

Safety and Health in Japan

A Newsletter from Japan Industrial Safety and Health Association (JISHA)



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Japan Advanced Information Center of Safety and Health



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Over the long term, occupational accidents in Japan have gradually declined thanks to human efforts such as the improvement of safety measures, but even so, 1,658 workers lost their lives last year, with about 53,000 more injured.

To prevent occupational accidents and diseases, Japan's Industrial Safety and Health Law and related regulations prescribe a set of measures to be observed by employers and workers. The measures are categorized to address such matters as the establishment of safety and health management systems, the safety of machinery, the improvement of worker abilities, and medical examinations for workers. However, in order for those measures to be effective, employers and workers must first have access to the proper knowledge and information.

Therefore, in January 2000, the Ministry of Health, Labour and Welfare established the Japan Advanced Information Center of Safety and Health next to the Industrial Safety Museum, and entrusted the center's management to JISHA. The budget of the center is provided by the Occupational Injury Compensation Fund.

The center has a comprehensive web site (www.jaish.gr.jp) where the following information on safety and health is always accessible in Japanese:

- Laws, regulations, and notifications regarding industrial safety and health
- Comfortable workplace implementation
- Occupational accident cases
- Chemical substance information
- Occupational accident statistics
- Innovations, improvements, and safety and health activities in the workplace
- Reports of studies and research on occupational safety and health.

The center also operates a virtual-reality theater and 3D theater, both of which are designed to heighten the audience's awareness of hazards in the workplace. The virtual-reality system provides the audience with the simulated experience of patrolling a workplace to show them exactly where hazards can occur, while the 3D system simulates near-miss experiences through highly realistic stereoscopic images.

Moreover, the center has a computer system that stores data on skill-training course certificates from about 1,500 designated training institutes. The system can integrate the records of all the certificates held by a worker on one card; this relieves workers of the need to keep individual certificates issued to them by training institutes.

The forerunner of the Industrial Safety Museum was established by the National Institute of Industrial Safety in 1943. The main purpose of the museum was to showcase the safety technology developed by the institute. However, the institute eventually changed status from a national institute to an independent administrative body, and in April 2001, JISHA was entrusted with management of the museum. Consequently, the purpose of the museum also changed, becoming a setting not only for displaying the results of the institute but also for introducing general measures to improve the level of safety and health in the workplace.

Renovation of the museum, including the introduction of new exhibits, is scheduled for completion in April. The museum's Welcome-zone will educate visitors on the concept of how to improve the level of safety and health in the workplace. In general, enterprises have so far been striving to maintain a "Zero Accident" status in the workplace and are naturally satisfied when no accidents occur. Fortunately, "Zero Accident" status can be attained, even when some hazards remain in the workplace. We believe, however, that the "Zero Hazard" issue is vital for Japan. Based on this belief, the museum's Welcome-zone will provide information on occupational safety and health management systems (OSHMS) that can help enterprises to attain a "Zero Hazard" status. For example, "Zero Accident" safety measures include actions such as hanging a "Watch Your Step" poster near a small step on the floor, or painting a step yellow when there is a danger of workers tripping and falling, while an example of a "Zero Hazard" safety measure would be smoothing out uneven surfaces to avoid stumbling in the first place.

We believe that occupational accidents and diseases will be eliminated if further efforts are made to change the safety and health level of a workplace from "Zero Accident" to "Zero Hazard." The most important role of the center is to promote this change.

We have decided that, starting this April, the complex of the abovementioned theaters and museum will collectively be called "OSH SQUARE." We hope that you will have an opportunity to visit us there.

Activities of Industrial Safety and Health Organizations

Lecture by Dr. Jukka TAKALA of the ILO

Under the auspices of JISHA, Dr. Jukka TAKALA, Director, InFocus Programme on Safety and Health at Work and the Environment, International Labour Organization (ILO), gave a presentation on the subject of “Global Trends on Occupational Safety and Health—A Management Systems Approach” on February 20, 2004. Dr. Takala has been involved in safety and health issues with the ILO since 1978, and was responsible for the preparation of the ILO Guidelines on Occupational Safety and Health Management Systems (ILO-OSH 2001).



