

Construction Safety and Health:

Origin in Europe, Advancement in North America,
Adoption in India

Knut Ringen, DrPH, MHA, MPH

Senior Science Advisor

CPWR: The Center for Construction Research and Training

Anders Englund, MD

Swedish Work Environment Authority (Ret)

Krishna N. Sen

Larsen and Tubro, India

**Join the ICOH
Scientific Committee on
Construction**

www.ohici.nl

Key Questions

- Why have societies allowed the high risks in construction?
- Why has there been so little interest in COSH in the occupational safety and health community?
- What have we been doing about it?

Outline

1. Setting the Context
2. Why Construction is Different (from 1100)
3. Origin of Modern COSH (from 1780)
4. Origin of Science-based COSH (from 1968)
5. Advancement of COSH in North America
6. Recent Developments in India
7. Concluding Comments

PART 1: SETTING THE CONTEXT

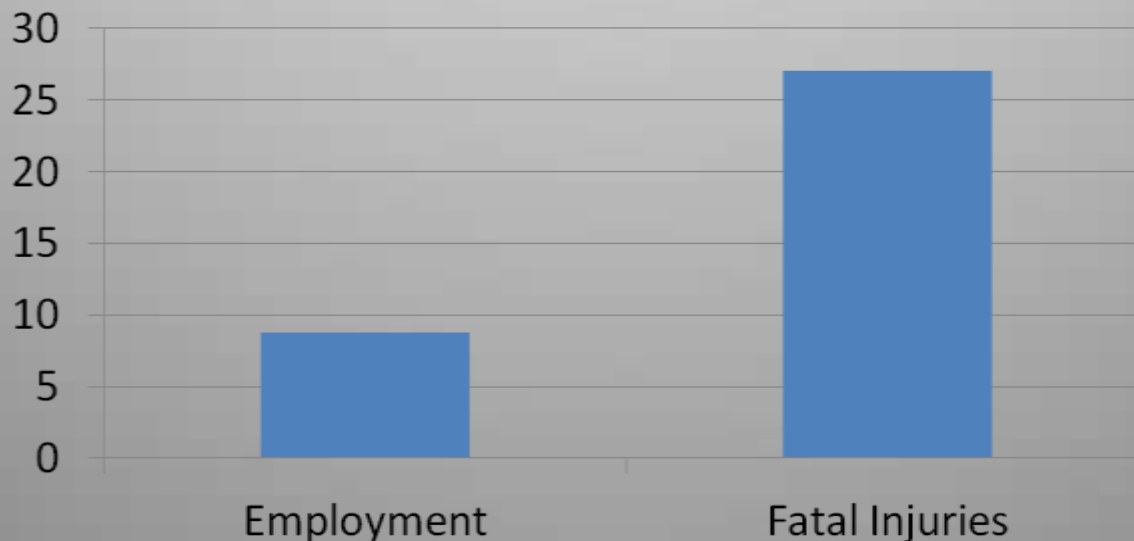
Why Construction is Important

- To GNP: 7-10%
- To Employment: 7-12%
- To Safety and Health: 20-30% of all fatalities, injuries and probably illnesses

Why Construction is Important

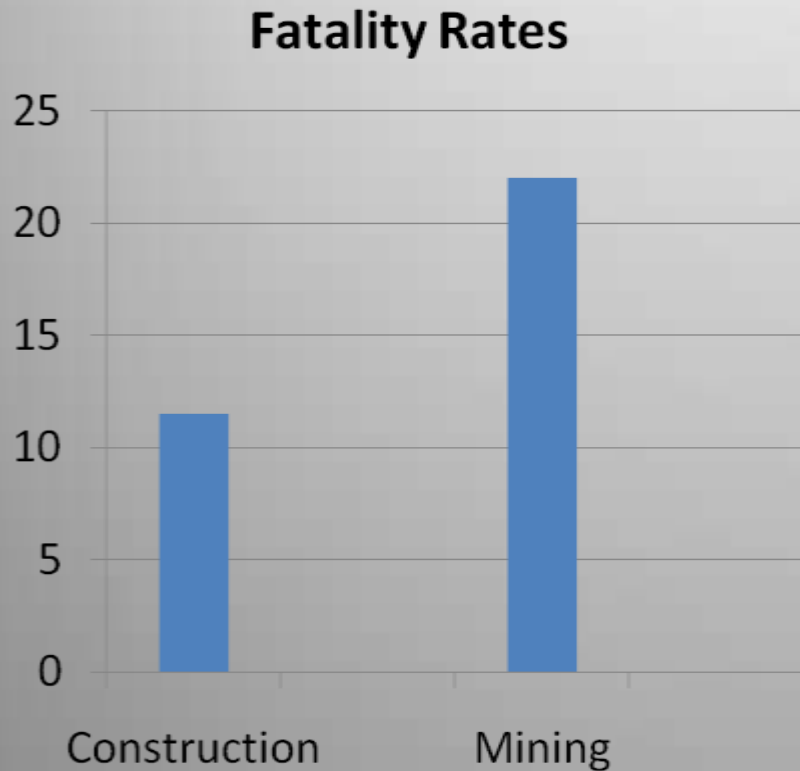
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Proportion of All, France, 2009



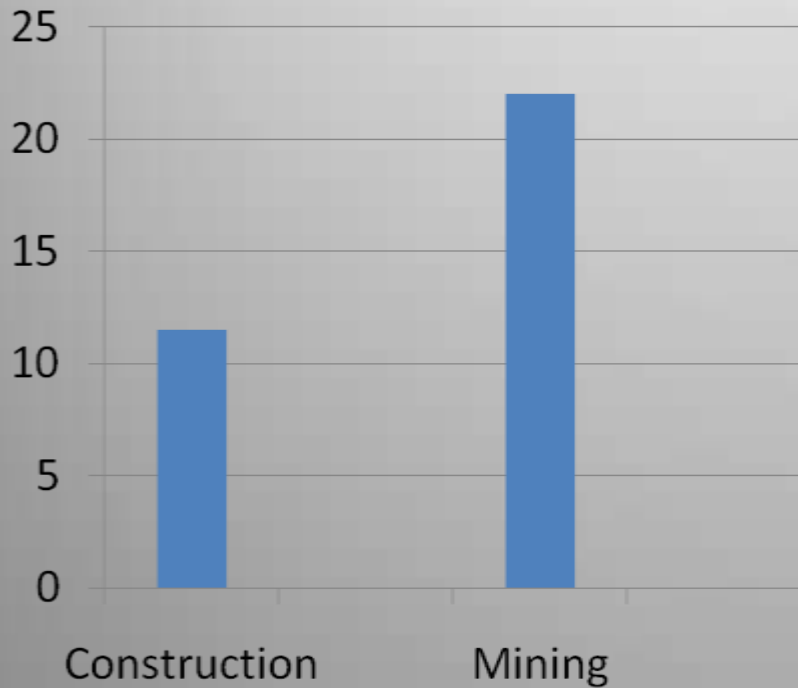
Thanks to OPPBTP

Relative and Absolute Risk: Construction and Mining, USA, 2007

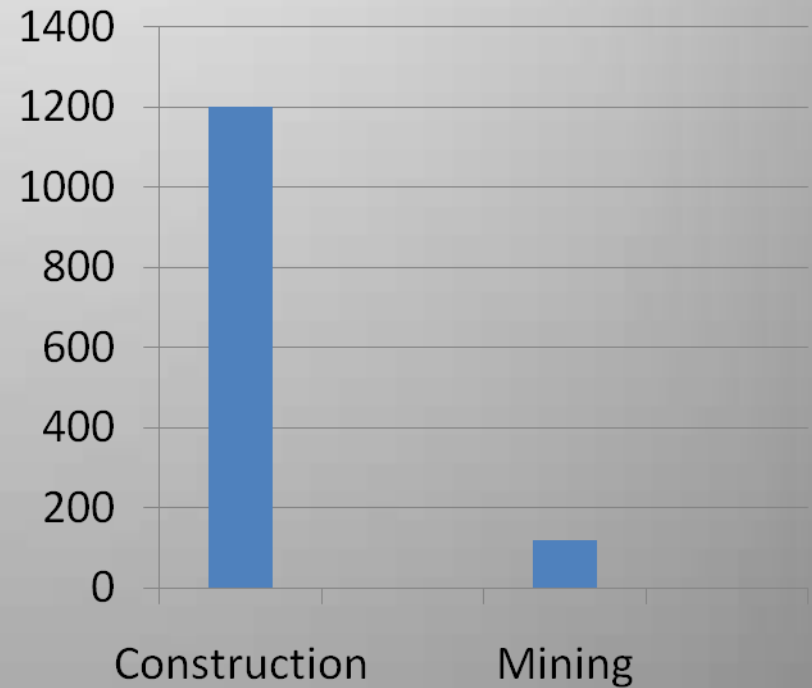


Relative and Absolute Risk: Construction and Mining, USA, 2007

Fatality Rates



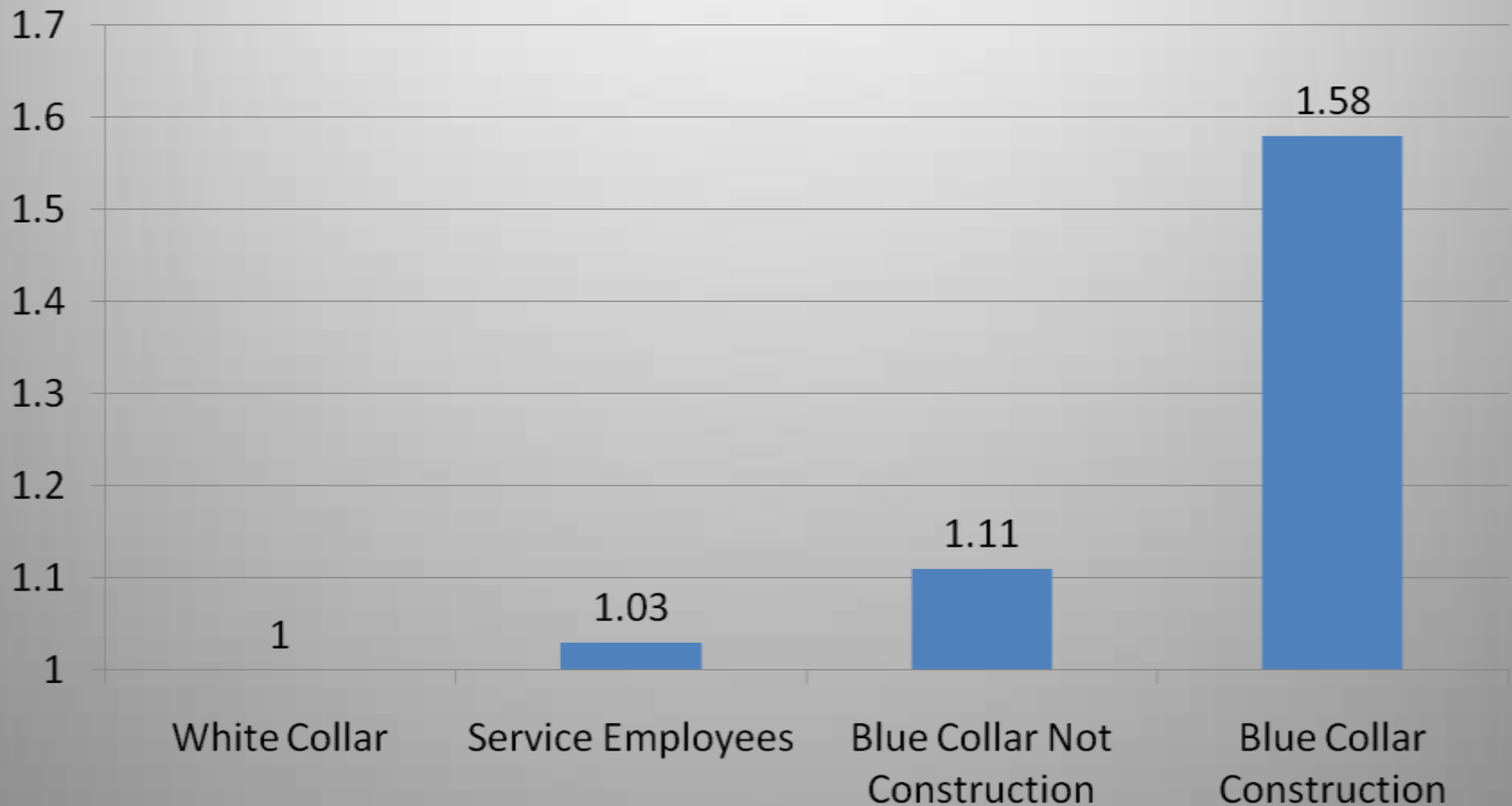
Number of Fatalities



Probabilities of Occupational Death, Injury or Illness over 40-year Working Life, Construction Industry, USA

Condition	Probability
Traumatic Death	0.5%
One or More Serious Injuries	80%
Hearing Loss	70%
X-ray Evidence of Lung Damage	20%
COPD	30%

Probability of Chronic Back Pain, US



Why Should We Care

In the USA

In the 40+ years
that I have worked in safety and health

Over **50,000** construction workers

have been killed on the job

PART 2: WHY CONSTRUCTION IS DIFFERENT

Grand Place Brussels



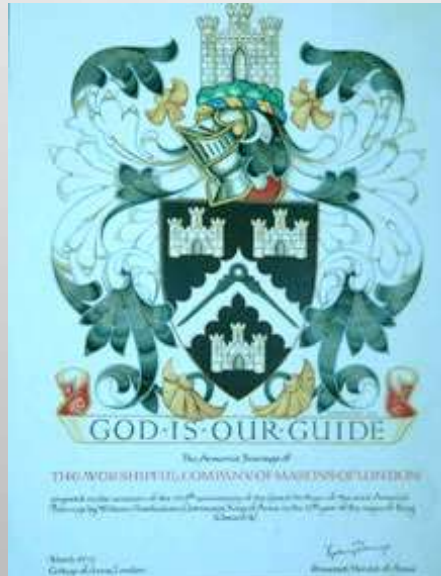
The Guilds

- **Ancient trades**
 - Pile drivers
 - Carpenters & joiners
 - Brick & stone masons
 - Blacksmiths and forgers
 - Plumbers
 - Teamsters
 - Roofers
 - Tile setters
 - Lathers and plasterers
 - Painters
 - Glaciers

London Guilds



Joiners & Ceilers, 1253



Stonemasons, 1356



Plumbers, 1365



Blacksmiths, 1421



Washington National Cathedral, Construction Period: 1907-1990



Stonecarvers Guild, USA, 2011



Today's Trades

- **Ancient trades**

- Pile drivers
- Carpenters & joiners
- Brick & stone masons
- Blacksmiths and forgers
- Plumbers
- Teamsters
- Roofers
- Tile setters
- Lathers and plasterers
- Painters
- Glaciers

- **Modern trades**

- Sheet metal workers
- Insulators
- Boilermakers
- Pipe and sprinkler fitters
- Electricians
- Machinists
- Operating Engineers
- Millwrights

**INTERNATIONAL
Brotherhood of Electrical
WORKERS.**

TO WHOM IT MAY CONCERN.

GREETING: This Charter, issued by authority of International Brotherhood of Electrical Workers, does grant to the following persons:

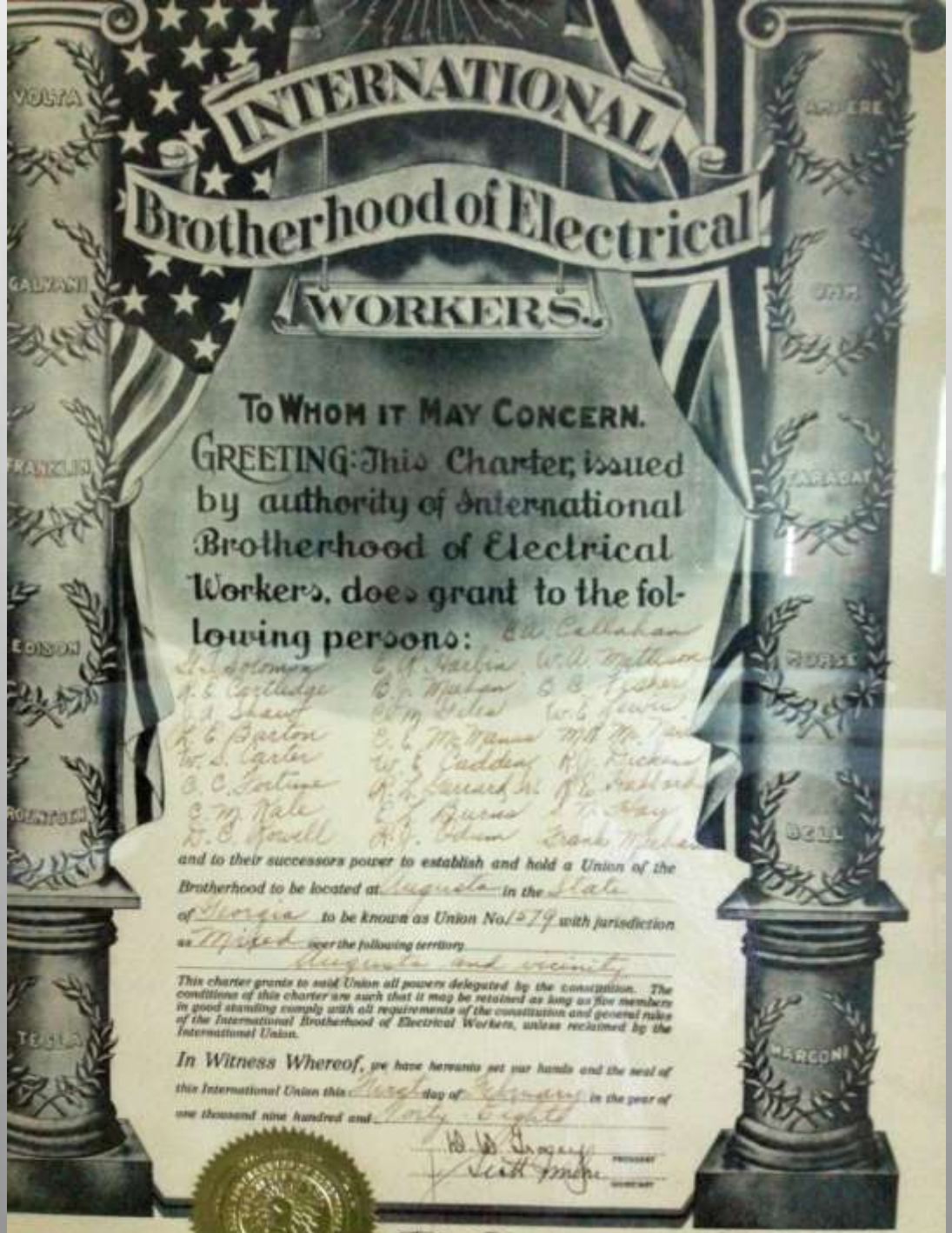
- | | | |
|------------------------|----------------------|-----------------------|
| <i>H. Solomon</i> | <i>C. A. Harkin</i> | <i>W. D. Matheson</i> |
| <i>J. E. Cortledge</i> | <i>C. P. Whelan</i> | <i>S. B. Fisher</i> |
| <i>J. A. Shaw</i> | <i>C. M. White</i> | <i>W. C. Lewis</i> |
| <i>J. C. Barton</i> | <i>E. L. McManis</i> | <i>M. B. Tain</i> |
| <i>W. S. Carter</i> | <i>W. E. Cadden</i> | <i>R. J. Dickson</i> |
| <i>C. C. Fortune</i> | <i>H. J. Seward</i> | <i>H. E. Ashford</i> |
| <i>C. M. Hale</i> | <i>E. J. Burns</i> | <i>A. T. May</i> |
| <i>D. C. Howell</i> | <i>H. J. Odum</i> | <i>Frank Wilson</i> |

and to their successors power to establish and hold a Union of the Brotherhood to be located at Augusta in the State of Georgia to be known as Union No. 1079 with jurisdiction as limited over the following territory: Augusta and vicinity

This charter grants to said Union all powers delegated by the constitution. The conditions of this charter are such that it may be retained as long as the members in good standing comply with all requirements of the constitution and general rules of the International Brotherhood of Electrical Workers, unless recinded by the International Union.

