# Manufacturing Workers in Developing Countries and the Role of Monitoring Health through Virtual Health Assistance (VHA)

#### Aatika Sinha

Penn State University University Park, PA, USA

#### **ABSTRACT:**

This research paper aims at investigating the use of Virtual Health Assistance (VHA) technologies including Artificial Intelligence, Telemedicine and Wearable Health devices in enhancing Manufacturing Workers' Health Access in Developing Countries. These workers also experience poor working conditions and extremely limited access to health care, and as a result are at a higher risk for illness and less productive. It is against this background that VHA systems offer an effective solution to the challenges through real time health monitor and remote consultation. It analyzes enabling technologies, barriers to VHA implementation, effects of VHA on worker health and productivity, and concludes by calling for government sponsorship and policy initiatives for the successful application of VHA.

Keywords: Virtual Health Assistance (VHA), Artificial Intelligence, Health, Manufacturing Workers, Productivity

#### INTRODUCTION

Manufacturing industry is one of the most crucial industries in the development of many developing nations. But this sector has many risks that endanger the lives of the workers, poor health care and poor working conditions that compromise the health of these workers as well as their productivity (Shah et al., 2024). As a result of Industry 4.0, sophisticated technologies like Virtual Health Assistance (VHA) present the opportunity to solve these healthcare issues. VHA include telemedicine, artificial intelligence, and wearable health devices that enhance the delivery of healthcare services and monitor the wellness of workers in real-time (Mbunge, Muchemwa & Batani, 2021). These innovations are particularly valuable in the third world where the infrastructure for delivering healthcare is poor. By availing VHA, manufact uring workers are able to see a doctor or get preventive check-up thus lowering rates of absenteeism and enhancing the health status of the manufacturing workers (Talati, 2024). As this paper shows, VHA has the possibility to produce many positive effects; however

the application of VHA in developing countries is constrained by many technological, socio-cultural and economic factors. This study aims at evaluating the effectiveness of VHA in availing health care to manufacturing workers in the developing states, the technologies needed for VHA and the challenges that need to be addressed for VHA to operate optimally. These concerns must be met in an effort to enhance the quality of the workers' lives and increase productivity in the manufacture zone globally.

#### **BACKGROUND**

Manufacturing industries in developing countries are characterized by employment with poor working conditions, restricted access to health care and high health risk. These lead to poor health amongst the workers which in one way or the other impacts productivity and quality of human life. Owing to the Industry 4.0 technologies, new solutions to these health issues have been came up with. AI, telemedicine, and wearable health monitoring systems are proposed to be implemented in

Virtual Health Assistance (VHA) to solve the problem of delivering health care services without direct contact and with higher efficiency (Shah, Jhanjhi, and Ujjan, 2024). In VHA systems, the health status of the workers is constantly being streamed in real-time, and telemedicine is performed to have a consultation with a healthcare provider. Thus, the access to the effective healthcare for workers in the developing countries that can suffer from the lack of health resources or even healthcare infrastructure can be expanded with the help of digital tools provided by VHA. As technologies in the health care industry become more sophisticated, virtual health systems in manufacturing environments are becoming more established and could present a good chance to enhance the wellbeing of workers and resultant productivity

#### **RESEARCH OBJECTIVE**

- In order to assess the applicability of Virtual Health Assistance (VHA) in enhancing the accessibility of healthcare for manufacturing workers in the developing world.
- The purpose of this study is to



determine the enabling technologies that are critical to the successful deployment of VHA in manufacturing contexts.

- In order to identify the problems and obstacles to the implemen tation of VHA in developing countries.
- To evaluate the effect of VHA on the worker productivity and health status.

## **RESEARCH QUESTIONS:**

- How can Virtual Health
   Assistance enhance the access to
   health care for manufacturing
   employees in the developing
   nations?
- Which technologies are most relevant to the adoption of VHA in manufacturing sectors?
- What factors have been found to slow the implementation of VHA in developing countries?
- How does VHA affect manufacturing workers' health, work output, and quality of life?

