

To,
Dr. Mansukh Mandaviya
Hon'ble Union Minister for Health and Family Welfare,
Government of India
Ministry of Health and Family Welfare
Room No. 348-A, Nirman Bhawan,
New Delhi – 110011

Subject: Protecting the Health of Manual Workers from Occupational Hazards

Respected Sir,

While much attention has been paid to occupational hazards faced by healthcare professionals and white-collar workers, a segment of our workforce remains critically under-protected: manual labourers. Exposed to dust, fumes, and hazardous materials on a daily basis, these individuals across construction, agriculture, mining, manufacturing, and other industries (sandblasting, painting, welding, woodwork, cleaning & sweeping, transportation, etc.) face an increased risk of respiratory diseases, lung cancer, and impaired lung function. These health issues significantly impact their quality of life and can lead to lifelong disabilities and even death. The good news is that these risks are preventable with proper protection and awareness.

We would like to propose the following policy measures to safeguard the health of manual workers:

1. Mandatory Mask Provision:

- a) All formally employed workers under central or state government must be provided with N95 or N99 masks before starting their work.
- b) Informal sector employers must also be mandated to provide masks to their workers.

2. Educational Initiatives:

Regular training programs must be conducted for formal and informal sector workers to educate them about the importance of protecting themselves from occupational hazards and the proper use of protective equipment.

3. Monitoring and Evaluation:

The government should sponsor bi-annual surveys to assess the prevalence of respiratory diseases among manual workers and the effectiveness of implemented policies.

4. Accessible Healthcare:

Regular free health checkups should be conducted at workplaces, with immediate referral of affected individuals to the Pradhan Mantri Jan Arogya Yojana (PM-JAY) for treatment.



5. Protection Beyond Masks:

For work exposing workers to harmful fumes and gases, employers should be mandated to provide appropriate protective gear (respirators, etc.).

6. Comprehensive Rules and Regulations:

Develop comprehensive rules and regulations that set standards for workplace safety, including guidelines specifically addressing exposure to harmful substances for manual workers. It should be enforced mandatorily.

7. Enforcement and Accountability:

Strict penalties, including hefty fines or imprisonment, should be imposed on employers who fail to comply with these regulations and endanger the health of their workers.

Equipping workers with protective gear is demonstrably cheaper than lost wages and healthcare costs from illness which is mostly borne by the government. The government should recognize this and enact effective regulations. We recognize the potential complexities of implementing these measures. We stand ready to provide further data, research, and expertise to collaborate with the government in preparing and implementing effective policies. We urge immediate action to prioritize the health of these often-overlooked members of our workforce, ensuring they can work with dignity and enjoy a life free from preventable health risks.

Protecting the health of our manual labourers is not merely a policy imperative; it is a moral obligation. By implementing these measures, we can safeguard their well-being, improve healthcare indicators, and build a healthier and more equitable society for all.

Health Parliament is the world's leading think-tank on healthcare policy issues, and the International Patients' Union is a patients' platform founded to address the challenges related to accessibility, affordability, and quality of healthcare faced by patients across India. Both Health Parliament and International Patients' Union are founded by Dr. Rajendra Pratap Gupta, former Advisor to Union Health Minister of India, who played key role in drafting the National Health Policy 2017 and the National Education Policy 2020.

With Best Regards,



Ms. Mevish Vaishnav

Group Chief Operating Officer,
Health Parliament & International Patients' Union
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Cc: Dr. Hiren Joshi, OSD (Communications and Information Technology), Prime Minister's Office requesting due consideration of this significant topic for inclusion in the upcoming edition of 'Mann Ki Baat.'

Enclosed: Supporting Research



Supporting Research

1. It was found that workers in the crusher and packing sections were highly exposed to total cement dust relative to TLV, and total dust was related to acute respiratory symptoms and acute ventilatory effects. (<https://bmcpulmed.biomedcentral.com/articles/10.1186/1471-2466-10-19>)
2. It was found that an exposure-response relationship between cumulative respirable metal dust exposures with deterioration of lung function among steel workers. Cumulative chromium was found to be a predictor of lung function values. The frequency of using mask had a positive relationship with the lung function values. (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5102237/>)
3. PM is associated with chronic obstructive pulmonary disease, bronchial asthma, and several other respiratory diseases and increases the mortality rates of these diseases. Moreover, increased exposure in the high concentration of atmospheric PM is associated with the development of lung cancer. The most simple and common way to protect an individual from airborne PM is to wear a face mask that filters out PM. In areas of high concentration PM, it is recommended to wear a face mask to minimize the exposure to PM. (<https://pubmed.ncbi.nlm.nih.gov/32185911/>)
4. It was found that airborne particulate materials in the construction site adversely affect the pulmonary function parameters like FVC, FEV1, %FEV1/FVC, PEF and FEF25-75% in the construction workers and cause an obstructive pattern of lung function impairment which is associated with the dose effects of years of exposure to airborne dust in construction site. ([http://www.i-pbs.org/pdf/241/24\(1\)_09Johncy.pdf](http://www.i-pbs.org/pdf/241/24(1)_09Johncy.pdf))

