

Globalization, cross-border migration and migrant workers in Africa: Implications for occupational safety and health

Piyasiri Wickramasekara, International Labour Office

In the last two decades or so, the world has seen unprecedented globalization in the form of integration of global markets for goods and services, finance, investment and capital flows. Economic indicators of globalization – exports, foreign direct investment, and financial integration – have expanded rapidly in the last 25 years. For example, world exports have expanded from 39% in 1980 to 48% of global GDP in 2003 and foreign direct investment has likewise increased from 7% to 22% of the global GDP over the same period. (1) At the same time, international mobility of people has however, remained extremely limited at less than 3% of the world population between 1960 and 2005.

Africa and the globalization process

The African continent comprises about 20% of the world land area, 14.5 of the world's population, 2% of the world GDP, and 9% of the world's migrant stock in 2005 (2). The African region and its countries are diverse in terms of development and poverty with a major distinction drawn between more prosperous North Africa and less developed Sub-Saharan Africa.

The impact of globalization on the global economy has, however, been uneven: "some countries have been able to take advantage of market economy, when others have become more marginalized, disintegrated, and impoverished". (3) This is clearly the case for Africa. The 2005 UK Government report 'Our Common Interest: Report of the Commission for Africa' stated: "African poverty and stagnation is the greatest tragedy of our time." (4) The report of the ILO-led World Commission on the Social Dimensions of Globalization (5) summarized the views of African leaders on the process of globalization as it affected Africa as follows: "No

one doubted that over the past 20 years of globalization, Africa has fared far worse than other regions..... At best Africa felt bypassed, at worst abused and humiliated." The Global Competitiveness Report 2006–2007 of the World Economic Forum highlighted that while African countries represent only two out of the top 50 countries in terms of global competitiveness, they represented 20 out of the bottom 25 countries. About 41% of Africans are in serious poverty earning less than \$1 a day, and one out of five Africans lives in an area affected by war and conflict. (6) In an increasingly globalized world economy, Africa accounts for only about 3% of world trade. Africa's share of global investment is also low at 3.4% (7) and it receives only 4–5% of global remittances. It is also the only continent where life expectancy has fallen in the last two decades.

However, recent trends have given rise to cautious optimism about Africa's integration into the world economy. The region has witnessed higher GDP growth, and attracting growing investments, especially from

"In a world of increasing prosperity and with more people sharing each year in this growing wealth, it is obscenity that should haunt our daily thoughts that four million children will die in Africa this year before their fifth birthday."

Tony Blair introducing the Report of the Commission for Africa, 11 March 2005. <http://www.number10.gov.uk/output/Page7314.asp>

China and India. From the late 1990s, Sub-Saharan Africa has marked a reversal of the low growth trend of the previous two decades. The region recorded real GDP growth of 5.3% in 2006, marking the third year of more than 5% growth compared to average annual growth of 2.3% between 1980 and 2000. (8) Mauritius, South Africa and Tunisia demonstrate that African countries can be successful in joining the global economy and substantially reducing poverty.

The challenge before Africa is the successful integration into the global economy. The New Partnership for Africa's Development (NEPAD), launched in October 2001, is the long-term policy initiative of the African Union (AU) and provides the framework for Africa's development for the next twenty years or more. It aims to integrate Africa into the global economy and to place it on a path of sustainable development. Both the AU and NEPAD strategies rely on the principle of increased African integration and unification, supported by African ownership and control. "In short, NEPAD is an attempt by African leaders to collectively address the continent's lack of development in the context of globalization." (9) There is consensus that economic reform, good governance, peace and stability, and achievements in democracy and human rights and support by the international community are essential elements in moving to higher growth.

International migration and Africa

Globalization has had limited impact on migration worldwide given the numerous barriers to cross-border migration imposed by different countries. Africa is no exception, but the widening disparities in population, incomes and human security has led to increased migration pressures in

“No one likes to eat crumbs from a feast; everyone likes to sit at the table.”

African proverb quoted by Tanzanian President Benjamin William Mkapa, the Co-Chair of the World Commission on the Social Dimensions of Globalization, in introducing the Commission report in 2004.

Africa. International migration in Africa has two major components. First is cross border migration within Africa. Second is migration out of the African continent to other countries in the industrialized and other regions. The bulk of African migration – almost two thirds of total – is within the African region itself with only about 25% to high-income OECD countries. (10) The focus in this paper is more on the migrant population within Africa and their protection issues.