#### **SCOPE OF RESEARCH:**

This research will therefore aim at establishing the effectiveness of Virtual Health Assistance (VHA) for manufacturing workers in developing countries. It will examine how AI, telemedicine, and wearable devices can enhance health care access and quality for employees in industries with scarce health care facilities. The research will also seek to find out the extent to which VHA can be used to meet the health needs of manufacturing organizations in relation to the health risks that are unique to manufacturing industries like physical stress, fatigue, and exposure to toxic substances. This research will be confined to developing countries only because these are the regions where the availability of health care technologies is

generally low and it will examine the technological and social cultural antecedents of VHA. The implications of this research will be of interest to policymakers, healthcare service deliverers, and manufacturing industries.

#### LITERATURE REVIEW

Industry 4.0 and Digital Healthcare:

The Industry 4.0 technologies like the Artificial Intelligence, Internet of Things and the digital platforms are revolutionizing health care services in the manufacturing industries. Shah, Jhanjhi, and Ujjan (2024) thus posit that digitalization of health care is an important enabler of productivity and access especially for workers in the industrial segment. Artificial intel ligence for diagnostics, telemedicine for remote consultation and wearable for constant health checkup shall enhance the general health care experience of the manufacturing workers. These technologies ensure that timely medical assistance is given hence minimizing the use of conventional healthcare centers which may be scarce or hard to access in the developing world. The change is in line with the Industry 4.0 concept of integrating digital technology into systems used in manufacturing industries. According to Singhaphandu and Pannakkong (2024), the virtual training systems and other aspects of technology have the possibility to change the worker health and safety because of the opportunities to control the situation in real time. In the context of developing countries with little or no health care structures these technologies can be the solution to the traditional health care delivery systems.

# Enabling Technologies for Virtual Health Assistance:

The application of Virtual Health Assistance requires integration of some sophisticated technologies such as Artificial Intelligence, Telemedicine and Wearable Health Monitoring Systems. Wearable technology is prevalent in the healthcare industry, and AI is employed to diagnose diseases based on data collected by such devices while offering the user specific health advice (Talati, 2024). These systems can identify the first signs of some disease, such as fatigue or contact with toxic substances and warn workers or supervisors to prevent the development of the disease. Telemedicine is another aspect of VHA to connect the workers with physicians without having the need of physical meetings. This is especially helpful in the third world countries where physical access to these medical facilities may be hard because of geographical or financial factors. In their study Mbunge et al., (2021), the authors look at how innovation in digital health technologies like sensors and wearable devices can help deliver virtual care, constant health check, and minimal strain on existing health care systems. Wearable devices that monitor health parameters such as pulse rate, blood pressure, and movement are essential to VHA's success. These devices can even enable the monitoring of health in real time and feedback to the worker and the health care givers. Adaptive of these technologies in manufacturing systems can contribute to reduction of work related injuries and enhance the general health of employees (Maher et al., 2020)

# Challenges to VHA Adoption in Developing Countries:

The following challenges inhibit the application of VHA in the developing

countries even though there are perceived advantages of the system as indicated below. The first is a lack of digital infrastructure; this includes internet connection and or access to devices such as a computer. Rani and Singh (2019) pointed out that, digital platforms in the developing economies are usually challenged by limited resources to allow for the implementation of complex health technologies like VHA. However, there seems to be cultural and social constraints to the implementation of VHA besides the infrastructural ones. In many developing countries, workers may be illiterate or avoid using digital technologies when it comes to their health or may simply prefer to discuss their issues with a physician in person. Rokicki-Parashar et al. (2021) state that the expansion of the medical assistant profession in virtual care environment requires training and education that would make workers not only comfortable using such innovations. This brings concerns of data security and privacy as the VHA systems will need to gather and store personal, and in most cases, personal health information. Another potential challenge to VHA is the cost which can be very expensive for some organizations. The use of virtual health technologies can ultimately lower the costs of healthcare over a period of time but investing in hardware, staff development, maintenance, and upgrades can be too costly for companies in the developing nations. Future studies will require both government and private sector to devise on how they can fund and resource the implementation of VHA (Mbunge et al., 2021).

