

Present Status of Health Care Facilities at Work Place: An Empirical Study on Some Business Enterprises of Some Selected Areas in Bangladesh

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Abstract: The health impact on human capital formation and socio-economic development are unquestionable and well recognized; this impact is intermediated through various determinants of human capital. Health care facilities of employees of business organizations are one of them. There is an increasing demand for the management of the large and medium scale enterprises to provide health care schemes to their employees, as people in this area are more health conscious because it is positively related to productivity and profitability. This study firstly aims at understanding the present state of health care facilities available at the workplace from the viewpoint of both employees and employers. The study then analyzed whether this scheme is feasible in the organizations. Some actions have been suggested on the basis of the findings. The study reveals that bottom line of the organizations are aware about this and this would ensure financial profitability of the organizations since it would reduce absenteeism among employees and also motivate them to work better for the organizations.

Key words: Health care, work place, business enterprise

INTRODUCTION

Strictly speaking, health is a state of complete physical, mental and social well being and not merely an absence of diseases or infirmity so that each citizen can enjoy a socially and economically productive life^[1]. Health care can be stated as the facilities and treatments provided to the people to keep them sound in physically, mentally as well as socially. This will ensure a man to do his duty efficiently. In business organizations or industry, this will ensure productivity improvement that will result greater revenue and profit for the organizations.

The health impact on human capital formation and socio-economic development are unquestionable and well recognized; this impact is intermediated through various determinants of human capital. Good health interventions create awareness to human, increase immunity and life expectancy; reduce morbidity and mortality that create human capital by increasing productivity resulting socio-economic development. Attainment of such important factors of human capital formation necessitates organized and routinized efforts^[2], thus, acceleration of the proximate determinants of human capital necessitates good governance of public health as well as health care facilities of private organizations.

Rationale of the study: Now it is the era of globalisation, which consequences a wide change in the socio-economic arena of each country either it is developed or underdeveloped. People all around the world are now much conscious about their socio-economic and personal need and safety. Due to the rapid industrialisation as the result of globalisation, the presence of technical and social development is undergoing rapid changes. The spread of mechanization and automation and the enormous discoveries of science and technology are influencing the look and feel of our environment. Employees of every organisation are now seeking their health security in their work place as well as in their home. Now, work is the most significant indication of effective and productive existence of human being^[3].

The workers and all the employees of business organisation and industry constitute an important and economically active segment of population and are, therefore, valuable people. But occupational accidents and diseases remain the most appalling human tragedy of modern industry and workplaces and this cause one of the most serious forms of economic waste. The industrial workers, as part of our general population are influenced by some factors necessary to their life i.e. housing, water, sewage and waste disposal,

nutrition and education^[4]. The ILO and WHO declared some guidelines to provide a safe occupational environment to safeguard health of workers in their workplace and to set up industrial production. In developed countries, extensive services are provided to the employees of their organisations by the government and employers. The employers provide health care to their employees and workers from their own cost or deduct some charge from the employees' remunerations. The insurance companies came ahead to provide this service in those countries. But in Bangladesh, as a developing country, more and more medium and large scale businesses and sole proprietorships are maturing and there is an increasing demand of management of these enterprises to provide health care scheme for their employees. Likewise, there is a potential market, which is fast growing among businesses, as people in these areas are becoming more health conscious. At present, there is a growing need for health care providers within the commercial sector. The service standard and cost of treatment of existing competitors is not up to the mark. So there is a gap to enter into the market and offer quality services at low costs. Health education has worked in Bangladesh so far particularly in terms of making people aware of family planning and immunization issues. Similarly, the benefits of the health care schemes can also be promoted through using the same guidelines.

Forms of hazards and diseases in occupation: An industrial worker or any employee either blue collar or white collar may be exposed to some common health problems depending upon his occupation. These may be categorized as (a) environmental sanitation which includes housing, water pollution, air pollution and sewage disposal; (b) communicative diseases such as tuberculosis, sexuality transmitted disease (STD), food and water borne disease, helminthic disease, vector borne diseases etc.^[5]; (c) mental health that include failure of adjustment to altered living and working condition resulting in mental illness, behavioral disorder, psychoneurosis, delinquency etc.; (d) accidents that occurs within the industrial units or outside industry; (e) social problems like alcoholism, drug abuse, gambling, breaking up homes, increased crimes etc. and (f) morbidity and mortality from incidence of chronic bronchitis and lung cancer are quite common^[6,4].

