EDITORIAL

IMPORT OF HAZARD:

It is alarming to note that while the industrialized nations have progressively improved their industrial health and safety, the situation is deteriorating in the developing countries. A recently released World Labour Report from the Geneva-based International Labour Organization (ILO) confirms it. The main industries that show concern for industrial safety are chemical, textile, engineering and asbestos. Why is it so?

The ILO report summarized three reasons for the deterioration of worker health and safety in the Third World: (1) import of new process or chemicals without the safeguard standards of industrialized countries; (2) general ignorance of the hazards; and (3) disregard for safety. Every year 1,000 new chemicals and a number of toxic pesticides are introduced into the Third World countries without any systematic study to determine the toxicity and symptoms and antidotes in case of poisoning. Most of these chemicals and pesticides have been either banned or severely restricted in developed countries. These companies then move their production facilities and products to developing countries in search of profits.

Similarly, the asbestos industry of the developed countries is actively pursuing its policy to locate the production centres in Asia and more specifically in India, Indonesia, Korea, Taiwan and Thailand. Every year thousands of workers in the asbestos industry are exposed to this killer dust.

The import of these hazardous materials, processes and technology operates in a vicious circle. In the developed countries the workers are continuously demanding better health and safety at work place. The institutions responsible for the health and safety provisions are also pressurised by the workers to regulate unsafe use of asbestos-source industries.
materials and process. In the USA, for example, the Environmental Protection Agency banned production of five categories of asbestos products and plans to phase out all other asbestos use over the next ten years. In Sweden, regulations are proposed to require medical examinations of all workers exposed to asbestos. In many western countries, toxic chemicals are severely restricted by law. Under such restrictions and pressure, the hazardous products are losing their market and profits in the west. Where do these industries go? Dump it in the Third World countries. The condition in third world countries provide ample scope for the growth of multi-national companies, the labour force is relatively unorganized; and the labour is cheap. The governments are generally ignorant and unconcerned about the health and safety standards. The workers and their unions are both ignorant of health and safety issues as well as feel constrained to raise it in the light of high unemployment.

What can be done? Present international regulations make it difficult to check multinational companies from shifting production facilities, products and processes from one place to another. The gains made by workers’ struggles in the West get nullified by the harm caused on workers of the South. How do we present this? First, it appears that workers and their organizations need to become more informed and alert about issues of health and safety at work place. Second, collective pressure needs to be brought about on hazardous activities and processes here. Thirdly, strong linkages need to be established with similar worker efforts in other countries to continuously exchange information and experiences.

Only then can we begin to tackle this growing menace of importing hazardous products processes technology and factories in India.

ASBESTOS SOURCE INDUSTRIES (cont.)

One textile industry uses asbestos in their products, including cloth products to make roofing felts; automobiles use it in brakes and clutch linings; shielders and as a filter; it is also sprayed on buildings as insulation.

All these industries manufacturing about 3,000 types of products containing asbestos are the source of deadly asbestos dust. Asbestos mines also contribute to this deadly asbestos dust in the environment.

WHAT IS ASBESTOS?

Asbestos is a fibrous mineral, which is practically indestructible, heat proof, fire proof and resistant to most chemicals. It is a broad term used to describe the chain silicates which occur naturally in fibrous form and are commercially useful.

WHY IS ASBESTOS DANGEROUS?

Asbestos dust is lethal. It is often called a HIDDEN DANGER because the fibres are so small that they are invisible. Such small fibres, called respirable dust, can penetrate deep into the lungs and damage the delicate cells of the body. Many of these fibres lodge in the lining of the lungs leading to asbestosis or cancer of the lung.

ASBESTOS—THE THREAT TO HEALTH

The tiny fibres of white, blue and brown asbestos are needle-like in shape. It is not the chemical composition of the fibres, but their size and shape, which causes health problems.
The fibres most likely to damage health can be less than 5 microns in diameter. A micron is one thousandth of a millimetre! Once in the air the fibres can be easily inhaled or swallowed.

It is the release of these fibres from the asbestos containing products that creates a serious health hazard in the form of the following DISEASES.

**ASBESTOSIS (THROUGH INHALATION OF FIBRES)**

When lodged in the lungs a fibre may cause a scar which continues to grow, even though there may not be any further exposure to asbestos. The scars do not allow oxygen to pass through to the blood, and therefore people with asbestosis have difficulty in breathing.