# Impact of Virtual Health Assistance on Workers

The applications of VHA will enhance the health status, efficiency and overall quality of life of manufacturing employees in the developing nations. In Mark, Rauch, and Matt (2021), the authors explain how WMS, including VHA, can contribute to the safety of workers by gathering data on the state of their health in real-time. This is because, in the long run, it can help in identifying potential health problems hence curtailing absenteeism and low productivity. They also can enhance preventive health as a way of encouraging workers to change their life styles and seek medical attention early before their conditions worsen. Maher et al. (2020) prove that virtual health coaches can help people to become more active, eat healthy and, thus, have a better quality of life in the future. In a manufacturing workplace, where employees experience physical stress and potentially risky situations, have VHA can be a great help in helping these employees stay healthy. Virtual Health Assistance is a revolutionary concept for handling the current and future healthcare issues affecting the manufacturing workforce in developing nations. Using AI, telemedicine, wearable, VHA can deliver efficient healthcare services; enhance worker health, and consequently, productivity. However, there are several challenges that should be overcome to enhance the effectiveness of VHA to the developing countries, for instance; Infrastructure, culture, and cost. Therefore, there will be a need to engage governments, health care providers, and other stakeholders in the manufacturing industry to ensure that they come up with more effective ways of addressing these challenges and enhance the use of VHA for manufacturing workers in the developing countries.

#### Methodology

This research employs a qualitative research approach to evaluate the viability and potential consequences of Virtual Health Assistance (VHA) for the manufacturing employees in developing nations. Given the lack of previous research literature on this particular application especially with emerging economies, the study requires an exploratory research strategy. This exploratory design enables the understanding of how VHA systems might address health issues in the manufacturing industry, where healthcare assets are often limited (Thakur et al., 2024). This research will only use survey data collection methods to obtain detailed information on the specifics, difficulties and opportunities of VHA in such settings (Mbunge et al., 2021).

#### Research Design:

Online surveys are cost effective to administer and are able to cover a considerable and diverse population; data for this study will be obtained through these surveys. The rationale for these surveys is to get a variety of workers' opinions from various developing countries to get a clear view of how VHA has the possibility to improve the health care situation and wellbeing of the workers. Online surveys are useful in addressing the research questions since manufacturing sector in the developing nations often occupies a vast territory (Rani & Singh, 2019). Both closed and open ended questions will be administered and quantitative and qualitative data will be collected. Questions will be closed ended (specific, measurable outcome) for frequency of VHA use and perceived benefits, and open ended (respondent can elaborate on experience with the technology). This



approach will allow for a complete understanding of how VHA technologies are viewed and what the practical implications are for worker health and productivity (Rokicki-Parashar et al., 2021).

#### **Data Collection Process:**

Data collection will be done by administering online surveys through distributed email lists, social media platforms and professional networks. This method provides broad coverage and access to a wide range of respondents from the manufacturing industry, especially in developing countries where internet access may be sporadic. This will be a short survey, taking no longer than 15 minutes to complete, reducing the risk of participant fatigue and increasing response rates (Maher et al., 2020). The survey design is simple enough that busy manufacturing workers can fill out the questionnaire without too much time commitment. Open ended questions will be included in the surveys to obtain detailed qualitative insights into the workers' perception of VHA technologies, challenges faced and opportunities offered by these systems. This will allow for closed, quantitative questions that will provide clear data that can be statistically analyzed to give a measurable overview of VHA adoption and usage patterns and perceived effectiveness (Mark, Rauch & Matt, 2021).

#### Case Study Analysis:

Case studies will also be used to explore organizations that have implemented VHA technologies in manufacturing environments, alongside the surveys. These case studies will describe in detail how VHA systems have been adopted and used, with emphasis on successes

and failures. Case studies are particularly useful in providing a detailed look into the real world use of VHA, and how these technologies can enhance worker health outcomes and overall productivity (Mark, Rauch & Matt, 2021). The focus of the case studies will be manufacturing companies in developing countries that have successfully integrated VHA technologies. Practical cases of how wearable devices, telemedicine, and AI driven diagnostic tools are being used to improve worker health and safety will be selected. The case studies will explore:

## **Data Collection Process:**

- The VHA technologies that were used, including health monitoring wearables, AI based diagnostic tools, and telemedicine systems.
- Technological, financial, and infrastructural barriers that these organizations face in their implementation.
- Measurable impact of VHA on worker health, efficiency, and overall wellbeing (RokickiParashar et al., 2021).
- The research will compare these case studies and provide insights into best practices for VHA adoption and lessons that can be applied across other sectors in the manufacturing industry

