



PUBLIC SERVICES
INTERNATIONAL

KNS annual meeting 22.6.2021

- **PSI globally**
- **Union Development**
- **KNS support in Pakistan and Indonesia**

Membership

- **700 trade unions in 154 countries**
- **30 million working women and men**

Regions

- Head office – **Ferney-Voltaire, France**
- Africa & Arab Countries- **Lomé, Togo**
- Asia Pacific - **Melbourne, Australia**
- Europe - **Brussels, Belgium**
- Inter-America - **São Paulo, Brazil**

Sectors

- **Local & Regional Government/Municipal**
- **Health & Social Care Services**
- **Utilities**
- **National Administration**
- **Education Support & Cultural Workers**

Priorities

- **Trade Union Rights**
- **The future of Quality Public Services & alternatives to privatisation**
- **Influencing Global Policy**
- **Organising and Growth**

Issues

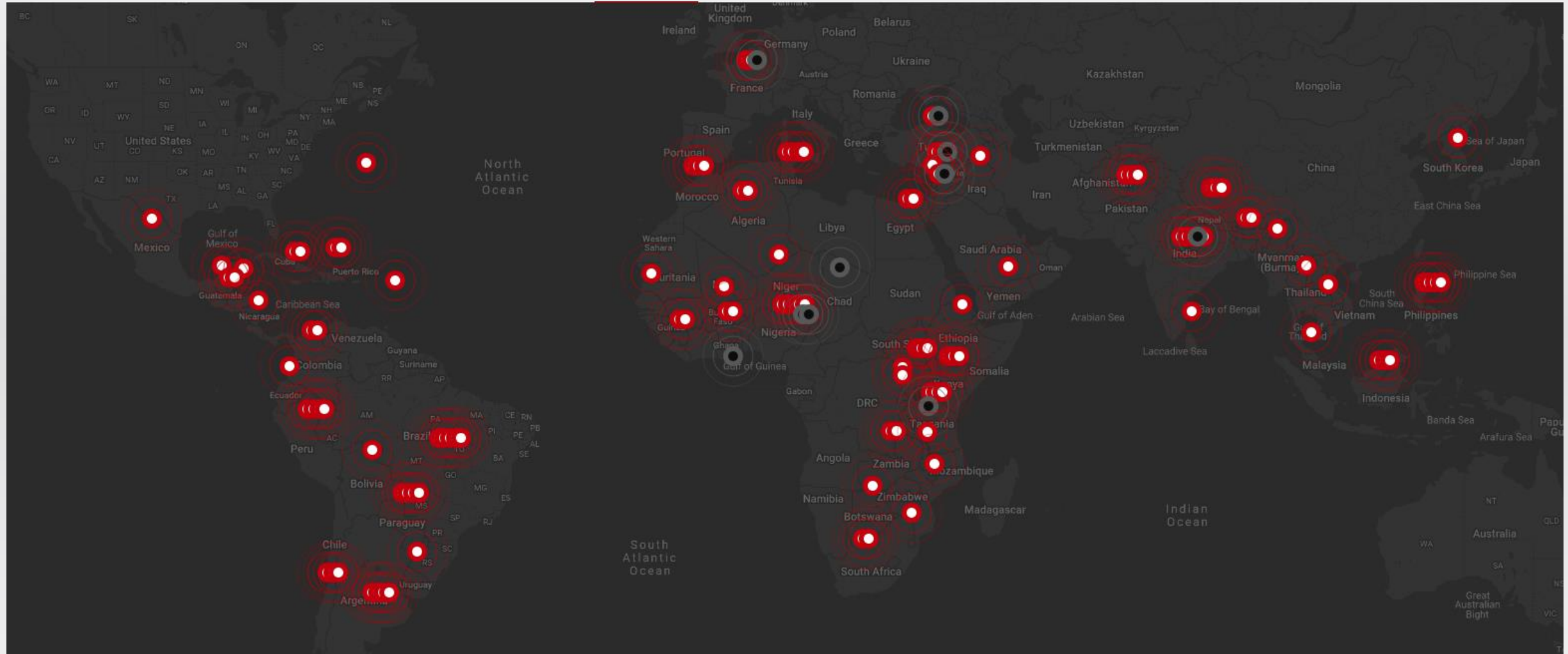
- Trade Union Rights
- Tax & Trade Justice
- Climate Change
- Emergency Workers
- Privatization / PPP
- Quality public services
- Public Funding for Development
- Multinational Corporations
- LGBTQI+
- Migration & Refugees
- Young Workers
- Whistleblowers
- Gender – Promoting Equality & Equity
- Workers with disabilities
- Informal work

