The new government has pursued the issue of right to information, and is planning to issue a comprehensive legislation to protect this fundamental right. But since the issue of right to information evolved in the context of seeking information about political corruption, the debate and focus has been on the right to information as a means of ensuring a clean, accountable administration.

But a very significant area which needs to be focussed on in this debate is that of workers' right to information. The directive principles on state policy in the Constitution of India calls upon the government to direct its policy "towards securing that the health and strength of workers are not abused and the citizens are not forced by economic necessity to enter a vocition unsuited to their age and strength". It also directs the state to "make provisions for securing just and human conditions of work". However, millions of workers from the formal as well as the informal sectors of the economy and surrounding communities are suffering because of the lack of information about different hazardous substances and processes with which they work and live around. The Bhopal gas tragedy was an example of such lack of information, where nobody knew that the material used and stored in Union Carbide could have a poisonous effect on human life. The recently amended Factories Act does provide certain rights to the workers and citizens around such hazardous factories. But still there are thousands of production and service processes which are not covered under this Act, apart from the serious questions regarding the implementation of this Act.

Apart from this there are several Acts such as the Trade Secrets Act, etc., which work against this legitimate demand of the working population to have access to all the relevant information to facilitate their initiative/participation in order to protect their constitutional right of "just and human conditions of work". Hence, the need of the day is to consciously include the "workers' right to information" as an integral part of the "right to information" debate.

There is also a debate going on regarding the issue of workers' participation in the Management. But if workers do not have all the access of information whether it is related to financial situation of an enterprise or about production processes and substances used, how can they effectively participate?
Occupational Health and Safety Legislations in India Inadequate

It is often discussed that personal injuries and illnesses arising out of the work situation impose a substantial burden upon, and are a hindrance to, national income in terms of lost production, wage loss, medical expenses and compensation payments. Yet, nothing substantial has been done to prevent occupational hazards. Occasional and isolated reviews of the existing laws have led to some ad hoc amendments here and there, but in general, they have never succeeded in building up a regulative scheme to control occupational hazards.

Occupational hazards, till sometime back, was a non-issue in India. But with the growing industrialization and use of very highly toxic chemical substances, occupational hazards have become an issue amongst the concerned people. Unlike the Western countries, there have been no movements in India to build up a public opinion against this. For example, the Black Lung movement of Coal Miners and the Brown Lung movement of textile workers which have started in U.S.A. However, in India some of the government sponsored institutes like the National Institute of Occupational Health and Safety (NIOSH), the Industrial Toxicological Research Centre (ITRC), the National Labour Institute (NLI), etc., and some non-government organisations are working towards exposing the potential health hazards associated with various work processes.

The existing industrial legislations even have serious limitations and it is hardly likely that they can have any impact in the area of occupational health and safety. The provisions present in the existing laws are too disjointed, and many types of work are not covered by any occupational health law. It may be noted that during the last decade, western countries like the U.S.A, Canada, Sweden etc. have revised their Industrial Acts and formulated comprehensive laws on occupational health and safety. These legislations do not challenge the global occupational hazards, but, at least, they ensure some amount of protection of work environment in their respective countries.

Keeping in view the growing industrial disasters, it seems important to analyse our existing legislations on safety, so that some measures can be taken to build up a comprehensive legislation that at least ensures a safety regulated workplace. In India the legislations that regulate the safety of the work environment and occupational hazards can be divided into three categories: Prescriptive/Protective, Curative, and Compensative.

Prescriptive/Protective Laws:

The Factories Act, 1948, the Mines Act, 1952, the Plantation Labour Act, 1951, and the Beedi and Cigar Workers Act, 1966, are the four acts which specifically prescribe standards for working conditions in Factories, Mines, Plantations and Beedi-making industries. It may be noted at the outset that the classification of all the variety of work and all the related occupational hazards are not covered by these four broad categories.