Dr. Jukka TAKALA, Director, InFocus Programme on Safety and Health at Work and the Environment, International Labour Organization (ILO)

The main presentation was preceded by introductory comments from Mr. Kazuo HIROMI, President, JISHA, and Mr. Kenji TSUNEKAWA, Director General, Industrial Safety and Health Department, Labour Standards Bureau, MHLW.

During his presentation, Dr. Takala described how occupational safety and health management systems (OSHMS) were being adopted around the world. In particular, he praised JISHA OSHMS Registration because it is in line with ILO-OSH 2001, which is the only international standard for OSHMS. Referring to the differences between ILO-OSH 2001 and the OHSAS 18000 series created by the British Standards Institution and other organizations, Dr. Takala also pointed out the advantages of the JISHA OSHMS Standards, which are based on ILO-OSH 2001.

Following Dr. Takala's presentation, Mr. Norio NISHIMOTO, Director, Safety Division, Industrial Safety and Health Department, Labour Standards Bureau, MHLW, discussed recent data indicating the increase of serious occupational accidents. He gave an overview of the results from safety management self-inspections that were recently conducted by large manufacturing sites. (See the “Research and Statistics” section of this newsletter for the results of these inspections.) Mr. Nishimoto also stressed the need for immediate action to adopt OSHMS in

workplaces that had a particularly high rate of occupational accidents.

Mr. Teruo ARAKAWA, Director, Technical Department, JISHA, also gave a presentation concerning JISHA's OSHMS activities and JISHA OSHMS Registration.

Total Health Promotion Fair for Workers Held on 15th Anniversary of the THP

The Total Health Promotion Plan (THP) marked the 15th year of its inception in November 2003. To commemorate this milestone, JISHA held the Total Health Promotion Fair for Workers from November 14 to 15, 2003.

The event kicked off with an introductory speech by Mr. Hiromi, President of JISHA, which was followed by comments from guest speaker, Mr. Tsunekawa, Director General, Industrial Safety and Health Department, Labour Standards Bureau, Ministry of Health, Labour and Welfare (MHLW). The keynote symposium was entitled “15 Years of the THP and Its Future.” Later, Dr. Kazuo MURAKAMI, Professor Emeritus, University of Tsukuba, gave a special presentation entitled “Reawakening



Total Health Promotion Fair for Workers Held on 15th Anniversary of the THP

Your DNA for Total Health.” Finally, to close the first day of the event, JISHA trainers led a hands-on THP demonstration for attendees.

On the second day, the venue was divided into four separate lecture areas. Three of the lectures covered various aspects of THP initiatives. In addition, Akira KUBO, Director, Takanawa Medical Clinic, gave a special presentation entitled “Health Strategies for the 21st Century—Total Health and the Health and Life Span Physical Examinations.”

2003 Year-End and New Year Zero-Accident Campaign

The Year-End and New Year Zero-Accident Campaign is held in workplaces nationwide by JISHA with the support of the MHLW, for the purpose of preventing the occupational accidents that tend to occur frequently around the year-end and New Year period.

2003 marked the 33rd anniversary of the campaign, which extended from December 15, 2003 to January 15, 2004.

The slogan for this year was “Pass the Zero-Accident Baton during the

Year-End and New Year Holidays.” During this campaign, participating workplaces conducted various activities aimed at promoting occupational safety and health, such as implementing safety and health management reviews and improvements, carrying out medical examinations, and educational activities like displaying posters on occupational safety and health-related issues.

2003 Mental Health Promotion Symposium

The 2003 Mental Health Promotion Symposium was held on January 15, 2004, jointly organized by the MHLW and JISHA. The theme for this year’s symposium was “Mental Diseases and Their Prognosis.” The event drew an estimated 556 attendees.