In Witness Whereof, we have herewith set our hands and the seal of this International Union this fourth day of February in the year of one thousand nine hundred and forty eight

H. D. [Signature] PRESIDENT
[Signature] SECRETARY



Why Construction is Different

WORKSITE:

- Non permanent
- Improvised
- Episodic
- Changing location
- Changing hazards as project proceeds
- Climate as big risk
- Multi-employer

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EMPLOYMENT:

- Short term, non permanent
- No work, no pay
- On-the-job training
 - Apprenticeship
 - Task-specific
- Multi-trade

**PART 4: ORIGIN OF MODERN
CONSTRUCTION SAFETY IN EUROPE**

History of Modern COSH

- 1884: Germany: Bauberufsgenossenschaften
 - Early emphasis on rehabilitation and compensation
- 1911 France: Caisse Maladie de Travail
 - Early emphasis on medical fitness for work
- 1934: International Federation of Building and Wood Workers
- 1947: France: First dedicated construction safety and health organization
- 1968: International Section for the Prevention of Occupational Risks in the Construction Industry of ISSA
- **1983: ICOH Scientific Committee**
- 1988: ILO Convention 167
- 1992: EU Directive on Mobile Worksites
- 2004: Bilbao Declaration
- 2009: ISSA Declaration of Brussels

Two Main Drivers in COSH

Safety derives from large disasters

- Tunneling
- Bridges
- Tall structures
- Petrochemical facilities

Two Main Drivers in COSH

Safety derives from large disasters

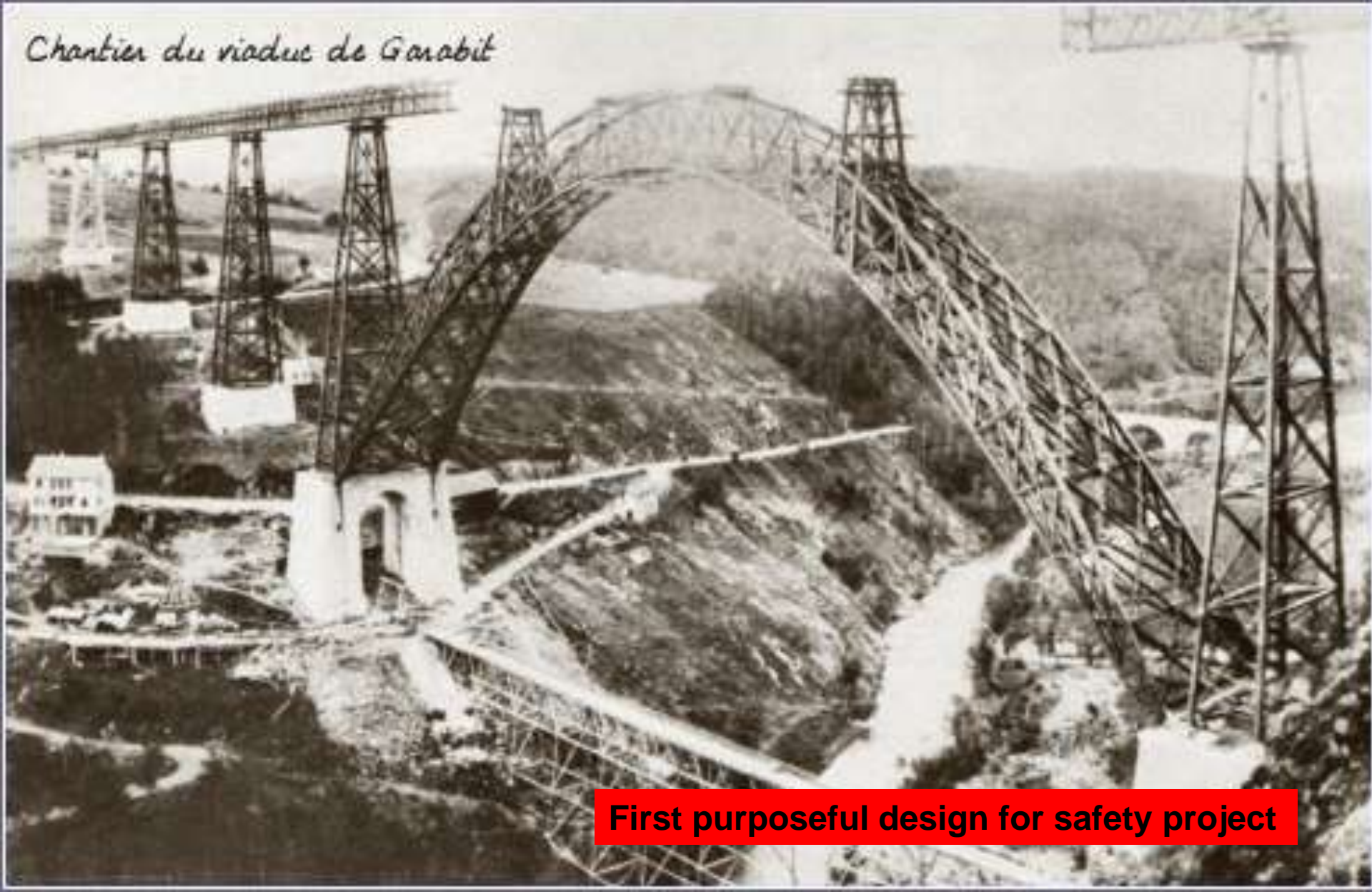
- Tunneling
- Bridges
- Tall structures
- Petrochemical facilities

Health derives from compensation and parallels development of Social Medicine

- Germany, 1884
- France, 1910

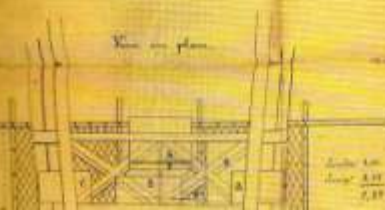
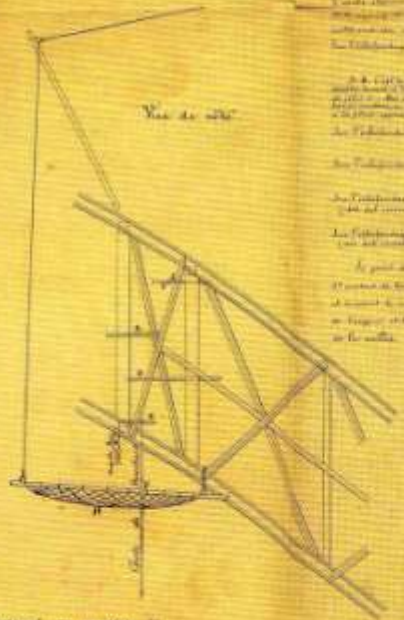
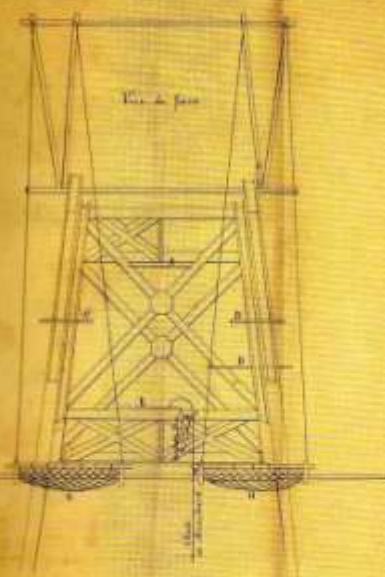
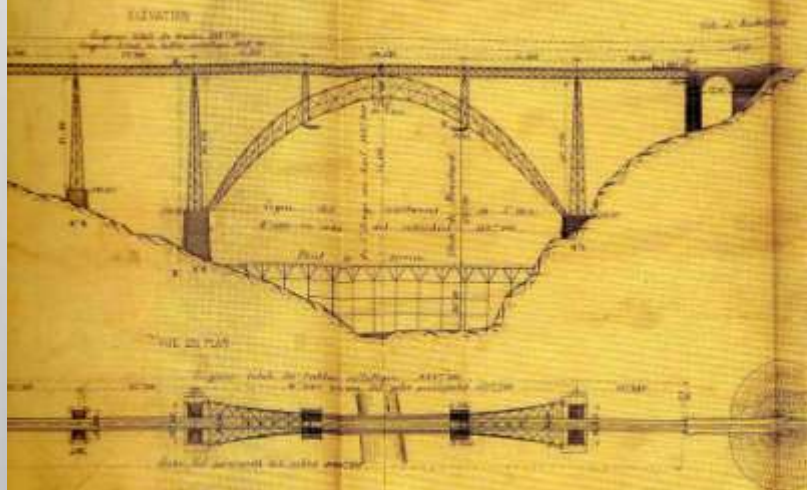
**Precedent-setting Projects:
Viaduc de Garabit, France, 1880-84**

Chantier du viaduc de Garabit



First purposeful design for safety project

Viaduc de Garabit



Detail des maçonneries
à l'échelle de 1/1000

Les piles ont une épaisseur de 12 mètres à la base et se rétrécissent à 8 mètres au sommet. Elles sont surmontées d'une tour de 12 mètres de hauteur. La longueur totale du viaduc est de 1200 mètres.

Appel Brevet de Brevet

État des lieux le 7 Mars 1880.

Légende explicative

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Le plan est dressé par Gustave Eiffel et Bruno Bisson le 7 Mars 1880.

Drawing by Gustav Eiffel

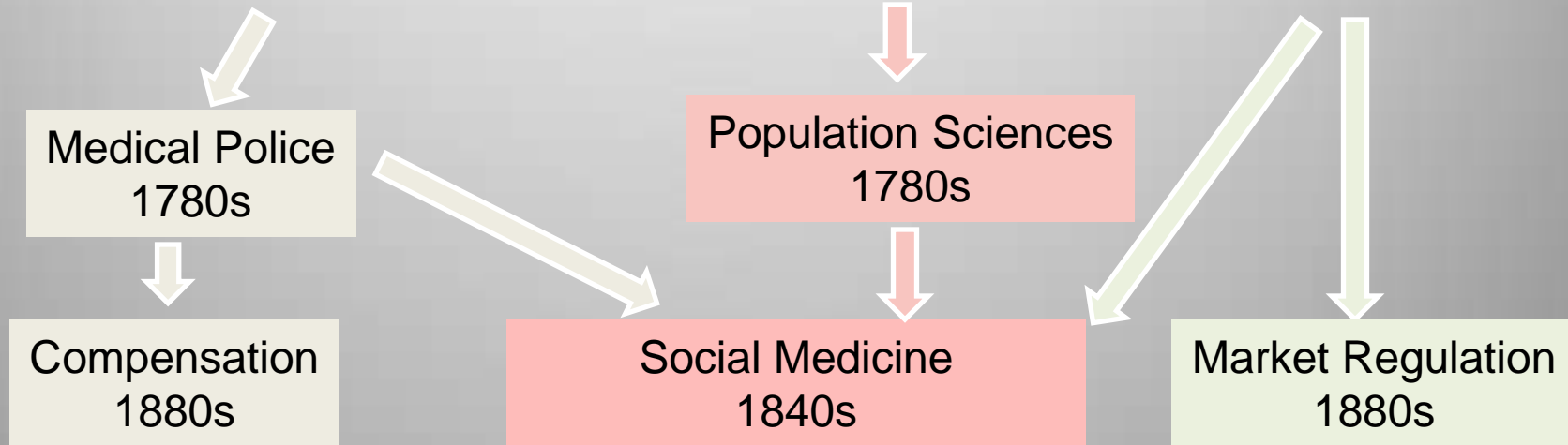
Thanks to Bruno Bisson, CRAMIF

Precedents of Modern Systems

Movement	Anti-revolutionaries	Revolutionaries	Liberals
Origin	Germany	France	England
Aim	Stability	Equality	Liberty

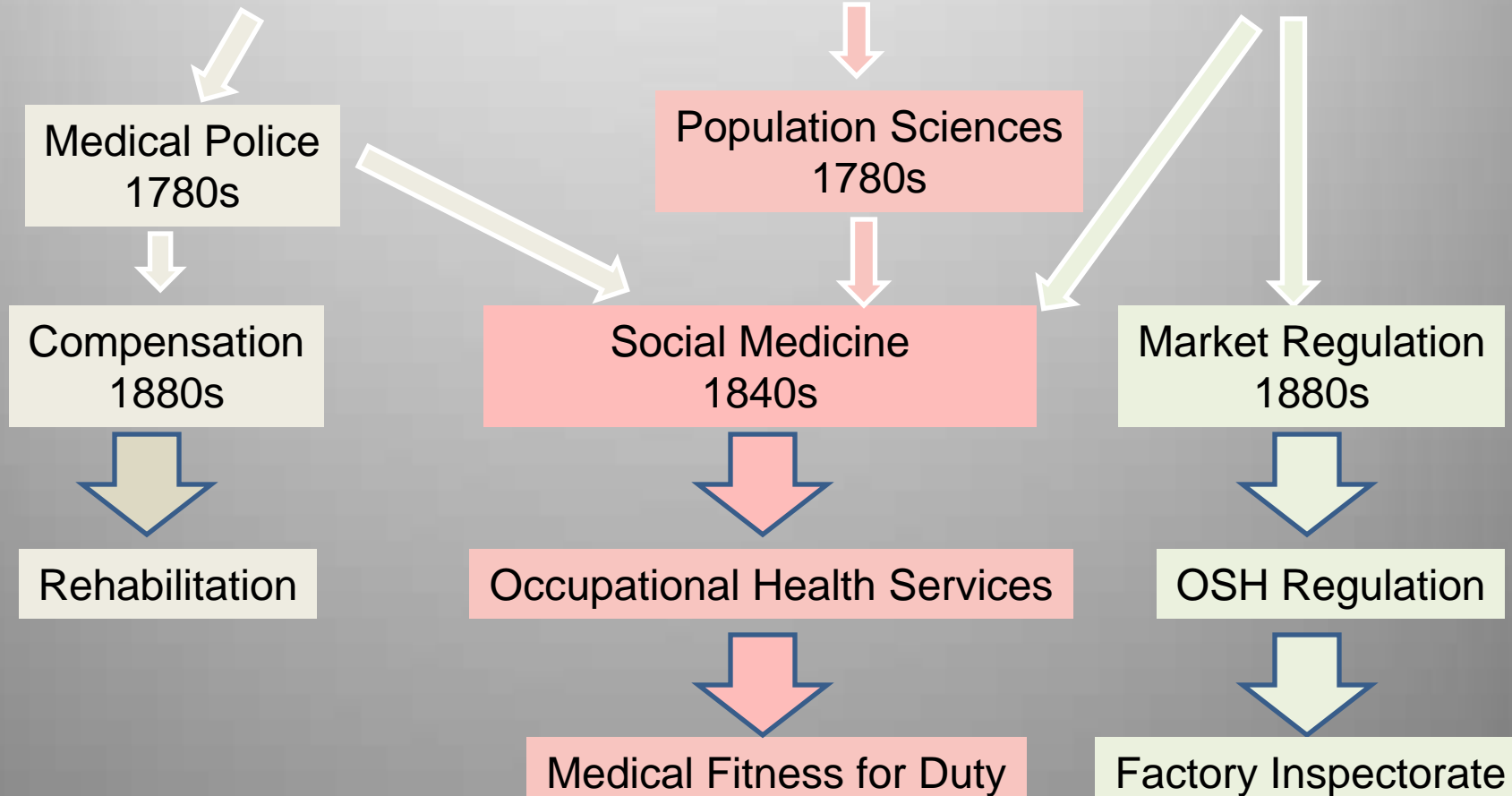
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Framework for Today's Systems

Philisophy	"Bismarckian"	"Beveridgean"
Countries	Continental: DE, FR, NL BE AU, CH	Northern/Southern: UK, NO, SE, DK, FI, IT, ES, PT
Approach	Insurance-based Employers & Employees Public-private mix	Tax-based Government driven Public provision
OSH Regulation	Statutory	Statutory
OSH Enforcement	Public and Private	Public
OSH Services	Paritarian	Private
Compensation	Statutory/Paritarian	Statutory/Public or Private

Thanks to Francesco Briganti
European Association of Paritarian Institutions
of Social Protection

“Bismarckian” Influence: Evolution of Safety and Health Organizations

Year	Country	Organisation Name	Structure	Main Functions
1884	Germany	BG-Bau	Statutory Bi-partite Funded by employer fees	Compensation, Inspection, Consultation Technical support, Information, Health exams, Medical care, Rehabilitation Research
1911-47	France	Tri-part • Compensation • Prevention • Medical evaluation	Statutory Bi-Partite Funded by government set rates	Health exams, Compensation, Consultation Information
1972	Japan	Japan Construction Safety and Health Association	Statutory Employer organization Funded by government and membership fees	Consultation, Information, Training Research
1976	Netherlands	Arbouw Foundation	Bi-partite agreement Funded by employer fees	Health exams, Consultation, Information Research
1978	Canada (Ontario)	Construction Safety Association of Ontario	Private Bi-partite organisation Funded by employer fees and fee-for-service	Consultation, Information, Training Research
1980	Belgium	CNAC/NAVB	Bi-partite agreement Funded by employer fees	Consultation, Information, Training
1990	US	Center for Construction Research and Training (CPWR)	Private union organization Funded by government grants	Consultation, Information Training, Research

Example BG BAU, Germany, 2008

Functions	Percent of Budget
Compensation for wage loss	55%
Rehabilitation	29%
Prevention	8%
Other (admin, legal, etc)	8%

Thanks to Bernd Merz, BG BAU

OPPBT, France

1947 : Risk prevention and regulatory control.

1985 : No more control actions.