The United Nations Population Division estimated the world’s stock of migrants – defined as persons residing outside their country of birth or citizenship – at 191 million in 2005. Africa’s number of migrants in 2005

amounted to 17 million or 9% of the global share of migrants. Asia’s share is much higher at 28% as shown in Figure 1.

Figure 2 shows the trends in Africa’s migrant stock from 1960 to 2005. The number of migrant workers has steadily increased from 9 million in 1960 to 17.1 million in 2005 (11). The share of women migrants has slightly increased from 42.2% to 47.4% over the same period.

Table 1 shows the migrant distribution by major regions in Africa. West Africa has the highest share of migrants which has almost doubled between 1960 and 2005. In all other sub-regions, the share has fallen over the period.

Figure 1

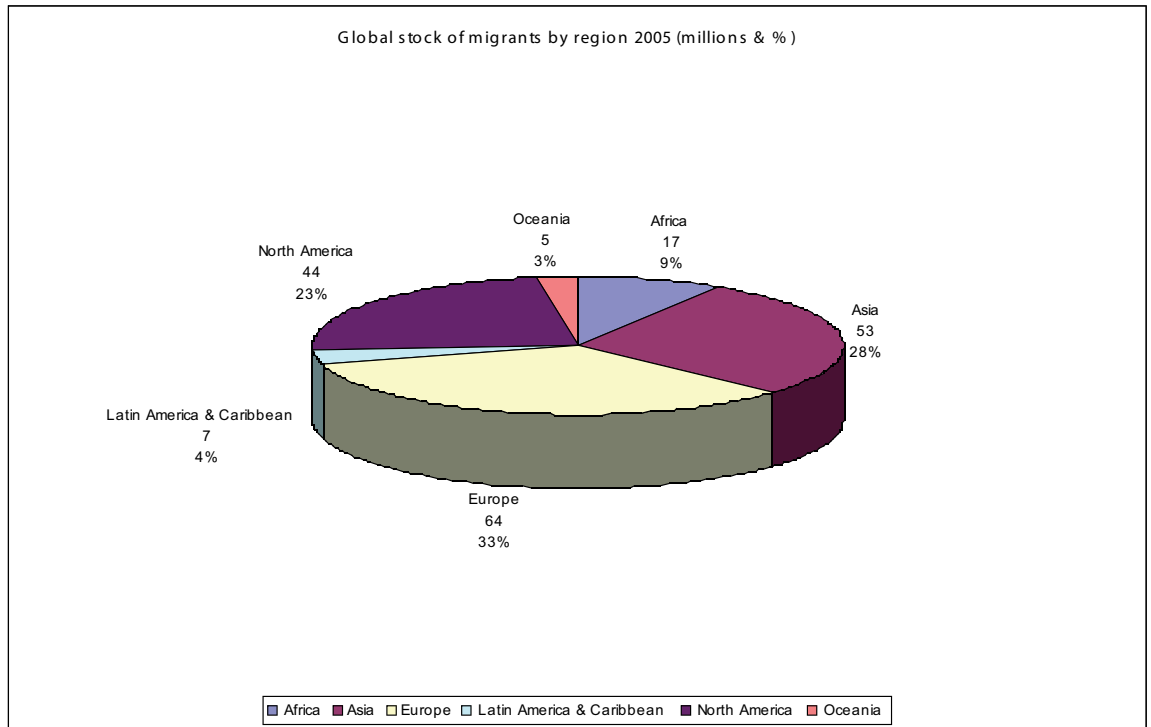


Figure 2

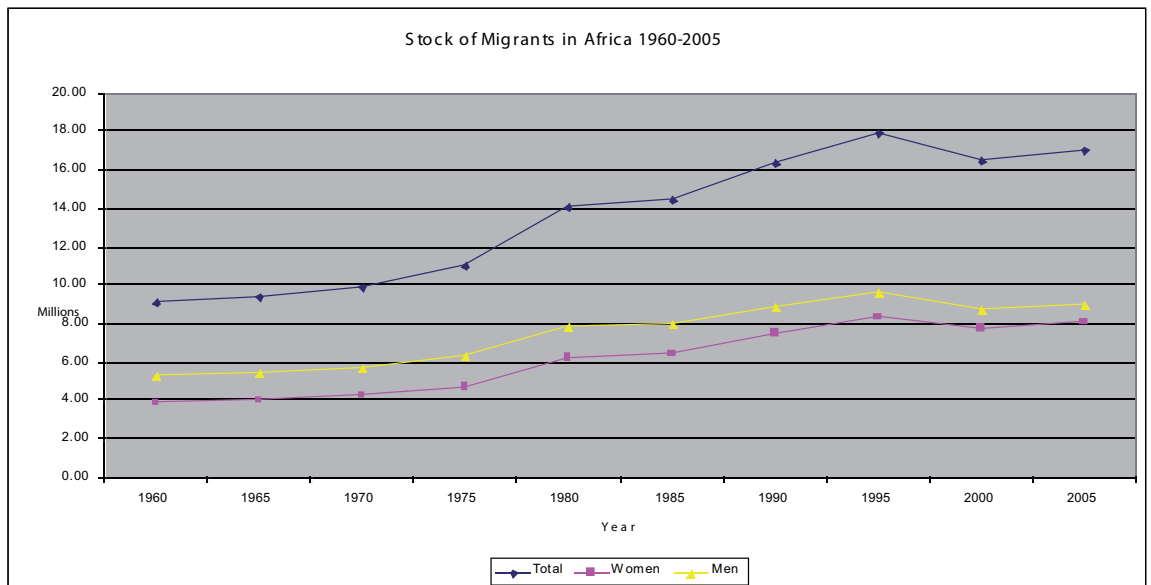


Table 1. Stock of Migrants in Africa in 2005

Region	Numbers in millions									
	1960	1965	1970	1975	1980	1985	1990	1995	2000	2005
Africa (Total)	9.13	9.44	9.94	11.01	14.1	14.43	16.35	17.94	16.5	17.07
Eastern Africa	3.09	3.33	3.42	3.42	5.1	4.58	6.07	5.01	4.55	4.52
Middle Africa	1.46	1.76	1.88	1.81	1.96	1.57	1.53	2.73	1.53	1.79
Northern Africa	1.48	1.01	0.95	1.03	1.51	2.4	2.31	2.23	1.99	1.84
Southern Africa	0.98	1.02	1.04	1.05	1.1	1.98	1.45	1.3	1.27	1.38
Western Africa	2.13	2.33	2.65	3.7	4.43	3.9	5	6.67	7.16	7.54

Region	Percent of total migrants									
	1960	1965	1970	1975	1980	1985	1990	1995	2000	2005
Africa (Total)	100	100	100	100	100	100	100	100	100	100
Eastern Africa	33.8	35.2	34.4	31.1	36.2	31.7	37.1	27.9	27.6	26.5
Middle Africa	16	18.7	18.9	16.4	13.9	10.9	9.3	15.2	9.3	10.5
Northern Africa	16.2	10.7	9.6	9.4	10.7	16.6	14.1	12.4	12.1	10.8
Southern Africa	10.7	10.8	10.5	9.5	7.8	13.7	8.9	7.3	7.7	8.1
Western Africa	23.3	24.6	26.6	33.6	31.4	27	30.6	37.1	43.4	44.2

Note: (including migrant workers, their families, refugees, and asylum seekers) Source: United Nations Population Division (2006), Trends in Total Migrant Stock: The 2005 Revision, New York, 2006.

There are several special characteristics of migration flows within and out of Africa which have important implications for their protection, including occupational safety and health issues.

