

MALINEE WONGPHANICH AND GRASSROOTS RESEARCH

The grassroots research into safety and health of workers is developing in many countries in Asia. This development has been accelerated by the pioneering work of key leaders in these countries. The contribution of Malinee Wongphanich (1929 -2002) was particularly notable and will be long remembered by all of us. The sad news of her sudden death due to a car accident at the end of 2002 made us recall the spirit of grassroots research advocated by her throughout her long career.

Malinee Wongphanich collaborated closely with the members of the Human Ergology Society and took part in the activities of the society. She acted as Editorial Board Member of the *Journal of Human Ergology* from 1985 until 1998.

The people-centred way of work by Malinee Wongphanich was vividly reflected in her research methods. As the first leader in occupational health research and education in Thailand, her methods developed at the Occupational Health Department of the Mahidol University were focused on the identification of preventive measures that could overcome the existing constraints in improving working conditions of work life in Thailand and other countries. She was keen to examine the effects of industrialization that changed the work life of these workers. She undertook serial studies to compare these conditions in Thailand with those in other countries.

I was involved in several of her international research projects. The first of these projects was the study of working conditions of textile workers in Thailand that was undertaken jointly by the Mahidol University and the Institute for Science of Labour. This was followed by field studies of occupational health resources in industrial development in the early 1980s. Subsequently, she continued her studies for comparing working conditions in Thailand and those in Japan and participated with me in ILO studies on small enterprises in Asian countries and on low-cost improvements. The discussion about grassroots research methods was always lively in all these occasions.

She repeatedly emphasized the various constraints in strategies and resources to prevent avoidable workplace risks. She noted that these constraints mainly related to the inequalities in access to preventive measures. As a response, she took initiative in implementing action-oriented research about the ways to meet the needs of working people in development. Her initiative was prominent in two important directions. One direction was to take a comprehensive work life approach and the other was to take socially minded steps.

These two directions were possible because she attempted to examine the conditions of work in



Dr. Malinee Wongphanich (1928 – 2002)

real work situations and associate the research results with recommendations for applying practical, locally feasible solutions. Thus her research clearly placed an emphasis on multidimensional understanding of work life. This emphasis had real good impacts when the research was aimed at locally practicable solutions for improving feasible aspects of a broad range of work life factors. By taking this direction, we could effectively examine the influence of multidimensional factors, such as work environment, work organization and work life characteristics. It seemed important to make special efforts to identify practical priority measures rather than purely technical solutions. In so doing, workers' self-reports and interview results as well as the results of participatory investigation of real situations were utilized for agreeing on effective preventive measures. Our recent achievements in identifying practical, low-cost improvements for meeting health needs of workers in small enterprises and the informal sectors are clearly based on this balanced approach advocated by her.

We recall that Malinee Wongphanich always attached a high value to action-oriented research tools. Examples included a set of worksite indicators based on field studies and ergonomic checklists. Using these tools, she made it clear that action-oriented research and training can foster cooperative steps aimed at both short-term and long-term solutions. She placed a particular emphasis on the effective support for managers and workers in improving their existing conditions using such tools. She stressed that these tools should be provided in a way that managers and workers could readily understand the way to improve these conditions by their own initiative. For example, she gave importance to the application of "suggestive checklists" and "omnibus one-stop referral facilities" to be used by managers and workers.

As one of the pioneers in occupational health in Asia, she was a fine leader in this international cooperation. She contributed greatly to the development of new strategies suitable to countries in rapid industrial development. As President of the Asian Association of Occupational Health from 1989 to 1991 during the period leading to the Asian Conference on Occupational Health held in Bangkok in 1991, she supported active exchanges of positive experiences through Asian regional networks in this field. Learning from her grassroots research strategies, we need to base our studies on real work life and action-oriented methods. These strategies will continue to guide us in identifying practical improvements in work life.

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