The Factories Act, 1948:

After the amendment in 1987, this Act has the maximum provisions on health and safety of workers. This Act provides right to information to the workers and the citizens around the hazardous factories, apart from listing of notifiable diseases, threshold limit values, and list of hazardous production process.

The Mines Act, 1952:

An amendment was made in 1983 regarding the formation of a committee consisting of representatives of the government, owners, workers, and qualified engineers which would make recommendations to the Central Government regarding formulation of
rules and regulations to inquire into different aspects of the mining industry, including health and safety issues.

Section 25 of the Act covers occupational diseases. A Government notification declares two diseases - Silicosis and Pneumoconiosis - as occupational diseases. Other occupational diseases caused by noise, vibration, heat, etc., are not mentioned in the Act. This section also specifies that if a doctor detects and declares any occupational disease, but subsequently fails to diagnose and prove the same to the Chief Inspector, then he is punishable under the Act. The Act itself is a deterrent for the practicing physicians to diagnose the health problems of the workers from an occupational hazard point of view. It is often seen that many occupational bronchial diseases and skin diseases are treated as non-occupational health problems.

The Plantations Labour Act, 1951

This Act seeks to regulate the conditions of plantation labour in tea, coffee, rubber and chincha and other plantations where the government feels necessary. This Act makes provisions for ensuring necessary amenities like drinking water, medical facilities, education, creches, housing etc. for the plantation labour. This Act applies to plantation work where the workplace is more than 5 hectares and where fifteen or more persons are employed.

The Beech and Cigar Workers (Conditions of Employment) Act, 1966

This Act is applied to all the processes of the manufacturing of beech and cigars. The Act obligates the owner to make provisions for cleanliness, ventilation, drinking water, washing facilities, etc. This Act does not have any other section or chapter on occupational health and safety. It is assumed that the minimum amenities provided in the Act are sufficient enough to combat all occupational health problems.

The other Precautionary/Protective law which does not cover any type of work process, but is applicable to the work process that pollutes the environment is the Central Water and Air (Prevention and Control of Pollution) Act, 1979 and 1981. This Act makes it mandatory for industries to seek the approval of the effluent disposal design and concentration of pollutants in the waste. This Act is particularly applicable to chemical and other industrial processes.

The Curative Legislations:

The Employees State Insurance (ESI) Act is curative and compensatory in nature. This Act provides benefits in case of sickness, maternity and employment injury to the workers whose monthly income is less than Rs. 1500/- The ESI Act is applicable to all those units where twenty or more workers are employed. In case of employment injury, the Act guarantees sick leave without loss of wage. Schedule III of the Workmen's Compensation Act is applicable to the ESI Act for claiming compensation. This schedule lists a number of diseases for which workers/employees can claim compensation.

Compensatory Legislation:

The Workmen's Compensation Act, 1923 guarantees compensation in case of occupational injuries and diseases. Diseases listed in Schedule III of the Act are compensable. The compensations paid under this Act are mainly for injuries caused due to accidents. However, even in the case of accident injuries the litigation under this Act may go on for many years.

The Act covers a wide range of workers who are not covered by the ESI Act.

LEGISLATIONS INADEQUATE

All the legislations discussed above are fragmented in nature. There is not even a single Act which covers the health and safety issues completely. Moreover, only the Factories Act and the Mines Act have mentioned about the health issues in separate chapter and section. Other Acts only make oblique references to it without making the health aspects very clear. Keeping in view the benefits of Participatory Management, many of the developed countries are reviewing their legislations for workers' participation in the management of their work environment, whereas our legislations at no point give any right to the workers.
to have a say on work-related issues. The Canadian Occupational Health Act is based on three basic safety rights, viz., the right to know, the right to participate, and the right to refuse. But our laws are governed by age-old concepts of protective-curative and compensatory legislations which do not give any substantial right to workers.

