

# KINGDOM OF THAILAND

## **The Study on Socio-Economic Impact of the Workers Who Had Occupational Hand Loss**

### **Abstract**

The study on Socio-Economic Impact of the Worker Who Had Occupational Hand Loss was aimed to.

1. study lifestyle characteristic of the workers who had occupational loss of finger or hand after receiving compensation.
2. study physical, mental, spiritual and social health status of the workers who had occupational loss of finger or hand after receiving compensation.
3. study socio-economic status of the workers who had occupational loss of finger or hand after receiving compensation.
4. assess socio-economic loss of the workers who had occupational loss of finger or hand after receiving compensation.

The studied samples with accidental sampling consisted of 4 groups including.

1. 160 worker in Smutprakarn and Samutsakorn Provinces who had occupational loss of wrist, hand. Area between fingers and finger.
2. 62 family members or worker attendants.
3. 120 people in their resident community.
4. 40 entrepreneurs in Smutprakarn and Samutsakorn Provinces.

whom the workers worked with. The research instrument were 3 interviewing forms for the workers, worker attendants and the people in their resident community and a questionnaire for the entrepreneurs. Quantitative data were analyzed by Statistical Package for Social Science in terms of frequency and percentage while qualitative data were analyzed by content analysis.

### **The research finding were**

1. most workers were able to do their routine activities without the attendants' assistance. They still lived with their family and worked in the same enterprise

but different duty in Smutprakarn and Samutskirk Povinces. Moreover, they still had powerful mind and could adapt to their colleagues. Most of them were not the people in Smutprakarn and Samutsakorn Provinces, therefore, they stayed in rented homes/rented rooms with their husband or wife. They had their own responsible members who were father/mother. Most of them were non-drinking and non-smoking and could adapt to their families, They had both normal sleeping and rest but lacked of exercise. Most problems/obstacles in their current living were inconvenient and inefficient working.

2. most workers had somewhat normal physical, mental, spiritual and social health status. They could help themselves without the attendants' attendants' assistance except their duration after heir had just lost their finger or hand since they were not accustomed to their self-assistance which they needed time for adaptation.
3. most workers earned somewhat equal average monthly income before and worse socio-economic status because of their work limitation of using finger or hand not as usual. They lost their promising work opportunity for earning more income or work promotion which were their socio-economic loss. Moreover, they accepted that they had inferiority complex and shyness of their imperfect body among their colleagues which were undetermined social loss.
4. economic loss consisted of
  1. average direct cost per worker was 59,671.40 Baht which mainly was real treatment cost of 53,835.04 Bath.
  2. average indirect cost per worker was 34,024.11 Baht which mainly was opportunity loss cost of income of the workers and their attendants.

The benefit which the workers received after the accident consisted of direct benefit which currently was average monthly income per worker of 6,315.62 Baht and indirect benefit which mainly was average treatment benefit per worker of 22,485.19 Baht. Most workers currently had monthly private expenditure not more than 3,000 Baht, their monthly family expenditure not more than 5,000 Bath, other monthly expenditures not more than 3,000 Bath, totally 11,000 Baht. In case of their husband/wife had no income, they had inadequate income for living. From interviewing of average monthly family income, counting from average monthly income of the workers and average monthly income of their husband/wife after the accident, was 10,426.00 Baht which was quite inadequate as well. It could be implied that these workers had inadequate income for living since they had opportunity loss of selecting work and finding new job with higher income. Therefore, the relevant offices of both governmental and private sectors should co-operate in getting higher income to these workers in order to compensate their socio-economic loss:

## **Keywords**

**ASEAN OCCUPATIONAL SAFETY AND HEALTH NETWORK (ASEAN-OSHNET)**  
Ministry of Labour, Thailand

Occupational Safety and Health Division  
Department of Labour Protection and Welfare  
Ministry of Labour, Thailand