Communications

- PSI website - <https://publicservices.international>
- PSI affiliates space – build their own websites
- PSI project pages
- PSI social media spaces
- People Over Profit – knowledge library and campaign platform, focus on privatisation - <https://peopleoverprof.it/>

Union Development and international solidarity work

- **Support PSI's global and regional priorities**
- **50+ externally funded projects around the world**
- **4 MEUR in 2021**
- **Team of 4,5 people in head office – coordinate with all departments and regions**
- **Solidarity not charity**
- **Local ownership and participation**



Project Partners & ways of working

- Solidarity Support Organisations (SSOs) – UtoU (Sweden), SASK (Finland), FNV Mondiaal (Netherlands) DGB BW and FES (Germany), DTDA (Denmark)
- PSI affiliates directly supporting project work – KNS, Kommunal, Vision, FORSA, UNISON, CUPE
- Collaboration with other GUFs, Nordic-Dutch coordination
- Global – regional – sub-regional and national level work

Project cooperation with KNS

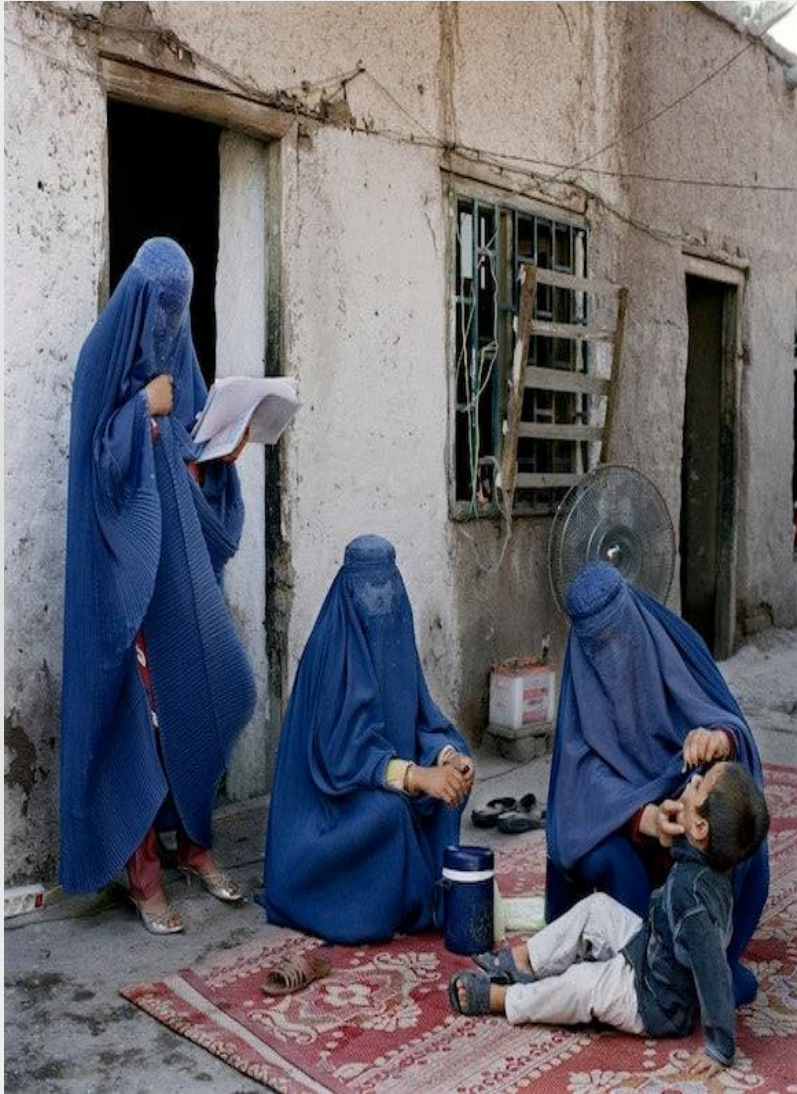
- Past years in Thailand, Andean region and ADB/Asia
- Lady Health Workers in Pakistan with PSI and FORSA
- Indonesia energy with PSI and SASK
- Important exchange from union to union

Pakistan

<https://www.facebook.com/PSIglobalunion/videos/564962474353086/>

Lady Health Workers in Pakistan

- The Community Health Workers program was started in 1994 in Pakistan
- Provide family planning, primary health care, vaccination and nutrition to the communities.
- Around 124,000 LHWs
- Entirely women, it represents one of the single largest women workforce in Pakistan





Working conditions

- Deprived of key entitlements
- Hard conditions, tough natural terrains
- No proper security provided
- Harassment at work
- Workload – additional duties due to COVID

Struggles and victories

- After several rallies, protests and sit-ins where one woman was killed in a police violence, the LHWs finally won the right to be recognised as public employees, a minimum wage and a union.



