

## **A journey of twenty years in occupational health and safety – Dil Se**

“It is infinitely difficult to begin where mere words must remove a great block of inert matter but there is no other way if none of the material strength is on your side. And a shout in the mountains has been known to start an avalanche”

- Alexander Solzhenitsyn in ‘The Oak and the Calf’

### **How it all began: Establishment and Objectives**

When the Bhopal gas tragedy stirred up the entire world in 1984, how could a young engineer like me, working in shifts in a chemical company remain unaffected and unconcerned? I had already started to organize the workers in 1983 and moved ahead from just reading, thinking and writing about worker rights to being actively involved in their struggle. I had started working in a chemical company in 1978 and after getting experience in 2-3 chemical units, was fairly stable in my present job with a good understanding of the workplace conditions in the chemical industry. Questions like, what could be the harmful effects when the human body is exposed to these dangerous chemicals, were always in my mind and they came to the forefront because of the Bhopal Gas Disaster. I met Vijay Kanhere by sheer luck in Mumbai and “the chemical reaction” thus begun, because of the chemistry between the two of us, resulted in the formation of Vyavsayik Swasthya Suraksha Mandal [VSSM] (Occupational Health and Safety Organization) in 1985 and later Peoples Training and Research Centre, in 1992. VSSM remained unregistered pressure group and later on realizing that legal registration is crucial for more organized & consistent work on the issue, we got PTRC registered.

Thus the prevalent social and environmental conditions, personal experiences, involvement in trade union movement and the meeting of Vijaybhai, all these got together and the resulting product of this chemical reaction was Peoples Training Research Centre (PTRC).

What an excitement it was in the beginning! What to do, how to do it, what should be the modalities, there were endless discussions on these issues. We got the initial support from Society for Participatory Research in Asia (PRIA), Delhi in our endeavor. As we became wiser

& mature, we became more pragmatic. Vijay always used to pull me back from my flights of idealism to the practical realities of life. We should not lose our track, he always said to me and it was his special focus to ensure that I do not get sidetracked from the main issues. Large number of social issues would attract me and I wanted to get myself involved in most of the problems, but Vijay was my pole star. By his sudden departure in 2006, I, in particular and OHS movement, in general, lost our friend, philosopher and guide but during this period the foundations were already laid, though the building is yet to be built.

In these two decades, experiences were many and all those should be documented, but in this brief essay I shall make an attempt to focus on major milestones, achievements, failures and the work areas of PTRC like what have been the major twists and turns in this journey, what we did and did not do, what were the strategies, strengths – weaknesses, failures-achievements, in this journey of 20 years.

### **The Initial Phase: 1986-1992**

During this period along with my job, under the banner of VSSM we did the following activities. In 1988 we organized an exhibition on the Bhopal Gas disaster in Vadodara. I got introduced to Comrade Bhalchandrabhai of All India Trade Union Congress (AITUC). He generously offered his office to be used for VSSM Office and thus we started meeting regularly at Shiv Apartments on Saturday evenings. This went on till 1993. The first visit to Khambhat happened during this period and we started building relationships with the workers, thus making some headway in the process. In 1988, the magazine, Kamdar, Vyavasaya Swasthaya was started and for that we decided to take the support of different trade unions. During 1990-1992 along with PRIA we inspired and gave shape to the national campaign against dust related lungs diseases (DRLD Campaign). This phase was also of information gathering related to developing understanding of local problems and developing relationships with the affected people. I got introduced to the struggle of Alembic Glass workers against Silicosis and their leaders and Raghunath Manvar and his struggle at power plant, where he worked. I also got to know, National Institute of Occupational Health (NIOH) and their humane officers Dr. Jagdish Parikh, Dr. Saiyed etc. During the meeting of Gujarat Safety Council at Ahmedabad, I got introduced to Shri Devjibhai

who was the leader of Chemicals Kamdar Sangh (Trade union of workers at Tata Chemicals), Dr. Haresh Shah of Ankleshwar and during the DRLD Campaign got introduced to the Majur Mahajan Sangh (Textile Labor Association), Ahmedabad. As a result of DRLD, Hauslaprasad Mishra initiated the movement for Byssinosis among textile workers; we supported him in this struggle and the establishment of their institution. Raghunathbhai also established Occupational Health & Safety Association (OHSA) and we supported it with active participation. We also supported the work of Ratilal Parmar for Ceramic workers.