The workers are the first-line workers who get affected by occupational hazards, and they are also the first to recognize the problems. So, unless the present legislations are viewed from a purely workers' perspective, no breakthrough can be made in providing a safe workplace to the workers.

WHY INADEQUATE

a. Narrow Coverage

The Factories Act and the allied Acts which specify the health issues involved in the different work processes do not cover all types of work. The workers are excluded from small shops, construction workers, office workers, telephone operators, VDT operators, agricultural labourers, to mention a few, do not come under many of these Acts. Even the ESI Act and Compensation Act do not cover the agate workers, the construction labourers, etc. The agate workers of Khambhat in Gujarat, the threshing operators of Punjab, Rajasthan, Bihar, U.P., are some of the examples of this. Last year, about 1000 labourers in Punjab, Haryana and Western U.P. lost either of their limbs while working on wheat threshers. These workers are covered under the ESI Act only if their insurance dues are paid by the employer. They can claim compensation under the Workmen's Compensation Act, (1923). The agate workers, who cut, grind, polish and carve agate stones into ornamental items at their homes, are exposed to silica dust which causes high incidence of various lung diseases. They are not covered under any Act. One such survey of agate workers puts the incidence of these diseases at 63.5 per cent compared to 35.6 per cent in the control group. Even children as young as 11 years were found to be suffering from serious lung diseases. This is because the workplace does not come under any type of work processes as mentioned under the Acts.

The ESI Act which provides curative services to the workers also has a very limited scope, while the compensatory legislations have some in-built limitations. The labourers who work in the unorganised sector and change their work very frequently receive very little legal support to claim a compensation in case of injury or disease. Moreover, in the unorganised sector, the employer is invisible, and therefore, the Compensation Act and the ESI Act bear little relevance for the workers. This problem is glaring in the case of construction workers, quarry workers, and beedi and cigar workers.

b. Lack of Regulation:

All the prescriptive/protective acts list down a series of specifications to be implemented to ensure a safe workplace. But in the absence of clear cut specified standards and regulations, most of the workplaces are operated with a certain degree of hazards. As noted earlier, the Factories Act does not give any right to workers for seeking remedies if the employers violate the regulations. The scheme of regulating the production processes is very weak. The lack of specifications leads to lack of proper regulation of the Act. It may be mentioned here that as the time interval of the health and safety survey is not specified, many factories work for years without a proper survey. The occurrence of serious accidents causing death should not be kept as an indicator for survey, as by that time many work processes might have turned hazardous, which will be difficult to control. In our factories, the level of dust, noise, moisture, humidity, toxic gases are not measured regularly. It is
even shocking to note that many plants that use and produce very toxic substances do not have proper instruments to measure the permissible level of exposure of gases (TLV).

The supporting industrial research institutions which are supposed to make recommendations on various aspects of occupational health and safety are also suffering from serious limitations.

The Central Water and Air (Prevention and Control of Pollution) Act provides specifications to limit the concentration of pollutants in the effluent and emissions. But it has been observed empirically that once a unit starts functioning it is very difficult on the part of the Pollution Control Board to regulate the standards or enforce any punitive measures in case of violations, until and unless the situation becomes grave. The best example of this is the case of the Sri Ram Food and Fertilizer Plant in New Delhi.

In the absence of clear cut regulations, many times the recommendations remain at the level of paper only. It may be mentioned here that the Union Department of Environment had prepared in July 1984 a list of all hazardous industries which must submit an environmental impact assessment report, before the sites for new plants could be cleared. But due to the absence of any strong regulative approach, this restriction has been reduced to 18 hazardous industries.

Even more, the Research Commission's findings on hazardous processes are not utilized properly because of the absence of a legal statutory body which can take follow up actions. In December 1984, the government of Maharashtra set up an Environmental Safety Committee to examine the safety standards of 15 large scale units in Bombay, in the first phase, and 200 units in the second phase. The report of the Committee revealed appalling safety standards in industries manufacturing, handling, storing and processing hazardous chemicals. But in the absence of regulative schemes, the manufacturers are relocating plants in some backward areas without making any substantial changes in the safety standards.

