

Topic: Migrant Workers - Changzhou Worker Wellness Project, chapter summary

The People's Republic of China (China) is experiencing one of the largest demographic transitions in recorded history as hundreds of millions of rural residents (migrants) come to urban areas for work—especially in the new economic development zones. It is estimated that there are 244 million migrant workers. Most of these migrant workers are under 30 years old, have low educational levels (less than high school), and limited understanding of managing life issues in their new urban environment¹. They struggle with many challenges such as isolation from their rural families (including their children), depression, infectious diseases and reproductive health problems, and limited educational opportunities. In addition, the vast majority of migrant workers do not have a local official residence registration (called *hukou*) in the urban area to which they have moved. Because they are not considered official residents, these workers often lack access to social security, education for their children, health services, housing and other services that official residents can access, and have poor knowledge about how to protect their health and create a stable and positive future.

Despite major policy mandates, such as the 'Healthy China' policy intended to provide high-quality health and wellness services for people over their lifetime, China has struggled to find effective ways to support migrant workers. Many traditional "top-down" approaches have not been successful connecting workers with health and social services. This situation is a complex problem and a participatory, transdisciplinary approach—which draws on guidance from many disciplines and from stakeholders in many sectors, with intense participation and the adoption of diverse, iterative, qualitative and quantitative methods—was piloted.

Beginning in 2011, the University of California, Berkeley and Pathfinder International² partnered with the Chinese government and other stakeholders to develop the Changzhou Worker Wellness Project ('project'). This pilot project launched in the City of Changzhou in southern Jiangsu Province between the cities of Nanjing and Shanghai—one of China's 52 national economic development zones. Changzhou has a population of about 5 million including over 1.5 million migrant workers. It is one of China's earliest industrial development zones and has a rapid influx of migrant workers. Although Changzhou had created many health and social services for migrant workers, worker participation was very low, due to distrust and lack of information and motivation. Also, factory owners and managers worried about difficulties recruiting workers and about high rates of absenteeism and turnover.

The project transdisciplinary and highly participatory, using a participatory model developed at UC Berkeley. This type of approach has not been the norm in China, where decision-making tends to take place at high levels of authority. For this reason, project leaders conducted initial workshops with key stakeholders—government officials, researchers, service providers, factory workers and managers, media and other stakeholders—to explain the value of the proposed model and secure 'buy in' before the main activities were designed and implemented. These workshops focused on helping stakeholders understand: how to identify key determinants of health for migrant workers; the value of deep participation; results of baseline studies with migrant workers; and ways to identify potential intervention solutions. Although initially uncomfortable with the participatory process, stakeholders quickly began to appreciate it.

Over the course of a year, with trainings and guidance and strong engagement of workers, three key interventions emerged: 1) a worker- and expert-designed low literacy ‘Wellness Guide’ about managing health and social issues in the local urban environment; 2) ‘Wellness Houses’—rooms in each factory where workers could meet to socialize and discuss and solve issues, exercise, and have access to health care, job training, a library, computers, and other services; and 3) peer-to-peer worker ‘buddy’ support systems in which experienced workers would be paired with new workers.

In keeping with the project tenets of participatory design, each factory defines its own issues and creates its own unique Wellness House with worker and manager input. For example, one factory general manager reported that his factory had set aside a space for workers to use, but did not know what to do with it until they joined the project and learned about how to collaborate with workers. Once engaged, those workers created a multi-faceted Wellness House that met their needs. In the design of one Wellness House, workers identified low literacy as an issue and created literacy training activities. In another factory, workers wanted to address the problem of not having a local summer school for their children—a major factor leading to high turnover. They designed a beautiful children’s classroom in the Wellness House, along with a high-level curriculum. To date, 28 factories have joined the project and early research findings (from Nanjing YouDian University and UC Berkeley) show high satisfaction, knowledge gains, better connections to local services, improved health behaviors and better worker retention.

When deep participatory processes among diverse people are established, there are no limits to creativity and solution-finding. Importantly, managers were surprised about, and very appreciative of, workers’ practical and creative intervention ideas, such as creating Wellness Houses. The Wellness House concept, the attractive, easy-to-use Wellness Guide, the practical system of pairing new and experienced workers and other actions generated by the participatory approach, are now being considered as a model for national expansion.

1. Lu, M. and Xia, Y. (2016). Migration in the People’s Republic of China. Asian Development Bank Institute. ADBI Working Paper Series. Number 593, September, 2016.

Zhang, H. (2010). The Hukou System’s Constraints on Migrant Workers’ Job Mobility in Chinese Cities. *China Economic Review*. 21, 51–64.

2. Pathfinder International and UC Berkeley Health Research for Action

Adapted from:

Neuhauser L., Wang, X., Hong, Y., Sun, X., Zong, Z., Shu, X., Mao, J., Lee E.W., Aibe, S. (2018). Collaborative research and action: The China Worker Wellness Project. In: D. Fam, L. Neuhauser and P. Gibbs. (Eds.) Collaborative Research and Collective Learning: Transdisciplinary research and practice. Springer Press