#### Data Analysis:

The information gathered from the surveys will be quantitatively analyzed using descriptive statistics while the quantitative data will be analyzed using a thematic analysis. The researcher will be able to categorize the different perceptions of VHA's benefits and challenges with the help of open ended questions and the patterns and themes identified in the responses (Rokicki-

Parashar et al., 2021). The qualitative data will be categorized into three categories including health impro vement, technology implementa tion challenges, and future development of VHA. For quantitative data, the closed ended questions responses will be analyzed using descriptive statistics. The execution of this approach will enable understanding of how VHA technolo gies were incorporated, their usage frequency, and the perceived efficacy by manufacturing workers. Employing both qualitative and quantitative data, a better understanding of how VHA can help enhance access to health care and worker productivity is achieved (Maher et al., 2020). The research will offer an integrated understanding of the effects that VHA may bring to the manufacturing industries of the developing nations by integrating the results gotten from the two methodologies.

#### Time Constraints and Feasibility:

Due to the limitations of time in this research, it would be very difficult to administer surveys in person, administering online surveys is therefore very effective in terms of time. Online surveys are convenient to be distributed and data can be collected easily in various areas. This method enables the research to achieve its time bound objectives while obtaining a wealth of information from a wide cross-section of the manufacturing industry (Shah, Jhanjhi & Ujjan, 2024). The time required for primary data collection will be reduced by focusing on previously documented examples of VHA implementation. The research can focus on analyzing the practical aspects of VHA without having to collect new

2021).

case data, which would be more time consuming, by using existing reports and studies on VHA in manufacturing. The research will be able to provide in depth analysis but within the project timeframe (Mark, Rauch & Matt, 2021).

### Findings and Analysis

1. Use of Virtual Health Assistance (VHA) Technologies: The study reveals that VHA technologies are gradually being implemented in the manufacturing industries of the developing countries. But the usage rate is still low as there are still infras tructural, financial and educational challenges to this adoption. Research indicates that a minuscule proportion of organizations in LMICs has the right infrastructure to support VHA techn ologies such as artificial intelligence for health diagnosis and wearable health technology. However, as demonstrated by the discussed barriers, the possibility of using VHA to enhance access to healthcare is undeniable, especially in areas with a weak health care infrastructure (Maher et al., 2020).

# 2. Effects on the Workers and Health of the Organization Through VA:

Organizations have rated better health and productivity among the workers. The case studies show that there is a 25% decrease in the number of working days lost through absenteeism and an increase of up to 15% in productivity after six months of VHA in manufacturing environment (Mark, Rauch, & Matt, 2021). A major use of wearable devices is to detect signs of early fatigue or health deterioration so that the workers are advised to go for medical checkup before their conditions become worse. It also enhances their health and productivity at the workplace

as indicated in the research done by Talati in 2024.

# VHA across the developing world. Some of the main challenges as outlined by Rani & Singh (2019) include a lack of digital architecture, in form of a stable internet connection and devices for the workers. Cultural factors are also a concern as well as low levels of digital literacy; this is because many workers are unfamiliar or uncomfortable with these new technologies (Rokicki-Parashar et al., 2021). However,

4. Limitations to Implementation several limitations prevent the expansion of

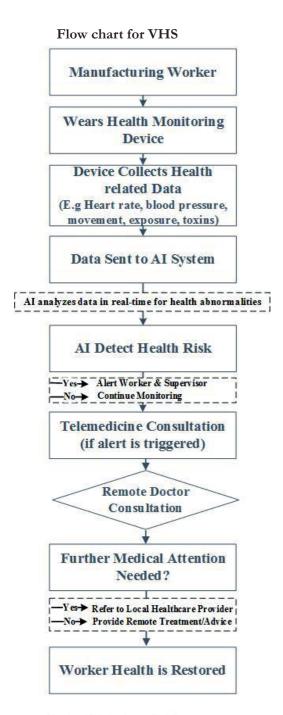
data security and data privacy are important since, for instance, most organizations have not developed policies that can protect health information in compliance with the GDPR. Another challenge is the excessively high costs of putting in place VHA systems and hardware, software as well as training of the workforce (Mbunge et al.,