The specific objectives regarding the study on Present Status of Health Care Facilities at Work Place: An Empirical Study on Some Business Enterprises of Some Selected Areas' is to:

- Identify the present status of the health care system in some service and manufacturing organizations of Bangladesh.
- Evaluate the expectations regarding health care facilities from the viewpoint of both employees and employers.
- Justify the feasibility of adopting health care scheme in the service and manufacturing organizations and to suggest the ways in which the scheme could be implemented.

MATERIALS AND METHODS

This study is limited only in some selected organisations that include both service and manufacturing sectors of the urban areas of Dhaka and Chittagong districts. As there is no previous study in this field, secondary data was not found for the purpose of the study and so the study was mainly made on the basis of primary data. For collection of primary data, first, both area and industry wise organisations are selected through stratified sampling.

From this list, the respondents were selected through random sampling that includes both employer and employees of the organisations. In this process 100 samples were selected for the purpose of the study. These samples include 70 employees and 30 employers of these organisations. Employers include CEOs, owners and managers whereas employees include factory workers, staffs both blue collar and white-collar. The samples so selected are representative to the population under study.

Primary data was collected through interview method by a structured questionnaire focusing the objective of the study. Also some observations were made at the time of interview. In addition, some secondary sources like journals, books, magazines and newspapers were also reviewed in this regard. The duration of the study was from July to December 2005.

The study was conducted by self-finance and so, the scope of the study was limited. Moreover, interviewing the respondents posed as problematic at time when respondents were reluctant to give an

interview. But with persistence and after assuring them that their comments would only be used for study purposes, they eventually gave their comments

without much hesitation. It may be mentioned that most of the employers were the ones who were mostly reluctant. The majorities were somewhat skeptical; especially when asked about the health care that they were providing their employees and whether proper care to their employees was entitled to. Furthermore, some employers were also reluctant to mention whether they would be willing to provide employees with a more comprehensive health care scheme in the future.

Findings of the study: This section comprises of the findings from the survey that was conducted among the employers and employees of different business enterprises focusing the objectives of the study. The employers within different companies and organizations were interviewed alongwith the employees to get an insight into what both these categories of respondents perceive as the rights and circumstances in terms of healthcare within the working environment as a whole.

Alongside this, the survey required finding out the existing health care facilities of employees working in these companies as well as the prospects of a healthcare scheme if companies were to offer them to their employees. Likewise, the CEOs, owners and managers of these companies have shown a positive relation between the health and productivity of their employees as a whole. These and other aspects were queried upon in the survey and the findings are mentioned accordingly.

The findings of this study are categorized into two stages: (a) Employees' part and (b) Employers' part.

Employees' part

Present status of employees regarding health care facilities: The findings of the survey in relation to the responses obtained from the employees of different companies and business enterprises are depicted below:

Average monthly income: The average monthly income of the employees was found to be around Tk. 4,000. The average monthly income of the employees is listed at a glance in (Table 1). The study discloses

that majority of the employees (56%) earn around Tk. 3,000 and 13% to 16% earn in between Tk. 3,000 to 10,000 and only 2% earn more than Tk. 20,000. It is clear in this study that the employees are not able to meet all the expenses of health care from their earnings after meeting their food and housing demands.

Diseases usually suffered from the most: The employees of the different organizations interviewed were asked to mention the types of diseases or illness they usually suffer from the most. The findings are summarized in (Table 2) according to the magnitude of sufferings. Majority of the employees suffered from fevers and common cold (70 and 62%, respectively) and another disease are headaches (42%), coughs (35%), gastric (30%), dysentery (11%), blood pressure (8%) and diarrhoeal diseases (7%).

Frequency of visiting doctors: About 10% of the respondents go to doctors every month, 10% visit every fortnight, 12% of them visit doctors every three-month while 20% of them visit every six months. It was also found that 48% of the respondents visited the doctors without any fixed routine but seek advice and treatment from doctors whenever the need arises.