- High level of cross-border movements between neighbouring poor and more prosperous states (Zimbabwe to South Africa): there has been a long tradition of mine workers and agricultural workers moving to countries, such as South Africa.
- Large forced migration flows triggered by political instability and armed strife, and ecological and natural disasters. The number of refugees in Africa was just over three million in 2005, and constituted 18% of total migrants in the region.
- While there are a number of regional economic communities such as the Economic Community of West African States, the East African Community, the Southern African Development Community, there is limited progress on free movement of persons and especially relating to labour mobility. Thus, most of the border crossings may be informal in nature, which is tantamount to irregular migration. Migrant workers in irregular status are most vulnerable to exploitation and are usually devoid of any protection.
- There is a sizeable brain drain of qualified and skilled persons from Sub-Saharan Africa to developed

countries (11). In 2000, some African countries experienced very high migration rates of their tertiary educated: Cape Verde (69.1%), The Gambia (64.7%), Seychelles (58.6%), Somalia (58.6%), Mauritius (48.0%), Eritrea (45.8%), Ghana (42.9%), Mozambique (42.0%), Sierra Leone (41.0%), and Liberia (37.4%). (12)

- Of more concern is the loss of health workers from the African continent. The unethical nature of African health worker recruitment is highlighted by the fact that Africa's share of global diseases is 25%, while its share of the global health workforce is only 3% according to the WHO World Health Report 2006. (13) The migration flows of doctors to rich countries from Sub-Saharan Africa have therefore been described as "fatal flows", because poor people are left vulnerable to devastating diseases and avoidable death. This also means that OSH may not have much support when public health support for the entire population is being undermined. As a result, migrant workers may receive the lowest priority in both overall health programmes and OSH strategies.