The opening speech was presented by Mr. Tsunekawa, Director General, Industrial Safety and Health Department, Labour Standards Bureau, MHLW. The first half of the program featured a symposium on “Returning Smoothly to the Workplace” led by Dr. Teruichi SHIMOMITSU, Professor, Department of Preventive Medicine and Public Health, Tokyo Medical University. The five-person panel discussed various issues

involved in returning to the workplace, as well as techniques for ensuring smooth re-integration into the workplace.

The second half of the symposium featured a special presentation on “Workers and Their Mental Health” by Taizo KATO, Professor of Multidisciplinary Studies, Science and Engineering Department, Waseda University. In his presentation, Mr. Kato proposed that stress is linked to an individual’s relationships with others. According to Mr. Kato, individuals who have many acquaintances can tolerate more stress. In his discussion of mental-health issues in the workplace, Mr. Kato pointed out that workers can quickly lose their will to work once they experienced a sense of failure, regardless of whether these feelings were warranted by their actual abilities. Mr. Kato stressed the need for coworkers to provide support to prevent such a sense of failure among their colleagues.

Lecture on the Musculoskeletal Disorders Priority Programme in the U.K.

On January 22, 2004, Mr. Malcolm DARVILL, Ergonomics Policy Unit, Health and Safety Executive (HSE), United Kingdom,

gave a presentation entitled “HSE’s Musculoskeletal Disorders Priority Programme—Learning and Achieving Together.” The event was co-hosted by the Japan International Center for Occupational Safety and Health (JICOSH), JISHA.

According to Mr. Darvill’s presentation, 1.1 million cases of work-related musculoskeletal disorders (MSD) occur every year in the U.K., resulting in 12.3 million working days lost. Reducing MSD incidence rates is an important goal of occupational health in the U.K. In 2000, HSE drew up a 10-year plan with targets such as achieving a 30% reduction in the number of working days lost due to health impairment, and a 20% reduction in the incidence rate for cases of health impairment by 2010.

Occupational health in the U.K. has traditionally been reliant on the efforts of the medical community. However, in order to achieve further progress in occupational health, HSE has proposed that all stakeholders, including employers and workers, collaborate to resolve occupational-health issues, and conduct risk assessments using a variety of approaches.

HSE also conducts research, gathers information from both the U.K. and overseas, and provides guidance in the form of written materials aimed at raising awareness concerning the prevention of MSD. It is also involved in efforts to improve the law when

appropriate and improve compliance with legislation relating to occupational health.

An overview of the lecture is available in Japanese at the JICOSH web site (<http://www.jicosh.gr.jp/Japanese/news/040122/index2.html>). The original PowerPoint presentation in English is also available for download.

15th Workplace Medical Examination Promotion Campaign

With the support of the MHLW, JISHA and the National Federation of Industrial Health Organizations (Zeneiren) jointly hold the annual Workplace Medical Examination Promotion Campaign, which is now in its 15th year. This campaign is aimed at helping workers to monitor their own health in order to encourage a healthier workplace environment, with the overall goal of raising occupational health standards in Japan.

The slogan for this year’s campaign was “Take Pride in a Healthy Workplace—Take Your Medical Examination.” This campaign was conducted in the workplace throughout the month of February 2004. JISHA and Zeneiren also held seminars and organized other

meetings to encourage small and medium-sized enterprises to take part in this campaign and to raise awareness regarding mental health and other aspects of THP. Additional support was provided by the regional Occupational Health Promotion Centers and Regional Industrial Health Centers.

Lecture on “Considering Human Factors”

On March 3, 2004, JISHA hosted a lecture entitled “Considering Human Factors.” The lecture was attended by an estimated audience of 230 persons, who listened earnestly to presentations from Mr. Ken’ichi TAKANO, Senior



Mr. Tony SMITH, International Business Director, National Safety Council (NSC), United States

Researcher, Human Factors Research Center, Central Research Institute of Electric Power Industry; Dr. Nobuo KOMIYA, Associate Professor, Department of Sociology, Faculty of Letters, Risho University; and Mr. Tony SMITH, International Business Director, National Safety Council (NSC), United States. Each of the presenters spoke about human factors in safety from his personal perspective, and gave examples of activities and techniques for incorporating human factors into safety concepts.