Recognition of LHW's work as work also paved way towards gender equality and recognition of women's unpaid labour





Impact of the Covid-19 pandemic

- Frontline workers working relentlessly through the pandemic
- Access to vaccination for LHWs, not prioritized by the government
- Role of CHWs in the vaccination drive

Campaign for equitable vaccine, locally and globally

Government of USA approved to the TRIPS Waiver one day after the LHW campaign for access to equitable vaccination



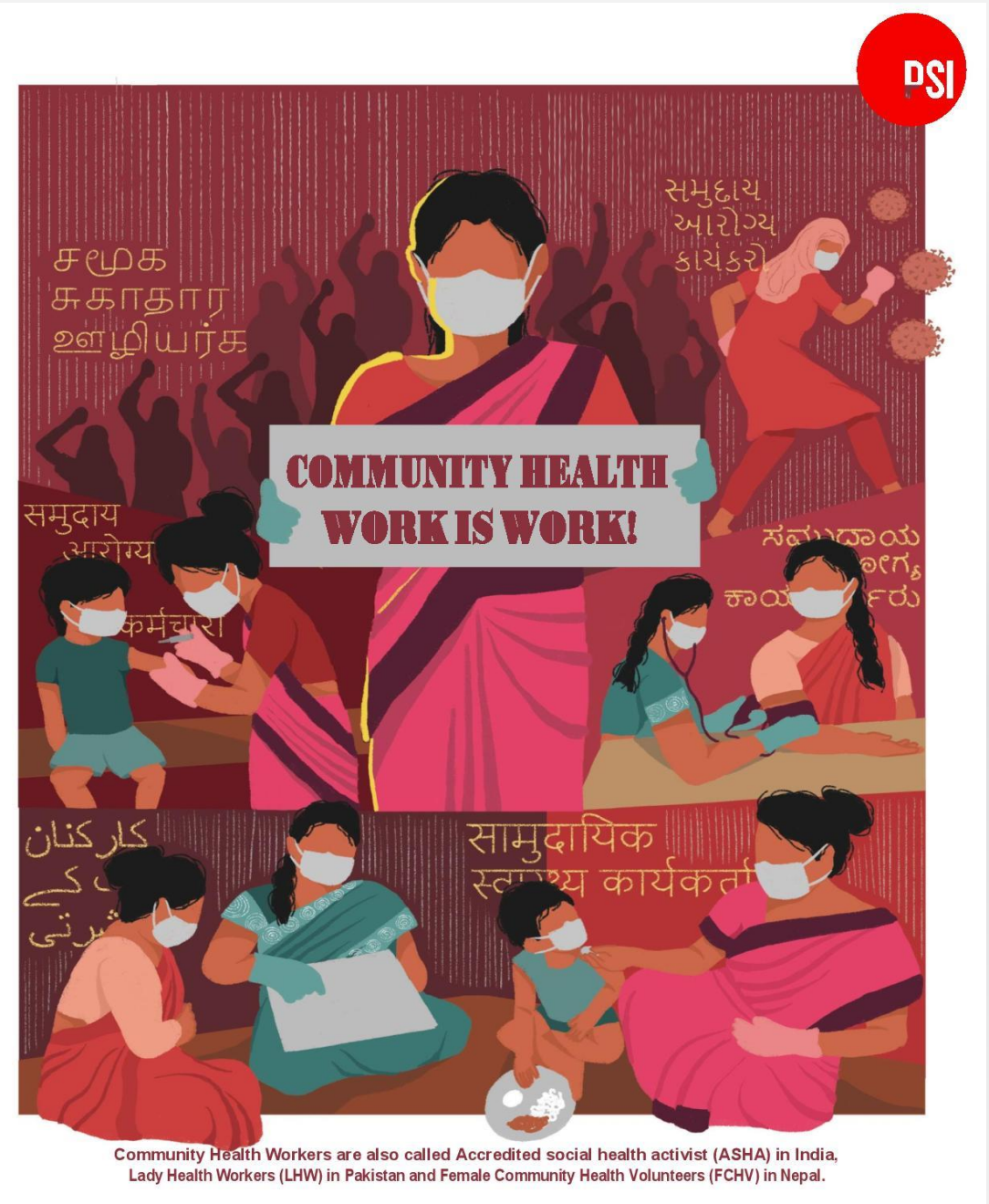
Community Health Workers' Campaign

Long Term Goal:

Achieve Decent Work (regularisation) for Community Health Workers in South Asia

Short Term Goal:

Inclusion of measures to fund and improve conditions of work of Community Health Workers in the National, Regional and International Covid response and Covid recovery plans, thus moving toward achievement of Decent Work



Community Health Workers are also called Accredited social health activist (ASHA) in India, Lady Health Workers (LHW) in Pakistan and Female Community Health Volunteers (FCHV) in Nepal.

South Asian women community health workers demand labor rights and occupational safety

On the International Day for Universal Health Coverage, Public Services International brought together Community Health Workers from India, Pakistan and Nepal for the launch of the campaign "Community Health Work is Work"

December 14, 2020 by Pavan Kulkarni



Illustration: Ninupama Viswanath for PSI

On December 11, the International Day for Universal Health Coverage, Community Health Workers (CHWs) in South Asia, who play a crucial and frontline role in public healthcare systems, were brought together by Public Services International (PSI) in a press conference.

RELATED STORIES



Trade unions and progressive movements across the world unite to #MakeAmazonPay



What is RCEP and why are trade unions in the Asia-Pacific region concerned about it?



COVID-19 crisis has reminded society of the importance of public services

Campaign Launch-Media Coverage



Economy Health Karachi

Lady Health Workers launch charter of demands

By Shehar Bano - Tuesday, December 22, 2020 2:35 pm

KARACHI: PPP MNA Shahida Rahmani, while speaking to a seminar organized by the all South Asian Health Workers & Employees Union in collaboration with the

Latest News

lockdown but were not given sanitizer, PPE or compensation for this precarious job. Not surprisingly, more than 20 of them tested positive for COVID-19. Halima demanded safer working conditions for all lady health workers, dignity and respect like other healthcare professionals, and fairer wages, insurance and pension."

By Bobby Ramakant

THIS year the Universal Health Coverage (UHC) day is different in a way that never before the UHC message was so loud and clear. From first case of coronavirus eleven months ago to nearly 70 million cases worldwide, the pandemic has made us realize how essential is health security for each one of us - and - unless we ensure development justice for each one of us, no one is protected. Primary healthcare is the fundamental building block of health systems and community health workers who provide primary healthcare services are the true champions. More importantly, community healthcare work, is also an essential work - failing which, our entire health system is threatened.

Community health workers across the south Asia region have united in solidarity and launched a campaign to assert their rights as workers. Kate

Kate added that community health workers currently face the risk of contracting COVID-19 through their work but are perversely denied health and life insurance as well as pensions. Governments have recognised community health workers as 'warriors against COVID-19' yet have routinely failed to provide adequate personal protective equipment (PPE) kits, training, wages or support. Their repeated requests for provision of safety kits, masks and sanitizers during the COVID-19 door-to-door visits and surveys has been denied by the authorities. With increased risks of exposure to the virus, the pandemic has illustrated that precarious work is a threat to public health.

World Health Organization (WHO) has long recognized the role of community health workers underlining that they "play a crucial role in broadening access and coverage of health services in remote areas and can undertake actions that lead to improved health outcomes."

Rosa Pavanelli, General Secretary, PSI stressed that it is important to formalize the relationship of community health workers with public authorities to enhance their quality of working conditions. This pandemic has shown that how tragic is the scarcity of health professionals globally. No country has been able to keep on treating patients at the level necessary. International organizations including the WHO are relying on greater task sharing by community health workers to

mented a range of threats and violations experienced during the pandemic. Community health workers are facing heightened risks of infection and enduring long working hours, psychological distress, fatigue, occupational burnout, discrimination and physical and psychological harassment. Many community health workers have reported not being paid during the pandemic.