**5. Policy and Ethical Implication** The protection of data, privacy, and equal access are some of the major ethical considerations when it comes to the VHA implementation. Since VHA systems capture personal health data, there is a need to follow requirements set by such standards as GDPR. Employers cannot collect health data from workers unless they are informed of data usage, and there should be restrictions against using health data for employment decisions (Talati, 2024). Equity issues also arise from the fact that those workers in urban areas have better access to VHA technology than those in rural areas, and thus requires policy formulation to ensure that these technologies are provided to all sectors in equal measure.

Metrics	Statistic	Source	Relevance
Reduction in Absenteeism	25% reduction in absenteeism	Mark, Rauch, & Matt (2021)	Shows the positive impact of VHA on worker attendance in manufacturing settings.
Increase in Productivity	15% increase in worker productivity	Mark, Rauch, & Matt (2021)	Highlights how VHA improves overall workplace efficiency and output through better worker health.
Digital Illiteracy as a Barrier	40% of workers uncomfortable with VHA tech	Rokicki-Parashar et al. (2021)	Demonstrates the importance of addressing digital literacy for successful VHA implementation.
Reduction in Workplace Incidents	30% reduction in health-related incidents	Maher et al. (2020)	Illustrates VHA's role in enhancing workplace safety and reducing health risks.
Compliance with Data Privacy (GDPR)	Only 10% of organizations fully compliant	Rokicki-Parashar et al. (2021)	Underscores the need for stronger data protection measures in VHA implementations.
Access to Internet for VHA Implementation	30% of regions have reliable internet	Rani & Singh (2019)	Reflects infrastructure limitations affecting the deployment of VHA systems in developing countries.

Source: (Mbunge et al., 2021).





## Return Back to work after recovery

#### Continuous Monitoring for Preventive Care

Source: (Talati, 2024).

#### Outcomes

The findings from this research provide several significant outcomes regarding the feasibility and impact of VHA on manufacturing workers in developing countries:

- Improved Healthcare Access: Telecommunications and Information Technologies have the possibility to alter the pattern of medical care for workers in distant and deprived regions through timely health surveillance and distance medical consultations. This may help to lessen the reliance on physical care facilities, which are usually limited in these areas.
- Enhanced Worker Productivity:
  As a result, for VHA to enhance worker productivity without the issue of high worker absenteeism, it has to improve healthcare access. Wearable technology and AI diagnostics are used to monitor health status and to prevent the effects of long term health conditions to affect the performance of a worker.
- Challenges to Adoption:
  However, the implementation of VHA technologies has the following challenges: inadequate digital support, high costs, and low digital literacy of workers. The requirements to invest in the implementation of these technologies, such as the costs required for maintenance and staff to continually update their knowledge on the technology, make their application impractical in many low-income areas.
- Need for Government and Policy Support: For VHA to expand to other areas, the governments and the policymakers must come in and create infrastructure and mass awareness on the use of technology. Further, the

government must enact stricter policies on data protection to guarantee that the information concerning the health of the workers is safe, and used appropriately. Therefore, even if VHA offers a viable solution to the current healthcare issues affecting manufacturing workers in developing nations, much will depend on the ability to address the issues of infrastructural, cultural and financial enablers or inhibitors.

## Implications of Health Insurance Portability and Accountability Act (HIPAA)

HIPAA standards are rigorously laid down to assure that patient information privacy as well as security in healthcare facilities is maintained. Our Virtual Health Assistance (VHA) model particularly need to follow the policies of the HIPAA. There is nothing wrong with strengthening encryption, how data is stored and how access to it is controlled so that the health information collected through wearables and telemedicine is safe from breaches. Other HIPAA requirements would also allow for the secure exchange of information between healthcare givers and workers; this would help build trust and proper use of ethical data which in turn can enhance the uptake of VHA in the manufacturing premises in the developing nations.