Mr. Takano’s presentation was entitled “Case Studies of Human Factor Initiatives by Enterprises—A Presentation on Safety Activities in the Workplace.” In his presentation, Mr. Takano gave a number of concrete examples to illustrate how enterprises could effectively promote safety activities in the workplace.

The presentation by Mr. Komiya, a specialist in the field of criminology, was entitled “The Broken Window Theory and Strategies to Combat Crime.” The presentation focused on the “broken window” theory, which has gained widespread acceptance in the United States and Europe. According to the theory, crime can be deterred by dealing with seemingly minor elements such as broken windows and graffiti effectively, instead of leaving things in a state of disorder. The theory holds that what counts is responding to each small concern and in doing so, building

up overall efforts. This is a very appropriate attitude for safety and health management activities in the workplace.

The presentation by Mr. Smith was entitled “Human Factor Initiatives at U.S. Industrial Work Sites.” Mr. Smith’s presentation focused on safety behavior programs. Interest in the principles of behavioral safety has continued to grow since 1990. In his presentation, Mr. Smith also maintained that risk assessment must consider the possibility of human error, and gave concrete suggestions for incorporating human factor concepts.

Labour Administrative Activities

Partial Amendment of Enforcement Order of the Industrial Safety and Health Law—Further Prohibition of the Use of Asbestos-containing Products

The Japanese government has issued the Partial Amendment of the Enforcement Order of the Industrial Safety and Health Law, which is to take effect on October 1, 2004.

The revised Enforcement Order prohibits the manufacture, import, transfer, supply, and use of 10 asbestos-containing products. The following products containing asbestos exceeding 1% of total weight are not permitted: asbestos cement pipes, extruded cement panels, decorated cement shingles for dwelling roofs, fiber-reinforced cement boards, ceramic siding boards, clutch facings, clutch linings, brake pads, brake linings, and adhesives.

Regulations Tightened to Limit Overtime Work

The Ministry of Health, Labour and Welfare (MHLW) has issued notifications from the

Minister and the Director General of the Labour Standards Bureau that further tighten restrictions on overtime work. The new rules are set to take effect on April 1, 2004.

The Labour Standards Law enables workers to undertake overtime work exceeding the legally prescribed number of hours if there is collective agreement between the employer and representatives of the workers. Under the previous rules, workers could undertake up to 45 hours of overtime work per month, not to exceed 360 hours annually. However, these limits could be exceeded when it was deemed necessary due to particular circumstances, as long as the employer and worker followed the prescribed procedures.

Under the new rules, the particular circumstances that enable overtime work beyond the prescribed limits have been restricted to temporary or unforeseen circumstances, and are not to exceed six months out of the year.

Infectious Disease Law Revised to Prevent Spread of SARS

The revised Law Concerning Prevention of Infection of Infectious Diseases and Patients with Infectious Diseases and

the Quarantine Law came into effect in May 2003, incorporating new measures designed to prevent the spread of Severe Acute Respiratory Syndrome (SARS). Under the new regulations, SARS is categorized as a Type 1 Infectious Disease with a very high risk for infection, joining other highly infectious diseases such as Ebola hemorrhagic fever and smallpox. The revised legislation gives prefectural governors the power to hospitalize any individual that contracts a Type 1 Infectious Disease. Building quarantines and traffic restrictions can also be invoked in the case of an outbreak of a Type 1 Infectious Disease.

Previously, prefectural governments were responsible for conducting investigations aimed at preventing outbreaks of secondary infection. Under the revised law, the national government has also been given the power to conduct its own investigations during times of emergency.

The revised legislation also places additional controls on individuals entering Japan who are suspected of carrying an infectious disease. Any such individual entering Japan must provide the director of a quarantine station or a quarantine officer with their contact address in Japan. In addition, the individual may be required to keep authorities apprised of the status of their health for a specified period of time. Individuals who fail to report this information or submit false information

can face imprisonment of up to six months or a fine of 500,000 yen.

