Designing an Anxiety Free Space for Workers in Factories

Consolidated ideas from GBL hackathon April 2020
# Index

<table>
<thead>
<tr>
<th>Serial No.</th>
<th>Heading</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Context</td>
<td>2</td>
</tr>
<tr>
<td>2.</td>
<td>Universe of Garment Industry Workers</td>
<td>2</td>
</tr>
<tr>
<td>3.</td>
<td>Scenarios</td>
<td>3</td>
</tr>
<tr>
<td>4.</td>
<td>Windows of Opportunity</td>
<td>7</td>
</tr>
<tr>
<td>5.</td>
<td>Out Of The Box</td>
<td>11</td>
</tr>
<tr>
<td>6.</td>
<td>Way Forward</td>
<td>12</td>
</tr>
<tr>
<td>7.</td>
<td>Appendix</td>
<td>13</td>
</tr>
</tbody>
</table>
1. Context

GBL organized a two day internal hackathon (8-9th April 2020) to brainstorm on steps garment industry (referred to as “factories” now on) can take for its workers in a Covid-19 world. Three teams participated, with representation from both GBL and Shahi Exports – India’s largest exporter of readymade garments - facilitated by external mentors. The teams ideated keeping both business and workers’ needs in these trying times at the center, being aware that the impact of the current crisis is going to last for many months to come.

The main questions were - What steps can factories take in this “new normal” to ensure workers aren’t too anxious about coming to work? How can factories run keeping everyone’s safety in mind? If a worker has Covid-19 symptoms how can factories ensure they don’t feel any judgement in reporting those? How do we prevent individual anxieties from snowballing into system level anxieties?

2. Universe of Garment Industry Workers

Solving the problem at hand necessitated understanding the different kinds of workers at factories and the anxiety felt by each. It then became imperative that factories as an employer would have to address the issues of not only workers who come to the factory, but also of those who can’t for various reasons.

Our suggestions have been framed keeping the following classification in mind. The insights aim to develop a thorough understanding of all touchpoints, curated actions in various scenarios and holistic communication strategies between the management & workers and within the worker community.
Sections that follow expand on key considerations for management to keep in mind.

3. Scenarios

First and foremost, factories should communicate the protocol for infected workers (disseminate information on support from ESI & the details of mediclaim coverage).

- Assure workers that they will be allowed to join back work after X days without losing salary owing to ESI insurance.
- If they end up getting let go, factories should remain in contact with the workers for future opportunities and the sentiment should be conveyed.

3.1 Workers who can’t come to work

3.1.1: Migrant Workers who have been stuck in hostels (due to lockdown) and want to go back home.

(This is keeping in mind both the mental health of workers and the financial strain on factories resources, over and above footing the wage bill. However, if due to government regulations, workers can’t go back home, then Scenarios 2 & 2.1 unfold.)

a. If possible, funds from Skill Development of various Project Implementation Agencies (PIAs) can be utilized to facilitate their safe travel back home, thereby lifting the financial strain on
factories, at the same time cementing employer-employee relationship. (Arrange transport, provide sanitizers and masks).

b. Workers must be properly screened for symptoms before being sent home. In case of symptoms, workers should be tested.

c. Factories can give CLEAR INFORMATION on:
   i. how many days workers are allowed to go back - how leave policies get affected;
   ii. when their contracts will terminate;
   iii. will they get their jobs back after a few months?

d. In case they can’t go back home/ decide to stay in the hostel - Strengthen stringent personal hygiene practices and social distancing norms in hostels.

3.1.2: Migrant Workers who were able to go to their homes at the time of the lockdown.
Note: Such workers are few.

e. Considering how they have no choice (if there’s no public transport/borders are closed), factories can give a few weeks/months’ time for these workers to rejoin.

f. Keeping in mind the gravity of the situation, such workers might be asked to voluntarily resign. In this case, it becomes important to develop and sustain a connection with these workers as a gesture of respect and keeping future requirements in mind.
   i. In rural areas, connection can sustain via DDUGKY or other skilling centers as mobilizers/center staff know the family members of each worker well.
   ii. What about workers that don’t come through DDUGKY, an alternate strategy needs to be developed for other sources of recruitment?

