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Occupational Health and Safety in Turkey: Problems And Solutions*

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Abstract

Since the 1980's, the rate of foreign investments by multi-national companies have been increasing very fast, the structure and percentage of sectors have been changing dramatically causing more occupational health and safety problems than ever before in Turkey. Industrialized nations transfer their old and more risky factory equipments, materials and more risky jobs such as mining to new industrializing countries; thus, industrializing countries such as Turkey have been facing serious occupational health and safety problems. The purpose of this study is to analyze occupational health and safety problems in Turkey by using current statistics and give suggestions to minimize the severe effects of occupational accidents.

Keywords: *Occupational Health and Safety, Turkey, Accidents*

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1. Introduction

Occupational health services are regarded as a fundamental right of every worker. In order to reach the highest attainable standard of health, workers' health at work should be protected (ILO, 1985; WHO, 1994).

There are two ways in which OHS can materially affect a company's performance. The first refers to actual 'OHS incidents' such as disasters and other workplace accidents that can generate substantial costs for the company. The second arises from the higher monetary compensation required by employees to compensate them for working in a relatively unsafe environment (Heaney and Irlicht, 2007).

Many work accidents and work related illnesses and injuries are reported each year in industrialized and non-industrialized countries. For example, as an industrialized country, in Canada, a country with one-tenth of the population of the United States, the statistics are similarly bleak. An average of over 500000 occupational illnesses and injuries were reported yearly throughout the 1990s, translating into a work-related illness or injury in 1 out of every 18 workers (Breslin and Smith, 2005).

In the United States, there are 13 million nonfatal work-related injuries each year. The total number of annual occupational deaths, injuries, and illnesses in the U.S. translates into 2.8 million lost workdays (Lyon and Hollcroft, 2005).

The rate of work accidents in industrialized countries has been decreasing in the last 10 years. According to EUROSTAT statistics, work place accidents decreased -%10 in England, -%35 in Germany, and -21% in Japan (EUROSTAT, 2007). Work accidents and occupational illnesses in England decreased from 167.251 in 1997 to 151.084 in 2005. The numbers in Germany showed important decreases in the same period from 1.598.972 to 1.029.520 (ILO, 2007).

Occupational health remains neglected in developing countries because of competing social, economic and political challenges. Current deficiencies of occupational health in the developing world such as Bangladesh, Central Africa are attributed to a lack of governmental interest in occupational health, poor

data and data collection systems, and weak enforcement of health and safety regulations (Nuwayhid, 2004).

The rate of work accidents in developing and new industrializing countries has been increasing in the last 10 years (ILO, 2007):

- In Taiwan; from 25.271 to 37.348
- In Thailand; from 52.025 to 58.529
- In Tunisia; from 34.576 to 43.317
- In Argentina; from 309.919 to 382.181

There are so many reasons causing occupational health and safety problems in the working environment. In developing and new industrializing countries, it is not easy to have proper up to date data to make analysis. In those countries, even if the structure of productions is changing from labor-intensive to mechanization, work accidents and occupational illnesses have been increasing dramatically because of bad working conditions.

2. Occupational Health and Safety in Turkey

The working conditions for many occupations in Turkey still involve a distinct and severe hazard to health that reduces wellbeing, working capacity and even the lifespan of individuals (Esin, et al., 2008).

According to statistics of Social Security Council of Turkey (SGK), in 2008, 1.170.248 companies were in operations, 8.802.989 people were employed, 72.963 work accidents were occurred, 866 employees were died by those accidents (www.ttb.org.tr/kol/is/images/stories/file/isgii.doc; Access date:23.03.2010):

- Distributions of work accidents among the first three sectors: 15% metal, 9% mining and 7.6% construction sectors.
- Almost 80.7% of work accidents were occurred in Small and Medium Sized Enterprises (SMEs).
- According to the ILO statistics, the economic losses caused by work accidents and illnesses in Gross Domestic Products in developing countries are about 4%. The cost of work accidents and occupational diseases was estimated about 38 Billion Turkish Liras.
- The percentage of occupational illnesses is changing between 4-12 workers out of 1000 working populations. Even if 43.689-141.869

occupational illnesses were expected, just 539 cases were identified because of lack of information.

As seen from the statistics above, metal, mining and construction sectors are the leaders of work accidents and more than 80% of accidents are occurred in SMEs in Turkey. Annual cost of accidents is so high but work accidents and occupational illnesses are not reported properly!

