The Health of Local Tourism Employees: A Challenge for Travel Medicine

The Case of the Inca Trail Porters

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The Problem
• The popularity of altitude trekking is increasing (eg. Himalayas, Andes)
• Porters carry the necessary equipment
• Working conditions are poor and health problems considerable
• Himalayan porters
  – anecdotal evidence
  – research (eg. Basnyat 2002) on health, physiology, weight of loads ...
• Andean porters
• African porters

Purpose of the Study
To describe demographics, working conditions and work-related health issues of porters working on the Inca Trail to Machu Picchu, Cuzco, Peru

Methodology
• Descriptive design
• Structured interviews with 101 Inca Trail porters in August/September 2001

Results- Demographics
• Gender: 100% are male
• Age: 17-68 years (mean = 30 years)
• Body weight: 50-76 kg (mean = 62.5 kg)
• 63.4% married with 1-8 children (mean = 2.5)
• 92.1% have additional other dependents
• Work as porter: 1-25 years (mean = 6.5 years, median 5 years)
• 73.3% worked solely their own fields before portering

Results- Working Conditions
• 50.5% are employed by the cook
• No porter has a long-term position with a company
• For 94.9%, the usual length of job is 4 days
• Hours of carrying/day: 6-12 hours (mean = 9 hours)
• Regular work day exceeds 18 hours
• The load is decided by the cook (60.4%), the head porter and the cook (39.6%)
• Weight carried: range 20 - 45 kg
• Payment/day: = US$ 5.00
• Tips (if any): = US$ 3.00 for total trip of 4 days
• NO clothes, shoes, equipment, designated shelter
• Food
  – 68.3% usually receive food but it is insufficient and unpalatable (1kg rice, 1kg pasta, 1kg sugar)
  – sometimes food left over by tourists can be had
  – Fuel: 63.4% often receive fuel but it is insufficient to cook

Results – Health Issues
• 34.7% described their health as poor to very poor and attributed it to work
• The main health problems are:
  – Respiratory infections (38.9%)
  – Kidney problems (36.9%)
  – Rheumatism (30.6%)
  – Back pain (29.4%)
  – Others: foot and leg problems, cold, muscle pain, stomach pain, ‘majurki’
• 92.1% fell ill on the job (n = 93, multiple responses)
• Cold: 80.6%
• Majurki: 40.9%
• Stomach pain: 28%
• Respiratory problems: 18.3%
• Foot problems: 18.3%
• Others: kidney problems, altitude sickness, fever, rheumatism, back pain, hernia, ...
• 38 porters had been injured while on the trail
  – Sprains
  – Dislocations
  – Scratches
  – Fractures
• In case of illness or injury
  – nobody takes care of porters
  – days ill are not paid
  – no compensation for inability to work due to work-related illness/injury

Results – Future
• New regulations are in place from January 2001 but are not applied in practice
• Gifts received from clients must be handed over to the cook or guide
• Tips given to the guide for the porters are not forwarded
• Damaged or lost equipment has to be paid by porters at grossly inflated prices
• If porters complain they will not be hired again

Discussions
No identified responsibility by stakeholders
• overseas tour operators
• local tour companies
• guides, head porters
• tourists
• guidebook authors

Recommendations
• Create awareness among stakeholders
• Create awareness among health professionals
• Create awareness among porters
• Design acceptable strategies that assist porters in
  – improving their working conditions
  – improving their health care
  – improving their health status

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