Revisions to Tobacco Industry Law

The Ministry of Finance has issued a government ordinance partially revising the Tobacco Industry Law. The new rules follow the World Health Organization's (WHO) decision to ratify the Framework Convention on Tobacco Control in May 2003.

The new rules pertain to the packaging of tobacco products, which must now be clearly labeled with a warning concerning the dangers of smoking. The warning must be displayed in large, easily identifiable printing. The warning must make at least one reference to "lung cancer," "myocardial infarction," "stroke," or "pulmonary emphysema," and at least one reference to "pregnant women," "secondhand smoke," "addiction," or "minors." The warning must take up at least 30% of the front side or largest side of the tobacco packaging, and must be clearly set apart from the rest of the packaging using a border. As an example, the following warning would comply with the new rules: "Smoking is a contributing factor to lung cancer. Smoking will also lead to

nicotine addiction, although the severity of addiction may differ from individual to individual."

In addition, tobacco packaging featuring the words "low tar," "light," or "mild" must contain specific warnings so as not to mislead consumers into thinking that these products are less harmful to their health.

The MHLW has established an FAQ page in Japanese to help consumers understand the harmful health effects of smoking. It is available at the MHLW web site (<http://www.mhlw.go.jp/topics/tobacco/qa/index.html>).

Winners Recognized at 6th Safety Master Awards

The MHLW has established the Safety Master System to recognize outstanding frontline supervisors that are directly involved in guiding workers. The Safety Master Award is presented to individuals who possess outstanding skills and experience, and who have demonstrated excellent safety performance in their workplace or department. The 6th Safety Master Awards Ceremony was held on January 15, 2004. At



Awards ceremony

this year's ceremony, Mr. Chikara SAKAGUCHI, Minister of Health, Labour and Welfare, presented 144 individuals with the award.

MHLW Issues Urgent Appeal for Improvements to Medical Care Safety

The MHLW issued an urgent appeal calling for improvements to the safety of medical care in Japan, including a proposal to reeducate physicians and dentists accused of malpractice. The proposal is a response to increasing public distrust of the medical community following incidents in which physicians have been arrested for malpractice. The proposal is broadly focused on three areas including medical practitioners, medical institutions and facilities, and medical tools such as drugs, medical equipment, and medical information. The new proposal is the MHLW's first comprehensive proposal aimed at improving the quality of physicians.

In order to eliminate the repeat incidence of malpractice among physicians, the MHLW has proposed giving the Medical Ethics Council stronger powers to monitor the activities of physicians. Furthermore, the

ministry will consider a mandatory reeducation process for any physician that is suspended from medical practice.

The MHLW has also indicated that it will consider requiring hospitals to supply patients with copies of video recordings taken of surgical operations.

In addition, the MHLW has identified the need to strengthen the current system of managing blood transfusions.

Proposals Seek to Increase Safety Standards for Refuse-Derived Fuel

Several government agencies and ministries recently finalized their proposals and reports aimed at preventing future accidents related to the use of refuse-derived fuels (RDF). The proposals follow an incident that occurred in August 2003 during which RDF caught fire and exploded at an RDF power plant in Mie Prefecture. The proposals were set forth by the Fire and Disaster Management Agency, the Nuclear and Industrial Safety Agency (NISA), and the Ministry of the Environment (MOE).

The Fire and Disaster Management Agency, which operates under the auspices of the Ministry of Public Management, Home Affairs, Posts and Telecommunications, established a study group to consider measures aimed at improving the safety of RDF-related facilities. The report issued by the study group recommends that RDF should be designated as a combustible controlled substance. Furthermore, it recommends that fire-fighting organizations track any information concerning the storage and handling of RDF.

The report by the NISA, which operates under METI, was authored by a working group assigned to study measures aimed at preventing accidents at RDF power plants. The NISA report calls for operators of the nation's 15 RDF power plants to devise strategies aimed at preventing future accidents at their facilities.

