



# RISK AMID RECOVERY:

Occupational Health and Safety of Latino Immigrant Workers  
in the Aftermath of the Gulf Coast Hurricanes

written by Tomás Aguilar

with Laura Podolsky

in collaboration with

the UCLA Labor Occupational Safety and Health Program (LOSH)

and the National Day Laborer Organizing Network (NDLON)

June 2006

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## Introduction

After the hurricanes hit the Gulf Coast, Latino immigrant workers came from all over the country to clean and rebuild the devastated areas. Some were recruited by contractors; others, having heard jobs were plentiful, came of their own accord.

Media coverage of the clean-up and reconstruction of New Orleans and the Mississippi Gulf Coast featured images of workers in white protective suits wearing goggles, hard hats, and gloves, with captions describing how dangerous the work was.



New Orleans, LA



Gulfport, MS



Worker at City Park, New Orleans

What you rarely saw were images of immigrant workers gutting buildings, cleaning up debris and tearing out moldy sheetrock from flooded houses, mostly without protective gear. You didn't see the workers when they went "home" after work, only to sleep in the same clothes they worked in because "home" was in an abandoned car or a shelter with nowhere to wash. If you were to spend some time in the hurricane-affected areas, you would see workers sleeping out in the street or in soaking-wet tents, pitched in a muddy field at City Park—a privilege costing \$300 a month, plus five dollars per shower every time they wanted to bathe.

Even under normal conditions, day laborers face a host of work-related hazards: a recent groundbreaking national study reports that one in five day laborers is injured on the job.<sup>1</sup> Anecdotal reports from the Gulf Coast cleanup effort suggested that working conditions there were even more dangerous: witnesses spoke of mold, toxic materials, respiratory problems, skin rashes; the workers facing these

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<sup>1</sup> Valenzuela, Theodore, Melendez, Gonzalez. *On the Corner: Day Labor in the United States*, 2006.

hazards had little or no protection. In response to these reports, the UCLA Labor Occupational Safety and Health Program (LOSH) and the National Day Laborer Organizing Network (NDLON) undertook a joint project to investigate occupational health and safety issues particular to Latino migrant day laborers in the region. On behalf of the organizations, day laborer organizer/field researcher Tomás Aguilar traveled to the Gulf Coast to find out about the actual conditions facing immigrant workers, what was being done about them, and what possibilities existed for collaborating with other groups to improve conditions.

While conditions were and continue to be bad for everyone doing recovery work in the Gulf area, immigrant workers confront particular difficulties. As the findings in this report will show, there are many reasons why the health and safety needs of immigrant workers are not being met: lack of safety equipment, gear and training; lack of capacity among the local community organizations and relief agencies to provide for the needs of immigrant workers; lack of basic services such as housing, food, and medical care; and discriminatory treatment of undocumented workers by law enforcement.

This investigation was conducted between December 2005 and February 2006. Conditions are ever changing and the current situation may differ from that found initially. Nonetheless, many hazards will remain through the long rebuilding process. The findings in this report remain relevant for three reasons:

1. The initial hazards have not disappeared and others may arise as rebuilding proceeds, posing health and safety risks to an even broader range of workers and returning residents.
2. As shown by recent evidence from workers involved in 9/11 cleanup efforts, the health effects of exposure to a disaster site may persist for years.<sup>2</sup> As a society, we have a responsibility to document those effects and to meet the health needs of workers and residents who experience them.

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<sup>2</sup> Herbert, Levin. World Trade Center Worker and Volunteer Medical Screening Program: Report of Initial Findings to the National Institute for Occupational Safety and Health of the Centers for Disease Control and Prevention. 2003

3. Finally, we cannot allow the well-documented<sup>3</sup> ineptitude and disregard for the safety of residents and workers alike to become the norm—in the Gulf Coast region, where OSHA regulations have been suspended, or in other regions where disasters will occur in the future.

This report documents the effects of that disregard and the lax enforcement of worker health and safety regulations on one segment of the workforce—immigrant day laborers—heavily exposed during initial cleanup efforts.

