All for One and One for All Campaign

by Bishnu Rimal

Health is Wealth, it is equally important to all. However, it is still 'sour grapes' for those who have to solve hand to mouth problems from the labour they sell everyday. The daily earning of the Nepali working class is less than sufficient for their needs. Mere political slogans cannot solve these problems, nor can a prosperous life be achieved without launching a series of creative schemes.

GEFONT's vision statement is **Socialism for Dignified Working Class & Prosperous Life.** In order to translate socialism in our Daily life, Co-operative, however, is what GEFONT views as one of the means to practice Socialism in our social life. Thus, as part of this movement GEFONT launched a Health Co-operative Clinic as one of the first steps of practicing Socialism.

Here one can easily question, as there are numbers of hospitals and private clinics in Kathmandu; what is the relevancy of this clinic then? The reasons given are-

- Public health condition of working masses is deteriorating
- Health service is too expensive and mostly privatised and is being more and more commercialised.
- Health service is being gradually monopolised and has almost become a non-bargaining business
- Medicine is extremely expensive and far from poor people's access
- There is dire need of Public Health Campaign
- There is a necessity increasing day by day of OSH Campaign

Based on these observations and such realities, Clinical service with pharmacy has been started since May 1, 2000.

Objectives of the Co-operative

There are three main objectives of the Co-operative—

- To meet members necessity on health sector
- To change their mind-set and make them self-sustain, cooperative and economise
- To upgrade their socio-economic conditions

In order to fulfil such objectives, following plans have been set--

- To operate Health Co-operative Clinic at Man Mohan Labour Building
- To operate Pharmacy
- Establish networking with Kathmandu model Hospital for referral cases
- Launching Nation-wide Campaign on OSH
- To develop public health workers

Operation of the Co-operative

There are 500+ individual shares equivalent to NRs. 100 per share distributed among the workers and their families. The GEFONT is also one of the shareholders. Being a confederation of different Trade Union Federations, the GEFONT has provided subsidy NRs. 50,000 (as its promotional share) to promote workers' cooperative. Thus, investment at the beginning is NRs. 100,000.

"Everybody should pay" is the key principle to run this workers cooperative Clinic. For this, all 500+ co-operative members are paying NRs. 1 every day. In addition, 10 per cent of the equivalent sum is being contributed by GEFONT as subsidy to cover clinical costs of GEFONT members. The clinic is open for all needy persons irrespective of co-operative members, GEFONT members or the general public.

The cost of the clinical service is around 40 - 50 per cent less for general public compared to other with private clinics. It means the Co-operative charges NRs. 60 to co-operative members, 70 to the GEFONT members and 75 to the general public as clinical fee. There is nominal charge for follow-up. There is a discount of 6 - 15 per cent in medicine from the pharmacy as well.

Based on the realities of Nepal's own reality, a policy of flexibility has been set and adopted. The Cooperative also provides service to families of its members. A member of family is defined as dependents. They may be parent, children or any other relatives depending on the Co-operative members. These dependents are to be listed earlier and included in the membership card. One of the dependent of member receives the same level of service as the Co-operative member. A system of **First come First Served** has been set. Those dependents getting sick earlier will receive the service for whole year. It is obvious that any one member of workers family can be the Co-operative member.

ITWAN- Investment in Health Sector: Brief Introduction

Independent Transport Workers' Association of Nepal (ITWAN) is providing various kinds of services to its members since its establishment in 1979. Members financial contribution and organizations various services are the basic feature of the ITWAN work. It has started welfare programmes when there were no insurance schemes in Vehicular accidents. In 1974, The Welfare Fund started providing assistance to the workers working public transport services whereas ITWAN forwarded its activities covering all workers in the transportation field. The contrast in the functioning between Welfare Fund and the ITWAN is Welfare Fund collects fees from central departure terminal point and provides services centrally; whereas ITWAN encourages members for direct investment and extends its services in decentralised way.

The ITWAN has different sectors of activities. It organises activities similarly like other trade unions from the membership dues, however it collects dues separately every day in order to provide assistance for health and safety and accidents. Obviously the ITWAN does not spend this special due for other area of activities.

The ITWAN collects such dues in 109 places throughout the country. Sagarmatha Zone is such place where there is only one point to collect such dues. Mechi-Mahakali and Janakpur Zones have 3,5 and 6 points respectively. Gandaki, Kosi and Narayani Zones have 11,13 and 14 such points respectively. Maximum number of such points exists in Lumbini and Bagmati Zone, where 32 and 25 dues collection points respectively are in operation.

The rate of dues varies depending on vehicle and distance it travels. For example in Gandaki Zone, for taxi and light vehicle it charges NRs. 1 per day. For long distance vehicles, which enter Pokhara it charges NRs. 15 per trip. This rate, however, is different in Bagmati Zone. Here in the Arniko Route Unit, the ITWAN local unit charges a maximum of NRs. 100 per trip. The average rate throughout the country is NRs. 10 per trip.

