

Asbestos Issues in Hong Kong

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[Ed: The author's presentation at the Congress covered asbestos issues in Hong Kong but the submitted paper (below) deals mostly with other occupational health problems, and the responses to such of victim associations in Asia.]

Asian Network – Scope and Actions to Strengthen Victim Movements and Stop Occupational Disasters

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In every minute and every part of the world, there are workers who lose their lives or suffer permanent impairment because of their occupation. The situation is even more obvious and worse in developing countries.

As economic growth becomes the sole national goal in developing countries, there are always exploitative labour policies, which feature low levels of wages, impose lenient safety monitoring and leave all the burden on the workers, so as to attract foreign investment. As a result, developed countries and the international multinationals shift their investment to those developing countries. Though, such a shift provides those developing countries with opportunities for short term economic growth and employment for their nationals, it also brings along serious problems like environmental hazards and occupational disasters, which cost the developing countries even more than they have earned. Typically, international multinationals move plants and production procedures which are hazardous to health and the environment to developing countries from industrially developed countries, within which, many such procedures or the ingredients they use are actually banned. The asbestos problem in developing countries is a very good illustration.

Occupational disasters pose a great threat to workers everywhere in the world. However, every time discussion of prevention issues is on the table, only governments, employers and professionals are involved. It shows extreme cynicism on the part of the authorities that victims and victims' organizations are almost always excluded from such panels; no one has ever considered their roles and participation in the

movement to improve preventative measures. This may be due to a common misunderstanding: that victims and their organizations are concerned only with compensation and rehabilitation and that the rationale behind their organizations' activities is merely elevation of compensation levels.

Fighting for a reasonable compensation level is not the only goal of victims' organizations. The victims' movement as a whole, in fact, aims also at the prevention of occupational disasters and stopping their spread.

Let us take an example. The Association for the Rights of Industrial Accident Victims is an organization incorporated by injured workers, occupational disease sufferers and families of industrial fatalities. Since its inauguration in 1981, its unchanged goals have been both advocacy for reasonable compensation and prevention of occupational disasters. All members of the Association are occupational victims or their family members. They, and their families, truly suffered from various occupational disasters. And they clearly do not want others to repeat their fate and suffer what they have suffered. As a result, the Association has organized victims into different groups with reference to the cause of their accidents or diversity of injuries and diseases. All the groups strive to fight for higher safety standards and improvement in working environment so as to reduce the rate of occupational disasters.

I would like to share how the Association organized the pneumoconiosis sufferers in order to prevent further occurrences of the disease.

Case 1 – Campaign on Banning Hand-dug Caissons

The hand-dug caisson was a common construction method in Hong Kong before 1996 as it could lower the building cost by reducing the use of machinery in foundation work. Before 1996, hand-dug caissons caused numerous deaths and injuries. On average, over 300 caisson workers per year were injured and reported to have contracted occupational diseases, mainly silicosis and occupational deafness. Moreover, the death toll of caissons was astonishing.

Since 1991, the Association has organized the victims and their families, demanding that the Government ban the use of hand-dug caissons. Helped by the alarm in Hong Kong society triggered by a series of catastrophic caisson accidents between 1992 and 1995, the campaign ended successfully with legislation imposing a great restriction on use of this method in the construction industry.

As the restriction is as exclusive as a ban on the method, problems related to hand-dug caissons were relieved and the number of silicosis sufferers was decreased (Table 1). In addition, the rating on disabilities suffered by victims after the legislation has dropped drastically.

Table 1

Year	No. Of pneumoconiosis cases
1994	320
1995	200
1996	119
1997	125
1998	109
1999	152
2000	116
2001	131
2002	119

Pneumoconiosis was a very common occupational disease in Hong Kong in the 1980s. Most of the sufferers participated in the construction industry. In that time, the annual figure of new cases was about 300. And when they were diagnosed as pneumoconiosis sufferers, their situations were serious, often up to 60 to 70 percent loss of lung function.

The Association began to organize the sufferers in the 1980s and first assisted them in compensation issues. Moreover, in the course of organizing the movement, we have worked on numerous lines of research and suggestions on prevention of the disease. In the end, we discovered that the major cause of pneumoconiosis in Hong Kong was a unique construction method – “the hand-dug caisson”. So, the Association concentrated on organizing pneumoconiosis sufferers and families of fatalities concerning hand-dug caissons to campaign for a ban. After more than ten years of continuous organizational work and activities, the Hong Kong Government legislated to impose extremely stringent requirements on the use of hand-dug caissons, which nearly equalled a statutory ban. The effect is actually encouraging, as the rating of respiratory function impairment of newly admitted cases in the years following the legislation dropped drastically, from 60-70% to around 20%. Such a reduction largely arises from the contrast between “young” sufferers, who were not likely to have worked in a hand-dug caisson, and the “old” sufferers, who were mainly caisson workers. The result of advocacy reflects clearly the importance of the involvement of occupational victims in the occupational safety and health movement.

Facing the new challenge of developed countries exporting work hazards to developing countries, alongside formation of localized victims' organizations, regional networking of the organizations becomes a very crucial strategy for regional and global advocacy.

The Association for the Rights of Industrial Accident Victims has participated actively in the Asian Network for the Rights of Occupational Victims (ANROAV). The Network aims at strengthening solidarity of different victim movements and improving safety standards in the Asian region. After the Kadar Fire in 1993, the organizations in Thailand and Hong Kong joined together to fight for a reasonable level of compensation for the victims and to demand improvement in safety standards of toy manufacturing. Outlined below is this illustration of development of regional solidarity.

Case 2 – The Kadar Campaign

During the disastrous fire in the Kadar Toy Factory in Thailand in May 1993, 188 workers were killed and about 500 were seriously injured. A Hong Kong investor owned the factory but denied liability for the accident and also responsibility to compensate.

Many local (Thai) and foreign (including Hong Kong) labour organizations joined together in the campaign. The groups from Hong Kong formed the “Hong Kong Kadar Fire Concern Group Alliance” in order to support the Thai groups coming to Hong Kong for campaigns against the investor, and assist the victims and the families in fighting for reasonable compensation. The Alliance organized a series of actions, including marches, demonstration and protests to the company offices. Thanks to the efforts made across borders and regional networking, the management eventually agreed to compensate the victims and the families according to their needs and demands.

The Kadar campaign is an extremely good example on how linkage and solidarity could be formed between different localized organizations within the region and how the power of victims in different countries could be consolidated into a stronger force.

The above two illustrations enlighten us about an important issue: the significance of inclusion and participation of victims in the course of occupational disaster prevention movements. Actually, victim movements could be evolved to drive and monitor campaigns for prevention of occupational disasters. In addition, when regional occupational problems emerge as issues, such as asbestos problems, every localized organization should link with each other through the regional network to generate more strategic power in battling exploitation by multinationals.