## Goals

Our goals were to assess:

- Health and safety hazards affecting immigrant workers involved in post hurricane cleanup and recovery work
- The availability of methods to protect workers from hazards, including personal protective equipment and training
- Resources and support available for workers including sources of information, access to advocacy and community-based organizations
- Health and safety training possibilities, including potential partnerships and sites
- The availability of educational methods tailored to workers' level of literacy, language, and other needs

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<sup>3</sup> US Government Accountability Office, GAO-06-365R Preliminary Observations on Hurricane Response, Washington D.C. 2006

## Methods

The research for this report involved a range of activities: interviewing workers and representatives from community and resource organizations, observation of worksites and living conditions, applying for a job, and attempting to obtain protective equipment. Tomás Aguilar, who conducted the research, describes his experiences in his own words.

I conducted formal and informal interviews with 53 immigrant workers and 28 community, union, church, and relief workers in Biloxi and Gulfport Mississippi; and in Slidell, New Orleans, Baton Rouge and Kenner Louisiana. The interviews took place between December 5-18, 2005, January 8-12 and February 6-11 and 20-25, 2006.

I interviewed workers in a variety of locations where they congregate, primarily at the informal day labor hiring sites at various street corners, sidewalks and storefronts. I also interviewed workers at convenience, grocery, and mobile telephone stores. Other popular places with workers were union halls, laundromats, Western Union booths and the “hotels” where some of them were staying.

In addition to the 53 complete interviews with workers, I had dozens more informal conversations. Many times, for example, while I was talking with a few workers, others would join us to offer accounts of their own experiences. At organized gatherings, such as union meetings or worker dinners, I would start a conversation with 3 or 4 workers only to have the group grow in size. I arrived at a total of 53 workers interviewed because that was the number of interviews in which I took down workers’ specific stories before we were joined by others.<sup>4</sup>

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<sup>4</sup> All names have been changed.

I faced several challenges in conducting the interviews, including being unfamiliar with the area. I spent a lot of time getting lost and orienting myself. Another challenge was the initial distrust and wariness from workers. They were facing harassment from the police, immigration agents, and other workers so it made sense that they would be cautious before engaging in conversation with a stranger. I supplemented information from worker interviews by observing worksites where possible, applying for jobs and attempting to obtain protective equipment.

Trying to obtain information regarding the availability of safety equipment at the Red Cross/FEMA site in New Orleans was challenging. I couldn't get into the site at first because they were admitting local residents only. Once I finally made it inside, I was told that they didn't have any equipment to give out. They recommended I try a relief organization across the street. I went there and found that this organization didn't have any protective gear to spare. However, they were eager to help in other ways, offering to distribute information or provide meeting space. This and several other organizations I connected with wanted to reach out to immigrant workers, but lacked bilingual staff and materials.<sup>5</sup>

To get a more complete understanding of the situation, I attempted to interview contractors on two different occasions. Both times, however, I was met with hostility and suspicion. The same thing happened when I tried to observe worksites.

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<sup>5</sup> As noted, conditions in the Gulf Coast region are ever changing. Since this research was conducted, several organizations have expanded their capacities for outreach to immigrant workers. These organizations have requested further support and occupational safety and health training in order to continue strengthening these outreach efforts. Please see the Appendix for a list of these groups.

# Findings

After conducting the interviews and visiting with workers at their jobsites, several clear patterns emerged, all indicating that workers' health and safety was in jeopardy. Like other workers and returning residents, Latino workers confronted a variety of hazards. The most frequently mentioned of these was mold; other toxic exposures and safety hazards were also common. Most workers, however, received neither health and safety training nor protective equipment. Respiratory, skin and other health problems incurred on the job were exacerbated by unsanitary living conditions. Most workers lacked access to medical services. Many reported wage violations and harassment, including threats of deportation and denial of access to shelter facilities.

The report findings do not point to one dominant reason behind the failure to meet immigrant workers' health and safety needs. Rather, the research found that various factors overlap to create a complex situation. For example, a worker who is desperate to earn money to pay for food and shelter is less likely to demand basic rights. Workers whose housing, however inadequate, is provided by their employer might feel similarly constrained. An accurate understanding of the situation requires framing it within a broader socioeconomic and political context.