### **Phase of struggle: 1993 – 1998**

The initial six years from 1993-1998 were almost spent in a struggle. My job with the private company continued. How to leave one's job and work full time without resources of any kind was the question? On the other hand if I do not leave the job, it was difficult to work on the issues. The job was not a very lucrative one in terms of money, so leaving the job was not that great a risk. But even to do that I did not have any resources to fall back upon.

But then situations took a turn whereby our unit was heading for a closer and I had to search for a new job. Vijay gave the final command; leave your job we will see how you can be sustained. On this word from Vijay I left my job in 1998. We worked during this period but at a slower pace. The major advances were in terms of building relationships and acquaintances in the field. With my marriage in 1992, Neena entered my life and soon after that, for family engagements we spent two and a half months in London. During my stay, I almost spent all of my time in visiting various groups in Britain working on Health and Safety. I wanted to garner some resources for our work back home, but during that period neither I had the required information nor the ability to do that. A lot of learning happened during that visit. During this visit I got an opportunity to participate in the Hazards conference in Sheffield. With International Labour Organisation (ILO) support I participated in the World conference on Safety held in New Delhi in 1993. In the same year I got an opportunity to participate in ten day training on Injury control organized by Indian Institute of Technology (IIT) Delhi & Karolinska Institute, Sweden. Because of the contacts built up during the Sheffield conference, I got an invitation to address a meeting organized by Danish trade union at a parallel programs held along with the UN Social Summit in Copenhagen. I learned a lot during that journey. After that they sent some offer for

funding, which was never delivered thanks to the grace of our postal department. When I came to know of it, it was too late.

### **The Learning Phase**

During the period of 1998 to 2002 in the second phase, I had time at my disposal, but resources still eluded us. The name of our magazine, Kamdar, Vyavsay, Swasthya (Worker, Occupation and Health) was changed to *Salamati* as wished by our readers and its period of publication was changed from indefinite to bimonthly. The most important milestone during this period was the fight that we led along with Vadodara Kamdar Union and the Environment Protection Group against the deadly effects of chromium on the workers at Hema Chemicals. This struggle still goes on. During this period we came to know of Silicosis in Chhotaudepur through "Vikalpa", an organization in Vadodara. We visited this area along with them. We represented this in the media and the Government. Important contributions to this cause were the photographs of Heindu Plessis, an internationally acclaimed photographer, which he took at Chhotaudepur of the silicosis victims.

In 1998 we organized 10 residential workshops each of 3 days related to occupational health supported by International Chemical, Energy and Mine workers unions (ICEM), which benefitted close to 300 workers. We prepared an exhibition of, Our Body: Our Work and took it to many places. In 2000 we got involved in Jan Swasthya Abhiyan (People's Health Movement).

### **The Decade of Work: 2002 to 2012**

The years of 2001 and 2002 were for Gujarat like a curse because of the massive earthquake in 2001 and the communal riots of 2002. Watching 'Living Stones', a documentary by Joseph Alkazi, which was telecast by Pij Doordarshan Kendra and was related to the silica workers of Khambhat, I got an inspiration to visit Khambhat in 1988. After that in 2002-2003 we got an opportunity to directly work on the Khambhat issue of silica workers. We got small grant from the Gujarat Ecology Commission for working on that project and within a year we conducted several programs like machine yatra, health fair and street plays to create awareness among people. These led to a significant awareness of this issue among people. In 2002 we came in

touch with Asian Network of Rights of Occupational Accident Victims (ANROAV), a relationship which lasts till today and was fruitful as well. We also participated in the World Social Forum which was held in Mumbai in 2004.

The NHRC and People's Health Movement had organized a public hearing at Bhopal in 2004 on refusal to right to health care. We participated in that along with other organisations of Gujarat. The government accepted that not diagnosing silicosis by the government amounts to refusal to right to health care.