At the same time, African labour markets and employment patterns have important implications for OSH for all workers. Informal sector employment predominates in many countries. The ILO report for the 11th African Regional Meeting mentioned: "Only

10 per cent of the African labour force was in the formal economy, with agriculture as the predominant employer, although non-agricultural employment had expanded rapidly. Some 80 per cent of new jobs created were in the informal economy, defined as economic activities not formally covered by the law or by practice, and therefore without legal recognition, social protection, and access to mainstream public or private resources. The sector contained diverse activities, occupied largely by women workers, and characterized by low productivity, with low and insecure incomes." (14) It also adds that: "Eight out of ten workers in Africa struggled in the informal economy, where four out of five could not earn enough to lift their families above the US\$2 per day poverty line."

This has important implications for OSH. Loewenson (15) notes that in many countries in Southern Africa, even the most comprehensive notification systems do not cover small-scale (informal-sector) production. A study of Ghana estimated that the proportion of workers who received comprehensive OHS in the informal sector was likely to be not more than 1–2% of workers. (16) The informal sector risks include poor work organization, poor access to clean water and sanitation, ergonomic hazards, hazardous hand-tools, and exposure to dusts and chemicals. There is also limited access to any social protection mechanisms.

Global market forces and trade liberalization, and competition among countries to attract foreign direct investments have resulted in less workplace protections for all workers, including migrant workers, especially in free trade or special economic zones. Globalization has also led to the emergence of global production chains initiated by multinational corporations involving various levels of subcontracting and outsourcing to different suppliers. In the process, 'labour' brokers have emerged who supply the needs of different enterprises. This has had important implications for employer-employee relationships, thereby undermining the legal link between employers and employees – *the key point of reference for determining the nature and extent of employers' rights and obligations towards their workers.*" (17) The surge in subcontracting and a high level of privatization has had profound effects on the labour market generally. Migrant workers are particularly vulnerable as victims of disguised employment relationships, and therefore they may enjoy hardly any protection. Loewenson stated: "Liberalized trade has also been associated with an increase in assembly line, low quality jobs, with minimal options for advancement, and a growth of insecure, casual employment in a small-scale informal sector". (15) There is also little regulation and inspection, and there is shortage of professional expertise. Moreover,

against the background of major public health issues, such as HIV/AIDS and Malaria, occupational safety and health issues may not be perceived as a policy priority. (18)

The Conclusions of the 11th African Regional meeting stated (19): "Although many African States have comprehensive laws concerning basic working conditions, including occupational health and safety standards and minimum wages, systems to ensure their observance are weak." Given this general situation regarding all workers, OSH problems of migrant workers are unlikely to receive much attention. In fact, the African Union Common Position on Migration and Development mentions only a policy framework and social protection standards for migrant workers, but does not mention OSH issues of migrant workers. (20) The 2006 UN Economic Commission for Africa report on migration and development in Africa does not contain a single reference to occupational safety and health issues or social protection for migrant workers (21).

Occupational safety and health is an important issue for migrant workers for several reasons. Most women and men migrant workers tend to be employed in high-risk and informal sectors, especially in 3-D work (dirty, demanding and demeaning) in agriculture, construction, and mining. They work long hours and/or suffer from poor general health, and are therefore particularly prone to occupational injuries and work-related diseases. They are not covered or are inadequately covered by social security and health insurance. Thus migrant workers are a particularly vulnerable group in regard to OSH, who are often invisible in national policies or statistics.

The current emphasis on migration and development focusing mainly on migrant remittances, return migration and engaging diaspora communities in Africa may unfortunately serve to shift attention away from migrant rights and workplace protection issues to some extent.