- **Focus on improving health and safety voluntarily**
- **Training, technical support, information, research**

2007 : Mission extended adoption of EU mandates

“Beveridgean” Influence

Legislative Chronology England

- 1926: Building regulations [for sites with mechanical equipment]
- 1931: First crane regulations
- 1948: Building (Safety Health and Welfare) Regulations
- 1961 Factories Act, Section 127 [statutory authority for COSH]
 - 1961: Construction (General Provisions) Regulations
 - 1961: Construction (Lifting Operations) Regulations
 - 1966: Construction (Working Place) Regulations
 - 1966: Construction (Health and Welfare) Regulations
- 1972: Health and Safety at Work Act
 - Keeps much of section 127 regulations in place
- Post 1992: Adaption to EU Requirements
 - 1992: “Six Pack” Rules [COSH Mgt; Manual Handling; PPE; Equipment; Display Screens; Health, Safety and Welfare]
 - 1994: Construction (Design and Management) Regulations

Precedent-setting Projects

North Sea, 1980s

Alexander L. Kielland Rig, Norway, 1980

- 123/212 workers killed



Precedent-setting Projects

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Piper Alpha Rig, Britain, 1988

- 167/228 workers killed

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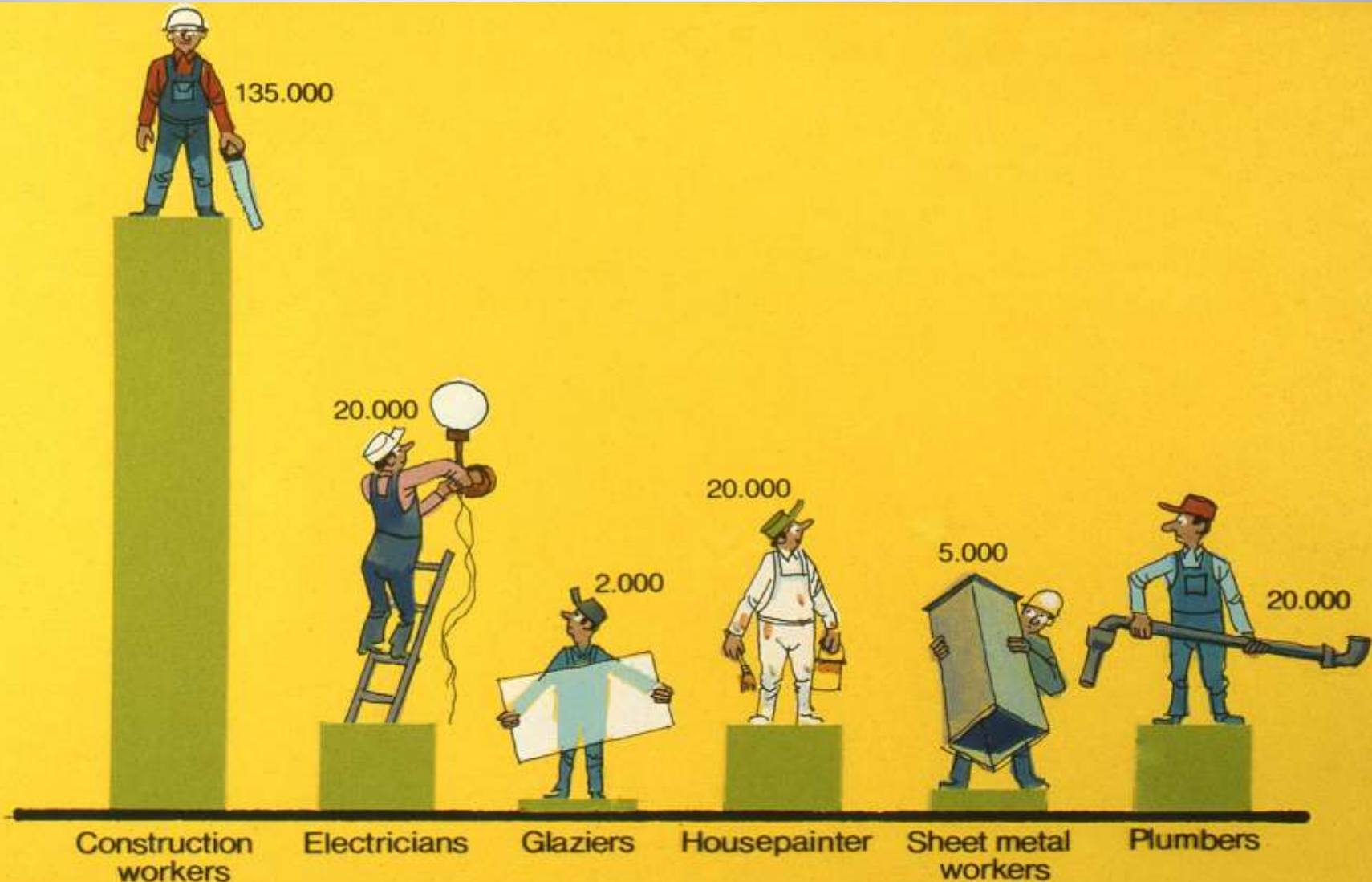
Led to systematic thinking about safety culture

PART 4. ORIGIN OF SCIENCE-BASED COSH

**BYGGHÄLSAN, THE SWEDISH CONSTRUCTION
INDUSTRY'S ORGANIZATION FOR WORKING ENVIRONMENT,
SAFETY AND HEALTH, 1968-1992**

Thanks to Anders Englund and
Bengt Järvholm

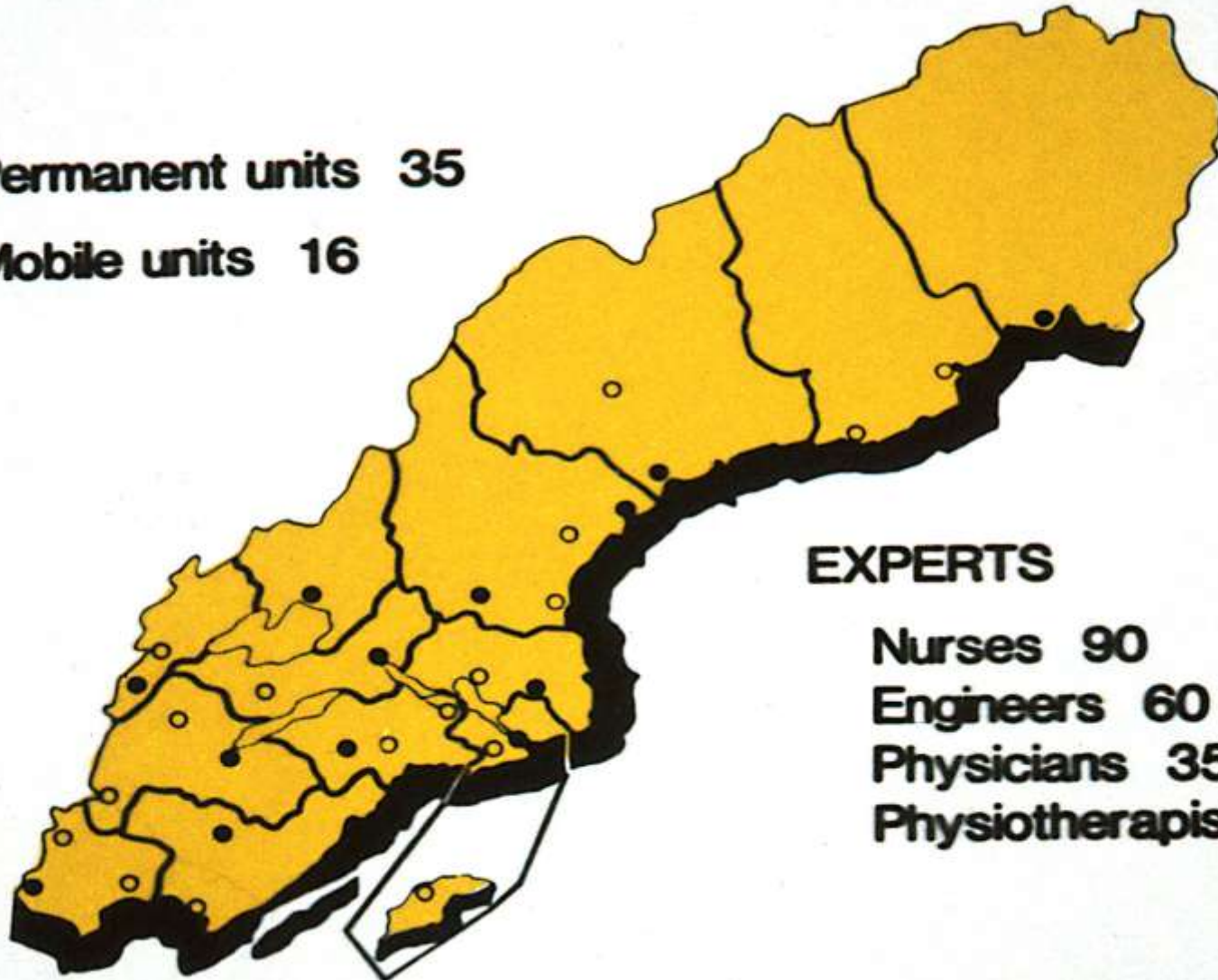
Swedish Construction Industry



Bygghälsan Overview

Permanent units 35

Mobile units 16



EXPERTS

Nurses 90

Engineers 60

Physicians 35

Physiotherapists 21

Mobile Unit



Areas of Focus

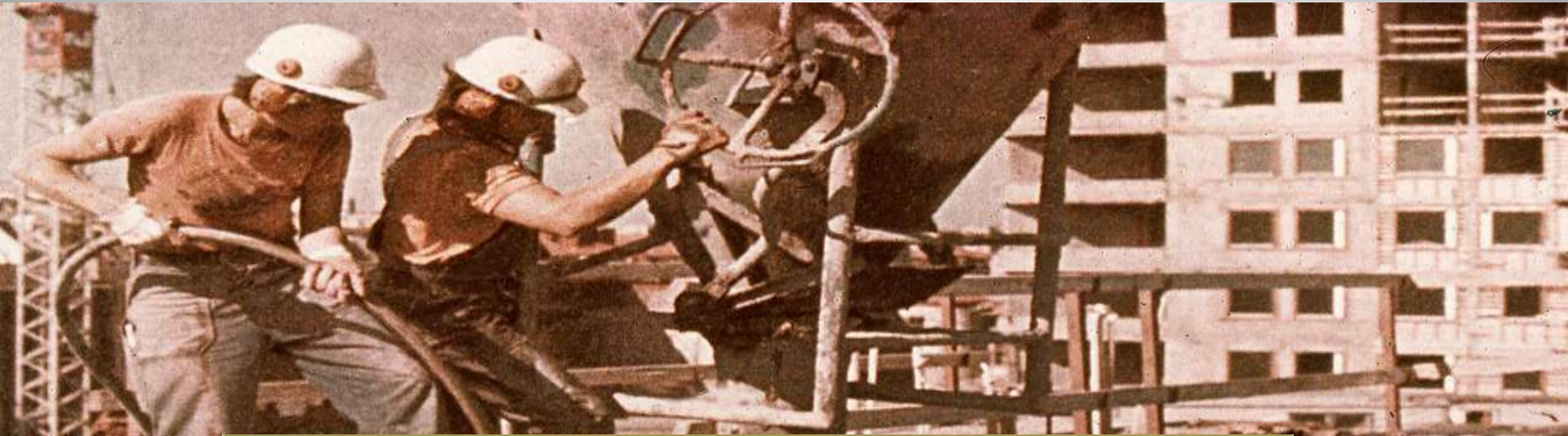
TECHNICAL ACTIVITIES

EDUCATION (safety delegates, supervisors)

INFORMATION (workers, foremen, safety committees)

INVESTIGATION (by law, research)

Characterization of Exposures/Risks



PROFILE OF ENVIRONMENT					
Load factors					
01 Work load (pulse frequency)	1	2	3	4	5
02 Load on upper extremities (hand and wrist, elbow- and shoulder-joints)	1	2	3	4	5
03 Load on back	1	2	3	4	5
04 Load on lower extremities (foot and foot-joint, knee and hip-joint)	1	2	3	4	5
26 Oil mist	1	2	3	4	5
28 Stone material dust	1	2	3	4	5
40 Noise	1	2	3	4	5
41 Vibration and shaking	1	2	3	4	5
45 Wet due to working process	1	2	3	4	5
60 Falling	1	2	3	4	5
61 Stumbling and slipping	1	2	3	4	5
62 Falling objects	1	2	3	4	5
63 Squeezing	1	2	3	4	5
64 Tramping on, thrust by or against object	1	2	3	4	5
67 Fragments and splash	1	2	3	4	5

Characterization of Health Effects

MEDICAL ACTIVITIES

REGULAR SCREENING FOR DISEASE
(mass → selective)

INFORMATION ON RISKS AND ON PREVENTION

**MEDICAL SERVICE, conventional and for
occupational disease**

REHABILITATION

ERGONOMICS

RESEARCH

“Bygghälsan Cohort”

- >389 000 persons, mostly men (\approx 95%)
- Occupational title from the check-ups
- History/Exposure questionnaires 1971-1974, 1988-1992.
- Individual data about height, weight, smoking habits, spirometry, blood pressure, hearing tests, Hb, glucose in urine, blood in urine,
- Unique identification number can be linked to national registers (e.g. mortality, cancer, etc)

Important Results for Construction

- First study on the magnitude of **occupational cancer** led to the first ban on **asbestos**
- First study of the magnitude of **musculo-skeletal** diseases and the systematic application of **ergonomics**
- First systematic evaluation of the hazards of **solvents** and introduction of **water based /low voc paints**
- First systematic evaluation of **noise** and introduction of **hearing conservation**
- First systematic evaluation of **cement dermatitis** led to fortification of cement with **iron sulphate**
- First study of **nutrition** among construction workers
- First **smoking cessation** program for construction workers

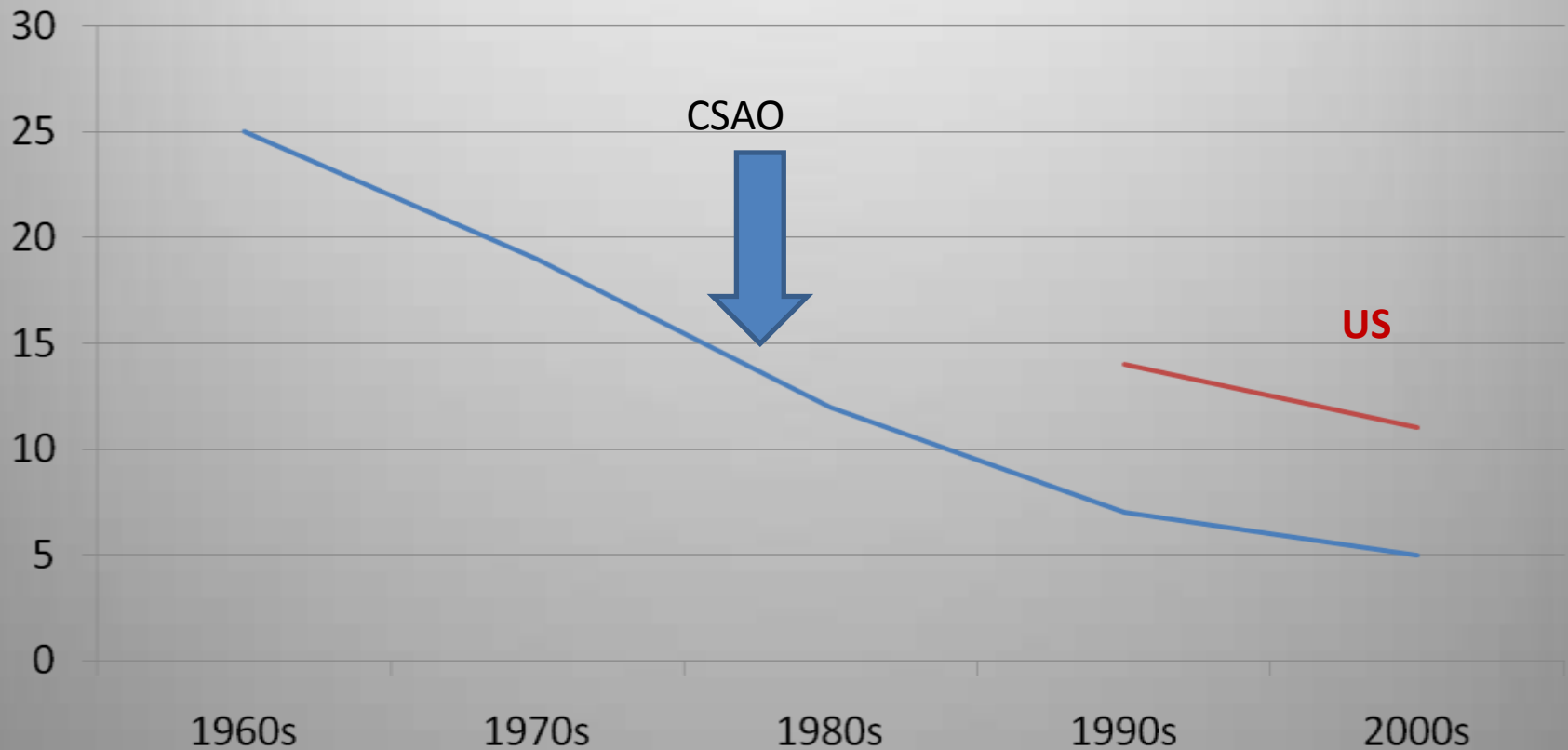
PART 5: DEVELOPMENT OF SCIENCE- BASED COSH IN NORTH AMERICA

OH! CANADA!