Some of the Zones collect such dues on a monthly basis. The monthly rate is not less than NRs. 50 per member. The ITWAN Narayani Zone charges dues to the vehicles entering from different parts of India as well.

In this process, ITWAN collects about NRs. 26,419 everyday. Monthly income thus comes to be about NRs. 792,440. The expenditure of the Union is also quite remarkable. There are several headings of expenses such as **Police custody allowances**, medical allowances, assistance in death, accidental costs of the members, legal assistance expenditure etc. Contingency cost is also provided by ITWAN, which includes token assistance to dismissed workers, hospital allowances, sickness benefits, passenger treatment cost, assistance to seriously injured and disabled cost etc.

The custody expenses for the members after the accident vary from place to place. This is NRs. 40-50 per day in Mechi Zone and in some places; practice of pocket money ranging NRs. 200 to 400 has been contributing to them. This assistance is NRs. 50 to NRs. 700 in Janakpur Zone. Narayani Zone provides NRs. 50 per day; whereas Bagmati Zone spends NRs. 100-150 per day. Likewise, this assistance is NRs. 100 in Mahakali Zone.

The rate of medical assistance also differs in various units of ITWAN. This is because of the difference in the income level. There is about NRs. 1500 for seriously injured persons in Mechi and all compensation is given for the disabled. In Kosi Zone, maximum of 5,000 is allocated in this heading. It varies in different district units in Narayani Zone. For example, in Parsa district the hospitalised person gets NRs. 50 per day, whereas in Chitawan, this amount does not exceeds NRs. 1,000. The rest of the districts have a system of NRs. 500 in maximum extent.

There is a difference in the rate of expenses in Bagmati Zone. For example, the Dhulikhel Unit spends about NRs. 10,000 maximum, but the Jorpati unit share 50 per cent of the total costs incurred. Lumbini Zone provides cost of the treatment as per hospital bills. For minor treatment, it gives NRs. 300, for hospitalised cases, it gives NRs. 50 per day. In the fracture case, it varies ashand fracture NRs. 2,000; leg facture and paralysis case NRs. 3,000. The unit also provides NRs. 1,000; NRs. 5000 for operation and psychiatric problem respectively. Among them, Arniko Bus Unit of Bagmati Zone has declared a new project. According to this project, the unit will grant a handsome amount of NRs. 50,000 for the senior drivers. The Condition is s/he must have had union membership for 12 years continuously, the age bar should cross 55 years and his/her driving licence of heavy vehicles has to be cancelled. It has provision of providing purse of NRs. 40,000 cash to those regular members turned into disable from the accident.

Activities carried out up to date

An experienced doctor is available everyday from 4-6 PM in GEFONT clinic. Primary treatment and other facilities are available here.

The cooperative has an agreement with Kathmandu Model Hospital for further medical treatments of referral cases having serious nature of sickness. The cooperative members and their dependents are exempted 20-50 per cent of cost depending on the medical service provided in the hospital. GEFONT has remarked this as the investment in the health of workers and their dependents. GEFONT is of the opinion that health is the most prioritised property and this has to be strengthened and secured.

In the period of October 12, 2000 to December 31, 2001, some 174 persons have been referred to Kathmandu Model Hospital for further treatment. The total cost incurring for the treatment of 174 persons was NRs. 246,664 and GEFONT shared cost of 61,666 from this amount. And same amount of cost (61,666) was shared by PHECT-Nepal— the partner of GEFONT Health Co-operative, as a token solidarity. This justifies that benefit is not always measured with money rather it can be experienced with service provided

Transport workers welfare fund (Yatayat Mazdoor Bhalai Kosh)

During the time of *Panchayati autocracy* all of the unions were banned. There was no mechanism of resolving workers problems at the National level.

But the transport-workers found out a new idea in 1974 'providing assistance to workers from the pocket of those transport entrepreneurs who were exploiting them'. They established the Transport Workers Welfare Fund with the main objective of providing assistance to transport workers during traffic accidents. This was registered in Lumbini Zonal office having Head Office in Butwal, Lumbini Zone. This fund carried-out the idea of "No Drivers would be in Jail; no one under police custody and none of the transport workers be disabled or dead in the absence of treatment." This welfare fund is the popular platform of all transport workers. It has its own building and millions worth of property.

The leadership of the Fund is elected every 3 years. The role of members of Independent Transport Workers' Association of Nepal (ITWAN) in the election is decisive. ITWAN assumes the Welfare Fund as its fraternal wing. According to the Fund, all vehicles moving in Nepal should pay every time

whenever they depart from the station. Dues are based on the distance travelled and deposited in any of the local office of the Fund. Because of this, the Fund is responsible to pick-up the cases of accidents wherever it takes place.