The MOE established its own study group to consider changes in the manufacturing, management, and use of RDF from the standpoint of achieving a sustainable society. The guidelines produced by the MOE study group include a recommendation to review the current technical guidelines that are based on the Enforcement Order of the Waste Management and Public Sanitation Law.

1st Industrial Accident Liaison Meeting Aimed at Preventing Repeat Industrial Accidents

METI recently held the 1st Industrial Accident Liaison Meeting, which was held on January 29, 2004. The meeting is aimed at preventing recurrences of industrial accidents by encouraging various industries to share information and expertise concerning industrial accident prevention. The meeting was attended by industry association representatives, covering the steel, aluminum, electric wire, chemical, cement, transport equipment, general machinery, textiles, oil refinery, electric power, gas, and manufacturing sectors.

In December 2004, METI issued its mid-term report detailing its survey of industrial accidents. At the meeting, industry representatives provided updates regarding their current initiatives aimed at industrial accident prevention. The attendees also listened to a presentation describing cases of successful efforts to reduce accident rates at steel plants.

METI is involved in ongoing efforts to promote information sharing regarding industrial accidents and to develop technology and implement other strategies needed to improve the safety of industrial workplaces in Japan. Future meetings will undertake industrial

accident-prevention initiatives such as comparative studies of accident-prone and accident-free sites.

MHLW Issues Notification Concerning Accidental Ingestion of Liquid Chemicals

The MHLW issued a notification to Prefectural Labour Offices concerning the prevention of accidental ingestion of liquid chemicals. Prefectural Labour Offices have been instructed to advise employers to comply with the following guidelines, as part of ongoing guidance aimed at improving safety and health standards.

- (1) Empty beverage containers should not be used for the purpose of measuring or storing liquid chemicals.
- (2) In order to prevent accidental ingestion, only containers specifically designated for measuring or storing liquid chemicals should be used. Containers used for this purpose must be clearly labeled as to their contents, and must include a written warning and instructions for handling.
- (3) Liquid chemicals must be stored in a separate location from beverages.

The notification follows a recent increase in accidents involving acute chemical poisoning caused by accidental ingestion of liquid chemicals. Workers have mistakenly ingested chemicals such as disinfectants and organic solvents due to the inappropriate use of empty beverage containers to store liquid chemicals.

Research and Statistics

Number of Fatalities in 2002

The Ministry of Health, Labour and Welfare (MHLW) has released its 2003 provisional report on fatal occupational accidents. According to the data, the number of fatalities in 2003 was put at 1,525, a decrease of 23 from the previous year.

By industry, the largest decreases in fatalities occurred in the mining and passenger and transportation industries, where incident rates dropped by 11.8% each. This was followed by industries such as construction and stevedoring at ports and harbors, where fatalities decreased by 8.3% and 7.1% respectively. Conversely, the forestry industry experienced the greatest jump in fatalities with an increase of 30.4% from the previous year.

By type of accidents, the largest number of fatalities occurred due to road traffic accidents (447 fatalities). This was followed by accidents involving a fall to a lower level (390 fatalities), fatalities resulting from being caught in or compressed by equipment (221 fatalities), and structural collapses (105 fatalities). These leading causes of death remained unchanged from the previous year. However, the largest percentage increase in occupational fatalities in 2003 occurred in the

category of fire-related deaths, which were nine times higher than the previous year (20 fatalities).

The statistics published by the MHLW are provisional figures as of January 7, 2004. The final figures are expected to be announced in April 2004.

Serious Occupational Accidents Increase Significantly in 2003

The MHLW has released its 2003 provisional data on serious occupational accidents in the workplace. According to data released on February 7, 2004, it received 238 reports of incidents in which three or more persons were simultaneously killed or suffered serious injuries. The 2003 provisional count was up by 22 accidents over the previous year's provisional data and was higher than the final reported figure of 231 occurring in 2002.