Based on interviews and observations of living and working conditions, I describe hazardous working conditions, lack of protection and training, unhealthful living conditions, a prevailing climate of fear, and a lack of adequate resources to meet worker needs. Excerpts from interviews are interspersed throughout to illustrate the findings and to paint a picture of the human toll and of human resourcefulness.

## A. Hazardous Jobs

A common job among immigrant day laborers is to demolish, clean and gut buildings to prepare the sites for the "more skilled workers," as one local worker

put it. I spoke with one worker in Biloxi who had been involved in such work. He had handled materials that gave him a rash on his arms. When he complained, his supervisor told him to stop whining and get back to work.

*Manlio, México*

Manlio described a common safety hazard he felt was so dangerous that he refused to do the work without adequate protection. “Many of these contractors want you to go up on a roof with nothing to hold you up but a rope tied to a tree or nailed to the roof with a normal-sized nail. Well, have you ever been up on a roof being held up by only a nail in a rope? It’s scary. It’s not for me. Leave it for the young daredevils. I’m too old for that.”

The most common work-related health and safety complaint was exposure to mold, often on a daily basis. Most workers interviewed knew that mold was harmful but didn’t realize how harmful or why it was harmful. Since working in mold-infested buildings didn’t produce immediate symptoms for some workers, many felt that it was not as dangerous as people made it out to be.

*El Conejo*

“El Conejo” thought the white and/or blue protective suits were a bit too much. “We come to work. Period. If you get sick, well, that’s just your luck. You could get sick by not working as well. Let’s not go overboard with these funny-looking suits. For the most part it’s basic work, plain and simple.”

Others were either sick or had just recovered from being sick. They described having “la gripa,” flu-like symptoms that took forever to go away. However, the symptoms people described—a persistent cough with nasal congestion—suggested that it might not be the flu or *la gripa* they were experiencing, but “Katrina Cough.”

The above examples illustrate a variety of attitudes expressed by the workers confronting hazardous conditions. Some accepted the risks as part of the job,

seeing the possibility of becoming ill as a matter of chance or luck. Others suffered health problems, but were unsure if they were work-related. Some of those with health problems complained but to no avail. A few asserted the value of their lives, expressing indignation at contractors' expectations and refusing to do overtly dangerous jobs.

## **B. Inadequate Protection and Training**

It seems that Latino day laborers face even more barriers than other residents and workers to obtaining the equipment and information they need to protect themselves: at some sites along Canal Street in New Orleans, I saw White workers with full suits, masks, goggles and gloves working alongside Latino immigrant workers with no protective gear. Further exploration shed some light on this situation.

Language, literacy and legal status present particular hurdles for many Spanish-speaking workers. One afternoon, I accompanied two workers who asked for help in finding a certain temporary labor agency. We headed to an agency on Pass Road in Gulfport, MS. The three of us applied for jobs, filling out Spanish-language applications. The applications were several pages long and written in very formal, legalistic language. When one of the workers couldn't understand some of the questions on the application, the clerk told us to just initial and sign the papers, that she would take care of it. She said that they were just routine questions. They weren't. The questions involved procedures on what to do if you were injured on the job.



Almost universally, basic health and safety training was not accessible to workers I interviewed. In some cases, workers had been given protective equipment but received little or no training on how to use it properly. Some assumed that the one piece of equipment they were given would provide ongoing protection; they did not realize masks and protective suits were not meant to be used repeatedly. Community organizer Nikita Williams of the Mississippi Poultry Project reports that workers in Biloxi were handling asbestos. When asked if they knew that asbestos was dangerous, some replied that they did but that they needed the job so they didn't complain about not having protection. When they did ask their supervisor for personal protective equipment (PPE), they were told that since the company had not gotten paid by FEMA, it couldn't buy such gear. Several other workers I spoke to reported similar experiences.