In the same year we helped Saiyed Faiyaz, a documentary film maker from Delhi to make a documentary on the issue of Silicosis among agate workers. This half an hour documentary, named as, 'Way to Dusty Death' was telecast by Doordarshan and at a later date, was given the President's award by the government of India. This film became an important tool to make the Khambhat issue easily understood among most of the people.

We got an opportunity to host ANROAV secretariat at PRTC which we hosted from 2006 to 2009. We edited OHS Rights - the quarterly news magazine of ANROAV during this period.

The International Award of American Public Health Association was conferred in 2007 on me and I got a chance to visit US to receive the award. This visit was made possible by friends and OHS activists world over contributing for it. During the two months stay in US I got an opportunity to meet many organisations working in the field of Occupational Health.

In 2006 the officers and experts of Karamsad Medical College visited our Khambhat office and got themselves acquainted with the situation of agate workers first hand. Then my lecture was organized in the hospital and as a result of that a clinic was started at our Shakarpur office in June 2007. Expert doctors from chest and TB would come once a week and examine the patients. Our volunteers would scout around to find Silica exposed workers and encourage them to visit our clinic. Arrangements were made with the Cardiac Care hospital at Khambhat to get X ray done, free of cost for the patients who were referred by our clinic.

X-rays, so obtained would then be sent to Karamsad Hospital and based on the clinical examination, occupational history, a final diagnosis would be made, and a certificate would be issued for positive findings. The original copy is retained by PRTC and a copy is given to the patient. Till date 712 workers have been examined and 188 have been confirmed as having Silicosis. Out of the 188, 71 have already expired.

NHRC declared Silicosis a serious health hazard and started to hear complaints related to that from 2006. It was stopped later on after the Supreme Court admitted a Public Interest Litigation related to the issue. NHRC joined the PIL as one of the petitioner. On Supreme Court orders the Commission started accepting specific complaints and asked us to submit documents. PTRC has submitted the documents of 71 dead workers to NHRC.

For the welfare of the afflicted and other workers certain initiatives were taken by us. We started a crèche for the small kids of workers, note book distribution for school going children, helping them in claiming benefits of government welfare schemes, join group insurance schemes, admitting children to residential schools, Tiffin delivery service, helping the sick workers in hospital admissions and giving or arranging cash money in case of an emergency.

With an aid from the Factory Inspection Office we conducted training programs for health and safety of factory workers which benefitted about 469 workers from 141 units.

### **Advocacy Efforts:**

The opportunity of international exposure to the Khambhat issue was made possible by the support of an organisation name Labour Action China from Hong Kong. AMRC, Hong Kong was instrumental in bringing these two organizations together. We participated in demonstrations outside the Gems and Jewellery Trade Fair at Hong Kong in 2005. In 2006 at the same venue we had Shri Rameshbhai Makwana as representative of the Silicosis victims in Khambhat to join the demonstrations.

Immediately after that we all visited the organizers of the International G & J Trade Fair at Basel in Switzerland and spoke to them about the issue. Alongside, we took the opportunity to visit the executives of ILO and World Health Organisation (WHO) in Geneva and made a representation of our case. The representatives of National Committee on Labour from US visited Khambhat in 2009 and published a report in 2010 titled, Heart of Darkness. The publication of this report caused a huge uproar in India.

The Gems and Jewellery Export Promotion Council undertook a visit to Khambhat and they initiated discussing the building of common shed for workers. Amendments were made in the Gujarat Factory Act related to Byssinosis and certain provisions were amended related to safety officers in Gujarat. These all were the direct results of our effort of many years.

The health department of Gujarat Government announced the issuing of Health Cards to Silicosis affected workers, enabling them to get free healthcare facilities from government hospitals and in the event of death of a Silicosis worker his family would be entitled Rs. 1 lakh. Government Doctors were trained for Silicosis diagnosis. To confirm the diagnosis of Silicosis, an expert committee at the state level was constituted. We were also able to make small changes in the ESI provisions as well.