In India, there are three groups of community health workers: Accredited Social Health Activists (ASHA) who are all women, Auxiliary Nurse Midwife (ANM), and Anganwadi, Yamuna Tekam, an ASHA worker since four years, represents Nagpur Municipal Corporation Employees Union (NMCEU). Yamuna said that during the pandemic, family wanted her to be home but authorities pressured her to go to the field with a mask. She was not given PPE and seldom got a glove. Abuses were hurled upon her or survey form was torn or water thrown on her colleagues. Three ASHA workers tested positive for COVID-19 in her centre. She was given Rs 30 per day (Rs 1000 for a month) which was far less than what was due.

Halima Zulqarnain, Central President, All Sindh Lady Health Workers and Employees Union (ASLHWEU), Pakistan, said that community health workers are referred to as Lady Health Workers in Pakistan, and were appointed since 1994 at Rs 900 a month for family planning programmes in rural

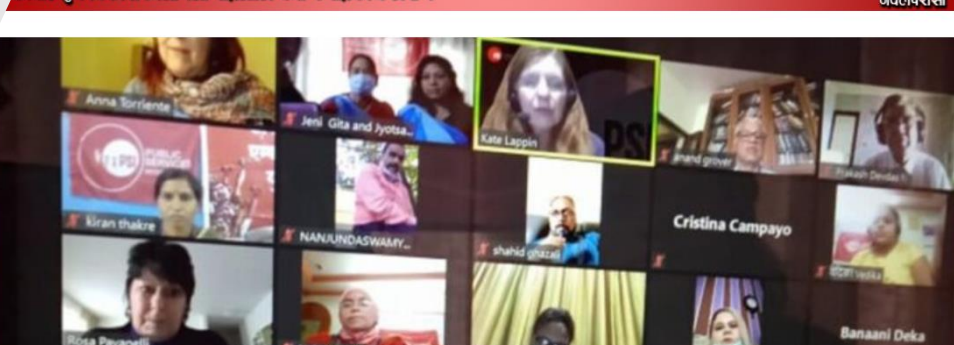
more than 20 of them tested positive for COVID-19. Halima demanded safer working conditions for all lady health workers, dignity and respect like other healthcare professionals, and fairer wages, insurance and pension.

In Nepal, community health workers are called Female Community Health Volunteers. Gita Thingg, Vice President, Nepal Health Volunteers Association said that they have played a vital role in reducing maternal and infant mortality rates nationwide. In Nepal, the title of 'female community health volunteers' suggests 'voluntary' work but it is 24x7 work, says Gita. Snacks and basic travel allowance is not a justified compensation for this important service they provide. She demands that government must recognize the critical role they play in health system with dignity. Since 2010 she has been unionising in Nepal to claim rights and benefits long owed to female community health workers. "We are working labour and we should be paid, and respect dignity and respect rights protected" said Jyotsana Shakya

Health Volunteer of Nepal said that 'female generations & female communers. Even the government of health volunteers to respond was not

Anand Grover, Special Rapporteur to Health and set Supreme and Hi India, said that every person is a healthcare facility which are available, acceptable, and government to ensure Community health workers - most because based on we do care for

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सुरक्षाका साधनहरु उपलब्ध गराउन माग ।

२०७७ मंसिर २७ गते शनिबार २०:१८ मा प्रकाशित

गणतन्त्र नेपालको जनहितमा जारी सुचना

सुरक्षाका साधनहरु उपलब्ध गराउन माग ।
२०७७ मंसिर २७ गते शनिबार २०:१८ मा प्रकाशित

बाल बालिकाहरुलाई जोसिमथक काममा नलागाओ ।
बाल मेत्री गाऊपालिका निर्माण गरौ ।
गाऊ-गाऊमा सामाजिक सद्भाव कायम गरौ ।



अवरोधक : सरयवल गाऊपालिकाको कार्यालय वलपरासी

Choose the right time to visit your dentist
दाँत उखेल्ने दाँतमा चाँदी सिनेन्ट सिस्मा कम्पोजिट गर्ने, टलकाउने अतिदुर्लभहरुको लागि नचिनिने मरी दाँत राख्ने तथा मने दुखेको दाँतको जरैदेखि उपचार गर्ने, नयाँ दाँत राख्ने बाड्ने डिङ्गो तथा नगिलेको दाँत सिधा गराउने, मिजा सुनिने रगत आउने मुख मनाउने घेरै पुरानो समस्याको पनि उपचार गर्ने. Crown and Bridge गर्ने, दाँतको एक्सरे र हर्षाको उपचार पनि मरीन्छ ।
दाँत मुख र मिजा सम्बन्धि सम्पूर्णका लागि हामीलाई सम्पर्क गर्नुहोस् ।