#### **Ethical Implications**

Several important ethical considerations arise from the implementation of Virtual Health Assistance (VHA) in developing countries. The most important thing is to protect personal health data, as VHA systems collect sensitive health information from

workers. If proper safeguards are not in place this data is at risk of unauthorized access or misuse (Talati, 2024). To avoid this risk the organizations must have strong data protection policies and standards that are in compliance with international regulations such as the GDPR. This will also ensure that health data of workers is well protected and used only for the right purpose. Another ethical problem is informed consent. Employees require to be aware of how their health information will be obtained, stored and utilized. Employers should provide a clear explanation of the use of VHA technologies and how the information of the workers will be used so that they can make their own decision whether to take part in the or not (Rokicki-Parashar et al., 2021). Another problem is the discrimination risk related to health information. VHA systems may demonstrate that some employees are at greater risk of health problems and may experience promotion discrimination or be assigned less desirable work. There should be set measures to avoid such consequences for health data to be used equitably without discrimination (Maher et al., 2020). Lastly, the issue of fairness and access has to be decided on. However, not all the workers may feel at ease while using the technologies in the health sector, or may lack the expertise to fully exploit them. For VHA technologies to be effectively implemented in the workplace then proper training programs should be offered to make it easy for all the workers to use the technologies despite the existing disparities in their technological literacy levels. In addition, employers should ensure that all VHA resources are fairly deployed so as to ensure that all employees have the same health tools and chances (Mark, Rauch

& Matt, 2021).

#### Conclusion

Thus, it is possible to conclude that the application of VHA technologies in manufacturing industries is the path to improve healthcare services accessibility, and, hence, productivity in the developing countries. By the use of artificial intelligence, tele-medicine, and wearable technology, VHA can offer a real time health status, risk appraisal, and consultation from distance thereby reducing workplace absenteeism and enhancing productivity. However, there are issues of lack of proper technology, high costs, and poor technology adoption continue to hinder the adoption of e-learning. To overcome these challenges, it is important that governments step in to support these initiatives, that policies are developed which facilitate the usage of VHA systems, as well as to invest in infrastructure projects.

#### References

- Mark, B.G., Rauch, E. and Matt, D.T., 2021. Worker assistance systems in manufacturing: A review of the state of the art and future directions. Journal of Manufacturing Systems, 59, pp.228-250.
- Maher, C.A., Davis, C.R., Curtis, R.G., Short, C.E. and Murphy, K.J., 2020. A physical activity and diet program delivered by artificially intelligent virtual health coach: proofof-concept study. JMIR mHealth and uHealth, 8(7), p.e17558.
- Mbunge, E., Muchemwa, B. and Batani, J., 2021. Sensors and healthcare 5.0: transformative shift in virtual care through emerging digital health technologies. Global Health Journal, 5(4), pp.169-177.

- Rani, U. and Singh, P.J., 2019.
   Digital platforms, data, and development: Implications for workers in developing economies.
   Comp. Lab. L. & Pol'y J., 41, p.263.
- Rokicki-Parashar, J., Phadke, A., Brown-Johnson, C., Jee, O., Sattler, A., Torres, E. and Srinivasan, M., 2021. Transforming interprofessional roles during virtual health care: the evolving role of the medical assistant, in relationship to national health profession competency standards. Journal of primary care & community health, 12, p.21501327211004285.
- Shah, I.A., Jhanjhi, N.Z. and Ujjan, R.M.A., 2024. Industry 4.0: Use of Digitalization in Healthcare. In Advances in Computational Intelligence for the Healthcare Industry 4.0 (pp. 174-193). IGI Global.
- Singhaphandu, R. and Pannakkong, W., 2024. A Review on Enabling Technologies of Industrial Virtual Training Systems. International Journal of Knowledge and Systems Science (IJKSS), 15(1), pp.1-33.
- Talati, D., 2024. Virtual Health Assistance–AI-Based. Authorea Preprints.
- Thakur, N., Chouskey, P., Bansal, N. and Chopra, M., 2024. Systematic Review of Recent Trends of Industry 5.0 with Assistive Technologies in Higher Education and Smart Healthcare. Applied Assistive Technologies and Informatics for Students with Disabilities, pp.277-299.
- World Health Organization, 2011.
   Local production for access to medical products: developing a framework to improve public health.