By industry, the number of accidents was: construction, 84; manufacturing, 39; and overland cargo transportation, 22. The number of serious occupational accidents in overland cargo transportation saw the largest increase of these three industries, with an increase of 9 from the previous year, resulting in 64 more deaths or serious injuries, and an increase of 4 fatalities in 2003.

Following the rash of occupational accidents involving large explosions and fires that occurred during 2003, JISHA issued an emergency request to its 124 member organizations to conduct comprehensive reviews concerning safety and health management, and to strengthen their efforts to prevent occupational accidents.

Report on Safety Management Self- Inspections by Large Manufacturing Sites

The MHLW has released a report on safety management self-inspections conducted in November 2003 at large manufacturing sites, which were implemented in the wake of a series of industrial accidents involving large explosions and fires occurring earlier that year. Self-inspection forms were distributed to all manufacturing sites employing 500 or more persons. Out of the surveys collected, the MHLW compiled 1,269 responses as data for the report.

In its report, the MHLW identified the following issues among workplaces that reported high accident rates:

1. Inadequate implementation of safety management activities by top management

2. Dissatisfaction among top management about manpower, experience, and funding for safety management
3. Insufficient cooperation and information sharing with subcontractors as pertains to safety management
4. Lack of safety initiatives on the part of safety committees responsible for monitoring and deliberating over safety issues in collaboration with labour and management
5. Inadequate implementation of reeducation for site workers after hiring, and inadequate efforts to review work manuals
6. Insufficient risk assessment for equipment and work procedures, and inadequate implementation of accident-prevention measures.

The MHLW stressed that the active involvement of top management is important in improving the above-described deficiencies.

However, it did not find a direct link between accident rates and main economic performance indicators such as the number of employees and business productivity.

The MHLW will urgently draw up plans to improve safety management based on the survey results. Starting in March 2004, it will inspect and supervise workplaces that lack adequate safety management, and will take other

measures to ensure that workplaces implement the necessary safety initiatives. Furthermore, it plans to establish a study group of qualified individuals that will be responsible for studying fundamental measures. The study group will examine safety management systems and safety activities in light of increasing employment mobility and organizational changes at businesses.

The full report by the MHLW is available in Japanese at the JISHA web site (<http://www.jisha.or.jp/topics/040217/040217.pdf>).

35% of Businesses Concerned about Health Impairment from Overwork

The Tokyo Labour Office has released the results of its FY2003 survey of businesses on the issue of employee healthcare. The survey targeted businesses with 300 or more employees and a head office in Tokyo.

According to the survey results, 35.3% of businesses expressed concerns about the onset of brain and heart disease among employees due to overwork, which was up 5.2 percentage points from the 30.1% figure recorded in FY2002. Furthermore, 35.5% of businesses were concerned about the onset of mental illness among

employees due to overwork, which was up 8.1 percentage points from the previous 27.4% figure.

Of the businesses surveyed, 54% indicated that their employees work or might work more than 100 hours of overtime or weekend work in one month, or average more than 80 hours per month. This figure was up 6.3 percentage points from the previous 47.7% figure. Overtime work in excess of 100 hours in one month or averaging more than 80 hours per month is thought to increase the risk of brain and heart disease.

The report found that businesses lacked sufficient awareness regarding the risk of health impairments resulting from overwork. The Tokyo Labour Office intends to implement various initiatives in order to strengthen its efforts to prevent health impairment caused by overwork.

Record-high Number of Traffic Accidents in 2003

The National Police Agency has released its 2003 data concerning traffic accidents. According to the data, there were 947,993 traffic-related accidents in 2003, up 1.2% from the previous year for an increase of 11,272 accidents. This is the highest

number of traffic accidents on record, exceeding the previous high of 947,169 accidents recorded in 2001. Traffic accidents involving a fatality stood at 7,456 incidents, down 6.7% from the previous year for a drop of 537 accidents.

The number of persons injured in traffic accidents also reached an all-time high and was estimated at 1,181,431 persons, up 1.2% from the previous year for an increase of 13,576 persons.