It is very clear that the prescriptive-protective legislations do not have any regulatory device. At the administrative level there are also different departments besides the Inspector. The Department of Environment, Controller of Explosives and Mines are also directly in-charge of safety standards. But the scope of these different departments are so divergent that it creates confusion in regulating the standards. The Pollution Control Board is only connected with the factories to the extent that they affect the environment. And the Factories Inspectorate feels responsible only to the extent that workers are affected. While the Inspectorate is connected with occupational safety, contravention of the rules regarding the storage of most hazardous gases under pressure is the responsibility of the Controller of Explosives. This artificial division of responsibility for controlling hazards emanating from the same source invariably leads to lack of coordination.

c. Lack of Standards for Protective Equipment:

Use of protective equipment by the workers in the hazardous processes is generally considered as a device to keep the workers away from the hazard. This attitude often keeps the management/owner unconcerned about the control of the source of hazard. Moreover, the safety Acts do not have any provision to regulate the quality of protective equipment so that it does not stand as a barrier between the worker and his work. In the quarry works, near Delhi, the protective equipment given to the workers against dust are so cumbersome that the workers find it difficult to breathe while using it. The workers therefore prefer to work in a dusty work environment rather than using the equipment.

d. No Right to Information:

Right to information must become a basic right, especially in the case of all hazardous processes, and there should be strict remedial measures provided if this right is violated. A study conducted by PRIA shows that workers have greater knowledge about their work process and with the support of some technical knowledge, they can identify the hazardous process much earlier than the technical persons, since they are in the forefront of the work. Our workers do not know what the chemicals are that they use, what are the hazardous effects or what are the precautions that can be
taken at times of danger. Moreover, information about the exposure level of the toxic fumes, gases, dusts, level of risk, etc. are not provided to the workers.

All the information related to the work process is considered confidential or trade secret, even though the results of research studies and recommendations of Industrial units by Commissioners, etc., appointed by the government are considered confidential. One copy of the study is sent to the concerned management and the other to the Chief Inspector’s Office of the State. The latter then determines which recommendations are “realistically” enforceable. Copies of the research reports with the name of the factory neatly deleted are made available to the public.

Not only at the level of toxic chemicals, but also at the time of storage, transportation, and delivery to factories, etc., the composition of the chemicals are not revealed. The revelation of trade names creates confusion and improper handling leads to major accidents. In the absence of complete information, if a worker mishandles the chemical, he is dubbed as a “careless worker”.

t. Lack of Worker Involvement:

In the industrial work process, the workers do not have any legal right to participate and make recommendations for better safety standards and hazard free work conditions. It is shocking to note that in the entire Factories Act, there is no mention about the Trade Unions. The shop floor workers have no legal right to work as safety representatives or to inspect the physical conditions and identify situations which may be a source of danger or hazard to the workers, as it is present in the Canadian, American and Swedish Occupational and Health and Safety Act. It may be noted that the provision of safety delegates from workers in the Occupational Safety law of Sweden, and in the Safety Committee of OH law of Saskatchewan and Ontario of Canada is the strongest point of their Act. The Act has provisions for special training to build up effective health and safety stewards so that they can participate in the safety analysis and recommendations at the shop floor level.

Workers should have the right to have their own safety representatives and the right to sue the erring employers. The relevant Act in U.K. gives wider rights to workers.

3. Occupational Health: A Legal Perspective:

The health of the workers can only be protected if the philosophy and approach to occupational health and safety is broad and universal, along with scientific and candid classification of work process so that all types of occupations come under one umbrella. Occupation-wise safety acts need to be developed, but if it is again divided by prescriptive-protective, curative and compensatory frame (legally) it will lead to confusion and hence loose coordination.

