BACKGROUND

The garment industry contributes more than 80% of Cambodia’s national export revenue and employs around 700,000 workers, of which 85% are female. The majority of female workers are not using family planning and, of those who are, many are under the age of 30. Female workers have often reported having poor health conditions, but major sources of information are project documents, rather than an independent formative study on worker health issues. To fill this critical knowledge gap, in partnership with the National Institute of Public Health, the Evidence Project/Population Council conducted this formative qualitative study under the USAID-funded WorkerHealth project to improve the understanding of female garment workers’ health seeking pathways, and drivers of health seeking behaviors of female garment workers. Though the study focused broadly on health needs, the findings emphasized workers’ concerns regarding sexual and reproductive health (RH) care and family planning (FP) services.

METHODS

This study is based on data collected between April and May 2016 from female workers in four factories in Phnom Penh and Kandal province and from other relevant stakeholders working to improve the health of garment workers. Data was collected through:

- 8 focus group discussions (FGD) with workers.
- 22 in-depth interviews (IDI) with workers.
- 27 key informant interviews (KIIs) with factory representatives, private health providers, and representatives of organizations implementing health interventions in garment factories.

A health-seeking pathway was drawn in each FGD and IDI. Ethical approvals were obtained from the Population Council Institutional Review Board (PC IRB) and the National Ethics Committee for Research in Cambodia.

RESULTS

MAJOR HEALTH NEEDS

Reproductive health (RH) and family planning (FP) are the two major health issues and priority health supports for garment workers. Three categories of health issues were identified:

1. Common Rhimes: cold, fever, vomiting, etc.
2. RH and FP issues: contraception, irregular menstruation, miscarriage, hemorrhage.
3. Other less acute conditions: digestive tract and hemorrhoids.

..."Yes, a lot of woman-related illnesses [reproductive issues, stomachache, headache, hemorrhoids, etc] require menstruation, and vaginal discharge..."

Regarding RH and FP issues, workers indicated that these are often a “lot of women-related illnesses” (reproductive issues, stomachache, headache, hemorrhoids, etc.) and that they require menstruation and vaginal discharge.

"...most workers preferred taking pills than injection or other methods..."

Workers preferred taking pills to injections or other methods when it came to reproductive health.

"If we go to the toilet too often, we do not dare to ask questions about reproductive health...When they have reproductive health issues, they share only with very close friends..."

Workers were hesitant to discuss reproductive health issues with others, even with their closest friends.

RH and FP are the main health supports needed by female garment factory workers, although for different reasons:

- Practicing a healthy lifestyle can be a preventive measure for common health problems and less acute illnesses.
- Clinical/medical expertise was believed necessary for treating RH issues.

"...I think general health isn’t as important as the reproductive health and family planning..." 

Workers believed that general health isn’t as important as reproductive health and family planning.

CONCLUSION

Health services

- RH and FP are the two major health issues and priority health supports for garment workers.
- Different health service delivery strategies are required to effectively address worker health issues, since workers follow different pathways, based on multi-level factors, when seeking individual types of health services.