This situation also needs to be seen against the lack of adequate policies and legislation at the national level for OSH protection. For Southern Africa, Ryan points out: "In many SADC countries, only a rudimentary policy

and legislative framework exist to protect the health and safety of workers." (22) Similarly key ILO Conventions on OSH have not been ratified. All ILO labour standards apply to migrant workers (whatever their status) unless otherwise specified. The ILO has developed a wide array of OSH instruments – more than 70 Conventions and Recommendations, and over 30 codes of practice – covering general provisions, specific risks and special economic sectors where migrant workers are largely employed (e.g. agriculture, construction, mines, and the hotel industry). Only a few African countries have ratified the main migrant worker Conventions or OSH conventions. The ILO Occupational Safety and Health Convention, 1981 (No. 155) has been ratified by 10 African countries (Algeria, Cape Verde, Nigeria, Central African Republic, Sao Tome and Principe, Ethiopia, Lesotho, South Africa, Zimbabwe, Seychelles), while only four countries (Benin, Burkina Faso, Zimbabwe, Seychelles) have ratified the ILO Occupational Health Services Convention, 1985 (No. 161). No country in Africa has ratified the recent Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187).¹

The Way Forward

The goal of decent work for all African workers very much depends on successful economic development and poverty reduction. A key principle is that African globalization efforts should not lead to the erosion of labour standards of all workers including migrant workers. OSH issues should be reflected in national policies and statistics with specific references to all migrant workers in the workplace.

The ILO and the World Health Organization initiated the *WHO-ILO Joint Effort for Occupational Health and Safety in Africa* in 2001 to intensify co-ordination of occupational health and safety activities.(23) The areas of collaboration that were chosen for this joint effort were: capacity building focused on human resource development; national policies, programmes and legislation; information, research and awareness raising; promotion of OHS in particularly hazardous occupa-

¹ Only one country in the world (Japan) has ratified this Convention up to now.



Drawing by Milja Ahola

tions, for vulnerable groups (including informal sector workers and children) and in newly transferred technologies. (24) Migrant workers were not identified as a distinct group, but they should be covered in the programme.

The ILO 11th African Regional Meeting stressed that it was important for ILO's tripartite constituents to focus on bringing up to date both the content and means of implementation of laws and collective agreements concerning basic minimum conditions to raise productivity and improve living and working conditions of workers, including the strengthening of labour inspectorates as a matter of priority. The Conference established the following target for the ILO's Decent Work Agenda for Africa by 2015: *Three-quarters of all African member States develop programmes for the improvement of working conditions, with specific national targets for reducing non-compliance with laws concerning hours of work and minimum pay, the reduction of occupational accidents, diseases and days lost to illness and accidents per worker, and a progressive increase in the number of labour inspectors in relation to workers.*" (14) It also established the following target for a fair deal for migrant workers in Africa: *"Three-quarters of all African States have policies to ensure that migrant workers have regular, authorized status and are fully protected by the labour legislation of the host country and granted equal treatment and opportunities by 2015."* (25)

Attainment of these targets requires a concerted effort to evolve and implement policies consistent with principles and guidelines in major OSH standards, and based on effective partnerships between the ILO's tripartite partners and all stakeholders. The ILO is now promoting the Promotional Framework for OSH Convention (C 187) which complements other ILO instruments on OSH. Convention 187 highlights in particular the needs for the establishment of a national OSH policy, a national OSH system, and a national OSH programme. The ILO held a Regional Meeting of CIS national and collaboration Centres for Arab States in collaboration with the Arab Labour Organization on 21 and 22 November 2007, in Damascus (Syria) to promote this Convention. One recommendation of the meeting is for participating countries (includ-

ing Sudan, Morocco, and Libya) to establish OSH national profiles while Egypt, Algeria, Tunisia already have them. (26) It is important to include migrant worker concerns in these initiatives.

Acknowledgement

The author wishes to acknowledge the able research assistance provided by Ms. Katrin Behrendt in the preparation of this article.

Piyasiri Wickramasekara
Senior Migration Specialist
International Labour Office
CH-1211 Geneva 22
Switzerland