Before building up a perspective on Occupational Health and Safety in the Indian context the following points merit serious consideration:

1. The protective legislations should cover all the toilers.

2. There should be a unified authority concerning hazards related to work.

3. Right to know should be made mandatory.

4. Workers’ participation in Safety Committees should be by elected representatives. These representatives should have a right to inspect all workplaces in their premises.

5. Workers should have the right to seek remedies.

6. In case of occupational diseases, the identification procedures should be strengthened by having special departments in hospitals for these diseases. Doctors need to be specially trained for diagnosing occupational diseases.

7. The Compensation laws should be made such that less time should elapse between the claim and the actual receipt of the compensation.

In short, legislations which cover all the sections of workers and which has some guarantee of being actually implemented by the workers having rights and their participation are needed.
Bharaich : Nine people, mostly youth, died following a gas leak from a generator at Tamoli in the district on Friday.

Name of the paper : Hindu
Published at: New Delhi
Dated : 7 February 1990

Ankara : Sixty eight miners were feared killed when a methane gas explosion triggered a fire in a coal mine in Northern Turkey. Sixty five of the miners were trapped underground following the blast near Merzifon, 350 km North East of Ankara.

The bodies of three workers were recovered but the raging fire and poisonous fumes prevented rescue teams from entering the shaft where the other men were trapped, the report said.

Officials of the Turkish Miners Union said trapped workers had sensed the build up of the methane gas half an hour before the explosion, but could not clear the shaft in time.

Name of the paper : Patriot
Published at : New Delhi
Dated : 9 February, 1990

Kalighat : Several persons fell ill on Wednesday on a fresh gas leak at the Shellac factory at Kalighat, South Calcutta, where chlorine gas leaked from a cylinder a few days ago, leaving four dead and over a hundred ill.

A fire brigade personnel, who had rushed to the spot, said that after the previous leakage, the erring cylinder, before being removed, had been put in a water tank in the factory. Some residual gas which had not been completely neutralised, suddenly escaped from the tank on Wednesday.

Name of the paper : Amrit Bazar Patrika
Published at : Calcutta
Dated : 22 February 1990

Nasik : Seven people died and 15 received serious burn injuries, as a row of about 20 huts went up in flames, when a cooking gas leaked from a tanker after it overturned and exploded near village Purane-Pada on the Bombay-Agra national highway near Dhule. Several cattle head also perished in the tragedy.

Name of the paper : Statesman
Published at : New Delhi
Dated : 25 February 1990
National Campaign on Dust-Related Lung Diseases

Despite the continued suffering of thousands of workers all over the country due to a variety of occupational health hazards and diseases related to their work places, this is still a much neglected area of focus and attention in the country. Occupational diseases arising out of hazardous substances like lead, benzene, silica, asbestos, acid, cotton dust, coal dust, etc., and hazardous processes are undermining the health of women and men workers; cancer, pain, stress and a variety of health problems and disabilities arising from fumes, toxic gases, noise, heat, etc. have already become a widespread phenomena in the country. Yet, very little is being done either by workers or their organisations or by the policy-makers or other regulatory agencies of the government to reduce work related health hazards in the country.

In recent years, many individuals, groups and organizations have been working in the area of occupational health through dissemination of information, documenting struggles, production of videos and other learning materials, training and education, and organizing struggles on occupational health. These efforts have been largely localized and have not necessarily been linked with each other towards a common thrust. We have been discussing the idea of initiating a more focussed campaign on a particular type of occupational disease to influence policy-makers and agencies of the government on the one hand, and to strengthen workers' struggles on these issues, on the other.

It is with this in view that we have decided to work towards developing a campaign focussing on dust-related occupational diseases, in the coming year.