In some cases, the small contractor could not afford the proper equipment. While speaking with workers at Lee Circle in New Orleans, I learned that many people hiring day laborers were homeowners who did not have any money to buy equipment. They had received an insurance check or money from FEMA and were trying to hire help to clean and gut their homes. One person I spoke to in early December preferred to hire day laborers specifically because he did not have

to provide them safety equipment or handle any administrative costs. He saw it as a “win-win” situation. He said that it “was understood” that the workers, since they were “independent contractors,” would provide their own “tools and anything else, including safety gear like goggles, gloves.” However, given that most workers in Lee Circle that morning did not have any such protective gear, this didn’t appear to be a shared understanding.



In the few cases when training was provided, workers only partially understood the information due to language differences. Language issues were even more complicated for some workers from indigenous areas of México and Central America, for whom Spanish was their second language. A few organizations had Spanish-language handouts and flyers on the dangers of mold but, with few exceptions, workers had not seen them.

*Miguel, Guatemala*

He considered himself one of the lucky ones. “I’m not worried about my health. I’ve been fine so far. I’m fortunate to have this face mask from a previous job [about 5 weeks earlier]. I wound up keeping the mask.” He used it because there was a lot of mold in the walls of the



houses he was cleaning and gutting. “Sometimes,” he said, “we are issued suits, you know, the white suits.” When I asked Miguel if he knew why it was important to have the proper safety equipment, he wasn’t too sure. In his first job in New Orleans, when he was issued his mask, the crew was told that mold was bad and that they should protect themselves. But he understood only a few of the instructions which were in English.

*Gerardo, Chicago*

He said he had been coughing a lot at work so he never wore the little white mask he had. “It’s old anyway,” he said. The buildings they were demolishing had moldy interiors but since no one else was complaining, he didn’t either.

*Pablo and Coworker, Ecuador*

Pablo and a coworker were hired to work on a crew picking up debris from the streets and loading it onto a large truck. They had not been provided any PPE. Only when they arrived at the materials “dump” did they realize they were handling dangerous materials. The workers there classified the material in their load as toxic—chemicals, asbestos, and other toxic material.

In addition to stories like these, I also learned of workers hired for the gruesome task of looking for bodies. An organizer I interviewed from the Mississippi Poultry Workers’ Center had met with workers in Biloxi who were paid \$9.00 an hour to find cadavers and put them in body bags. These workers were given gloves, but no training or immunizations. One worker ended up with a skin infection after a decomposing corpse fell apart in his hands, coating him with bodily fluids.<sup>6</sup>

In summary, Latino workers face a wide range of hazards such as exposure to mold, body fluids, asbestos and other toxic materials; they also face falls from buildings and other safety hazards. The effects of these hazards are compounded by a lack of training and protective equipment; workers without adequate respirators or protective clothing experience skin rashes and lingering respiratory problems.

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<sup>6</sup> This story is detailed in Kassi Tallent’s report, *Migrant Workers on the Gulf Coast: Human Rights Abuses in the Wake of Katrina*, A Preliminary Report to the Inter-American Commission on Human Rights, 2006

### C. Living Conditions

Hazardous work conditions and substandard living conditions are intertwined: for many workers, regular shelter and food was a higher priority than proper safety gear or training. Yet lack of adequate housing and unsanitary conditions add to the risks of job exposure. Workers go “home” after work—to an abandoned car, a shelter or a rain-soaked tent pitched in a muddy field at City Park, a privilege that costs \$300 a month and an additional \$5 per shower. Job exposures do not subside at the end of the work day—many immigrant workers who are not provided protective clothing at work sleep in their contaminated clothes.

#### *Miguel*

Miguel slept in a room with many other workers. He did not have to sleep in his clothes, but he admitted that he often wore the same clothes several days in a row without washing them. “I guess it’s the same as sleeping in them. It’s difficult to find a laundry facility. A lot of times I just don’t have the time or energy to wash my clothes.”