Eventually, asbestosis leads to a painful death. This may take about 10 to 20 years to occur after initial exposure. Asbestosis usually develops as shortness of breath, coughing, phlegm, leading to lung infections and finally heart failure.

Smoking increases the risk of death from asbestosis. There is no treatment for the disease.

**LUNG CANCER (THROUGH INHALATION OF FIBRES)**

In this case, asbestos fibres enter the cells of the lung tissue ultimately causing a cancer. Cancers are uncontrolled cell growth. The lung cancer may take about 20 to 25 years to develop and is nearly always fatal.

Of all the asbestos diseases, lung cancer is the greatest killer of people who have had low levels of exposure to asbestos. Smoking increases the risk of death by lung cancer.

**Pleural and Peritoncal Cancers are called MESOTHELIOMAS. These cancers can take between 30 to 45 years to develop after initial exposure to asbestos. People with mesothelioma rarely live longer than 12-18 months after it has been diagnosed.** These cancers have no relation to smoking. There is no cure.

**GASTROINTESTINAL CANCERS (THROUGH SWALLOWING OF FIBRES)**

These are cancers of the stomach, bowels or rectum. They are cancers which are 2 to 3 times more common in asbestos workers than the general population. They may occur 20 to 40 years after initial exposure, and have no relationship to smoking. They may be some chance of survival if surgery is performed early.

Other than Asbestosis, lung cancer Mesothelioma and Gastrointestinal cancer, asbestos is also associated with cancers of larynx and bronchus, and of organs such as the ovaries and kidney.
Early Warning Signs

The diseases caused by Asbestos all have the same "early warning signs".

Unusual Shortness of Breath
Coughing
Chest Pain In Breathing
Blood Stained Spit (Phlegm)
Loss of Sight

If you have one or more of these signs, it does not mean you have an Asbestos-related disease.

However, if you have worked with Asbestos and you have any of these signs, then see your doctor for a check-up. Remember to tell the doctor that you have worked with Asbestos.

Events of Interest

Marginal Pervaiz, a former worker of Mandaspur (Madhya Pradesh) based slate pencil factory has filed a writ-petition in the Supreme Court of India against silicosis inflicted upon him during his work in the factory. Supreme Court has ordered the district authorities to supply all relevant information regarding all slate pencil units in Madaspur. The Supreme Court has appointed a well-known advocate Mr. G.L. Sondhi to argue the case on behalf of Mr. Pervaiz.

Dhiraj Sonaji who was working in the pipe machine department of Digvijay Cements and was exposed to the asbestos fibre for 18 years, died on 21st May 1984. Supreme Court has issued an order directing the Employees State Insurance Corporation (ESIC) and the factory to pay Rs.10,000 to the legal representative of late Sonaji by way of interim compensation. The petition was filed by Consumer Education and Research Centre (CERC), Thakorshah Smaarak Bhawan, Ellisbridge, Ahmedabad.

The Philadelphia Area Project on Occupational Safety and Health (PHILAPOSH) and the Delaware Valley Toxics Coalition in USA have produced buttons and stickers to draw attention to the health hazards of Asbestos. They feature a "no asbestos" international graphic symbol. For details, PHILAPOSH, 5th Floor, 3001 Walnut St., Philadelphia, PA 19104 USA.

Nine workers at the University of California, Berkeley in America, have been reinstated to their jobs after the settlement of asbestos dispute. They had been suspended for refusing to participate in an asbestos training programme. The workers walked out of the university-sponsored training programme saying that it...
exposed them to asbestos under unsafe conditions that endangered their health.

A bill to allow the export of drugs which have not been declared safe and effective by the US Food and Drug Administration as passed by the US Senate in May. The decision would reverse a 33-year-old ban on export of such drugs. The bill will result in export of dangerous and ineffective drugs to the third world countries where regulatory standards are poor.

A conference sponsored by the US National Institute of Environmental Health Sciences reports the results of research on pregnancy complications among MIC-exposed women at Bhopal. An epidemiological survey of 3,270 families in Bhopal conducted 9 months after the accident showed that 43.8% of the pregnancies did not lead to the birth of a living baby. Of live births 14.2% died within 30 days.