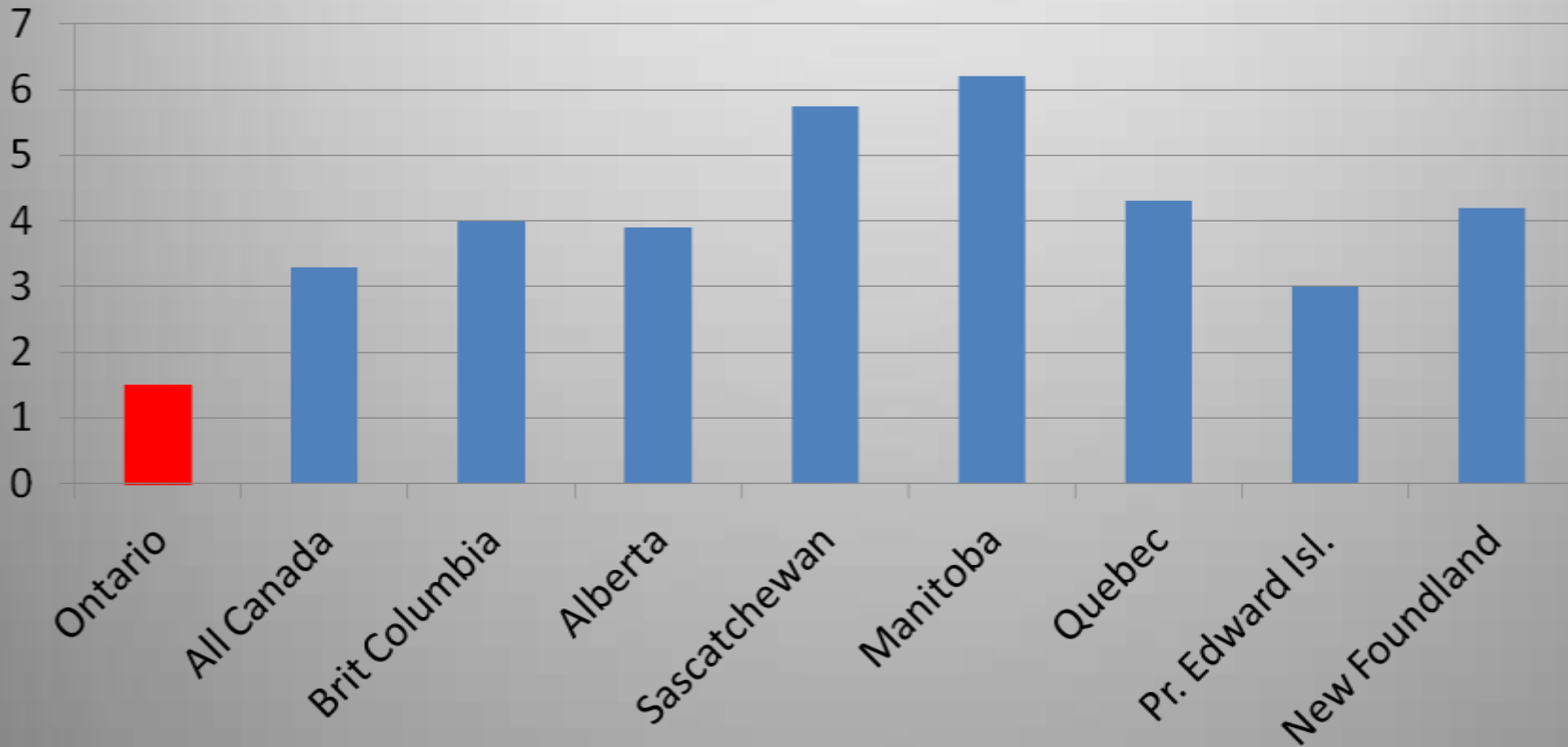
Ontario, Canada

Fatality Rate, 100,000 FTEs/200 Mill hours



Ontario Compared to Rest of Canada, 2000-2006

Lost-time Injury Rates, 100 FTEs/ 200,000 hours



Comparable data not available for New Brunswick and Nova Scotia.
Source: CSAO, Annual Report 2008

Impact of Supervisor Training, Ontario

Year	Sarnia/Lambton		Lost Time Injury Rate	
	Hours Worked	Cumulative No of Supervisors Trained	Sarnia/Lambton	All Ontario
2004	6,443,161	555	1.27	2.56
2005	10,897,814	854	0.88	2.57
2006	11,478,075	891	0.63	2.37
2007	12,671,300	1,103	0.43	2.16
No of Trained Supervisors per 100 FTE Workers in 2007			17.41	6.04

Thanks to Doug McVittie, CSAO

Et Tu, USA?



Chronology of COSH in US

1775: Continental Congress orders construction of naval fleet (first Federal construction procurement order)

1874: Engineer & Surveyor (now Engineering News Record) founded

1902: Maryland passes first State workers compensation law

1911: American Society of Mechanical Engineers (ASME) was founded

1911: American Society of Safety Engineers (ASSE) founded in New York

1912: National Safety Council created in Milwaukee

- Offshoot: Milwaukee Construction Industry Safety Council

1918: American National Standards Institute (ANSI)

- 1931: The A10 Committee on Safety and Health in Construction

1936: Walsh-Healey (Public Contracts) Act

- Federally procured construction must meet s&h standards

1968: Construction Safety Act (Sec. 107 of Contract Work Hours and Safety Standards Act)

- Advisory Committee on Construction Safety and Health

1970: Occupational Safety and Health Act

- 1990: NIOSH construction program created
 - CPWR National Construction Center
 - 1993 and 1995 National Conferences
 - 2000: ELCOSH
- 1994– OSHA Directorate of Construction

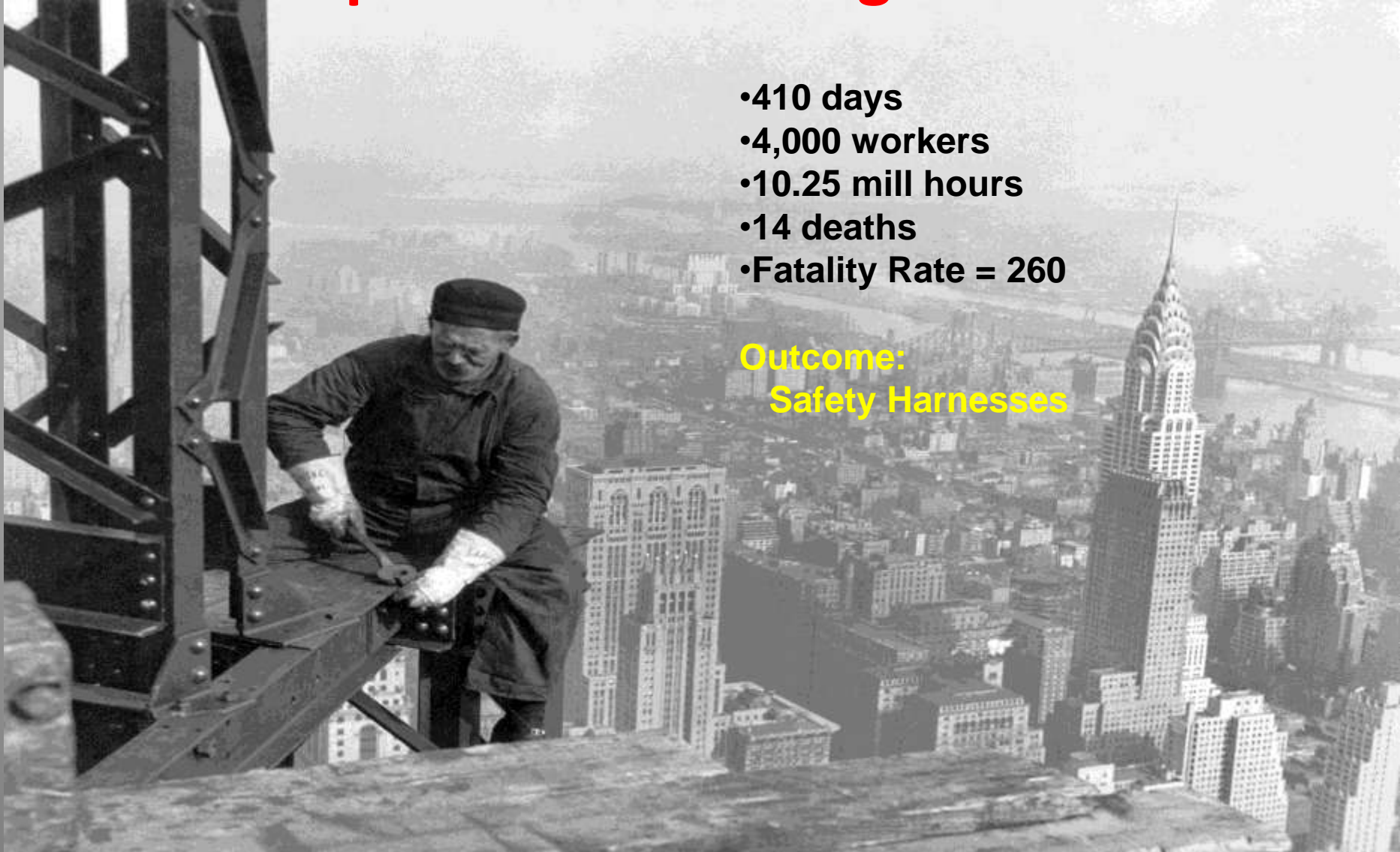
1996: *Design for Safety* first proposed

Precedent-setting Projects in US

Empire State Building 1930-31

- 410 days
- 4,000 workers
- 10.25 mill hours
- 14 deaths
- Fatality Rate = 260

Outcome:
Safety Harnesses



Precedent-setting Projects in US

Golden Gate Bridge, 1933-38



First use of safety nets in US
Outcome:
19 workers saved from certain death
Nets since then in universal use

First Hard Hat



Also:

- **First mandatory tie-off**
- **First mandatory gloves**

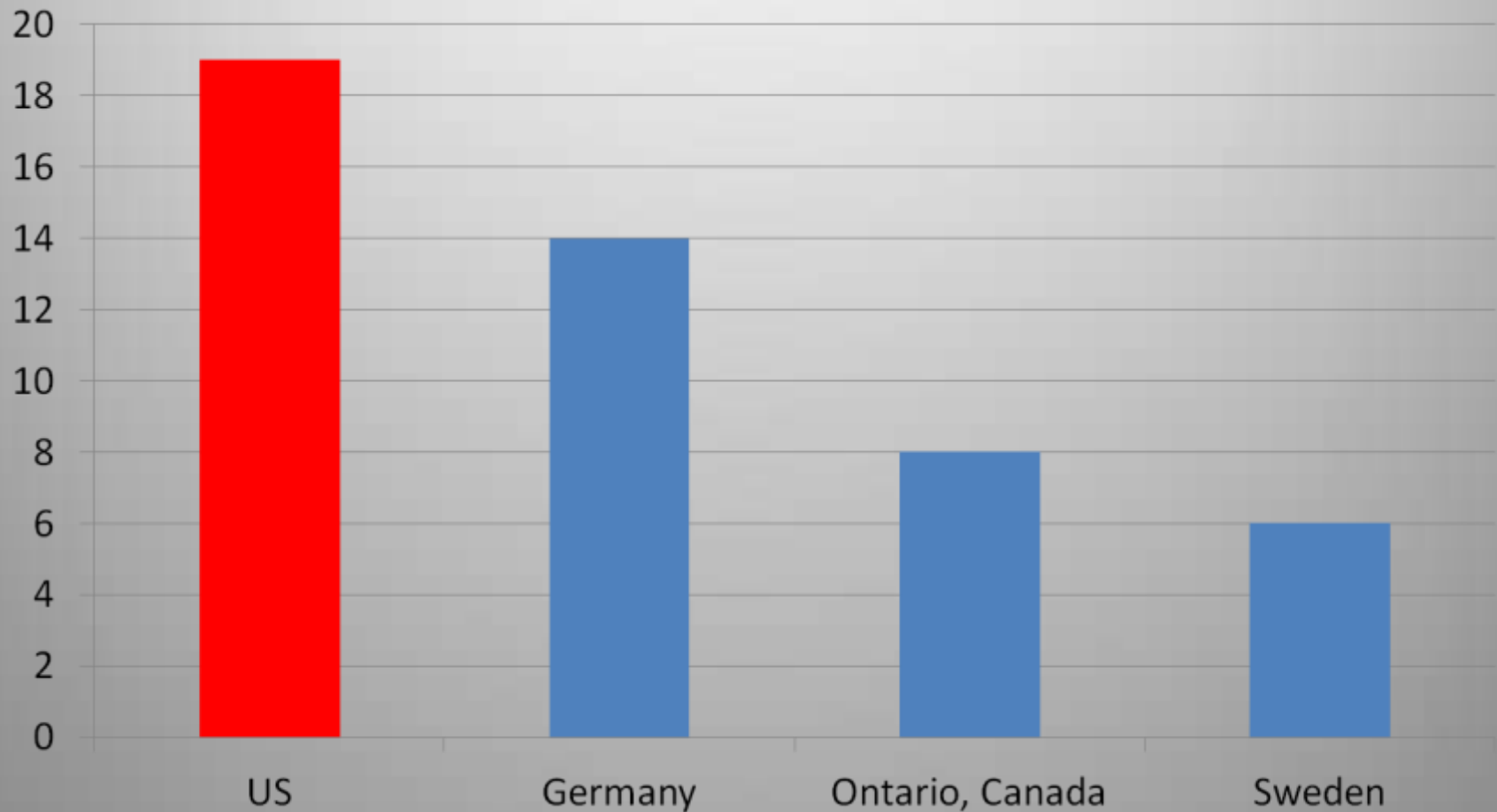
Precedent-setting Projects in US

World Trade Center Towers 1968-72



Led the ban on asbestos
in construction in US

In 1988, US Was Underdeveloped Construction Fatality Rates (1992)



Congressional Inquiry 1988

- Why does NIOSH spend only \$0.08 per construction workers per year while it spends over \$2 per manufacturing workers and more than \$5 per miner?
- What is NIOSH doing about construction?

1988 Agreement

- Unions, large employers and government agree to create systematic program to reduce the risks in construction
- Fundamental premises
 - It had to be *evidence-based*
 - It had to be *practical* and *cost effective*

Step 1 Learn from Advanced Countries

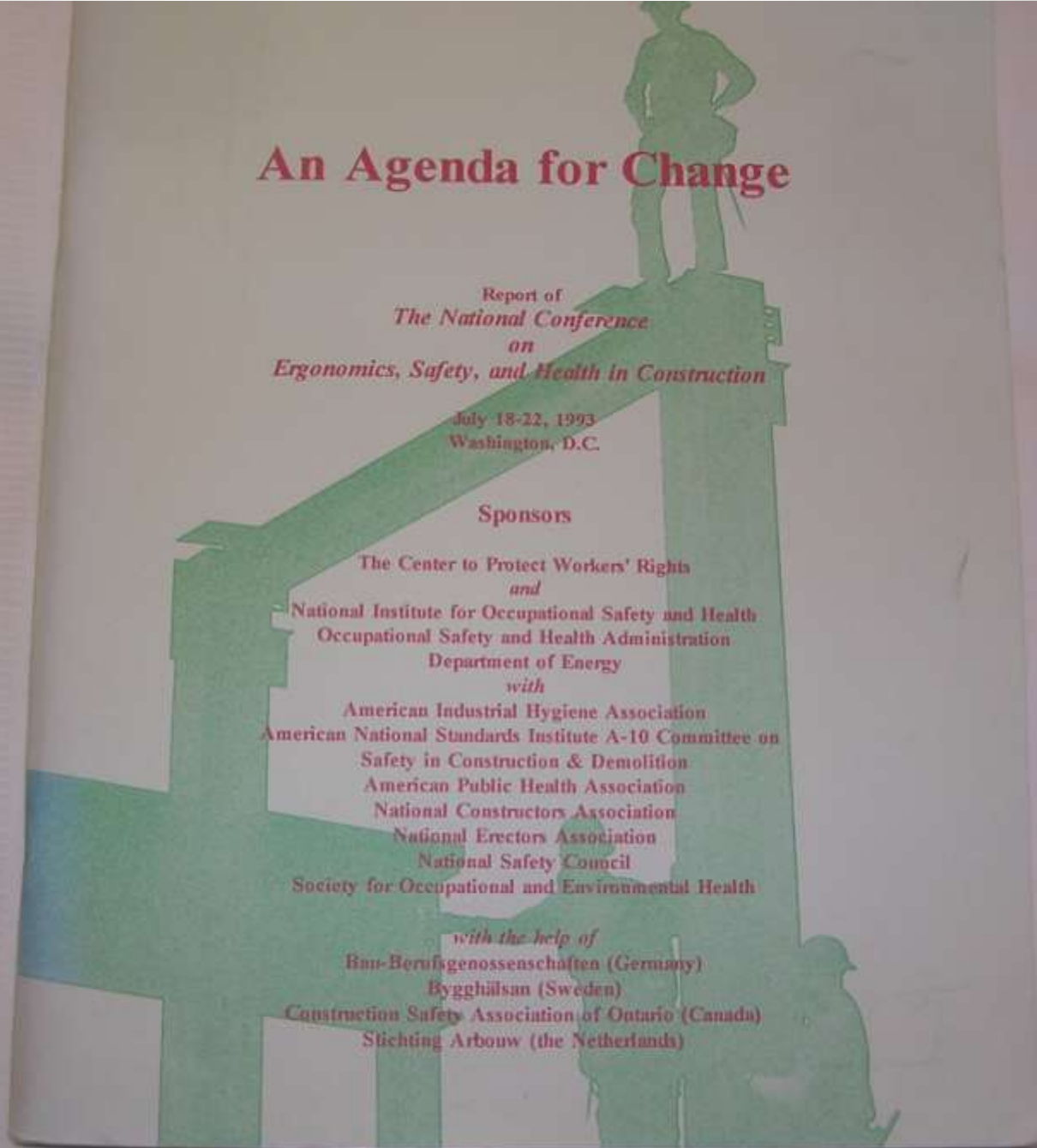
- Asked ISSA construction section for help
- Enlisted assistance from Sweden, Germany, Ontario (Canada), Netherlands and Japan

Step 2: Collect as much Data as Possible

- Union health plan records
- Union death benefit files: PMR studies
- Systematic review of the BLS and other national data

Step 3: Create National Consensus on Agenda for Change

- 1993 National Conference
 - *An Agenda for Change*
- 1994 Regional Conferences: Boston, Atlanta, Cincinnati, Seattle
 - *Advancing the Agenda for Safety and Health*
- 1995 2nd National Conference
 - *Building a Safety Culture*



An Agenda for Change

Report of
*The National Conference
on
Ergonomics, Safety, and Health in Construction*

July 18-22, 1993
Washington, D.C.

Sponsors

The Center to Protect Workers' Rights
and
National Institute for Occupational Safety and Health
Occupational Safety and Health Administration
Department of Energy
with
American Industrial Hygiene Association
American National Standards Institute A-10 Committee on
Safety in Construction & Demolition
American Public Health Association
National Constructors Association
National Erectors Association
National Safety Council
Society for Occupational and Environmental Health

with the help of
Bau-Berufsgenossenschaften (Germany)
Bygghälsan (Sweden)
Construction Safety Association of Ontario (Canada)
Stichting Arbeuw (the Netherlands)

Recommendations from 1993 Conference

- Create national and local coalitions
- Require site-specific safety and health plans
- Get vastly improved data
- Find ways to simplify regulatory process
- Simplify workers compensation procedures
- Promote combining workers comp and health insurance
- Expand joint labor-management programs
- Strengthen international cooperation
- Expand research programs to characterize industry

A photograph of construction workers on a job site. In the foreground, a man in a white t-shirt and blue jeans, wearing a red hard hat and work gloves, is using a large orange and black power tool, possibly a jackhammer or breaker, on a concrete surface. He has a focused expression. In the background, several other workers wearing red and blue hard hats are visible, some working on a structure. The scene is dusty and brightly lit, suggesting an active construction environment.