Type of health care service provided by organizations: Table 3 Companies having large number of employees are usually the ones that provide health care facilities to their employees. Some organizations provide a specific amount of money to their employees every month as medical benefit (43%). A few others have doctors assigned for employees (22%). Some organizations pay the medical bill of employees as per actual but within a ceiling amount (20%). Some others also pay fixed yearly medical allowances (5%) while the others pay according to the medical bills of employees (4%). Likewise, other organizations provide employees with medical benefit through specified health care unit instead (6%).

Present expenditure for treatment: In Table 4 terms of the amount of money spent for treatment, respondents were asked to mention how much they spend annually for their treatment purpose. The

finding reveals that 31% of the employees expense upto Tk. 500, 24% spend Tk. 500 to 1000 and 23% spend Tk. 1000 to 2,000 for health care and only 22% expense more than Tk. 2,000 for treatment (Table 4).

From the study, it is clear that majority of their spending for health care is near about Tk. 2,000.

Place of healthcare sought by employees and its quality: Majority of the respondents buy medicines from their local pharmacy or medicine dispensary. Others go to MBBS doctors and health centers whenever they are really sick and cannot get cured themselves. Most of the respondents (77%) think that the quality of treatment is quite high. However, 8% of the respondents stated that the quality was very high while the remaining respondents (15%) stated that the quality of treatment was moderate.

ATTITUDE AND RESPONSE TOWARDS HEALTH CARE SCHEME

Reactions if organizations provide healthcare services: The study asked the employees of different organizations regarding what their reactions would be if their employers provide them with health care schemes. It was found that the majority of employees reacted positively. About half of them (48%) were very happy another (52%) stated that it would be 'good' for them if their employers provide them with such healthcare schemes. Only 2% of the respondents were not very enthusiastic about it but had a moderate reaction. The reasons behind the mixed reactions are (a) less cost of the treatment, b) high quality treatment and c) available treatment in the workplace.

Expected coverage of services from healthcare scheme: The employees in different organizations were asked about what type of services they would expect from the health care scheme at the time of the study. From the study it is found that 88% expect general health checkup while 58% expect treatment if they fall into any accident at work place or out of workplace and 39% to 30% expect treatment in case of skin problems, family planning, ENT, pregnancy checkup, RTIs with drug treatment and gynecological problems, respectively (Table 5). Moreover, they expect facilities for STD and RTIs, health certificate and gastric treatment that have magnitude from 29 to 14%.

Expected cost of services from healthcare scheme:

The respondents were asked about what would be the cost that they would be willing to pay per person per month for each healthcare scheme. The expected major price ranges as disclosed by respondents in a month is upto Tk. 200 for 66% respondents. Another 20% want to spend Tk. 200 to Tk. 300 and only 8% want to spend Tk. 300 to Tk. 500. The remaining 6% want to spend above Tk. 500 (Table 6).

EMPLOYERS' PART

Employers' status regarding health care: The survey findings in relation to the responses found from the employers of different organizations and business enterprises are depicted below:

Employees' health related information: The survey required finding out the health profile of employees from the employers' point of view regarding the indicators like opinion on the health condition of employees, interval of health check, relationship between fitness and efficiency and health in relation to productivity. About 76% of the employers stated that their employees have relatively good health. Moreover, 57% of the employer stated that their employees have not fallen sick with any major diseases yet. Another 6% mentioned that their employees are continuously suffering from general diseases while 6% also stated that their employees have heart diseases. 3% have diabetes (Table 7). About 41% of the organizations give their employees health check every month. 16% of them give health checks every three months.

Impact of health care facilities: More than half of them think that efficiency fully depends on the health and physical condition of employees while another 40% think that efficiency does not totally depend on health but only to some extent. Employers were further asked whether they think that the productivity of the employees will be affected due to their ill health. About 79% of them responded positively while the remaining 21% stated the reverse instead (Table 8). The employers who responded positively (i.e. 79%) were then asked the reasons behind their responses. Some of the major reasons are in the Table 9.

The main affects in productivity are production declines due to absenteeism (60%) and quality of output deteriorate (20%). Another affects are problem of new recruitment (10%); higher workload (5%) and results in financial loss for the company.