Summary of Monthly Labour Survey Results for 2003

The MHLW conducts a Monthly Labour Survey of workplaces that employ five or more regular employees, in order to monitor wages, working hours, and employment trends. According to the final summary of the Monthly Labour Survey Results for 2003, the amount of overtime hours worked increased for the second year in a row, but total cash earnings decreased for the third year in a row. The number of regular employees also dropped for the fifth consecutive year.

The average number of total actual working hours per month was 152.3 hours, up 0.1% from the previous year. It was the first time that the number had increased in three years. The average number of total real working hours per

year was 1,828 hours, while the average monthly salary stood at 341,898 yen, down 0.4% from the previous year for the third consecutive annual decline.

The number of regular employees was down 0.5% from the previous year, resulting in the fifth consecutive annual decline. The number of regular full-time employees was also down 1.3% for the sixth consecutive annual decline, while the number of regular part-time employees was up 2.2% to mark the second consecutive annual increase.

Summary of Special Labour Survey Results for 2003

Once a year in July, the MHLW conducts a Special Labour Survey of workplaces that employ one to four regular employees. The survey is carried out in conjunction with the ministry's National Survey and Prefectural Survey of workplaces that employ five or more regular employees, in order to monitor wages, working hours, and trends of employment.

According to the final summary of the Special Labour Survey results for 2003, employees worked an average of 7.3 actual working hours per day, which remained flat from the previous year. The average number of days

worked per month was 21.5 days, down 0.3 days from the previous year.

Scheduled cash earnings averaged 193,570 yen per month, down 0.1% for the second consecutive annual decline.

Number of Temporary Workers Rises 22%

According to a survey of the manpower outsourcing sector by the MHLW, a total of 2,129,654 individuals were employed as temporary workers in FY2002, up 21.8% from the 1,747,913 workers recorded in 2001. This represented nearly a twofold increase in the number of temporary workers during the three-year period from 1999 to 2002. The number of temporary workers had stood at 1,067,949 workers in 1999.

Domestic Topics



More Cases of Mesothelioma Recognized as Work-related Disease

The Ministry of Health, Labour and Welfare has reported that 55 workers were recognized as having the work-related disease of asbestos-induced mesothelioma in FY2002. The number of workers recognized has increased nearly fourfold during the last 10 years, indicating that there has been a recent upswing in asbestos-induced mesothelioma.

Previously, only asbestos-induced mesothelioma of the pleura and peritoneum were recognized as work-related diseases. However, the criteria for recognizing asbestos diseases were revised in September 2003 so that now, asbestos-induced mesothelioma of the pericardium and tunica vagina are also considered to be work-related diseases.

Helmet Recycling Program Underway

The Japan Safety Helmet Association has started a helmet recycling program aimed at promoting environmental conservation. Until now, used helmets were disposed as landfill waste or incinerated, methods that have been cited as contributing to environmental and air pollution. To address this situation, the Japan Safety Helmet Association has established the Helmet Recycling Center, which follows guidelines specified under the Basic Law for Establishing the Recycling-based Society enacted by the government. The goal is to reduce negative impact on the environment by reducing industrial waste, taking part in recycling, and encouraging the use of alternative, non-fossil fuels.

Collected helmets are gathered at a combined warehouse and processing facility, where the helmets are then dismantled and sorted. Recyclable materials are sent to recycling plants, while waste materials are shipped to waste processing plants. All shipments from the recycling center are accompanied by a shipping manifest for the systematic disclosure of processing details as required. The recycling center adheres to an efficient management process that enables it to accurately separate and sort recyclable materials from waste materials.

The recycling center is funded by registered members, most of which are helmet manufacturers. Registered members may optionally ask helmet users to pay for the cost of the recycling service.

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JISHA was established in 1964 under the Industrial Accident Prevention Organization Law. Its purpose is to eliminate industrial accidents by improving Japan's industrial safety and health levels through voluntary accident prevention activities among businesses throughout Japan.

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