#### *Gerardo, Chicago, and Javier, Guatemala*

They were staying in one of the many worker “hotels.” I did not have the wristband required for entry but went in with a group of workers. The place was musty and the ceiling moldy. Over 100 people slept in bunk beds stacked 3 beds high. There was coughing everywhere. Gerardo had been nursing a chest cold which wouldn’t go away. I took them to a local clinic where he was given some medicine for the cough and told to get some rest. Many other workers slept in hotels and motels they were rebuilding. They slept on cold, damp, floors with no heating or running water. Once they rebuilt the hotel, paying customers would move into the clean, warm, refurbished rooms.

#### *Oscar and his wife Lucia, México*

He and Lucia had come to New Orleans from Maryland a month ago and

were living in City Park. It had rained heavily the night before and the “tent city” located in New Orleans’s City Park was full of mud. Their small rectangular “lot” at the park cost \$300 per month. The contractor they worked for usually paid the monthly fee but Oscar and Lucia had been let go without explanation and now found themselves with little money and the rent due. The showers that were available cost \$5.00 per shower. Oscar and Lucia took sponge baths, each watching out for the other as they bathed.

When I visited the same site a few months later in March, the number of workers staying in City Park had dwindled. The conditions, however, remained the same. Mario, a worker I had spoken to in December, was still there. The jobs he had worked at since I had last seen him were in construction. He had sustained an injury on the job but had not seen a doctor.

In Biloxi, several workers lived in a mechanics garage. They had a shower and a port-o-potty, but no heat or potable water. Local Catholic nuns donated work gloves and hand sanitizer to the workers.

Several workers I had interviewed in January in New Orleans had reported then that everything was going OK for them. In February, I met up with them in Austin, on the corner by Home Depot in north Austin. Jose F., one of the workers, shared that although he was getting paid in New Orleans, the living conditions were terrible. They had no heat or hot water and were sleeping on the floor. They didn’t receive safety training. Although he didn’t get sick or injured, he would not be going back to New Orleans. Other workers I spoke to on the corners of Austin reported the same: it was not worth going to work in New Orleans and endangering your health.



#### **D. Climate of Fear**

Workers did not see a viable avenue to improve job conditions, fearing that any complaints would jeopardize their jobs and their access to shelter.

*Manuel and Gabriel, Guatemala*

They were gutting and rebuilding houses. They were concerned about mold exposure, but didn't complain to the boss because earlier complaints about unpaid wages had gone nowhere. Further, staying in a room provided by the contractor proved a strong disincentive for raising health and safety issues: "[If we lost our jobs] where would we go? We'll just stay with the misery we know. At least we're not sleeping in the rain."

Immigrant workers spoke of daily risks and harassment related to their immigration status. Anti-immigrant sentiments of mistrust and fear seemed high, especially among the local police. Workers reported that even while waiting for the local shelter to open they were harassed by police who accused them of loitering.

Immigrant workers also complained of harassment from contractors, especially if they complained or demanded their rights. Some were threatened with deportation or fired and not paid. As a result, workers were reluctant to complain about unsafe conditions.

*Carlos, México*

He had been working in Dallas for several years. He came to New Orleans with a Dallas-based contractor who promised good wages. Eventually he lost his job. "Of course I would love to have safer

working conditions. Of course I would like to be able to shake this cough. But until I get settled with a good boss, one that treats us as human beings and not mules, I have no choice but to take any job—whether they offer protective gear or not. So no, I don't dare demand protective gear as a condition of employment, not while I'm sleeping on the streets."

Many times middlemen hired by the contractors made problems worse. Usually these middlemen were Latino or Latina, or at least spoke Spanish. The middleman would "handle" the money by "cashing" the checks for the workers.





### *Roman and Coworkers*

They were owed over 2 weeks pay. When Roman complained to their contractor, he was told that their pay was taken care of. "He told us to talk to the supervisor [the middleman]. He brought us all together. The supervisor then lied to the boss and said that we had been paid already. The boss believed him and told us to leave. When we tried to explain in our broken English to the boss how the supervisor had lied, the boss called the police on us. We ran away before the police arrived but now we are sleeping in cars with no money in our pockets."