मिलिजुली गार्मेन्ट एण्ड ईम्ब्रोइडरी प्रा.ली.
बर्दघाट-९, भुताहा, नवलपरासी
फोन: ०७६-४९२९६६
हाम्रा सेवाहरु :
नील्स पाईन्ट, शर्ट, ब्लाउट, ब्याग, भ्रानो, टि-बर्ट, ट्याक, बुट, गेम टि-बर्ट आदि सुपथ मुल्यमा पाईनुका साथै कपडामा पिन्ट पनि गरिन्छ ।

हाम्रा सेवाहरु
बुद्धा लड कलित नखेर उठो
बुद्धा लड कलित नखेर उठो

Joint Charter of Demands

Governments have an obligation to ensure the safety and wellbeing of workers, including CHWs, as they perform their job.

WE DEMAND :



1 adequate safety protocols as well as adequate personal protective equipment (PPE), following WHO or government standards, whichever is higher

2 PPEs made suitable for women who comprise most CHW in south asia

6 transport facilities or fuel and transport costs allowance

7 proper accommodations and nutritious food while in self quarantine post-work



4 declaration of COVID-19 as an occupational disease under the WHO guidelines and ILO Conventions 155 and 181 and Recommendations 164, 171 and 184, including a right to compensation and rehabilitation should we be infected in the course of performing our duties



8 measures to protect us against discrimination and forced work in unsafe working conditions



The pandemic has illustrated the importance of a robust health system supported by public health workers.

Community Health Workers (s) have been an essential part of the response to Covid-19. Most governments have failed to recognise us as public health workers.

WE DO:



WE DEMAND :

1 adequate and timely payment that is not below the prevalent minimum wage for equivalent workers



4 social security entitlements, pension payments, parental/carers/sick leave entitlements, as per country labour laws



2 overtime pay as per country laws



3 higher pay scale depending on educational qualification and years of service



Public Health policies are better when workers contribute to them.

WE DEMAND :

1 democratic voice through our collective representation in the decision-making process



2 space for our representatives in national and policymaking committees for COVID-19 response and recovery plans



3 consultation in decisions relative to essential services in our communities

5 mandatory social dialogue process in resolving health intervention implementation and monitoring issues



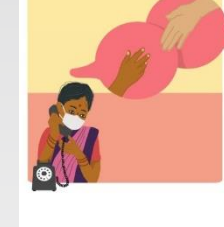
When governments treat CHWs as simply volunteers, and not critical public health workers, they are exposed to higher levels of risk, harassment and marginalisation.

WE DEMAND :

1 a work environment free of harassment and violence



2 a dedicated helpline for health workers where we can receive information and support relating to public health as well as problems we are facing



4 a strong media campaign to explain to the community the role that CHWs play in the response to COVID-19 in order to help counter the stigma attached to the work that we do during this pandemic

3 a grievance redressal mechanism to ensure timely action and resolution of grievances



5 proper menstrual health management for female frontline health care providers, as well as free menstrual hygiene products

COMMUNITY HEALTH WORK IS WORK



UNIONS IN INDIA

Mumbai Mahanagar Karmachari
Mahasangh (MMKM)
Hind Mahila Sabha (HMS)
Nagpur Municipal Corporation
Employees Union (NMCEU)
Karnataka State Government
employees Association (KSEGA)
Indian National Municipal &
Local Bodies Workers Federation
(INMLWF)
Tamil Nadu Government Officials
Union (TNGOU)

UNIONS IN PAKISTAN

All Sindh Lady Health Workers
and Employees Union
(ASLHWEU)
Punjab Ladies Health Workers
Union (PLHWU)

UNIONS IN NEPAL

Nepal Health Volunteers
Association (NEVA)
Health Volunteer Organisation of
Nepal (HEVON)

SOLIDARITY!

We seek to continue our work
in solidarity across countries to
secure all CHWs recognition

Using the **ILO nurses’
convention** review as an
opportunity we urge health
affiliates to include in their
submissions that the
**convention should not permit
volunteer public health
workers**

Indonesia: Strengthening trade unions in the energy sector



- The project aims to consolidate, strengthen and unify the trade unions in the state electricity company's (PLN) its parent company, subsidiaries and outsourcing entities so as to improve the working conditions of workers and address the continuing threat of privatization.