### **Legal Work**

The real work of getting compensation was not easy. To prepare the worker to claim compensation as per the ESI, work with the doctors of ESI for diagnosing the disease, if diagnosed as positive, to make him reach the Special Medical Board, if the Board verdict was negative, to prepare an application, sitting with a lawyer, go for an appeal in the Medical Appeal Tribunal, along with the collection of all relevant documents. Some times in absence of relevant documents we had to file an RTI (Right to Information) application to get the same and do errands in the courts. After the verdict was given, to fight for its implementation was again a big struggle.

We succeeded in getting compensation for workers who suffered from noise induced deafness, dermatitis (skin diseases), Occupational Asthma, Silicosis, Nasal Septum perforations and Liver problems because of exposure to Chromium etc. Some landmark judgments also came in the process. Many times we failed as well. We filed petitions in NHRC and Gujarat High Court related to these issues. Though the PIL petitions receive enough attention from the media and people, in absence of any organisational set up, these decisions and judgments though landmark, remain only on paper. This sound understanding has made us less inclined to file petitions and get court orders for the same. Had we not met our lawyer and supporter, Shri Mavlankar in the local (Vadodara) court, may be all that has been done would have remained on paper.

We were able to experiment and innovate with legal matters in this field. Sometimes there have been moments of despair. In some cases while the battle was going on in the courts, the worker has expired and due to legal limitations nothing could be done to take the matter forward. Around 10 petitions are being heard at present in the Vadodara Labour Court, Medical Appeal Tribunal and the ESI court.

Under the Workmen Compensation act one application is being heard at the Anand Labour Court. We had filed one petition before the NHRC for the abolition of bonded labour in our society.

### **Articles published:**

Several articles in English were published in Workers Health International Newsletter (WHIN) in several of its issues since 1983. Articles have been published in PRIA Bulletin (March-96, June-98 & Feb.01), Labor File (Oct-99), Economic & Political Weekly (Jan-99), Trade Union Record (July-91), OHS Rights (Aug-99), Asian Labor Update (Mar-07 & Dec.07), with Maggie Robbins in New Solutions (Nov-2008), Asia Pacific Newsletter (March-2006), Info Change Agenda (2009), The Week (Sept-2011), Indian Express (Feb-2007) etc. In Gujarati, more than 40 articles have been published in Navnit Samarpan, Naya Marg, Bhumiputra, Nirikshak, Khoj, Aapnu Swasthya, Manviya Technology, Hitrakshak, Paryavaran Mitra, Aadilok, Suraksha, Daily Sandesh, Daily Madhyantar and many special issues like India's Asbestos Time Bomb (2009), Naya Padkar Rajatdeep Visheshank (March-2010), Struggle For justice (March-2005), Souvenir of Gujarat Safety Council (1993), Vaishvikaranna Vahen and vamaal(2011), Invisible victims of development (with Mohit Gupta). In 2012 Parichay Pustika Trust published booklet on Occupational Health.

### **Research**

The battle in the courts is not won on emotional and ethical grounds. We need to have sound and substantive evidence for our claims. Thus we also researched on multiple topics in this process of working for the health and safety of workers. A research paper was written by collecting data of fatal accidents from the Factory Inspectors Office and analyzing these data which occurred during 1990 to 1995 in Gujarat. A research paper based on secondary data of "stove explosion" incidents was published in '*Arthaat*' (January 1997) and it got published in local Gujarati daily Sandesh. It was also accepted for publication at a conference in Canada. A study about the living conditions prevalent among widows of Silicosis workers in 2003 with the economic support of Dr. Ambedkar Chair of Sardar Patel University was carried out by us.

In 2001 we worked on the trend of Occupational diseases in Vadodara. A study of Power Plants for PRIA and a study on the chemical industry of Gujarat and Maharashtra for AMRC was done by us. In the same year we gave our feedback to the Hesperian Organization of US for their draft of book on Occupational Health after discussion with our worker friends. (One of their publications, where there is no Doctor, has been well received all over the world. Dr. Kiran Singlot has translated it into Gujarati – Jyan Doctor Na Hoy). We carried out a study on Agate workers of Khambhat in which 4750 workers participated. A report was prepared in 2011 about the effects of Polyacrylate contamination on workers. The Gujarat High Court took notice of it filed suo-moto PIL.