## E. Resources

It is no secret that the response to the overwhelming needs of Gulf Coast residents, evacuees and workers has been woefully inadequate.<sup>7</sup> I experienced the inadequacies firsthand when I attempted to obtain safety equipment for workers. Despite several attempts, I found that it was either not available at all or was only for certain groups of residents or workers. I also heard stories of resources being used to make money rather than assist workers.

### *Pablo and Coworker, Ecuador*

They complained that they had to pay \$10 for what they claimed were “Red Cross” box lunches. “Why do we have to buy the food that the charities are giving away?” Initially, Pablo, from Ecuador, and a coworker were able to get food, a place to sleep, and a place to wash their clothes from the contractor for whom they were working.



<sup>7</sup> US Government Accountability Office, GAO-06-365R Preliminary Observations on Hurricane Response, Washington D.C. 2006

Then, without explanation, those privileges were revoked and the workers told that only White workers were allowed to use the facilities. They were told to get a letter from the company that would authorize them to get a badge identifying them as workers. But when they went to the company office to request the letter, the staff person there said she didn't have time to write it.

Stories of neglect and abuses abound, but I found inspiration in the workers and in the groups dedicated to meeting the widespread needs. I do not attempt to present a comprehensive picture of all the groups working to meet the overwhelming demand for services and resources—the many community-based, non-governmental organizations, faith-based organizations, labor unions and



educational institutions. Rather, I focused on identifying organizations that are trying to reach Spanish-speaking workers. Many such organizations are doing the best they can to meet the overwhelming need for services but lack resources themselves; some asked me if I could help them obtain outreach materials. I spoke with representatives from a variety of groups who corroborated the information I obtained through interviews and observation. For a list of the organizations with whom I met while researching this report, please see the Appendix.

## **Recommendations**

The worker health and safety initiatives described below should be undertaken in partnership with NIEHS grantees and local organizations in order to address workers' needs as comprehensively as possible by: 1) assisting workers with housing, medical care, and other basic needs, 2) providing health and safety education for residents who need protection themselves and who employ day laborers, 3) assisting workers in recovering unpaid wages from contractors, 4) providing protective equipment for workers.

### **Education (in collaboration with NIEHS grantees and local community organizations)**

- Radio spots (with workers' stories, music, and public service announcements)
- Adapt NIEHS and other materials to create fotonovelas, visual fact sheets or booklets. Pocket-sized booklets for workers have been used successfully by other organizations to educate day laborers about their legal rights.
- Innovative training using visuals, role plays and other interactive activities should be provided where workers congregate for jobs, where they live, and at social events like organized soccer matches, job fairs and health fairs.
- Training should be provided for worker advocates and service organizations with an accompanying resource packet of materials. The target audience could be Spanish-speaking workers specifically or could be multi-ethnic and multi-lingual groups (English, Spanish and Vietnamese.) It could focus on workers' needs or could also address hazards facing residents. Utilizing web-based resources more broadly could also prove to be an efficient, cost-effective means of sharing educational materials with service providers.
- Partnering with the National Day Laborer Organizing Network (NDLON) using a preventive model of outreach. Workers could be reached at different NDLON-affiliated workers centers to inform them about what to expect if they do go to the Gulf area. Worker safety training could be provided ahead of their trip to the

Gulf. Small, travel-sized pamphlets could be created that workers could take with them.

### **Protective Equipment**

- Provide protective equipment directly to workers with education about its proper use. Education about hazards can create defeatism if there is no viable way to obtain protective equipment. Many homeowners who hire day laborers do not have the resources to provide workplace health and safety protective equipment to workers. Some contractors provide safety gear and equipment to their workers but others do not. There are many opportunities to connect with homeowners and small contractors to provide much-needed gear and educational resources.
- Partner with community-based organizations, labor unions and faith communities to provide protective gear. There are several organizations in the area that have expressed interest in providing workers equipment directly.