Anak Perusahaan PLN

Total 41,334 members



100%



PT. PLN (PERSERO)

99.99%

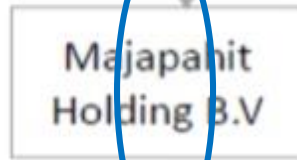
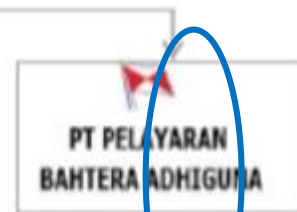
SP.PLN
25,000

6 IPPs
1,182

16 Outsourced
Plants with
5,289

PPPI 4,200

SP.PJB 3,000



SPEG
2,263

SP.ICON 400

Results



- **Coordination and Networking:** Brought the different energy sector workers together in one platform. Created synergy and understanding among workers regardless of their working arrangements with PLN. PSI, BWI and IndustriALL affiliates.
- **Increased Capacities:** Capacity to develop and execute an organizing and bargaining strategy. Identify and train potential leaders.
- **Knowledge and Data:** Mapping Energy Sector and Energy Workers Across Indonesia. Research on “State and Future of Public Energy, Renewable energy and Just Transition”
- **Advocacy and Campaigning:** Strong joint position of energy sector unions in the campaign against **Omnibus Law** particularly electricity sub-cluster.

Campaigning against Omnibus Law and energy privatisation



#TolakOmnibusLaw

Omnibus Law Disregards Constitutional Court Ruling = UNCONSTITUTIONAL

Omnibus Law Job Creation Bill combines the definition of "operational permit" and "electricity provision permit" which is aimed at disregard the Constitutional Court Ruling No. 111/PUU-XIII/2015.

1. M. Abrar Ali, Ketua Umum GP PLN Pasir 0811-8542-9271
 2. P. Kuncara, Ketua Umum GP Indonesia Power 0811-879-7191
 3. Agus Wibawa, Ketua Umum SP PLN 0898-474-0900
 4. Yudi Winawa, Ketua Umum SPEL (SPRI) 0857-155-2900
 5. Subana, Ketua Umum P. Tenaga Indonesia 0858-1542-2541
 6. Indah Budiarti, Public Services International 0811-814-8210

#TolakOmnibusLaw

OMNIBUS LAW JOB CREATION

ELECTRICITY RATE HIKES = EXPENSIVE ELECTRICITY

Omnibus law opens a chance for private to control electricity and removes the function of Parliament as people's representatives in controlling policies of electricity

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#TolakOmnibusLaw

Reasons Why Electricity Sub-Cluster of Omnibus Law Harms the Peoples

Understanding the reasons why unions in the electricity sector reject the Omnibus Law Job Creation Bill (RUU Cipta Kerja)

Removal of state control over branch of production that affect peoples' lives

- ✓ Reviving articles which were canceled by Constitutional Court Ruling No. 111/PUU-XIII/2015, or in other words, revived zombie articles.
- ✓ Combined the definition of "operational permit" and "electricity provision permit" which is aimed at disregard the Constitutional Court Ruling No. 111/PUU-XIII/2015.
- ✓ Obscuring the definition of "business areas" which is aimed at disregard the Constitutional Court Ruling No. 111/PUU-XIII/2015.

Removal of Parliament's Function in Making and Monitoring Electricity Policies

- ✓ Removes parliament's consultation in deciding general plan of national electricity (RUKN)
- ✓ Removes parliament's right to determine electricity rate for consumers, to set grade of electricity rate and fuel rate determination for PLN owned plants.
- ✓ Many electricity laws are set without involving the Parliament. Electricity cluster of Omnibus Law Job Creation Bill requires 14 government regulation as further provision.
- ✓ Government Regulation made under Omnibus Law Job Creation that possibly will surpass Law and without Parliament's control

Removal of Regional Government's authority

- ✓ Omnibus Law Employment Creation removes Regional Government's authority in terms of electricity provision

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Training on organising and collective bargaining



Project website: <https://psisaskenergyprojectindonesia.org/>
Facebook: <https://web.facebook.com/groups/519533765278553>

Future

- **COVID -19 re-shaping the priorities and ways of working**
- **Close collaboration with SSOs and PSI affiliates through PSI sectoral policy work and projects**
- **Joint learning, joint lobbying, joint networking, exchange of experiences and ideas**

**Thank you KNS for the valuable
support and solidarity
throughout the years!!**