Dust-related lung diseases such as asbestosis, byssinosis, coal miner's pneumoconiosis, and silicosis, are affecting lakhs of workers, both in the formal and informal sectors of the economy. These deadly lung diseases do not differentiate between men, women or children—the effect is on any and everyone exposed to these dusts. Since the informal sector employs the maximum number of women workers, they are the worst affected in this regard. These lung diseases destroy the young and are proving fatal for many. Lungs affected due to dusts become more prone to infections such as TB.

As a consequence of initial discussions with like-minded colleagues, it is proposed that the campaign on dust-related occupational diseases should focus on

- Educating and motivating people
- Promoting concrete action on diseases
- Influencing policy-makers

We need your active involvement in this campaign for the accomplishment of its objectives. Therefore, we need your response to the above ideas for the campaign. We need your suggestions as to how to go ahead in this, who are the other people who should be involved in this campaign, etc.

We may need to consider to convene a larger meeting to this end later in the year in order to provide the basis for a more comprehensive thrust to the campaign. In the meanwhile, your responses and suggestions to the above will be crucial.

We look forward to your encouragement, involvement and support in this campaign.
The Ramagundam super thermal power station of the National Thermal Power Corporation (NTPC) Ltd. in Andhra Pradesh has bagged the prestigious 'Sword of Honour' presented by the British Safety Council for attaining high safety standards. The Ramagundam super thermal power station, which is meeting power requirements in the southern region, has the distinction of being the first power plant in the country to be presented the award.

**Name of the paper**: Indian Express  
**Published at**: New Delhi  
**Dated**: 5 February 1990

Even after the world knew and realised the devastating effects of a stupendous accident like the Bhopal gas tragedy, it is frustrating to know that in a city like Calcutta, small and medium factories manufacturing and dealing in dangerous and poisonous chemicals do thriving business in congested residential localities without let or hindrance.

Small accidents caused by the negligence of such units occur from time to time, destroying mostly property in fires, but these do not attract much attention unless a substantial number of lives are lost. It is estimated that there are no less than three lakh units in the city operating with trade licenses issued by the Corporation and at least 10,000 of them are unauthorised. With the growing awareness of environmental pollution, health experts and civic officials are running around making sample surveys.

**Name of the paper**: Newsline  
**Published at**: Hyderabad  
**Dated**: 26 February 1990

A study by the International Labour Organisation (ILO) reveals that the world over every five minutes one worker dies in an industrial accident and 14 get permanently disabled. Interestingly, it also points out that India has an exceptionally high rate of industrial accidents in the world. On an average about 7000 deaths per year are known to occur in India due to industrial accidents.

It has further computed that in India about five million man-days are lost every year as a consequence of growing industrial accidents and Rs. 150 crores paid as compensation for injuries. If costs like loss of production and damage to equipment are taken into account, the total annual loss is put at Rs. 2000 crores.

According to a survey by the National Institute of Occupational Health, about three lakh workers in the organised sector sustain injuries of varying degrees while on duty. As for the unorganised sector, no specific facts and figures are available. Mining, textiles, metals, chemicals and transport equipment industries are generally considered to be highly accident prone.

**Name of the paper**: Financial Express  
**Published at**: Bombay  
**Dated**: 15 February 1990

SECUREX '90, the safety and security exhibition is being organised by the Trade & Technology Exposition Co. (India) Pvt. Ltd., from April 19-22, 1990.

This exclusive exhibition will feature equipment for fire fighting and prevention in industries, homes and offices. It will also display equipment for protection at work; for prevention, detection and control of crime; industrial safety devices for protection of machines, computer systems and software; and for industrial health, hygiene and safety. Disaster protection and rescue technology is another area of interest.

For more information, contact: Trade & Technology Exposition Co. (India) Pvt. Ltd., Ionic, D-1, 3rd Floor, (Behind Telephone Bhavan), Colaba, Bombay - 400 005.

**Name of the magazine**: Business India  
**Dated**: March 5-18, 1990

About 600 workers employed by the Bombay Municipal Corporation (BMC) on the main sewerage lines are demanding an end to the continuous night shift for
the last 10-15 years and an improvement in their inhuman working conditions which exposes them to toxic gases and other risks.