Building a Safety Culture

Report of the Second National Conference
On Ergonomics, Safety, and Health in Construction

The Center to Protect Workers' Rights
December 1995

Recommendations from 1995 Conference


- Safety culture is a shared responsibility
- Safety culture should apply to all construction
- Benchmarks and performance goals are needed
- Labor inspectorate (OSHA) must remain backbone
- International cooperation is critical
- Safety and health training should be mandatory
- More research is needed on effectiveness of interventions

Step 6: Engage in Systematic Research and Intervention

1993: work with leading contractors and government

- Precertification on public works jobs
- Highway work zone
- Falls from heights
- Electrocutions

1995: Special Emphasis

- T-BEAM  Hot work, lead
- Ergonomics

1995: Demonstrations of negotiated agreements on workers comp

1996: Smart Mark basic OSH Training

1997: Construction Industry Chart Book (now in 4th ed.)

1999: www.elcosh.org

2003: Immigrant workers

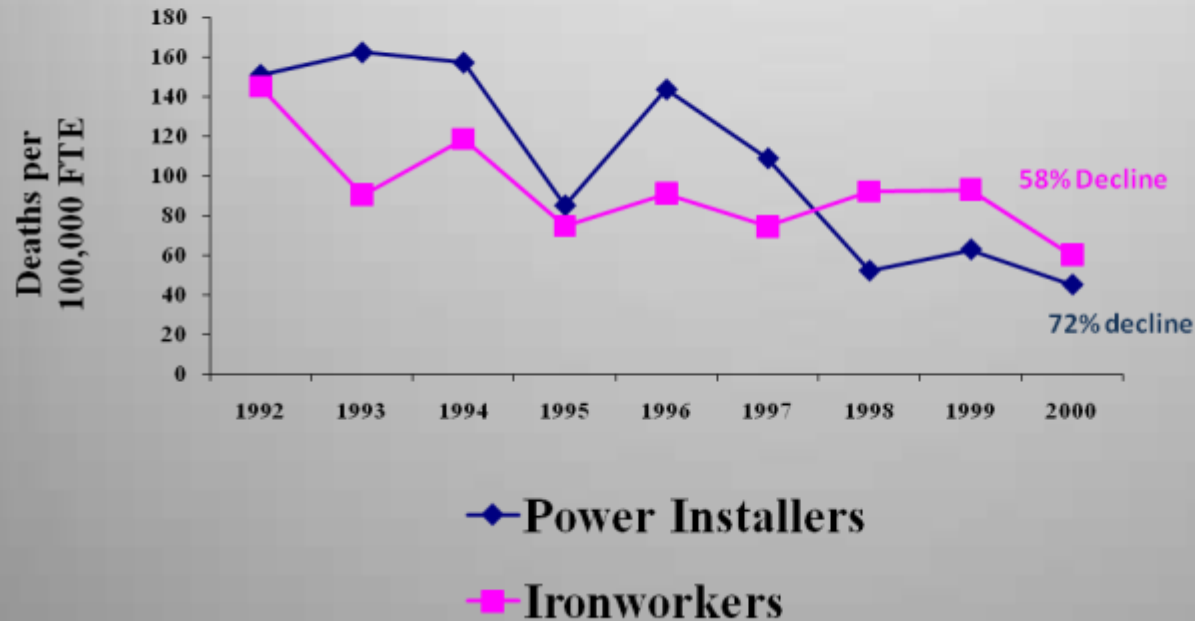
2007: S&H Specifications for “green” construction

2008: www.Constructionsolutions.org

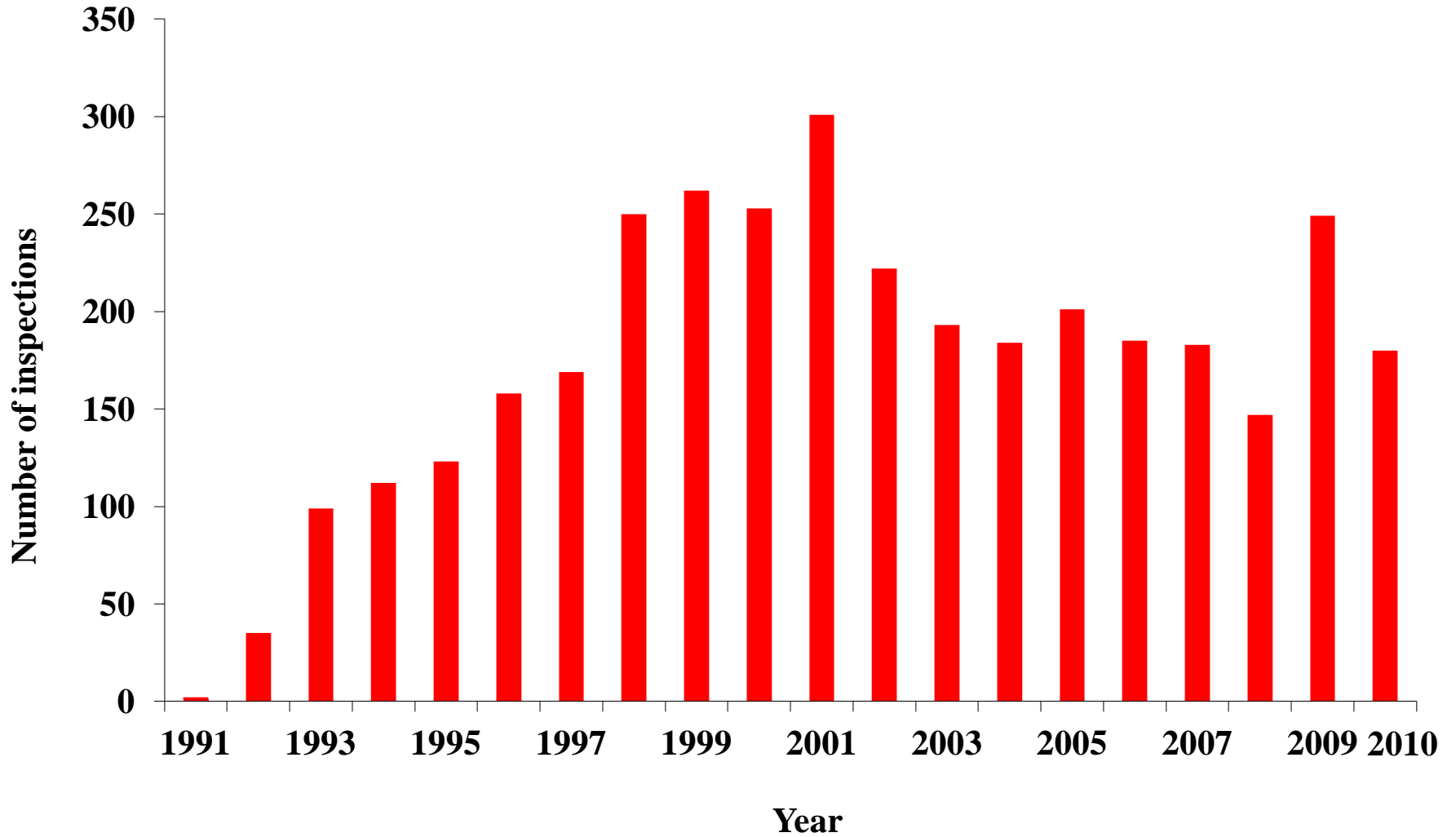
2010: Performance (leading) indicators

Example: US Focused Campaigns

Decline in High Risk Fatality Rates

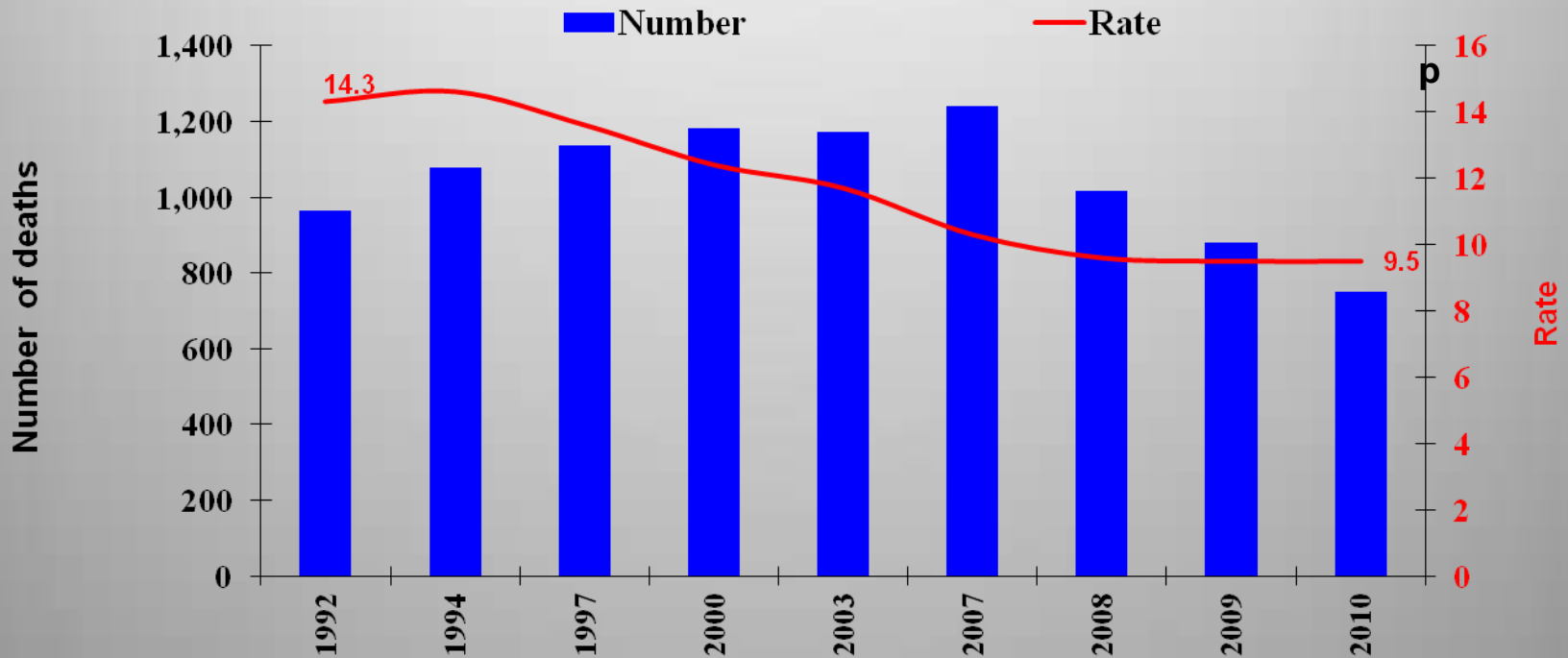


44d. OSHA lead exposure inspections, 1991-2010



Fatal Injuries:

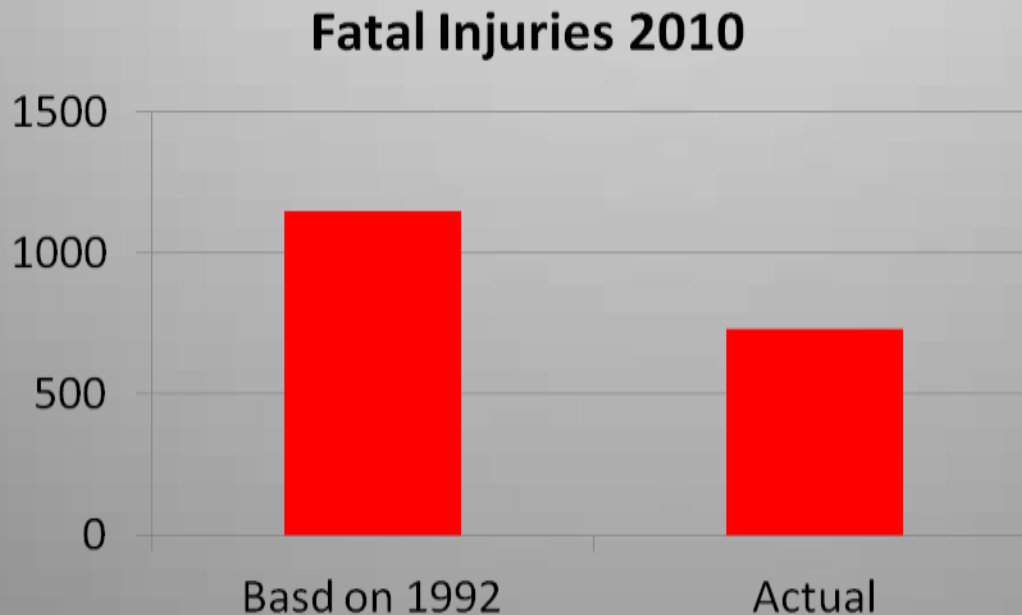
1992-2010 decline in rate = 33.6%



Construction accounted for 8% of workforce, but 22% of work-related deaths in the U.S.

Bottom Line

Had fatality rate stayed where it was in 1992 the US construction industry would today be recording 450 additional deaths per year



Part 6: The State of COSH Policy

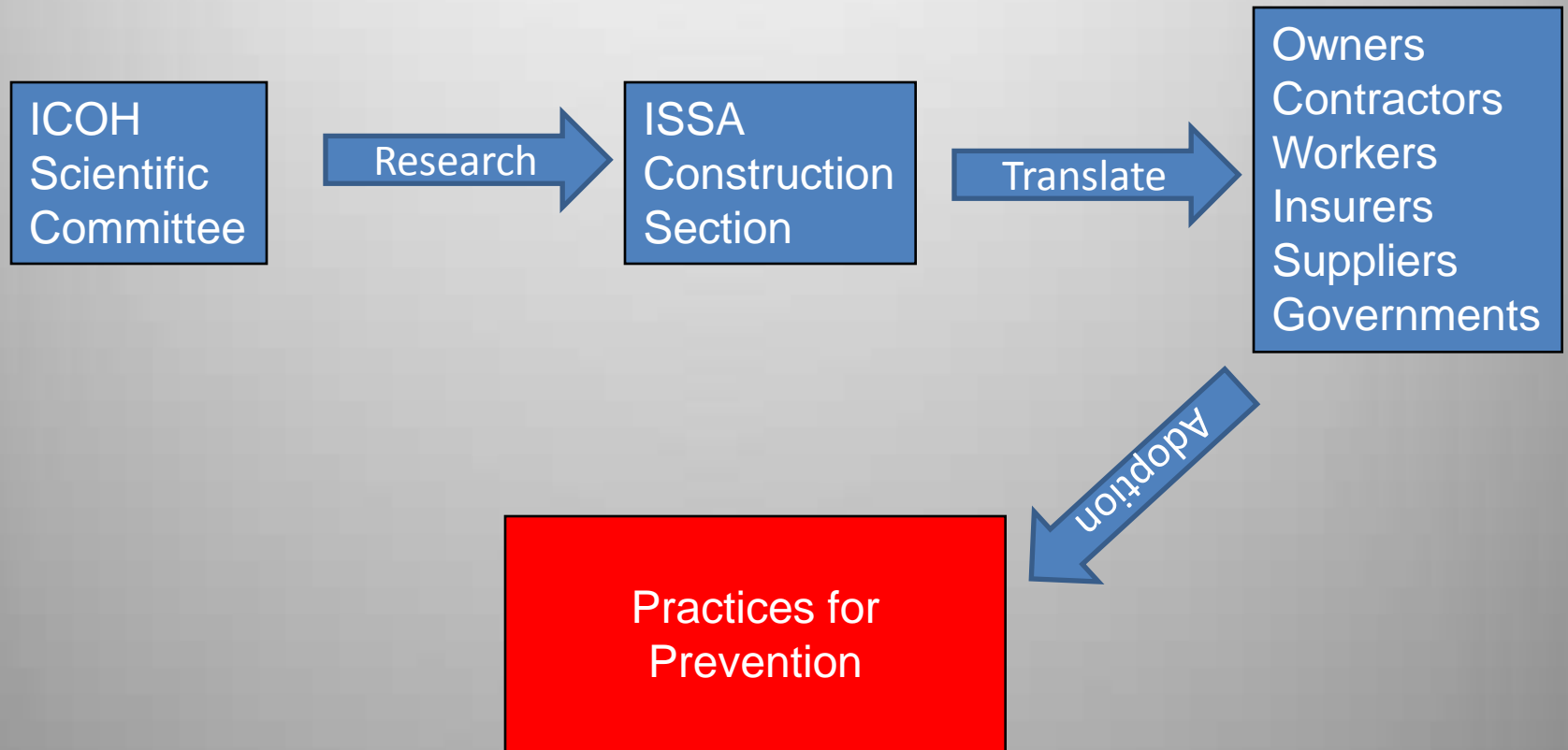
PRECEDENT-SETTING PROJECTS

Olympic Delivery Authority, London



- 35,000 workers
- No fatalities
- Reportable injury rate=0.03/100FTEs
- **A model for owner-controlled safety performance and safety culture**

Research to Practice (R2P)





issa

INTERNATIONAL SOCIAL SECURITY ASSOCIATION
ASSOCIATION INTERNATIONALE DE LA SECURITE SOCIALE
ASOCIACION INTERNACIONAL DE LA SEGURIDAD SOCIAL
INTERNATIONALE VEREINIGUNG FÜR SOZIALE SICHERHEIT

Secrétariat du Comité Construction
17-19, place de l'Argonne
F - 75019 Paris, France

T: +33 1 40 05 38 02
F: +33 1 40 05 38 84
E: construction.issa@cramif.cnams.fr

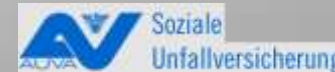
Section on Prevention in the Construction Industry

www.issa.int/prevention-construction

Board Members



Members



Corresponding Members



THE DECLARATION OF BRUSSELS

25th november 2009



XXIXTH INTERNATIONAL SYMPOSIUM OF THE ISSA CONSTRUCTION SECTION ON OCCUPATIONAL SAFETY AND HEALTH IN THE CONSTRUCTION INDUSTRY

BRUSSELS, BELGIUM 23-25 NOVEMBER 2009

WHEREAS the International Social Security Association (ISSA) was established to perfect and develop public social protection based on the solidarity of all citizens through international cooperation;

WHEREAS the ISSA Bureau established the Construction Section to carry out actions to prevent occupational accidents and diseases in the construction industry;

WHEREAS one of the main activities of the Construction Section has been to convene the International Symposium of the ISSA Construction Section on Occupational Safety and Health in the Construction Industry to identify and address important safety and health demands through research, innovation and good practice;

WHEREAS life expectancy has increased significantly in most nations during the last 20 years, whether they are developed or emerging economies, and will most likely continue to do so, thereby placing greater pressure on the Social Security arrangements that have been created;

WHEREAS progress has been made in safety and health, the construction industry is still a high risk sector with respect to accidents and occupational diseases, often resulting in premature death or disability retirement; and

WHEREAS globalization has provided economic opportunities for many parties involved, it has also affected the Social Security arrangements that have been created worldwide and has challenged the progress that has been made in safety and health performance in the construction industry. This is in particular due to the use of workers from low-wage countries as those workers are often employed under the worst working conditions.