The first household labor survey was conducted by Turkey Statistic Association on “Work Accident and Work Related Health Problems” in 2007. Questionnaires were distributed to the 37.963 sample household and 87552 people who were more than 15 years old were interviewed. According to the results (TUIK, 2008):

- 2.9% of employees had work accidents. The percentage was 3.6% for men and 1.3% for women.
- Distributions of work accidents to sectors; stock quarry and mining sector had the highest work accident rate (10.1%).
- Work accident rate was 3.7% among primary school graduated workers while the work accident rate was 0.9% among university graduated workers.
- In occupational groups, work accident rate among mechanics and related jobs (5.9%) and assemblers and mechanical operators (5.7%) was higher than average work accident rate was (2.9%).
- 2.9% of employees hired in the last 12 months had work accidents. The percentage was 3.6% for men and 1.3% for women.
- 3.7% of workers had occupational health problems. The percentage was 3.9% for men and 3.0 % for women.
- 63% of workers declared work related health problems was 35 and up age category, 1.6 % was between 15-24, 4.7% was between 35-54 and 4.5% was 55 and up age category.
- Work-related health problems among part-time workers were 4.9% which was very high among other groups.
- The highest work-related health problem among the sectors was mining and stock quarry sectors (8.1%).

When we analyze the statistics above;

- Men have more work accident and occupational illnesses rates and women have.
- There is a strong relationship between work accidents and education (well educated workers have less work accidents rate than less educated workers have).
- Part-time employees face more work accidents than full-time employees because of the adaptation and job qualification problems.

3. Current Problems about Occupational Health and Safety

Some of the current problems about Occupational Health and Safety in Turkey are summarized below (www.ttb.org.tr/kol/is/images/stories/file/isgii.doc; Access date: 23.03.2010):

1. The rate of work accidents in Small and Medium-Sized Enterprises (SMEs) is very high.
2. The lack of expertise and information about OHS and risk assessments is continuing.
3. The best practices of OHS could not be distributed and shared by all enterprises in national wide.
4. The participation of workers about OHS studies is not in satisfactory level yet.
5. Sub-contracted work implications have been wide spreading more causing more accidents in the working environment.

As it is seen from the statistics above, 98 out of 100 establishments in Turkey is SMEs, and almost 80% of work accidents and occupational illnesses are occurred in SMEs.

SMEs cannot effort the costs of OHS expenditures. They have lack of qualified work force, limited financial resources, infrastructures, enough attention to OHS issues, and so on. Their profit margin is so limited; on the other hand, their costs are so high!

Flexible working-hours scheme and part-time employment in the working environment reduced the amount of labors having job security. Another problem in developing countries is a child labor. Child labors in Turkey have

been working under bad conditions without having social security benefits (Aydemir, 1999).

Unemployment and unregistered employment rates are also among the most important factors of work accidents and illnesses. According to the statistics, unemployment rate in Turkey in 2009 was 13.5%, and unregistered employment rate was 43%! Unregistered employment in agricultural sector was 85.3% and in other sectors was 29.7% (TUIK, 2010). These statistics mean that most of the workers in Turkey work in enterprises without having any social security benefits such as health insurance, pensions, etc. How it is expected from enterprises to have their workers secure and healthy place with unregistered employment culture?

According to Labor Law No.4857, which was issued in parallel to international developments and new approaches in contemporary OHS studies are important milestones in the establishment of a National OHS Policy (www.csgb.gov.tr/www.isggm.gov.tr/htdocs/.../Politika%20_ing.doc, Access Date: 24.03.2010):

OHS problems in Turkey are all related to the level of development, education, unemployment rate, unregistered economy and so on. Current OHS Laws and Regulations are not sufficient in practice because of lack of coordination and social dialog among business and public institutions.

Given the importance to the community and individuals of healthy and safe workplaces, good regulatory systems and effective legal and other mechanisms that promote effective OHS management are paramount. Negligence law and OHS regulation place the principal legal obligation to provide and maintain a healthy and safe workplace on the employer. This is a rational approach that is justified by the control of the employer over the business enterprise and how it is conducted (Wheelwright,?).

4. Conclusion and Recommendations

As seen from the statistics of SGK, 98 out of 100 enterprises in Turkey are categorized as SMEs. Only industrial enterprises having more than 50 workers are required to have OHS experts even if some other sectors facing many occupational accidents and illnesses are not required. Risk assessment studies

must be conducted in all other sectors such as education and service to find out more risky sectors and new requirements for them must be put into effect by law.

Unregistered employment rate must be reduced and all workers must work under social security norms!

An efficient investment in workers' health should be regarded by the employers as an important factor influencing the overall efficiency of the enterprise (Liszkowska, 2002).

OHS activities should keep with changing times. Many traditional safety activities may not be affective any longer. The implementations of a safety program often prove to be a disappointment. If workers experience the results of a program positively, they may be willing to participate in other safety activities. Thereby, the values of organizations are gradually revised and consequently new safety activities initiated (Saari, 1992).

International efforts should be concentrated on helping grass-root workplaces cope with these risks, particularly in industrially developing countries. Ergonomics is expected to provide practical measures to prevent work-related deaths and injuries by addressing common factors, such as manual workloads, excessive stress, human error or poor work organization (Kawakami and Kogi, 2005).

Preventive treatments and cultures in Turkey should be adopted in work places to reduce the economic cost of work accidents. It is less costly to prevent accidents than to pay medical treatment bills!

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