The workers, who have formed a 'Mumbai Sewer Workers Action Committee', told reporters that they faced the danger of death and chronic disability as they were exposed to toxic fumes in the sewers and they had been on continuous night shift for several years in violation of International Labour Organisation rules.

In 1988, the Occupational Health and Safety Centre, Bombay had conducted a study on the conditions of the workers and had made several recommendations to reduce the daily risks in the job but nothing had come of that. The BMC had not even carried out a detailed study of the hazards the workers were exposed to much less provide them with equipment to minimise their risks.

Many workers had died of TB and other illnesses and most workers suffered from asthma, skin diseases and chest infections. Workers had to go 30 to 35 feet deep into sewers and often many felt giddy. They did not have proper washing facilities after their work as well. A lot of workers also suffered from vision defects and 47 percent of the 200 workers interviewed by the committee had chronic respiratory diseases. They are demanding regular breaks and a day off after three days, proper equipment, washing facilities and information on the kind of toxic gases they are exposed to.

Name of the paper : Indian Express
Published at : Bombay
Dated : 2 February 1990

National Safety Council is organizing a Specialised Public Training Course on 'Safety in Chemical Industry' from March 13-16, 1990 at West End Hotel, 45 Marine Lines, Bombay - 400020. The course is designed to impart such knowledge to the participants and to provide an opportunity to them to discuss among themselves the common problems in this area in this industry and get to know the best solutions that are being adopted.

For further details contact : National Safety Council, Sion, Bombay - 400022.

LETTER TO THE EDITOR

Dear Editor,

I work with arsenic and mercury in my laboratory, and to diagnose the effect of it, I have recently got a test done in the laboratory, but a detailed report has not been provided to me. What shall I do?

Answer : In such tests the samples have to be taken at the end of the working day. Only such samples give us a correct picture. The ILO Encyclopedia is quite clear about this. (See the section on 'Biological Monitoring'). I remember I had included this point in Notifiable Diseases. If the tests are not done as above you can ask for such tests to be done.

The persons affected should get the report of the tests. Normally the reports go to the employer and are treated as confidential by the research institutes. Recently the amendments in the Factories Act gave the right to workers to get their reports of the medical tests.

If they do not get reports, they can ask a court to order All India Institute of Medical Sciences or the employer to hand over certificates to the affected persons.

One can ask courts to order improvements in the working conditions and also for periodical medical monitoring. Are there meters in the workplace to monitor pollution? One can ask for such installation.
Mr. Deshpande was employed by a pharmaceutical company, in production line, around 1971. In 1975 he was transferred to the section involved in cleaning of boilers. In 1973 Mr. Deshpande had to face disciplinary proceedings regarding absenteeism.

According to the management, Mr. Deshpande was absent for 92 days in 1977 and 86 days in 1978. Out of these 5 days, absence was irregularised, i.e., Mr. Deshpande did not apply for leave before or after being absent.

There were eight boilers and every boiler was cleaned once a year. According to Mr. Deshpande, the operation of cleaning boilers was a continuous operation as there were eight boilers.

His work involved the following:

1. Scraping the tubes inside the combustion and other chambers.
2. Cleaning economisers.
3. Removing and cleaning valves.
4. Cleaning the boiler drum from inside and painting it.
5. Removing the scales from water tubes. Scales are layers of coating formed inside the tubes.
6. Cleaning fans, oil pumps, etc.

He defended himself on the grounds of occupational health problems and the disciplinary proceedings were dropped. It is important to note the main points of his defense. A lot of hard work by Mr. Toshar, an OH activist, had gone into researching for the defense of Mr. Deshpande.

This is a case where management neglected its duty of protecting the health of the workers and then tried to penalise the affected workers. This attempt by the management failed due to the following arguments.