### **Publications:**

In 1994 we published directory of hazards of 150 commonly used chemicals with the help of ICEM. PRIA helped us publish story of struggle waged by silicosis victims of Alembic Glass titled Dhulia Fefsa in 1994. In 1998, again PRIA helped us publish our experiences of our visit to some of the thermal power plants in Gujarat with Raghunath Manvar, titled Prakash Na padchhaya. In 1999 we published text of our exhibition poster titled Aapnu Kam, aapnu Sharir. In 2001, we published report of our study on trend of occupational diseases in Baroda district "Karkhana ke Kalkhana". In 2002 we published "Kalmukho silicosis" and reprinted it again in 2008. We published report on enforcement of Factory Act titled "Kort Ma Karkhanu." In 2008 we published lecture notes on OHS training. In 2010 we published Gujarati version of Silicosis- a lover's story with the help of AMRC, Hong Kong. For PRAYAS-CLRA we prepared and published case studies of victim's of accidents in cotton gins titled "Horror of white clouds" in English and "Safed Kapas Ma lal dhabba" in Gujarati. In 2012, we published report of the study of Agate workers in Khambhat titled "Stoned" in English and "Majbut Patthar, Majbur Majur"

### **Strategy:**

When the issue of safety and health at work is discussed among elite, they usually stop at limited work for prevention- like workers should work more carefully while working. Through our experiences we have learnt that the key, for prevention of occupational diseases and accidents at

work is in the hands of employers. To keep workplaces safer and healthier Government and Trade Unions can only put necessary pressure on them. In present socio-politico-economic situation of the country, where democratic values have not been fully developed, feudal relationships still exist, when governance is poor, peoples participation in power is limited, large population is struggling for most basic needs and poverty and unemployment are on large scale, prevention is far away. In such situation we decided our strategy to work with workers at grass root to increase their level of information on hazards and safer practices on one hand and identify victims to help them claim their legal rights on the other. We had decided to work only on Occupational health so except for a brief period of 5 years between 2002 & 2007 when we also worked on HIV/AIDS, we fully concentrated working on OSH. Many voluntary organizations work on any issue where resources are available easily, but we did not opt for such policy. Still, we extended our moral and at times, active support to the organizations working on Child labor, Women, General health, environment etc. While networking with other organizations we always saw to it that the issue of OSH is not forgotten by other groups. We aimed at organizing victims and empower them to raise their voice rather than work for their welfare. So it was, more of rights, less of welfare, as a strategy. Rather than joining with any one particular political party or trade union we decided to work with one and all on the issue of OSH. We have accepted foreign funds but we accept from progressive groups for the programs we decide and do not let anyone dominate us. We are interested in expanding work but at our own conditions and on our own way. We are in a hurry, but we are aware of the root cause of the problem which is complex socio-politico-economic situation. Over a period, we have developed understanding that even in most unfavorable situation we should consistently keep up our efforts.

### **Strength and weaknesses:**

More of weaknesses and less of strengths. We could not raise adequate financial resources for the work. Administrative skill required for such work is limited. More attention was given on working at grass roots and prepare material in Gujarati. We could not build a good team. My timidity, inferiority complex and hesitation came in my way. Limited spirit of adventure also played its part. I am poor in writing proposals and send them at appropriate places. When ever, we have seen honest and strong intentions, we have helped other OSH groups to flourish.

Excellent Gujarati and good English writing skill has been my greatest strength. I can communicate with workers very well and get out information from them. I also have good training skill. We have been able to collect good deal of literature on the subject. I am little cynical- would criticize immediately without mincing words but am a miser in praising others - of course whatever I do, I do it without any calculations, have always expressed my honest views.