### **Government and Contractor Responsibility**

Government agencies need to investigate contractual arrangements to ensure that contractors are held responsible for providing adequate health and safety training and protection for the workers they hire. While the technical assistance and educational programs provided by federal regulatory agencies are laudable, failure to enforce basic health and safety rights is endangering workers' health. Suspension of enforcement activities by OSHA has resulted in a lax attitude towards health and safety protection that cannot be allowed to become the norm.

### **Workers' Rights Center**

Support the creation of a workers' center that would provide a permanent space where low income Latino immigrant workers can negotiate better working conditions and salary. A workers' center could also provide a space for organizing and educational activities.

## Conclusion

Conditions for Latino immigrant workers doing post-hurricane reconstruction work are unsafe. Workers are exposed to mold and other toxins so frequently that many of the workers interviewed didn't even give it much thought anymore. Finding decent, safe shelter and getting paid for their labor are taking priority over worrying about unsafe working conditions. Harassment from the local police force and Federal immigration authorities is constant.

While many organizations are trying to meet some of the needs of these workers, there remains an overall lack of resources, making it difficult, if not impossible, to provide safety equipment and training to immigrant workers.

There is potential to change these conditions. Collaboration among local, regional and national organizations will be key. Disseminating relevant safety information to the workers is starting. We need more of it.

Finally, the formation of a workers' center where workers will have a space to come and learn about their rights in the workplace will play a crucial role in any efforts. A workers' center can be a hub for the various organizations to connect with the workers and help them empower themselves.

## Appendix

### Organizations Interviewed:

American Civil Liberties Union

Laborers International Union  
of North America

Association of Community Organizations for Reform Now

Latino Health Outreach Project

Advancement Project

Louisiana Environmental Action Network

Catholic Charities

Loyola University Law Clinic

The Center to Protect Workers Rights

MS Center for Legal Services

Common Ground

Mississippi Immigrant Rights Alliance

Federal Emergency Management Agency (FEMA)

Mississippi Poultry Workers Center

Government Accountability Office (GAO)

New Orleans Worker Justice Coalition

Hispanic Apostolate

Oxfam America

Emergency Communities

People's Hurricane Relief Fund and  
Oversight Committee

Gulf Coast Interfaith Disaster Task Force

Project WiTH

Hands On USA

Safe Streets

Interfaith Worker Justice

United Methodist Church

International Union of Painters and  
Allied Trades

US Department of Labor

### UCLA Labor Occupational Safety and Health Program (LOSH)

The UCLA-LOSH Program is a nationally recognized center in Southern California for Spanish and English worker training, educational materials development, technical assistance and policy information in the area of workplace health and safety. LOSH is part of UCLA's Institute of Industrial Relations within the College of Letters and Science and the Center for Occupational and Environmental Health within the School of Public Health. With a multi-ethnic, bilingual staff, the LOSH Program trains hundreds of workers yearly using popular education approaches. In order to maximize impact, the LOSH training model emphasizes a train-the-trainer approach that prepares workers to go back to the workplace and train others.

For more information, please visit [www.losh.ucla.edu](http://www.losh.ucla.edu).

### National Day Laborer Organizing Network (NDLON)

NDLON's mission is to strengthen and expand the work of local day laborer organizing groups, in order to become more effective and strategic in building leadership, advancing low-wage worker and immigrant rights, and to develop successful models for organizing immigrant contingent temporary workers. NDLON fosters healthy, safer, and more humane environments for day laborers to obtain employment and raise their families. In this sense, NDLON advances the human, labor, and civil rights of day workers throughout the United States.

For more information, please visit [www.ndlon.org](http://www.ndlon.org).

### National Institute of Environmental Health Sciences (NIEHS)

The mission of the NIEHS is to reduce the burden of human illness and disability by understanding how the environment influences the development and progression of human disease. NIEHS has funded the Worker Education Training Project (WETP) since 1987. The WETP trains workers engaged in activities related to hazardous materials and waste generation, removal, containment, transportation and emergency response.

For WETP resources on hurricane recovery, please visit the WETP's National Clearinghouse website at [www.wetp.org](http://www.wetp.org).

For more information on NIEHS, please visit [www.niehs.nih.gov/](http://www.niehs.nih.gov/).