Overarching Resolutions

- All nations should :
 - Recognize that the construction industry is still a **high risk industry**
 - Ensure that construction is conducted according to the **highest labor standards**.
 - All workers are entitled to **risk prevention, rehabilitation** and proper **compensation** for injured workers.
 - Provide for working conditions that enable workers to **reach their normal retirement age** without any harmful effects on their health
 - Require that **work tasks be adapted** to the workers' functional capacity.
 - Reaffirm their commitments to safety and health **as an essential part of Social Security arrangements**

Recommended Actions

1. OSH policies should be kept current with global best practices;
2. OSH strategies should consider unique characteristics of each country;
3. Social security agencies should foster a culture that favors safety and health;
4. All stakeholders have a responsibility for ensuring safety and health;
5. On the company level, workers should be involved in all phases of safety and health operations;
6. Safety and health performance should be measured on all levels and should be improved based on findings;
7. Strengthened labour inspectorates is an essential underpinning;
8. Public clients should lead in the adoption of tenders requiring best safety and health practices.

Please Come to Boston...

BOSTON • USA • 16-18 October 2012

XXXth International Symposium of
the ISSA Construction Section on
Occupational Safety and Health
in the Construction Industry



CPWR  THE CENTER FOR CONSTRUCTION
RESEARCH AND TRAINING



issa



www.issaboston2012.org

Incredible India

PART 5: ADOPTION IN INDIA

Incredible, but for...

- 35,000-150,000 fatalities/yr
 - Official count is 1,600
- Child labor common
- Abuse of women workers widespread
- Obsolete hazards such as asbestos widely used

Construction Industry, India

- 31,000,000 workers
- Construction spending doubling every five years

“Workers employed in Construction works are highly vulnerable segments of labour force particularly because of its unorganized nature. The workers in construction industry are characterized by inherent risk to the life and limbs. The construction activities are also characterised by its casual nature, temporary relationships between employer and employee, uncertain working hours, lack of basic amenities, inadequacy of welfare facilities and casual approach of employers for the problems of workers. In the absence of adequate statutory provisions, the requisite information regarding the nature and number of accidents is also not generally available.”

11th Five Year Plan (2007-2012), p. 57.

But, India Has Excellent Legislation

Year	List of Applicable Laws
1884	The Explosives Act (amended 1983)
1923	The Indian Boiler Act (amended 2007)
1934	The Petroleum Act
1962	The Atomic Energy Act (amended 1987)
1983	The Static and Mobile Pressure Vessel (unfired) Rules
1983	The Dangerous Machines (Regulation) Act (amended 2001)
1988	The Motor Vehicles Act
2002	The Petroleum Rules
2003	The Electricity Act, 2003 (replaced The Indian Electricity Act, 1910)
2004	The Gas Cylinder Rules
2004	Radiation Protection Rules
2005	The Disaster Management Act

Comprehensive Laws

- Act No. 27 of 1996: The Building and other Construction Workers (Regulation of Employment and Conditions of Service) Act
 - Provides a full range of safety and health protections
- Act No. 28 of 1996: The Building and Other Construction Workers Cess Act
 - Authorizes the States to collect a tax on all construction to be used for the welfare of construction workers and their families.

Comprehensive Laws

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...But the laws have not been acted on

GLOBAL HSE PRACTICES IN CONSTRUCTION



Safety Shack, Construction Project, Chennai



Safety Shack, Construction Project, Chennai

HIGH LIGHTS OF HSE STATISTICS
WISH YOU HAVE A SAFE DAY

01-11-09

NO OF PEOPLE ATTENDED	-	7845
TOTAL MAN POWER STRENGTH	-	1325
MAN HOURS WORKED FOR THE MONTH OF NOV 2009	-	365449 hrs
CUMULATIVE MAN HOURS WORKED	-	4,978,506
SAFE MAN HOURS WORKED	-	4,978,506
NUMBER OF LOST TIME INJURY - NIL -	-	NIL

- x - x - x -

Work safely all the while, go home with the Smiles

TYPICAL PRACTICES IN CONSTRUCTION



The Unskilled Workforce

- In 2009, wages were Rs 130-150/day/worked
- Employed is taken from desperation and given with disdain
- At this level of pay, there is no economic incentive for safety
- Occupational injuries for these workers not recorded

The Unskilled Workforce

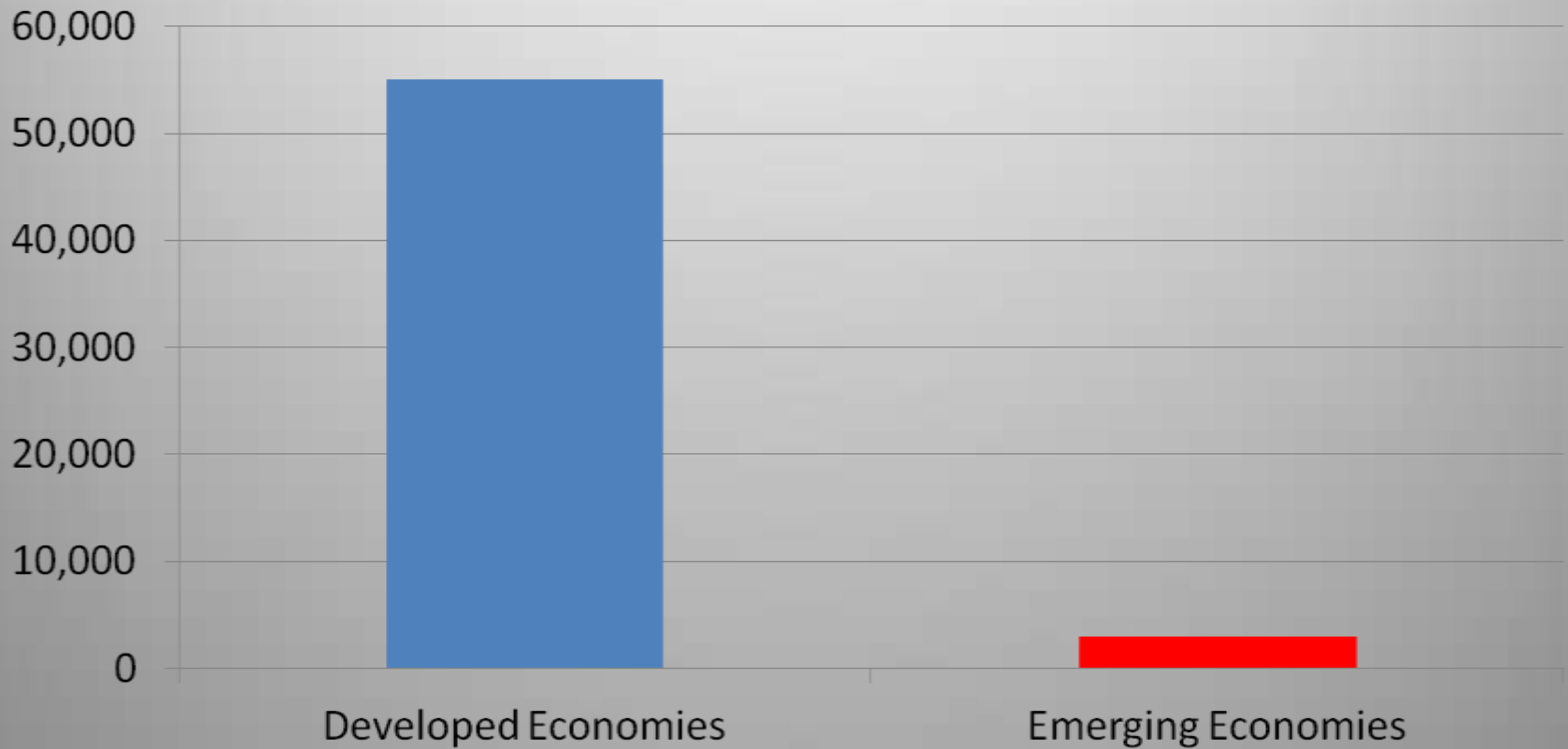
- In 2009, wages were Rs 130-150/day/worked
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- Occupational injuries for these workers not recorded

The Dilemma

- To make safety pay, skill levels and productivity need to be increased
- This conflicts with policy goal of full employment

Capital Investment Top Tier Contractors

USD Per Worker



Other Key Challenges

- Weak knowledge base for both exposures and outcomes
- Solutions must be practical and cost effective

New Delhi, December 2009



Goal 1: India should aim to adopt policies in accordance with the Declaration of Brussels

1. OSH policies should be kept current with global best practices
2. OSH strategies should take into account unique characteristics of each country
3. Social security agencies should foster a culture that favors safety and health
4. All stakeholders have a responsibility for ensuring safety and health
5. On the company level, workers should be involved in all phases of safety and health operations
6. Safety and health performance should be measured on all levels and should be improved based on findings
7. Strengthened labour inspectorates is an essential underpinning
8. Public clients should lead in the adoption of tenders requiring best safety and health practices

Goal 2. India should adopt a goal of making its construction industry as fully sustainable as possible in terms of safety and health

- a) A sustainable construction industry is in the interest of all stakeholders: the clients who get a better quality product, the employers who get a more productive work force and the workers who get a better work environment.
- b) It must be the industry's responsibility to create a sustainable environment, but this can only be realized if the government at all levels assures the enforcement of Building and other Construction Worker Act by qualified personnel.
- c) India's construction industry lacks sustainability in general and in particular for its unskilled labor force. There is an urgent need to upgrade the working conditions for unskilled workers, and to expand skills training for all workers.
- d) The leading construction clients, including the energy sector and public works, and the leading construction contractors, suppliers and relevant industrial accident insurance providers, should serve as role models and leaders in promoting best safety and health practices

Goal 3. Safety and health needs to be strengthened in several key areas

- a) Mandatory comprehensive safety and health training and certification of such training for all workers and supervisors should be implemented. International assistance for capacity building should be sought.
- b) The lack of valid data on employment, hazardous exposures, and work-related deaths, injuries and illnesses is a major impediment to the implementation of this action plan. Documentation of the current baseline and changes in the future is needed to guide an effective national policy. A national data base on employment and OSH is needed.
- c) The level of knowledge of traumatic risks, chemical and other health hazards including ergonomic risks needs to be improved urgently. There is a great need for better integration of safety engineering, industrial hygiene, ergonomics and human factors sciences, and occupational medicine
- d) Workers should be involved in all aspects in the recognition and prevention of hazards and should receive training for this purpose

***A white paper based on these
action items will be prepared and
submitted to the industry and
government.***

A WHITE PAPER

PRESENTED TO
THE PEOPLE OF INDIA AND THEIR GOVERNMENTS
AND
THE CONSTRUCTION INDUSTRY OF INDIA

***STRENGTHENING OCCUPATIONAL
SAFETY AND HEALTH
IN
INDIA'S BUILDING AND CONSTRUCTION
INDUSTRY***

BASED ON THE ACTION PLAN
ADOPTED BY
International Symposium on Safety and Health in Building and Construction

Key Recommendations

- Strengthen labour inspectorate
 - In 2011, the Factory Inspectorate of India created a directorate dedicated to construction, which is located in Chennai

Key Recommendations

- Strengthen labour inspectorate
 - In 2011, the Factory Inspectorate of India created a directorate dedicated to construction, which is located in Chennai
- Establish partitarian safety and health dedicated to construction safety and health organization using the authority and funding in the Cess Act
 - Several States are acting on this recommendation

CONCLUDING COMMENTS

A New Era: Sustainable Construction

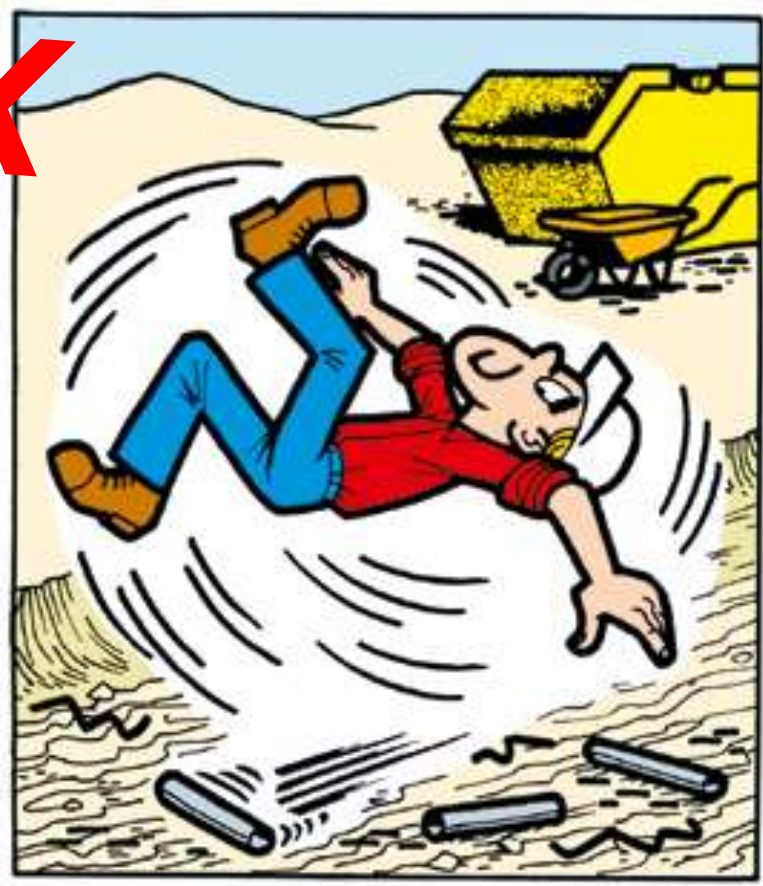
- Life cycle perspective
- Energy optimization
- CO2 emission minimization
- Minimal waste of resources
 - Including human resources

**Sustainable construction =
Enabling workers to enjoy life-time careers
free of work-related disability or death**

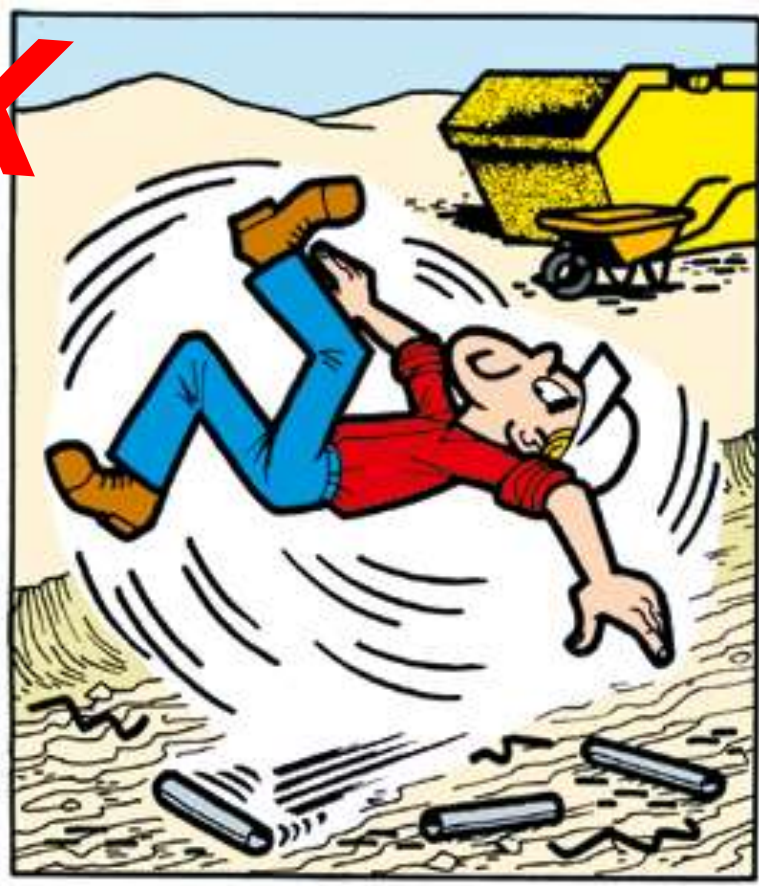
**The Basics of Construction Safety
are Not complicated**