3.2. Workers who will rejoin work
(Both migrant and daily commuters - See Appendix for detailed “touchpoints”)

Note/ Suggestion - The decision of which units to open (in case of many) will be production based. If a second filter can be applied - proximity to hostels/ hospitals etc. and their location in government declared hotspots should be prioritized.

*A Self-declaration form should be distributed to all workers on Day 0 for everyone to go through it thoroughly.

a. Filtering of workers based on medical conditions (to be ascertained by doctors): E.g.: those with respiratory problems, high blood pressure, heart problems and diabetes, pregnant women or recent mothers should not be allowed. (Coordination between HR-Organizational Development Team (OD)-Medical-Saarthis team required aka Special Task Force).
   i. Screening at the unit, especially for daily commuters, as hostellers would have been monitored better.
ii. All supervisors and Saarthis (worker champions, role explained in next section) to be apprised of Covid-19 symptoms and to be on the lookout, and involve the medical team if required.

iii. Anyone coming to work from a “high-risk” area or outside the city, should remain at home or 14-day quarantine depending on the situation.

iv. Track where each worker is working everyday so that if anyone shows symptoms/ tests positive then management knows who to isolate or monitor.
   1. Every factory HR to maintain a log with emergency contact number of worker/ relatives/ guardian with address of residence.
   2. Same protocol to be followed for ailing (Covid19 infection) workers as mentioned before.

b. Day 0 activities - the day of opening up. (Use the medical testing day 0 also for training on new protocols and morale-boosting, initiative factories is taking, no work! Welcome workers, extend support - HR to take responsibility).

   i. Medical testing
      1. Fund-raising for acquiring kits (Brands can be approached too) can be considered.
      2. We can work with the government to get support in testing.

   ii. *Self-declaration Forms (the form should inquire 14 days of travel history among other things. Content to be taken from factories SOP documents, but language adapted keeping suggestions of this doc in mind):
       1. Factories to communicate the importance of this form.
       2. Reassure that people who choose to stay home due to health problems will not be laid-off wherever possible
       3. Communication: Use help of factory supervisors and volunteers to create these forms + assist in distribution.
          a. If feasible (as this will be labor intensive) all workers to be called two-three days in advance, informing them about the need and content of the form via phone.
       4. These forms must be signed by all employees at a factory - right from the general managers to workers. This is necessary for the safety of the entire campus and will also ensure workers don’t feel singled out and thereby judged. The feeling of judgement will result in underreporting in case of any symptoms later.

   iii. Prepare the units for workers’ arrival
       Important: A team needs to be put in place to take responsibility for this.
       1. Keep doors open where possible.
       2. Keep scrap cloth/tissues ready for usage like opening bathroom doors or touching other surfaces and dispose of them after usage every time. Keep a stock of cloth scraps at strategic locations (outside bathrooms, in the canteens). Communicate the new protocol to workers.
       3. Block additional space in the factory for the canteen for tables and chairs to be
spaced out. Add cardboard/plastic dividers on the table to prevent transmission.

4. Increase space between workstations (sewing, sampling, cutting) where possible. Add either plastic sheets as dividers between stations or use face shields to prevent transmission.

5. Maintain & update required stock (this applies to all PPE/sanitary equipment).

c. At the factory - Day 1 onwards (Section 4 outlines other ideas related to this in detail).
   i. Staggered work timings so people don't come in all at once.
      1. Different lunch and chai break timings - smaller groups.
         a. Staggered to talk to each other, wash hands.
         b. Informal way of creating a support system for workers.
         c. As little movement as possible - workers who used to go home for lunch to be asked to get their lunch to work.
   ii. No more than two people to be allowed in the washroom at a time.

3.2.1: Workers coming to work from hostels

a. Factories can prioritize these workers in rejoining.

b. Factories to arrange the transport (this can be avoided if units to open are chosen based on the criteria highlighted at the beginning of this section), sanitize buses.

c. In the case there is a need for less workers due to low number of orders, can factories use extra workers to manufacture more PPE?
   i. We are aware that some factories are already manufacturing PPE, the suggestion here is to absorb “extra” workers who may otherwise have to be laid off.

d. Factories can consider a reshuffling of roles where extra workers can absorb the roles of "missing" workers IF they want to - eg: housekeeping staff etc.

e. Get a vacant building/hotel to house workers who are not working temporarily (in case factories’ running capacity doesn’t require them) OR spare rent for them regardless.