Organizations providing health care services: The survey found out how many of the organizations interviewed provide health services for their employees. Apparently 94% of the employers provide some kind of medical allowance to their employees as part of their salaries. The remaining portions of the employers (6%) do not pay anything to their employees.

Attitude and response towards health care scheme: The study in this section represents whether health care schemes are feasible or not and whether potential companies can sustain a certain price range while giving this service to their employees. The following indicators were queried in the survey:

Opinion on adaptability of health care schemes: The study reveals that 60% of the employees think that this health care scheme would be suitable while another 40% of them think that this health care scheme would not be suitable. It was also found that about 28% of the employees who think that the health care scheme will be suitable for their employees and 25% of them think that the scheme offers general health care while another 18% think that their employees will get sound health. Furthermore 16% also think that the health care scheme will be suitable because it will increase the productivity of employees.

Probable impact of health scheme for employees and employers: According to the majority (78%) of employees interviewed, the productivity of the employees would increase if a health care scheme were provided. Furthermore, around 28% of the employers stated that the company would be benefited financially while another 20% stated that the loyalty of the employees towards the company would increase due to this facility. The survey also disclosed probable impact on the company if a health care scheme were to be introduced. These are sound health condition of the employees, access to proper treatment, sound physical and mental health and motivate to work better.

Expected coverage of services from health care scheme: The employers in different organizations were asked about what type of services they would expect from the health care scheme. The services that the respondents expect from the scheme in order of magnitude are (Table 5) general healthcare (65%);

treatment for wounded and accidents at workplace (45%); ENT treatment (33%); health certificate (28%); skin problem (25%); family planning (23%); treatment of RTIs with drug (20%); treatment for STD and RTIs (18%); pregnancy checkup (13%); gastric treatment (12%) and gynecological problems (10%).

RESULTS AND DISCUSSION

According to both employees and employers of the study, most employees of different organizations are getting some kind of medical allowances, although very nominal, from employers. This medical allowance is usually a part of the basic salary of employees and cannot be a proper medical allowance. Even though this is a very nominal amount, ironically both categories of respondents consider this amount as a sort of medical allowance. As a whole, most employees realize that the medical allowance they are currently getting from their employers, is irrational and does not even cover their own medical expenses let alone their immediate family members.

However, it may be mentioned that most employees realize that they would not get better health facilities from their employers because there is a certain expenditure level, which their employers would be willing to pay to them as health benefits and not more than that. Thus even if the allowance that their employers are currently paying is not enough. They are not complaining to their employers about it since they realize that companies will not pay more.

According to the employers of the organizations interviewed, the majority of them think that health care scheme will be suitable for their employees since employees would receive medical services easily and get access to general health care and would ensure that employees have a sound health. Few others stated that the schemes would increase the productivity of employees as a whole because efficiency and productivity are directly related with the health of the employees. It was found in the study that more than half of the respondents think that efficiency fully depends on the health and fitness of the employees while some think that efficiency does not totally depend on health but only to some extent.

Limited employers stated that scheme would be unsuitable since most of them think that they are already providing medical benefit for their employees thus they do not need to have any other health scheme. Likewise, others stated that their companies have their own doctor and so they don't need any special schemes as such. On the other hand, most employees

Table 1: Average monthly income of the sample employees

Monthly Income (Tk.)	Percentage
Around 3,000	56
Between 3,000 and 5000	16
Between 5,000 and 7,000	13
Between 7,000 and 10,000	13
Over 20,000	2
Total	100

Source: Field study

Table 2: Types of diseases suffered by the sample employees

Types of Disease or illness	Percentage
Fever	70
Colds	62
Headaches	42
Coughs	35
Gastric	30
Dysentery	11
Blood pressure	8
Diarrhea	7

Source: Field study

Table 3: Present scenario of health care provided by employers

Types of health services provided	Percentage
A specific monthly amount of money along with the salary	43
Doctors are assigned for employee	22
Companies have their own health care wing/center	6
Provide fixed yearly medical allowances	5
Pay the medical bill of the employees as per actual	4
Pay the medical bill of employees as per actual but within a ceiling amount	20
Total	100

Source: Field study

Table 4: Present annual expenditure for health care

Expenditure amount (Tk.)	Percentage
Upt to 500	31
500-1000	24
1000-2000	23
2000-3000	14
3000 and above	8