There is no excuse not to act

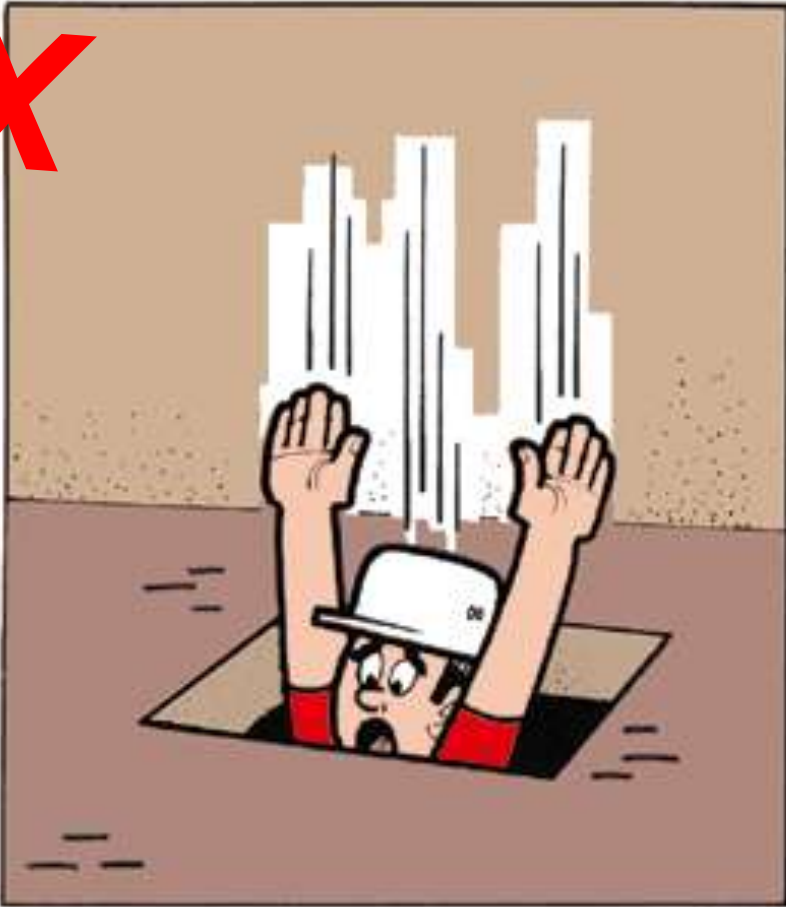
ISSA: Pictures for Prevention



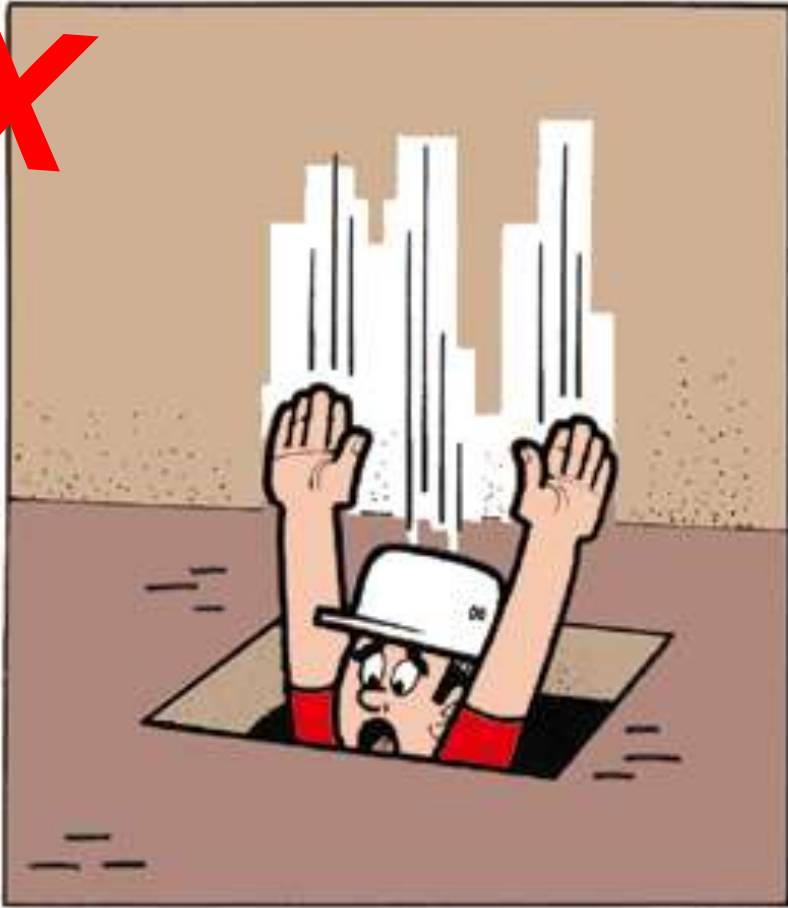
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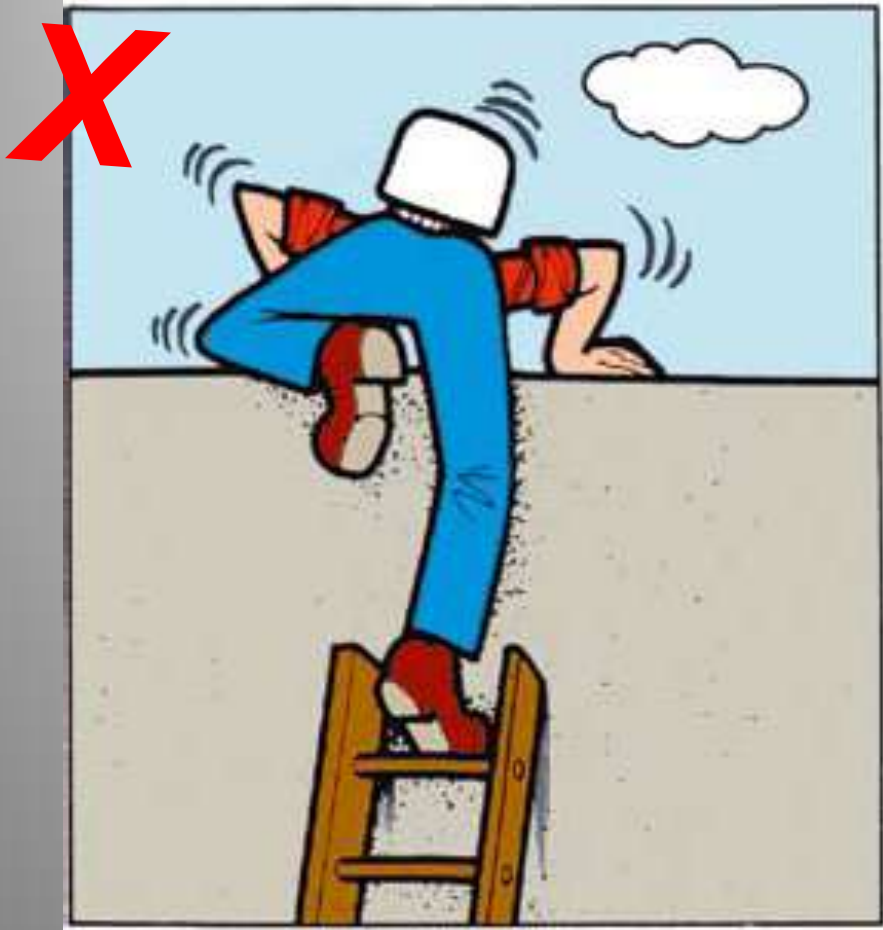
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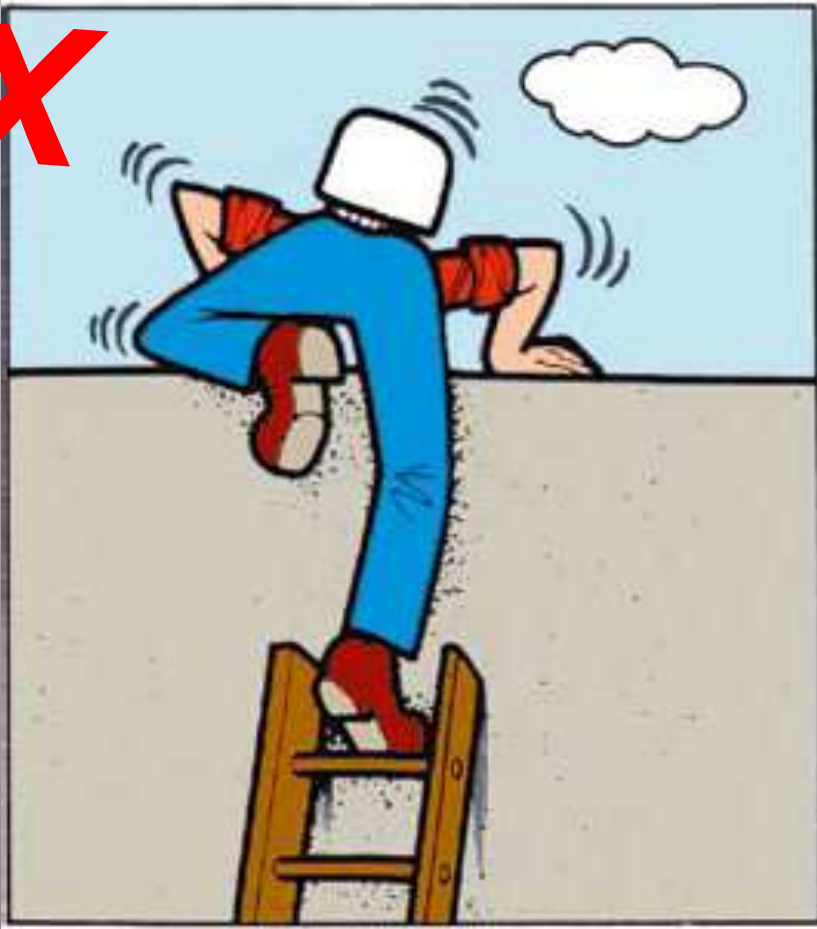
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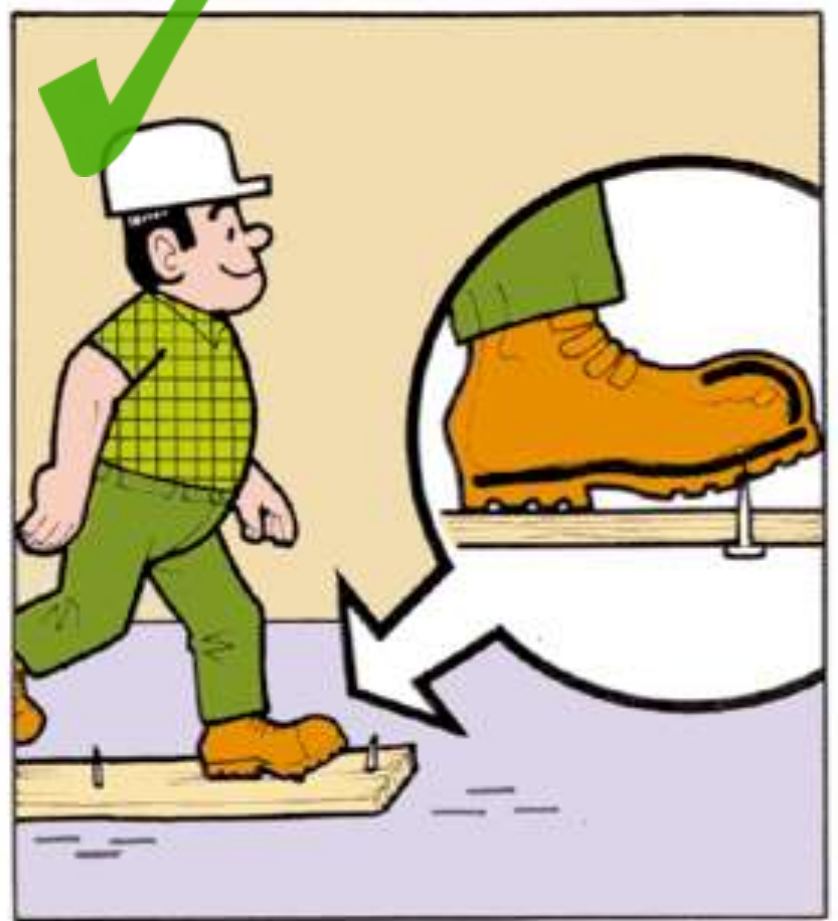
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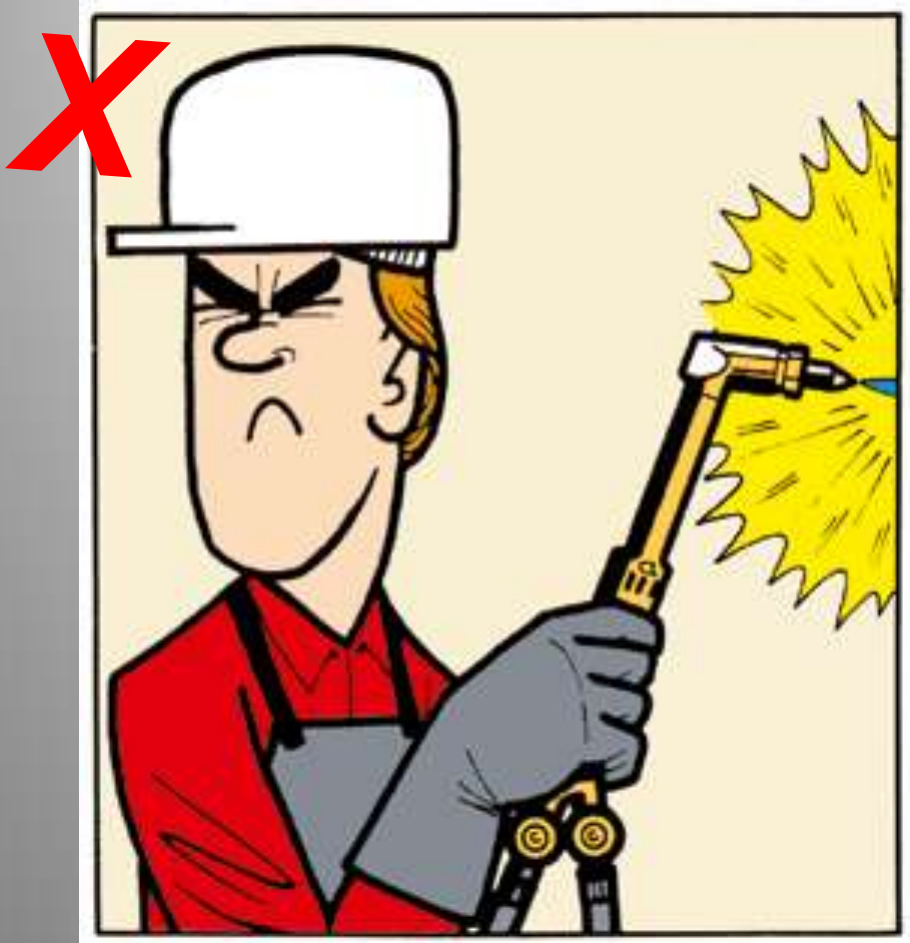
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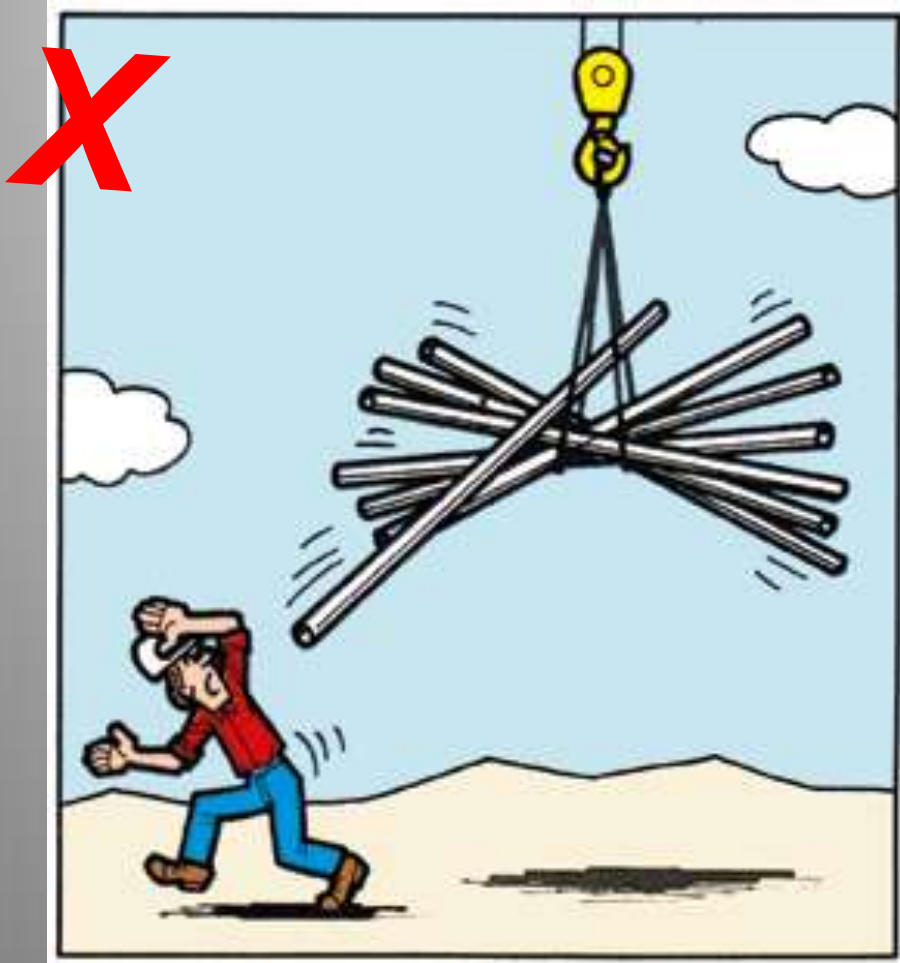
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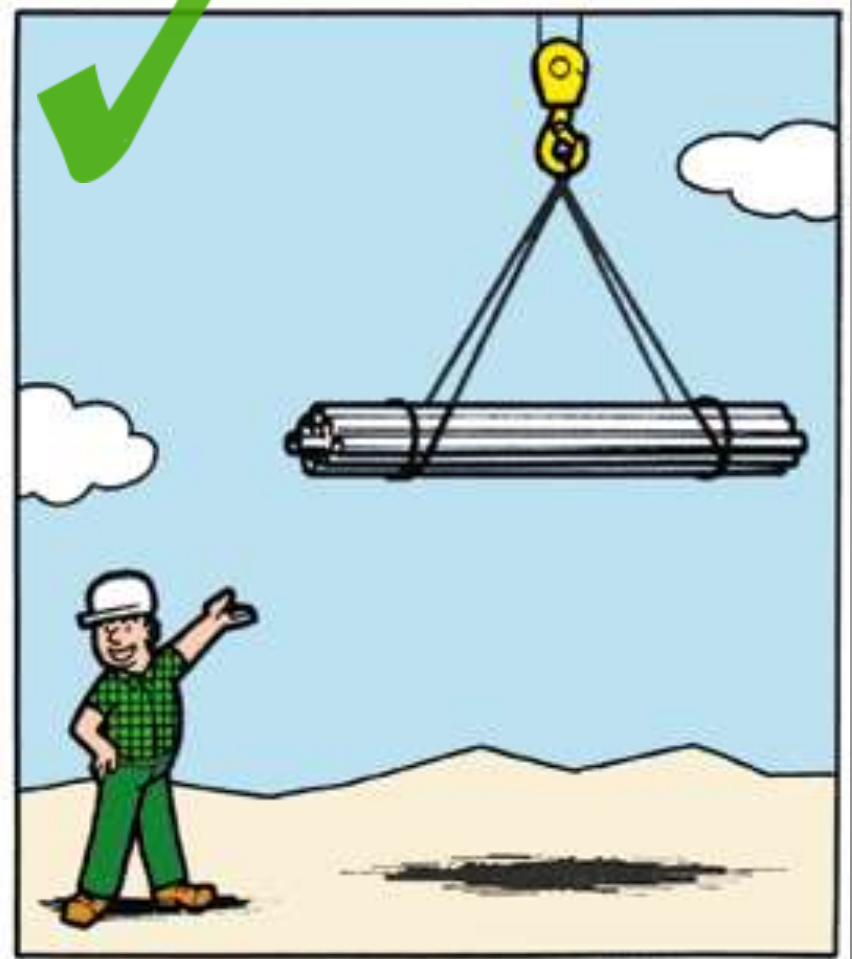
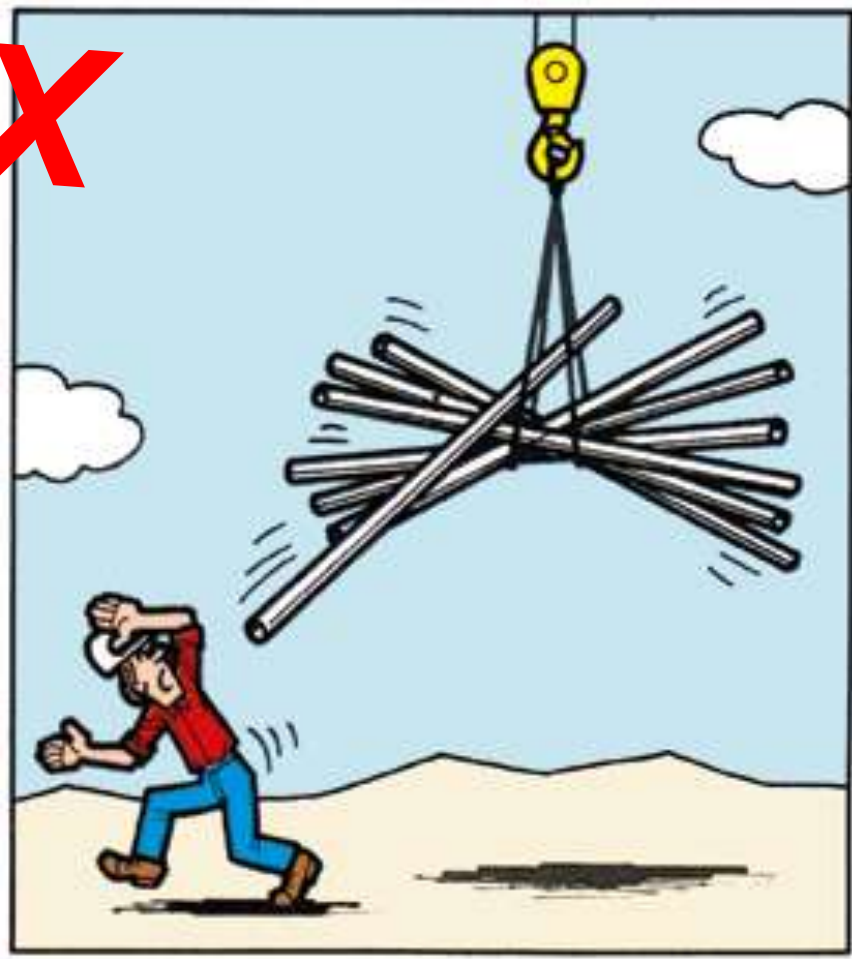
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ISSA: Pictures for Prevention