An international conference on Occupational Health was held in December 1985 at the Centre for Latin American Democratic Studies (CEDAL) in Heredia, Costa Rica. The conference was organised by the University Confederation of Central America. A total of 37 participants from 15 different countries from 33 NGOs were present in the meeting. The conference evolved a plan to establish an international network of groups working in the field of Occupational Health.

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EDUCATIONAL MATERIALS

ASBESTOS: HEALTH RISKS AND THEIR PREVENTION

Conference papers from meeting of experts on the safe use of asbestos, ILO Geneva, 1973; contact: Workers Health Centre (WHC), 27, John St., Lidcombe, 2141, Australia. It also published a leaflet on ASBESTOS.

THE EXPORT OF HAZARD: TRANSNATIONAL CORPORATIONS AND ENVIRONMENTAL ISSUES

It analyses the export of hazardous materials and technologies into the developing world. Two related themes which run through most of the essays are the "double standard" and the absence of international regulations.

by Jane H. Ives, available from Routledge and Kegan Paul, Park Street, Boston, MA 02109, USA.

BHPOL

A monthly bulleted published by Bhopal Group for Information and Action (D-42, Friends Nagar, Bhopal, 462001, India). It covers the relevant information on continued implications of the gas disaster. It contains information on health effects, rehabilitation, legal issues, compensation, etc.

CANCER AND WORK: MAKING SENSE OF WORKER'S EXPERIENCE

It establishes the connection between particular occupation and cancer, including cancer caused by asbestos. It can help workers interested in health and safety matters to understand factory safety problems and to ask pertinent questions. It also indicates the limitations of epidemiological studies and statistical analysis of data collection in reference to work hazard. Available from Southern Distribution, Albion Yard, 17 Balfe St., London N1, England.
LEAK-AGE

An assortment of recent gas leaks in the country.

June 18, 1986 a gas leaked from an old captive Power Plant at the Rourkela Steel Plant (Orissa). One worker was killed and eleven were injured.

June 19, 1986, a gas leaked in a chemical unit in Nandesari area in Baroda (Gujarat).


August 2, 1986 'Cobalt-60' a radioactive leaked from cancer treatment unit of a hospital in Indore (Madhya Pradesh).

August 21, 1986, phosgene gas leaked out from a factory in the densely populated Ruhr Valley in West Germany injuring 42 people.

WORKSHOP ON WORKER’S AWARENESS AND OCCUPATIONAL HEALTH & SAFETY.

PRIA has organized a one day workshop on Worker’s Awareness and Occupational Health and Safety at Nagpur (Maharashtra - India) on 27th August, 1986. The meeting was organized at the request of the local worker activists. It was attended by seventy activists. The discussion centered around the issue like closure of factories, retrenchment, lay-off, lock-out, modernization of factories and job classification and occupational health and safety. Workers’ basic role to know the dynamics of these issues was also highlighted. Worker activists are now planning to organize a comprehensive training programme with PRIA’s support to acquire basic skills and a broader perspective to understand the local problems.

A WARNING OF THIS TIME

THOUSANDS OF WORKERS IN INDIA ARE EXPOSED TO HIGH LEVELS OF ASBESTOS DUST IN THE COURSE OF THEIR WORK, WHILE THE COMMUNITY IS CONTINUOUSLY EXPOSED TO RELATIVELY LOWER LEVELS. ASBESTOS DUST KILLS. THE WORLD HEALTH ORGANISATION STATES THAT THERE IS NO SAFE LEVEL OF EXPOSURE TO THE DUST: WHETHER HIGH OR LOW.

AMANY DEVELOPED COUNTRIES ARE RESTRICTING OR BANNING PRODUCTION OF ASBESTOS PRODUCTS BUT MULTINATIONAL CORPORATIONS ARE OPENING ASBESTOS FACTORIES IN INDIA IN COLLABORATION WITH BIG INDUSTRIAL HOUSES OF INDIA.

IT SEEMS ANOTHER ‘Bhopal’ IS GETTING TRANSFERRED FROM FIRST WORL TO THIRD WORLW: THIS TIME NOT IN FORM OF GAS BUT IN FORM OF FIBROUS DUST.

THIS TIME KILLING THOUSANDS NOT AT ONCE BUT SLOWLY...........

Have you come across health and safety problems while at job?

Do you have any experience on Occupational Health and Safety to narrate to others? Your experience can save other workers from the same kind of hazards. Please send us your experience in your own language. We will publish your experiences in the bulletin.

Our Address:

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