Table 5: Major services that the employees and employers expect for health care

Services Expected	Employee's part		Employee's part	
	Respondent%	Rank	Respondent%	Rank
General health checkup	92	1	65	1
Health Certificates	18	10	28	4
Skin Problems	39	3	25	5
STD and RTIs	29	9	18	8
RTIs with drugs	30	7.5	20	7
Pregnancy checkup	30	7.5	13	9
Gynecological problems	31	6	10	11
Family planning	38	4	23	6
Treatment for those wounded in accidents	58	2	45	2
ENT	32	5	33	3
Gastric treatment	14	11	12	10

Table 6: Expected willingness to pay each month for health care

Payment range (Tk.)	Percentage
Up to 100	30
100-200	36
200-300	20
300-400	5
400-500	3
500 and above	6

Table 7: Health condition of employees in the eye of their employers

Health condition	Percentage
Good health	76
Have not fallen any fatal disease	57
Continuously suffering from general diseases	6
Have heart disease	6
Have diabetes	3

Source: Field study

Note: Some respondents mentioned more than one disease

Table 8: Relationship of efficiency and physical condition and effect of health condition on productivity

Efficiency and physical condition	Percentage	Health and Productivity	Percentage
Has relationship	60	Positive effect	79
No relationship	40	No effect	21
Total	100	Total	100

Source: Field study

Table 9: Reasons behind positive response

Reasons	Percentage
Production decline due to absenteeism	60
Quality of output deteriorates	22
New recruitment is problematic	10
Higher workload on workers	5
Results in financial loss for the company	3

Source: Field Study

were very enthusiastic about health care scheme and would be very happy if their employers provided them such schemes.

It was found that the majority of them would expect the scheme to have general health check up coverage followed by treatment for those wounded in accidents. Most mentioned that if the scheme covered their children and wives then that would be very beneficial for them as they spend a substantial amount on family treatment and medicines yearly.

Since some of the organizations do not presently provide health services to their employees, they are eager to provide healthcare schemes in order to increase the productivity of employees.

The organizations that facilitate the schemes would expect the scheme to have general health check up coverage followed by treatment for those wounded on the job, family planning, STDs and RTIs etc.

The quality and reliability of service would be the most important feature of the schemes followed by cost of service, efficiency of service and scope or coverage of service.

If the schemes ensure that the employees would not lose any working time when visiting for treatment then they would think about buying the schemes.

The cost of schemes should be in between Tk. 100 to Tk. 500 per month.

At present, there is a growing need for health care providers within the commercial sector. The service standard and cost of treatment of existing competitors (mostly pathological business) is not up to the mark. So there is a gap to enter market and offer quality services at

low cost.

Health education has worked in Bangladesh so far particularly in terms of working people aware of family planning and immunization issues. Similarly, the benefits of health care schemes can also be promoted through using the same guidelines.

There is a huge demand and gap for quality service in the country and can fulfill this gap by some health care providers or organizations. Thus it can do so by creating a demand for quality treatment at accessible rate by ensuring a competitive advantage over its competitors. Managers can initially target and penetrate the structured and semi structured market where there is an existing human resource management department and scope of providing health care to employees.

CONCLUSION

There is an increasing demand for the management of the business and industrial enterprises to provide health care facilities for their employees and there is potential for health care providers to enter into this market as more and more businesses are recognizing for health care facilities to their employees. It may be said that if organizations wish to give their employees a better health care facilities then they can react positively and thus enhance the productivity of their employees. Employees would be inspired a lot if they have access to such schemes. Most organizations interviewed may not realize this yet, but they would be liable to change their attitude in the near future when they all realize how productivity of employees is directly related to the revenue of business

as a whole. The bottom line is aware about this and this would ensure financial profitability of that organization since it would reduce absenteeism among employees and also motivate them to work better for the organization. Thus such schemes would be a win- win situation for all parties involved. Employers can ensure profitability as well as do social services by providing health care to their employees. Although a lot of organizations already think that they are providing their employees some kind of health care facilities, there is an increasing demand for more comprehensive and better scope of health care from the employees of every business and industrial enterprise either it is public or private.

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