3.2.2: Daily commuters: challenging to map their travel history

Factories could consider leaving out daily commuters OR give them temporary accommodation near the factory. These may make the bulk of the workforce in case of rural factories, in which case arranging transport and even accommodation may be crucial.

4. Windows of Opportunity
Further to the basic steps outlined in section 3, for different scenarios, factories can also consider the following:

**Welcome kit at the end of Day 0**

1. Cloth mask for all workers and their family
   a. DIY activity where they customize their mask (forming emotional attachment with the mask, making usage likelier).
   b. HR/OD/Supervisors to take photos of workers wearing masks and working, share these on the factory Whatsapp group.
2. Sanitary napkins + iron supplements (It is crucial for factories to consider the health needs of a majority female workforce. We have seen in our previous work that female workers don’t always have access to hygienic methods of menstrual management and have high rates of anemia. In this time of crisis this lack of access may be exacerbated due to limited supplies).
3. Put cloth scraps at various places in factories (no checking for scraps at security) + some in the welcome kit.
   a. These cloth scraps can be used to open doors, touch other surfaces.
4. Handwritten message and posters/standees at the entry gate:
   a. Stay safe, stay healthy.
   b. No explicit mention of Covid in these messages.
   c. We are there for you, we depend on you as much as you depend on us.
   d. Instructions on how to use the mask and cloth scraps.
   e. Suggestion: factory feeders can take responsibility for workers in their line.
5. Employee handbook (if any stock left).
6. Guidelines for use of masks, PPEs and sanitizers
   a. Reusable masks provided to all workers with awareness on washing everyday.
   b. Extra masks available in case of need.

Note: all these combined will make the workers want to keep the welcome kit.

**General principles of communication (tone & delivery of content) with workers**

1. Resolve the life vs livelihood trade-off faced by workers. Communicate that personal safety = financial safety of the family = economic safety of the nation.
2. Fear vs Care: Transform any suspicion into “Your Health is My Health Attitude.”
3. Communications should be framed with an intent to change behavior. Ideas to frame behaviorally backed messages can be found [here](#).
4. Don’t sound persuasive, better to be considerate and understanding.

Why this communication strategy?
1. The new normal demands co-operation, understanding and solidarity.
2. Production pressure should not end up hampering the whole careful+caring exercise.
3. Effective use of Human Interface and Technology interfaces will ensure a safe and secure work environment.
4. Strong, long term incentive needed for workers who come to work + needs to be communicated on Day 0

**Introducing Saarthis (Ambassadors of Change)**

Saarthis will be responsible to drive the “Communication Strategy.”

HR/OD team will select the Saarthis based on a set criterion (to reduce personal bias).

**Who can become a Saarhi?**

- Workers can nominate themselves or co-workers.
- P.A.C.E. champions.
- On an average 6-7 Saarthis per floor (depending upon the factory size).

**How will be the Saarthis identified on the shopfloor?**

- Bandanas
- Badges
- Special T-shirts

**Training and capacity building of Saarthis**

- GBL can assist HR/OD teams to develop training guidelines and impart training on:
  - Roles and responsibilities
  - Communication channel and activities

**Reward system (non-monetary)**

- Badges, recommendation letter, certificates, picture on the notice board
- Group clap (everyday) for “best performing” Saarthi on a floor

**Measures of success (create competition across lines)**

- Identifying indicators of success based on what we want workers to follow and learn from the “Communication Strategy.”
- No. of people wearing masks
- People following the hygiene instructions
• Workers willing to do video messages for display (check information myth busting measures later in this section)

Sharing

1. Medical room counselling help desk (Saheli/Gelathi)
   a. To not overburden the help desk, dedicated slots for floors.
   b. Staffed with dispensary people, no outward mention of Covid in the name.
2. SMS based communication
   a. Broadcast messages once a week.
      i. This has to be tailored: especially for factories that are shutting down and workers are not being called to the factory.
      ii. Communication to go out whenever possible so as to not leave workers in limbo.
3. Factories Whatsapp business account
   a. To be created to coordinate. Supervisors and feeders may have their line workers’ phone numbers.
4. Share phone numbers of HR and OD staff who can’t come to the factory (floor division, this will also reduce workload on HR and OD staff in the factory). If possible make them available on live video. The information can be given through:
   ● Notice board
   ● Feeders
   ● Hopefully in chai breaks!