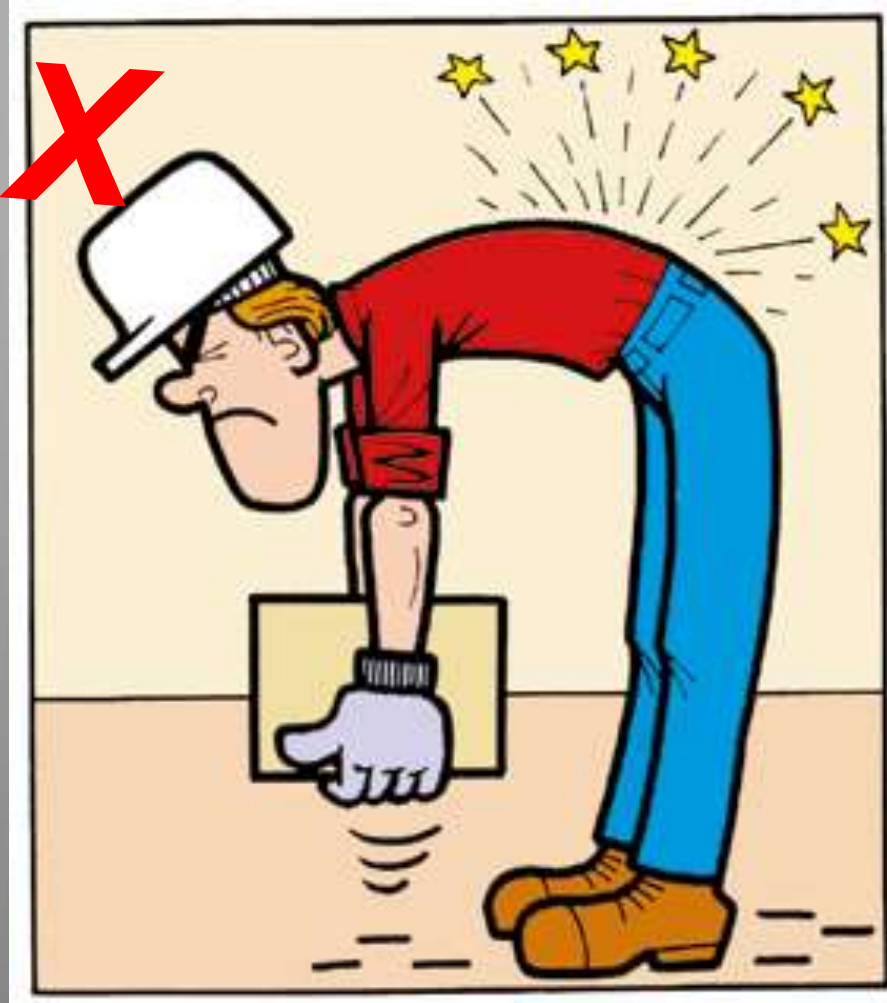
ISSA: Pictures for Prevention



ISSA: Pictures for Prevention



ISSA: Pictures for Prevention



www.elcosh.org

**We Need a Virtual Memorial for
Construction Workers
Killed on the Job
So they are not Forgotten**

Precedent Setting Project: City Center, Las Vegas, 2006-2011



8 Workers Killed

- Lack of oversight by owners
- Lack of coordination
- Missing safety culture
- OSHA derelict in its duties

*Harvey Englander,
operating engineer, Pelli
Hotel Tower*



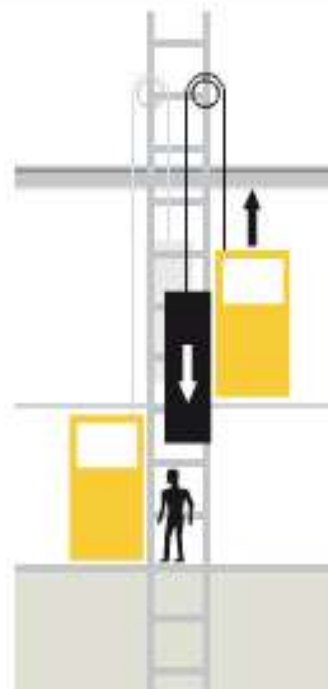
TOPIC:

Construction Deaths

FATAL CONSTRUCTION ACCIDENTS ON THE STRIP



Worker was killed when a descending counterweight to an elevator "man-lift" struck him as he serviced the alternate man-lift.



OSHA INVESTIGATION

The worker was not trained to lock out the manlift system before servicing it. Operators and supervisors were not following the manufacturers's rules in lubricating the manlift. OSHA found six violations and fined Perini Building Company \$21,000.

FOLLOW-UP

At an informal conference between OSHA administrators and Perini, an OSHA administrator withdrew all citations for total fines of \$0.00.

*Harold Billingsley,
Ironworker, City Center
Casino*



Construction Deaths

FATAL CONSTRUCTION ACCIDENTS ON THE STRIP



Worker fell through a 3-foot by 11-foot opening in temporary corrugated metal decking on the second floor, falling 59 feet to his death. The worker did not have his safety harness attached.



OSHA INVESTIGATION

Safety lanyards on the worker's body harness did not have hooks on the ends. This safety system allows the worker to "clip" themselves to other railings or fixed material. There should not have been a hole in the decking. There was no netting, guardrail or personal fall arrest system in place to protect the employee from falls. OSHA found three violations and fined SME Steel \$13,500.

FOLLOW-UP

At an informal conference between OSHA administrators and SME, an OSHA administrator withdrew all citations for total fines of \$0.00.

Harold Billingsley, Ironworker, died Oct. 5, 2007 at CityCenter Casino

[view Harold Billingsley's Bio](#)

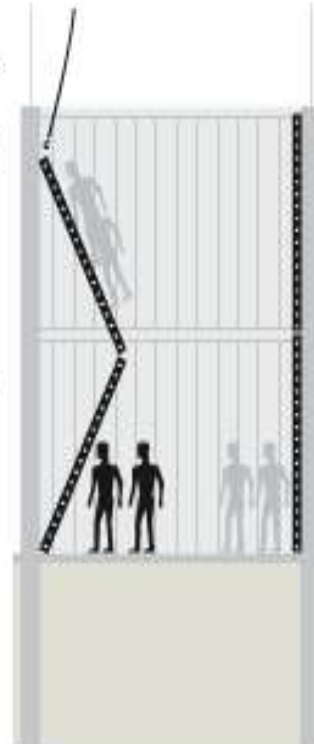
*Angel Hernandez,
Carpenter, City Center*



FATAL CONSTRUCTION ACCIDENTS ON THE STRIP



Two workers were killed when 7,300-pound forms that support poured concrete were improperly removed and collapsed inward. A crane that had been attached to the large metal forms was unhooked and there were not enough connection points to support the standing forms. Two workers were on top of the concrete forms and two others were inside the elevator core.



OSHA INVESTIGATION

The inspection showed no evidence of ties, bolts, pipe bracing or other methods in place that would have prevented the forms from falling away from the elevator core walls after being released from the crane. Employers did not make sure the forms were properly secured and did not train employees in the proper removal of the forms. OSHA found two violations and fined Perini \$14,000.

FOLLOW-UP

At an informal conference between OSHA administrators and Perini, an OSHA administrator withdrew one violation and left the other intact, for total fines of \$7,000.

Angel Hernandez, Carpenter, died February 6, 2007 at CityCenter - Vdara Condo Hotel

*David Rayburn, Jr.
Ironworker, Cosmopolitan*



TOPIC:

Construction Deaths

FATAL CONSTRUCTION ACCIDENTS ON THE STRIP



While “bolting-up” a spreader I-beam inside the east elevator core at the fourth floor level of the Cosmopolitan, an ironworker fell 44 feet to his death when the beam broke free of the wall plate. His safety harness could not save him because the only place he could tie it off to was the beam that he was balanced on, which fell.



OSHA INVESTIGATION

The employer, Schuff Steel, didn't make sure that the steel was secure. From gathered evidence is it not clear how many bolts were used to hold the beam in place. Only two bolt heads were found on-site, indicating that each end had only one 3/4-inch bolt holding it up. Schuff should have made sure there were nets or decking below the worker. OSHA found six violations and fined Schuff Steel \$12,150.

FOLLOW-UP

In an informal conference, OSHA and Schuff Steel did not come to a settlement. The case will most likely be heard by a review panel.

David Rabun Jr., Ironworker (apprentice), died Nov. 27, 2007 at Cosmopolitan

[view David Rabun Jr.'s Bio](#)

*Michael Taylor,
Safety Engineer
Cosmopolitan*

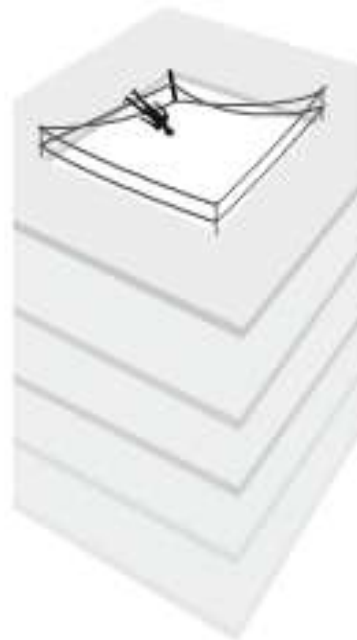


Construction Deaths

FATAL CONSTRUCTION ACCIDENTS ON THE STRIP



A Perini safety engineer appeared to fall five floors when a corner iron post that helped hold up a guardrail system collapsed. The corner posts are usually held in place by support pieces called "kickers," welded to the bottom, but one of the steel subcontractors had removed the kickers to install a steel beam.



OSHA INVESTIGATION

A steel subcontractor, Reliable Steel, created circumstances that compromised the strength of the iron posts by removing the kickers and by welding other pieces incorrectly. OSHA found four violations, and fined Reliable Steel \$2,850.

FOLLOW-UP

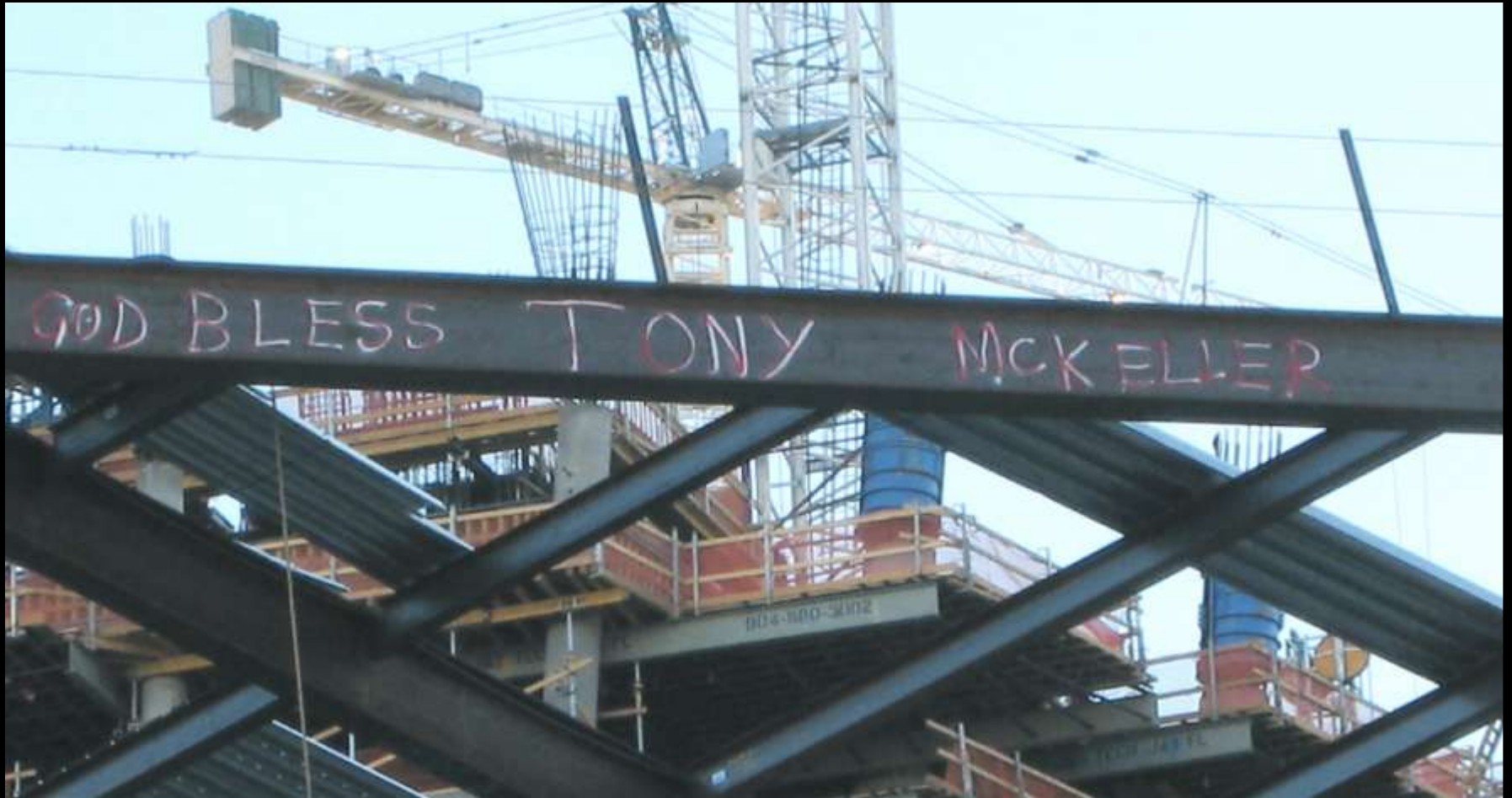
An informal conference between Reliable Steel and OSHA is scheduled for April 3.

Michael Taylor, Safety engineer, died Jan. 14, 2008 at Cosmopolitan

[view Michael Taylor's Bio](#)

Tony McKeller

Ironworker. Killed 2009



St Gotthard Tunnel, 1872-82

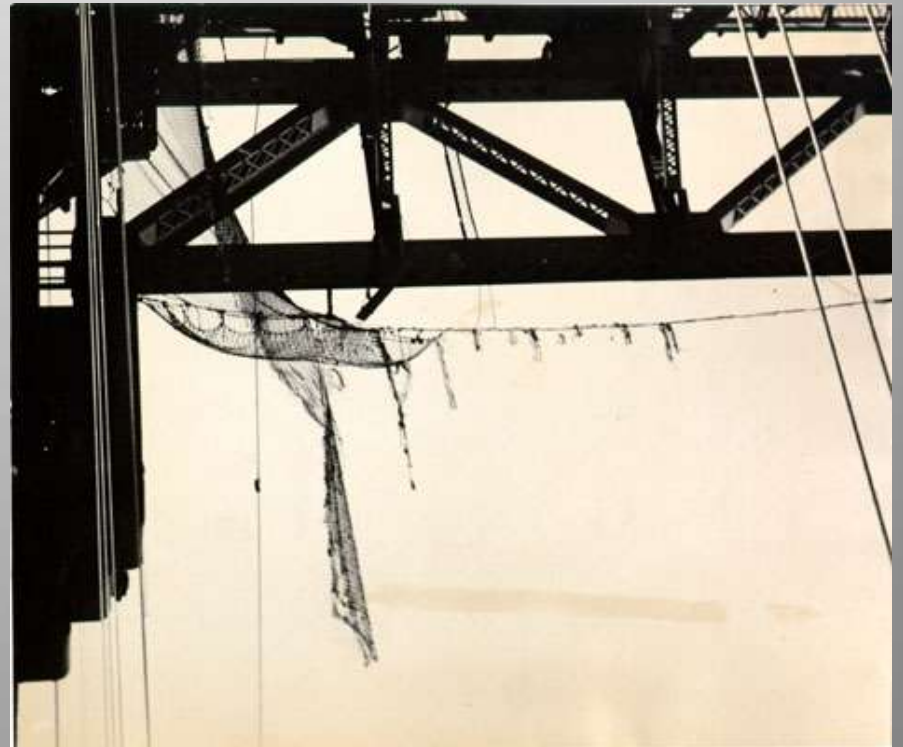


200+ workers killed

Golden Gate Disaster 1937



10 Workers Killed



Golden Gate Bridge Memorial Plaque

OT 101



Iron Workers Memorial Bridge, Vancouver, BC, 1958



19 workers killed

IRONWORKERS MEMORIAL BRIDGE

Look straight ahead into the harbour: in the distance, a steel truss cantilever bridge spans Burrard Inlet as part of the Trans-Canada Highway.

The Second Narrows Bridge opened in 1960, the longest of its kind in western Canada.

It cost 26 million dollars, and 23 lives.

June 17, 1958: A derrick hovers over the north side. Perched on trusses and beams, men are inserting and anchoring thousands of enormous steel bolts.

The bridge has already taken four lives.

A sound cracks like a giant rifle, and the front end of the bridge crumples instantly. Lacking safety harnesses, 79 workers plunge as far as 67 metres (220ft), then to be dragged underwater by the weight of their tool belts.

A slight miscalculation by 2 bridge engineers. A temporary supporting structure was too light to bear the weight.

19 dead (the 2 engineers among them, 20 hospitalized and up to 50 injured – many rescued by First Nations boats – in the most deadly construction accident in B.C. history.

Re-named the Ironworkers Memorial Bridge, the structure stands as a monument to worker safety, for they must not have died for nothing.

08.18.2011

Send Information, please

knutringen@msn.com