### **Successes and failures:**

More of failures than successes. Lot of work of advocacy for silicosis among Agate workers but failed in getting changes at grass root or motivate workers to get organized. Workers kept dying but we could not pressurize the Government to take any action for prevention. We could not relate ourselves with trade unions but could be part of many networks of voluntary organizations. We had some benefits of it. We succeeded in sensitizing middle class to some extent through our efforts. In promoting Gujarati news bulletin we succeeded in proportion to the inputs and efforts that we had put into it. But we failed in motivating more authors to write on the subject with people's perspective. We could not engage experts either to evaluate our work or design the programs. We could not motivate workers in large numbers to claim compensation for the damages they incurred. We did raise intellectual resources but the socio-economic situation did not allow workers to take advantage of it. We bought equipments like spirometer, audiometer, a set of pneumoconiosis X-rays etc but could not utilize them fully. We do not go into who is responsible for successes and failures. May be, very complex set of factors. I am happy for what we have been able to do. Still, looking at the situation of proletariat in India, what we have done is just superficial. Once the sensitization and understanding of problem reaches to a critical level then the phase of concrete work would begin or when our country achieves certain economic conditions then society would pay attention to this problem.

### **Support received**

I could continue to work for more than two decades only because of the support, love and affection showered by my family. Family has allowed me to use my house as office and has born

with whatever inconvenience came as a result. My parents and extended family too have extended their economic and moral support. Had late Vijay Kanhere not been with me, I would not have achieved what I have. After his demise, other trustees, particularly Dr.J.R.Parikh is extending good support. My colleagues at Khambhat office- Jayesh, Naina, Ramesh, Manjula need to be remembered for their commitment. In legal work our lawyer Shri Mavlankar is giving excellent services. Niranjana-my wife- has been meticulously maintaining accounts and Jitendra Gandhi & Sons have audited accounts for last 20 years. Sanjay Dave of CHARKHA has helped us reaching out to media on and off. Organizations that supported us include PRIA, AMRC, ICEM, Global Greengrant Fund, and Environment fund for NGOs, Toxics Link, Institute for Global Labor and Human Rights, Developing World Outreach Initiative, Bhansali Trust etc.

### **Way forward:**

This article is about PTRC and not about OHS situation in India. Still, to give understanding of the huge work before us, it would be suffice to say that in India we have yet not reached a stage even to estimate oldest occupational lung diseases, not to talk of its prevention. We are far away from discussing issues like sick building syndrome or RSI or bullying at work. All branches of Banks do not have separate toilets for women workers. In such situation we have several dreams with commitment. Those interested can join us. Several activities like spreading word, write articles, getting funds, join advocacy efforts, diagnosis, extend support to the victims etc can be carried out jointly. I am presenting a small list of programs/activities in a hope that someone may get inspired to take up any one from the list.

- Extensive work on silicosis
- Prepare small groups of workers in different industrial centers in Gujarat.
- Inspire youth by visiting them at Medical-Engineering-law-social work-social science-colleges
- Organize workers safety conference each year
- Advocacy for integrating Occupational health with general health services
- Organize *Shodh Yatra* to know the OSH problems and victims of Occupational diseases.
- Prepare a group which would consistently work on improving ESI services.

- Take up research on enforcement of legal provisions and its social impact.
- Publish small booklets on different subjects.
- Prepare poster exhibition for different occupations and industry
- Establish centers for migrant workers in their source areas to guide and train them
- Establish a unique center for occupational health where all - social, legal, medical-services are available for workers
- Establish training institute for occupational health which has all basic facilities for lodging-boarding, library etc
- Initiate campaign for pressing Govt. of India to ratify ILO C.155
- Generate public opinion for amending legal provisions
- Initiate column on the subject in popular dailies
- Make our newsletter "SALAMATI" attractive-colorful and raise its circulation.

## **Conclusion**

After working for twenty years in this field I have become wary of nice slogans, great ideas and utopias talked about by our experts from air conditioned halls of five star hotels about prevention, safety, humane workplace and worker rights. I believe that even if we get proper compensation for the loss suffered by workers, it will be a victory for us. In the present scheme of things even getting compensation is a long battle. Despite all the failures and despair I hope for a positive change in the years to come. Our work at PTRC has been a shout in the mountains of the Industrial World, hoping that some day it will create an avalanche.

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