ILO POLICY and ACTIVITIES and TECHNICAL COOPERATION ON ELIMINATING ASBESTOS-RELATED DISEASES

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The ILO policy on asbestos is governed by the international instruments (relevant Conventions and Recommendations, and International Labour Conference resolutions) adopted by the Organization, as well as ILO codes of practice. These international instruments provide solid legal bases as well as practical guidance for comprehensive preventive measures at the national and enterprise levels in order to protect workers and prevent asbestos-related diseases.

ILO Policy on Asbestos

Resolution on Asbestos was adopted by ILC, 2006

Considering that all forms of asbestos, including chrysotile, are classified as human carcinogens by the International Agency for Research on Cancer (IARC), and expressing its concern that workers continue to face serious risks from asbestos exposure, particularly in asbestos removal, demolition, building maintenance, ship breaking and waste handling activities, it calls for:

“The elimination of the future use of asbestos and the identification and proper management of asbestos currently in place as the most effective means to protect workers from asbestos exposure and to prevent future asbestos-related diseases and deaths.”

“The Resolution also underlines that the ILO Convention on Safety in the Use of Asbestos No.162 should not be used to provide a justification for, or endorsement of, the continued use of asbestos.”

ILO activities on asbestos

Identification of priority areas for action

Provision of policy guidance and strengthening legal frameworks for prevention of ARD

Building inter-agency cooperation for consolidated action by multiple partners

Sharing knowledge and experience

Assisting countries through technical cooperation
ILO International Instruments

Legal frameworks for action:

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- 35 Codes of Practice

- A formidable compilations of principles, obligations, rights and duties, and technical standards on how to deal with asbestos hazards
Key provisions of Convention 139 concern:

- periodically determine the carcinogenic substances and agents to which occupational exposure shall be prohibited or made subject to authorization or control;

- make every effort to have carcinogenic substances and agents to which workers may be exposed in the course of their work replaced by non-carcinogenic substances or agents or by less harmful substances or agents;

- reduce the number of workers exposed to carcinogenic substances or agents and the duration and degree of such exposure to the minimum
Key provisions of Convention 162 concern:

- prohibits the use of crocidolite and spraying of all forms of asbestos;

- replacement of asbestos or of certain types of asbestos or products containing asbestos by other materials or products evaluated as harmless or less harmful;

- total or partial prohibition of the use of asbestos or of certain types of asbestos or products containing asbestos in certain work processes;

- measures to prevent or control the release of asbestos dust into the air and to ensure that the exposure limits or other exposure criteria are complied with and also to reduce exposure to as low a level as is reasonably practicable
Difficulties in recognition and prevention of ARD

Asbestos remains the primary carcinogenic substance in the workplace.

ARD are amongst the most serious and costly occupational illnesses.

Long latency periods of ARD, exposure to asbestos is difficult to control.

Lifetime risks of 5/1,000 for lung cancer; 2/1,000 for asbestosis at 0.1 f/cc OEL.

Residual health risks remain after cessation of exposure causing incurable diseases and premature deaths.

Lack of trained specialists, poor health surveillance, low level of diagnosis of ARD.
Outline
for the Development of National Programmes
for Elimination of Asbestos-Related Diseases

Roles and action towards the elimination of ARD

**Governments**

1. Promote public awareness, establish and implement NPEAD linking them to labour and health policies
2. Introduce substitutes for asbestos, safer technologies and economic stimuli for their use
3. Strengthen legal frameworks and enforcement through labour inspection, control of exposures and compliance with OELs
4. Certify companies for demolition and maintenance works
5. Respond to business needs by sharing experience on good practices
6. Strengthen cooperation between labour, health and environment sectors
Roles and action towards the elimination of ARD

**Trade Unions/Workers**
- raise awareness of health risks from exposure to asbestos
- promote the establishment of NPEAD
- participate in NPEAD implementation, training and risk management programmes
- cooperate with OSH professionals on application of protective and preventive measures
- cooperate on the introduction of safer technologies and substitutes

**Enterprises/Employers**

*Introduce substitutes for asbestos:*
- no liability in future for causing ARD
- better reputation and companies’ images for customers & society
- new business opportunities with asbestos-free products
ILO technical cooperation to eliminate ARD

Promotion of the ratification of Asbestos Convention 162 and implementation of ILO Asbestos Resolution

Technical assistance to countries in establishing NPEADs jointly with WHO

Inter-agency cooperation (ILO, WHO, SRC-SBC-UNEP, ISSA, ICOH) for global action to eliminate ARD

- Inter-agency awareness-raising workshop on sound management of industrial carcinogens, with special emphasis on asbestos, for the Asia-Pacific Region, Bangkok, 2010; planned for 2014 in Indonesia

Strengthening national systems of health surveillance for ARD, training physicians to use the ILO Classification of Radiographs of Pneumoconioses (Brazil, Chile, India, Indonesia, Malaysia, Peru, Thailand, Vietnam)

Development of national certification schemes for chest x-ray reading with AIR Pneumo Project, Japan

Sharing knowledge on prevention of ARD, asbestos substitutes and transfer of safe technologies

Global action and support of regional initiatives to eliminate ARD, e.g. Asian Asbestos Initiative (AAI)
Up to 3000 ships need to be scrapped annually (Bangladesh, China, India, Pakistan, Turkey)

Average-size ship contains 5-7 tons of asbestos which is collected and “re-used”

ILO-IMO-BC(UNEP) cooperation – guidelines produced by all three agencies

Technical cooperation and training activities

The IMO Convention on Environmentally Sound Ship Recycling adopted in 2009 with ILO contribution; guidelines are currently being developed to support the implementation of the Convention
Conclusions

- The use of asbestos in the developing world is still high; it even continues to grow in some countries.
- In many developing countries, preventive capacities, legal systems, and compensation mechanisms are inadequate to respond effectively to the forthcoming peak of ARD.
- The continuous use of asbestos represents serious health risks to individuals and is damaging to the economies and societies.

The elimination of conditions inevitably leading to ARD does not mean only the elimination of exposure conditions, but also requires the changes of the economic, commercial, legal, social, and political conditions that permit persistence of the working conditions leading to these diseases.

UN specialized agencies, workers’ organizations, non-governmental organizations, and civil society should persevere in their efforts to eliminate ARD globally.
Thank You!

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