Caring

1. Connecting with family: each feeder is responsible to help workers contact family (video, regular calls).
2. Pleasant images on the factory notice board/walls (human babies, cute animals washing their hands) in addition to:
   a. Posters/announcements/supervisors reminding workers to use their masks.
   b. Reminders not to constantly touch their mask.
3. Art and craft competitions within hostels, work displayed on the common room wall.

Edutainment (MythBusters)

Pre recorded messages (Health, Safety and Hygiene). Common myths can be found here.

1. Different influential people from the factories ecosystem (MD, managers, workers).
   a. Short video series debunking myths

Different channels:
1. Public announcement system
2. Whatsapp
3. Videos on a projector

5. Out Of The Box

In the spirit of innovation we also invite factories to consider an experimental line of thought. Let’s be prepared and perceptive to change & innovate both culture and business wise, with the vision that factories can become a leader in ushering a paradigm shift in the way business is done.

**Re-imagining the line system**

Consider moving to a modular system. This will help in maintaining social distance enabling work stations to be placed 6 feet apart. The workers who do show up can be skilled to take up production of individual pieces so clothes are not produced in parts and touched by many.

**Re-thinking matrices of value**

Be a pioneer in leading a paradigm shift to focus on "worker satisfaction" over and above “worker productivity” in public facing reports and communication. As a principle and strategy - in statements to the governments, stakeholders, partners, brands etc., commence with updates on worker wellbeing and focus on social profits before economic profits. Take a stand.

Such high pressured dire times can be tapped into building a responsible image of the business that can be utilized later - both for business and worker wellbeing.

**Turning spare factories spaces into Isolation Wards**

With additional features such as in house testing and factories ambulance to take workers to hospitals. To improve trust factory managers get tested in front of the workers.

**Shorter Work Week**

factories can consider operating factories every alternate day or fewer number of days in a week (workers can work an extra one or two hours on the day they do come) to minimize movement of people.
6. Way Forward

To execute the suggestions outline in this document, factories must consider:

1. Tapping into its CSR Budget.
2. Monitoring what’s working, what’s not and adapting plans accordingly, weekly.
   a. GBL can assist in devising this mechanism.

In general the GBL team is happy to help design and implement any elements of this document as the factories management deems fit.
7. Appendix

7.1 Touchpoints for workers at the factory
Based on GBL’s qualitative data on a typical day in a worker’s life, we mapped all the potential touchpoints aka interaction zones for spread of Covid-19.