References

1. Wickramasekara P. Theme Paper on Globalization, International Labour Migration and Rights of Migrant Workers. Geneva, ILO, 2006. Available at: http://www.ilo.org/public/english/protection/migrant/download/pws_new_paper.pdf
2. The World Bank. Africa Development Indicators 2007, Washington DC, October 2007.
3. Holkeri H. Globalization and its effects on occupational health and safety. In: Special issue on Globalization, African Newsletter on Occupational Health and Safety 2001;11(3):55.
4. UK Government. *Our common Interest: Report of the Commission for Africa* (headed by Mr. Tony Blair), March 2005. <http://www.number10.gov.uk/output/Page7310.asp>
5. WCSSDG. A fair globalization: Creating opportunities for all. World Commission on the Social Dimension of Globalization (WCSSDG) and International Labour Office, Geneva, February 2004. <http://www.ilo.org/public/english/wcssdg/docs/report.pdf>
6. World Economic Forum. Raising the Bar. Report of the World Economic Forum on Africa Cape Town, 13–15 June 2007. http://www.weforum.org/pdf/SummitReports/africa07/africa_report_2007.pdf
7. African Union & Economic Commission for Africa. Economic Report on Africa 2007: Accelerating Africa's Development through Diversification. Economic Commission for Africa, Addis Ababa, Ethiopia <http://www.uneca.org/era2007/>.
8. The World Bank. Global Economic Prospects 2007: Managing the next wave of globalization. Washington DC, 2007.
9. Mears R. A vision for African Globalization. Paper presented at the September 2007 Conference of the Economic Society of South Africa, Johannesburg.
10. Lucas RE. Migration and Economic Development in Africa: A Review of Evidence. Journal of African Economy 2006;15:337–95.
11. UNECA. International Migration and Development: Implications for Africa. Addis Ababa: Economic Commission for Africa, 2005.
12. Docquier F, Marfouk A. International migration by educational attainment, 1990–2000. In: C. Ozden and M. Schiff (eds). *International migration, remittances, and the brain drain*. Washington, D.C. The World Bank & Palgrave Macmillan 2005:151–99.
13. WHO. The World Health Report 2006 - Working together for health. World Health Organization, Geneva, 2006. http://www.who.int/entity/whr/2006/whr06_en.pdf
14. ILO. *Report of the 11th African Regional Meeting*, 24–27 April 2007, Addis Ababa: ILO, AfRM/XI/D.4(Rev.), <http://www.ilo.org/public/english/standards/reln/rmeet/11afirm/report.pdf>
15. Loewenson R. Globalization and occupational health: A perspective from southern Africa. In: Bulletin of the World Health Organization (WHO), 79 (9). Geneva: WHO 2001.
16. Clarke E. Do occupational health services really exist in Ghana? A special focus on the agricultural and informal sectors. In: Lehtinen S. (ed). Challenges to occupational health services in the regions. The national and international responses. Proceedings of a WHO/ICOH/ILO Workshop, Finnish Institute of Occupational Health, Helsinki 2005.
17. ILO. The employment relationship. Report V(1), International Labour Conference, 95th Session, 2006. <http://www.ilo.org/public/english/standards/reln/ilc/ilc95/pdf/rep-v-1.pdf>
18. Eijkemans G. Review of the WHO Activities in Occupational Safety and Health, Thirteenth Session of the Joint ILO/WHO Committee on Occupational Health Geneva, 9–12 December 2003. http://www.ilo.org/public/english/protection/safework/health/session13/dr_eijkemans_who_1.pdf
19. ILO. Conclusions of the 11th African Regional Meeting: The Decent Work Agenda in Africa 2007–15. Addis Ababa, 24–27 April 2007, AfRM/XI/D.3(Rev.). www.ilo.org/public/english/standards/reln/rmeet/11afirm/conclusions.pdf
20. African Union. African Common position on migration and development, endorsed by the Executive Council, Ninth Ordinary Session, 25–29 June 2006. Banjul, The Gambia, EX.CL/277 (IX).
21. UN Economic Commission for Africa. International Migration and Development: Implications for Africa. Addis Ababa: Economic Commission for Africa 2005.
22. Ryan M. Work and health in Southern Africa. African Newsletter on Occupational Health and Safety 2006;16(1):11–4.
23. Goldstein G, Helmer R, Fingerhut M. Mobilizing to protect worker's health: The WHO Global Strategy on Occupational health and Safety. In: African Newsletter on Occupational Safety and Health, 2001;11(3):56–60.
24. The World Health Organization (WHO)/ International Labour Organization (ILO). Joint Effort on Occupational Health and Safety in Africa: www.sheafrafrica.info/en/About/About.htm, Update 2 – Areas of Collaboration. Last access on 24/10/2007.
25. The ILO Multilateral Framework on labour migration provides a valuable tool to help countries in formulating policies for attainment of this target. ILO. The ILO Multilateral Framework on Labour Migration: Non-binding principles and guidelines for a rights-based approach to labour migration. Geneva, International Labour Office 2006. www.ilo.org/public/english/protection/migrant/download/multilat_fw_k_en.pdf
26. Information provided by Michèle Nahmias, ILO SafeWork Programme.