The Fund has 14 local offices. The office in Hetaunda, for instance, looks after cases from Makwanpur District to the whole of Eastern Nepal. Bheri, Seti and Mahakali Zones fall under the area of Nepalgunj-Kohalpur office. Similarly, Bhalubang office picks up the cases of Rapti Zone, whereas Kusma office for Gandaki and Dhaulagiri Zones. The office in Lumbini looks after the cases took place up to Nautanua and Gorakhpur of India.

The Transport Workers Welfare Fund is basically concerned with traffic accidents related to casualty. However, it has provided different services to its members. As an example, the Fund provides annual medical assistance of NRs. 10,000 and lifetime monthly NRs. 1,000 for those workers who are physically disabled because of Vehicular accidents. In addition to this, the Fund also provides scholarship equivalent to 3,000 for 1 child from transport workers' family and bed allowances to the sick transport worker.

The Fund has strong regulations to check any kind of irregularities. Any vehicle under accident, if it has not deposited its trip-levy in the concerned local office, no claim for any assistance would be entertained. However, those drivers, conductors, or helpers contributing on a regular basis should not be worried of any expenditure relating to traffic accident. The Head Office of the Fund will cover all of the costs incurred. The Fund also takes over the medical cost of treatment of Passengers in the same basis as its members. In the Year 2000-01, 836 vehicles related to Fund faced accidents. The number of deaths, injuries and serious injuries numbered 537. 43 Cows, 39 Buffalos, 107 Goats, 11 pigs and 63 Bicycle/Rickshaw effected by the accidents. The Fund paid NRs. 14,931,259 as compensation.

Latest Activities: Launching of Health Micro Insurance Scheme

Health Micro Insurance Scheme is the one step forward of GEFONT Health Cooperative Campaign. Beginning is from one of the Kamaiya prone districts- Banke of western Nepal; shortly it will be expanded to Berdia. After analysis of the impact and having both positive and negative experiences, the corrected proceed on will be directed towards other districts.

Based on ILO-STEP study of sickness, current status of treatment and level of health awareness, benefit package and rates of premium have been finalised. Rural Agricultural workers including Ex-kamaiyas from

five Village Development Committees and urban workers from Nepalgunj Municipality will be covered. In the beginning, the Scheme will cover 400 Agricultural workers' families and 100 Non-agricultural workers' families (such as rickshaw pullers and transport workers).

| The rate of | premium | for | Banke | and | Berdia | district | has | been | fixed | as |
|-------------|---------|-----|-------|-----|--------|----------|-----|------|-------|----|
| follows: | - | | | | | | | | | |

| Family categories | Monthly Rate of Premium per family | | | | | |
|-------------------------|------------------------------------|--|--|--|--|--|
| | Agricultural Workers & families | Non-Agricultural Workers & families | | | | |
| Family up to 5 members | 20 | 40 | | | | |
| Family up to 7 members | 35 | 60 | | | | |
| Family up to 10 members | 50 | 90 | | | | |
| Family above 10 members | 60 | 120 | | | | |

Benefit package for the workers families has been finalised such as health check up and consultation, maternity, snake-bite, dog-bite, ordinary dental care, general medicine, surgical, minor and major operations and all pathological services including HIV test as well as x-rays etc. It is expected that all the expenses including 100 per cent of the costs will be covered by the Scheme.

For the purpose, GEFONT organised a Launching programme of Health Micro Insurance Scheme in Nepalgunj, Banke on March 2, 2004. Chaired by GEFONT Chairman Mukunda Neupane, various dignitaries and representatives from different organisations were present in the programme. Among the speakers were director of Bheri Zonal Hospital Dr. D. P. Pradhan, Sub-Regional Officer of ILO Marc Soucqet and Isméne Stalpers of ILO STEP. GEFONT Secretary General Bishnu Rimal delivered keynote speech and treasurer Binod Shrestha was the master of ceremony.

On the occasion, an agreement with health providers have been signed and the MOU was exchanged between GEFONT Chairperson Mukunda Neupane and the Chief of Primary Health Centre of *Bankatuwa* VDC Mr. Ramakant Chaudhary and Chief of Area Health Post of *Shamshergunj* VDC Mr. Bal K. Chaudhary; whereas MOU exchange is due with expected secondary and tertiary care provider local Hospital.

It is to be noted that the scheme will support 10 per cent and 50 per cent of the costs respectively in the purchase of medicines and in the use of

ambulance as well in addition to 100 per cent support of costs of other specified services.

Considering the intensifying crisis, displacement, increasing unemployment and slackening economic activities in the country, issue of livelihood and social protection have gradually become the most relevant issues in our national life. As a part of most urgent social protection measure, health micro insurance is expected to play a vital role for working population. And hence, the success of this scheme of GEFONT is being watched from other actors also with keen interest. If GEFONT becomes successful in this scheme in Banke, expansion of the scheme will take place with new energy and enthusiasm and it will benefit thousands and thousands of working class families all over the nation

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