<table>
<thead>
<tr>
<th>#</th>
<th>Time</th>
<th>Activity</th>
<th>Touchpoints</th>
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<tbody>
<tr>
<td>1</td>
<td>5:00 -7:00</td>
<td>1. Daily chores/getting ready</td>
<td>● People: family, neighbours, shopkeepers, Janodaya staff, hostelmates</td>
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<td>● Shared appliances: phones, TV, radio, etc.</td>
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<td></td>
<td>● Places: shops, common washrooms, water collection points</td>
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<td>2</td>
<td>7:00-9:00</td>
<td>1. Travel to factory</td>
<td>● public transport, rickshaws, personal vehicle</td>
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<td>3</td>
<td>8:30 -9:00</td>
<td>1. Security check at entrance (factories to develop appropriate SOPs for infrared thermometer screening).</td>
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<td>2. Attendance</td>
<td>● Workers queue up &amp; Frisking</td>
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<td>● Biometric/ Register/ Card Reader</td>
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<td>● Gate pass/Temporary ID collection</td>
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<td></td>
<td>● Temple/ creche/ medical facility visits</td>
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<td></td>
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<td></td>
<td>○ Women with children in the creche (especially in rural areas) are big contributors to production. factories should look into the possibility of opening the creche according to government guidelines.</td>
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<td>○ Social distancing “box outlines” to be made at medical rooms, water points, bag storage area.</td>
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<td>● Physical greeting (intentional/unintentional)</td>
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<td></td>
<td>● Washrooms/collecting drinking water</td>
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<td>● Workers keep personal belongings in one space</td>
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<td>4</td>
<td>9:00 -9:15</td>
<td>1. Batch meetings (to discuss problems from previous day, targets for today, bottlenecks, motivating)</td>
<td>● Line of 50-60 people come together with supervisor Pouch (bobbin thread + cutter) needs to be collected from the feeder</td>
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<td>● HR executives/welfare officers interact with workers</td>
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<td></td>
<td>● Workers go back to their work stations</td>
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<tr>
<td>Time</td>
<td>Event</td>
<td>Details</td>
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<tr>
<td>9:15 - 12:30</td>
<td>During Production</td>
<td>1. Work begins</td>
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<td></td>
<td>- Workers seated very close to each other</td>
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<td></td>
<td></td>
<td>- Pass garments to each other</td>
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<td></td>
<td></td>
<td>→ Worker &gt; (carton) &gt; worker</td>
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<td></td>
<td>→ Worker &gt; Feeder (carton/…) &gt; Worker</td>
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<td>→ Panel to transfer between the workstations</td>
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<td>- Close contact between workers when support is required</td>
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<td></td>
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<td>- Mechanics visit if any issues with machinery</td>
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<td>- Supervisors, production managers, dispatch, feeders, IEs all have close contact</td>
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<td>- Washroom/water break when required on same/different floor; can be a time for social interaction in large groups</td>
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<tr>
<td>12:30 - 13:00</td>
<td>Lunch break; in batches</td>
<td>1. Lunch break; in batches</td>
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<td>- Workers queue up to get their lunch bags</td>
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<td>- Walking up to the canteen - crowding, queuing</td>
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<td>- Canteen is overcrowded already</td>
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<td>- Wash hands before eating (in the washroom) or canteen</td>
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<td>- Eat their tiffin; if canteen food then canteen cutlery</td>
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<td>- Return the cutlery in a plastic box</td>
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<td></td>
<td>- Canteen workers making and managing the food</td>
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<td>- Washing the used cutlery</td>
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<td>13:00 - 17:00</td>
<td>Work resumes (High intensity period of work by EOD)</td>
<td>1. Work resumes (High intensity period of work by EOD)</td>
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<tr>
<td></td>
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<td>- Punching out after work (queueing near biometric)</td>
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<tr>
<td>17:00 - 19:00</td>
<td>Security check</td>
<td>1. Security check</td>
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<td></td>
<td></td>
<td>- Frisking</td>
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<td></td>
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<td>- More crowding in the evening than morning, long</td>
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3. Buy groceries/household items

queue - inside and outside the gate
  - Buying groceries/snacks
  - Shared auto/bus back home

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<th>After Production Ends</th>
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<tr>
<td>8</td>
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<tr>
<td>9</td>
</tr>
<tr>
<td>2. Chores</td>
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<tr>
<td>3. Watch TV, entertainment</td>
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<td>4. Set up things for next day</td>
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<td>10</td>
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7.2 Rigorous academic evidence to back our suggestions

This [health sector brief](#) on tackling Covid-19 by the Abdul Jameel Poverty Action Lab (founded by 2019 Noble Laureates in Economics, Abhijeet Banerjee and Esther Duflo) covers the following salient points:

a. Actionable and specific information is better in changing behavior than generic information.
   i. Eg: Set an alarm to wash hands every two hours is better than just saying “wash your hands.”

b. Peer networks such as those of friends, neighbors, and other well connected individuals in the social network work well in disseminating information rather than pure information dissemination campaigns.

c. Edutainment and involvement of celebrities can help in better adherence of suggested behaviors.

d. Providing recommended masks, tests, other equipment/services for free, especially in the face of shortages in the market, can lead to mass uptake.

e. Overall improving trust in the healthcare system is crucial for reporting and cooperation with health guidelines.