1. When Mr. Deshpande was not working in the section of boilers, there was no complaint of absenteeism about him.
2. After 3-4 years of joining the more hazardous section of boilers the problem began. Medical leave comprised a substantial part of his leave.
3. Earlier his resistance power protected him from general illnesses.
4. The management never informed him about health risks involved in cleaning boilers.
5. The personnel department had no idea of the occupational health risk involved, and had totally overlooked the occupational health aspect of Mr. Deshpande's frequent absence.
6. The OH problems involved are as follows:

   a. According to Dutton (1911) (As early as that) Vanadium pentoxide affects the gastrointestinal system and renal system. Digestive disorders and problems of the kidney become possible. Other effects are nausea, vomiting. Workers cleaning an oil-fired boiler are exposed to the risk of being affected by Vanadium pentoxide.

   b. Percentage of Vanadium is highest in the combustion chamber. Intermittent exposure may lead to bronchitis, pneumonia, pleurisy. In pleurisy there is a swelling of the outer coverings of the lungs.

   c. Proper respirators were not provided to prevent smaller particles entering the lungs.

   d. Carbon monoxide is produced and confined in the boilers. Carbon monoxide affects the capacity of blood to carry oxygen. Cells are starved for oxygen. Liver cells also get affected leading to weakening of liver. General resistance power may get affected.

   e. Scaling of boilers involves the risk of being exposed to minute particles of silica and possibility of being affected by disabling lung disease named silicosis is present.

The management had no defense against the above arguments. The OH activist provided nine thoroughly researched references from authoritative literature on occupational health.

The aspects to be noted are:

i. Mr. Deshpande had never informed his doctor about the nature of his work.

ii. Any doctor treating Mr. Deshpande never asked about the nature of his occupation. No doctor informed him about the risks involved in his work.

iii. The management never informed any worker in that section about the occupational health problems in their work. The managerial practice actually hid the risks. Management did not provide necessary protective equipment.

iv. Management failed in its attempt to take disciplinary action against Mr. Deshpande because he got timely help from Mr. Toshar who was interested in OH and had kept himself informed about OH issues.
The Hindu Survey of Indian Industry 1988

This is a collection of data and articles on different industries, mainly from the organised large scale sector, compiled by the Hindu newspaper. There is a special emphasis on the chemical and petroleum industries. This volume not only provides data but also analysis on the growth and development of various industries, ranging from power to electronics.

The volume is priced at Rs. 15/-, and can be acquired from The Hindu, c/o M/s Kasturi and SONS Ltd., Madras 600 002.

Safety Desk Book

This is a directory of manufacturers, dealers, consultants, professionals and service consultants, engaged in the business of Industrial Safety, Fire Prevention and Control, Electrical Safety, Process Safety, Pollution Control and Environmental Safety, Security Equipment, and other miscellaneous services in the area of safety.

This has been compiled by SAFTI, and is available from Post Box No. 11, P.O. Sipcot Complex, Hosur 635 126, Tamil Nadu.

International Labour Conventions and Recommendations 1919-1981

This volume contains the text of the 146 Conventions and 102 Recommendations, out of a total of 156 Conventions and 165


The price of the volume is Rs. 500/- and is available from ILO, 7 Sardar Patel Marg, New Delhi 110001. For those who are interested in receiving copies of details regarding some specific industry or issue as mentioned above, you can write to us in PRIA and we can make available photocopies of the specific section.

Black Lung

This is a small booklet in Hindi, basically meant as a handbook for coal miners, mine workers and health workers. It deals with the hazards of the coal industry and discusses in detail about Black Lung disease, or Pneumococcosis, which is a common disease of coal miners, and is caused by coal dust. This booklet has been produced by Sahaj, Gujarat, and Jan Chetna Manch, Dharbad.

For copies, write to Sahaj, G.P.O. Box 134, Baroda, Gujarat 39001.

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