

# Safety and Health in Japan

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



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# The Total Health Promotion Plan (THP)



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## *Japanese Workers Today*

Japan's contemporary workforce is facing a variety of difficult challenges. Let me provide just a few illustrations. In recent years, Japan's workforce has seen a larger and larger percentage of senior workers. The further development of the Japanese economy and society depends on ensuring that senior workers are empowered to exercise all their skills as leaders in the socioeconomic arena. At the same time, it is clear that industrial accident rates increase with worker age. Many of these accidents, such as tumbles and falls, are related to the slow decline in physical dexterity that accompanies aging.

Japan's Industrial Safety and Health Law requires employers to provide regular medical examinations for their workers. Examination results show a rising percentage of workers with health issues, including warning signs of cerebrovascular and ischemic heart disease. In FY2004, 47.6% had health issues of some kind. Health issues are most often identified in blood cholesterol tests, liver function tests and blood pressure tests. The problems revealed by these tests are those most often attributed to poor lifestyle habits in the areas of eating, exercise, relaxation, sleep and work.

The total number of suicides reported in Japan last year was about 32,000, with 8,000 of these among workers. The total figure has remained consistently above the 30,000 mark since 1998.

According to the findings of the most recent survey conducted by Japan's Ministry of Health, Labour and Welfare (MHLW) on the health situation of workers (FY2002), more than 60% of workers feel significant uncertainty, concern or stress related to their job or work environment. This survey is conducted every five years.

At JISHA, we believe the Total Health Promotion Plan (THP) endorsed by the MHLW provides an effective means of addressing the various difficulties facing Japanese workers. We are working hard to support the universal adoption of the THP, which is described below.

### ***Basic Approach of the THP***

The THP is based on the acknowledgement that there are factors in the workplace that impair health and generate stress—factors which are beyond the ability of the individual worker to control. Of course, workers must take responsibility for maintaining their own health, but their best efforts are limited, at best, if employers do not also engage in proactive workforce health management. When employers implement company-wide health improvement campaigns featuring labour-management cooperation, it can prevent people from slipping through the cracks.

### ***Specific THP Initiatives***

The first step is for top management to develop policies for promoting the health of employees. Based on these policies, and with the guidance of the company's safety and health committee, management then prepares a health promotion plan that details specific health promotion initiatives and numerical targets.

Next, health advisory staff form a team of specialists in medicine, health, exercise, nutrition and psychology—either employed by the company or contracted through an external service provider. The team then designs and facilitates health education programs tailored for individual workers, which might include exercise regimens, nutritional counseling and/or psychotherapy. The team uses the Plan-Do-Check-Act (PDCA) cycle: they evaluate results, make improvements where possible, and then encourage the individual to take the next step in his or her health education program. Clearly, the implementation of these practices requires coordination among the company's health management staff and the full cooperation of line managers. With the strong support of everyone involved, the THP can motivate workers to build healthier habits, help them to improve their overall health, and encourage their efforts to maintain a healthy lifestyle.

# Activities of Industrial Safety and Health Organizations

## 64th National Industrial Safety and Health Convention

The 64th National Industrial Safety and Health Convention was held October 26 to 28, 2005 in Hiroshima, Japan. It attracted about 11,000 participants from around the nation.

The plenary session on the first day of the convention featured an opening ceremony followed by the presentation of awards to recognize the achieve-

ments of individuals and companies in promoting safety and health. This session also included a speech by Mr. Akira ONO, Director General, Industrial Safety and Health Department, Labour Standards Bureau, Ministry of Health, Labour and Welfare (MHLW), and a special lecture by Mr. Takeshi YORO, professor emeritus at the University of Tokyo.

On the second and subsequent days of the convention, there were 14 breakout sessions arranged in three different tracks. The sessions included presentations of best workplace practices,

lectures and symposia. The Green Cross Exhibition and the Comfortable Workplace Forum were held concurrently with the convention.



Mr. Ono addresses the convention



The plenary session of the convention



Green Cross Exhibition

### Delegation Sent to the 17th World Congress on Safety and Health at Work

The 17th World Congress on Safety and Health at Work was held September 18 to 22, 2005 in Orlando, Florida in the United States. The event was sponsored by the International Labour Organization (ILO), the International Social Security Association (ISSA), and the National Safety Council (NSC).

The congress provided an important opportunity for safety and health specialists representing government, labour, and management to meet together, identify common workplace safety and health issues, and discuss measures for addressing them. The theme of this year's congress was "Prevention in a Globalized World—Success Through Partnership."

JISHA's proposal to send a delegation to this congress received responses from more than 30 individuals, primarily businesspeople and those involved in the field of safety and health. In addition to participating in the congress, the delegation visited safety and health institutions in the US as well as the Japanese Embassy there.



JISHA delegation at the congress

## 2005 Year-End and New Year Zero-Accident Slogan and 2006 Slogan

JISHA collects suggestions annually for its Year-End and New Year Zero-Accident Slogan and its slogan for the coming year.

From the 1,476 and 3,781 slogan suggestions received for the 2005 Year-End and New Year Zero-Accident Slogan and the slogan for 2006, respectively, the following have been selected.

### 2005 Year-End and New Year Zero-Accident Slogan (prizewinner)

*“Maintain safety awareness during the new year season”*

Three other entries received an honorable mention.

### 2006 Slogan (prizewinner)

*“Conduct forward-looking safety checks to create accident-free workplaces”*

Three other entries received an honorable mention.

## National Occupational Health Week 2005

The 56th National Occupational Health Week was held October 1 to 7, 2005, following a preparatory period lasting from September 1 to 30. The Week was promoted by the MHLW and JISHA with the cooperation of five sector-specific industrial safety and health associations, and workplaces nationwide participated.

This year’s slogan was “Avoid overworking to promote physical and



2005 Year-End and New Year Zero-Accidents Slogan poster



National Occupational Health Week poster

mental health.” During the Week, occupational health education and outreach activities, such as workplace patrols, work environment inspections and poster displays, were held at various workplaces to further promote voluntary occupational health management activities.

### **Distinguished Service Award and JISHA Chairperson’s Award Winners in 2005**

Every year at the National Industrial Safety and Health Convention, JISHA presents the following awards to recognize the achievements of individuals and companies in promoting safety and health.

The Distinguished Service Award was established in 1971 and is conferred upon individuals or organizations that have contributed to society by working tirelessly to promote safety and health. This year’s recipients were Mr. Ryuji TANAKA, Chairperson, Technology Institution of Constructing Plywood Scaffold, and Mr. Masayuki IKEDA, Director, Kyoto Industrial Health Association, and professor emeritus at Kyoto University. The JISHA Chairperson’s Award was established in 1985 and recognizes companies that have shown outstanding performance in promoting and improving safety and health, and that have achieved remarkable success

in educating people and conveying the importance of health and safety issues. The winner of this year’s award was Kirin Brewery Co., Ltd.

### **Asbestos-Related Inquiries Shoot Past 1,500**

In light of the significant social problem posed by asbestos, JISHA’s Occupational Health Research and Development Center is now handling inquiries from employers regarding policies for preventing asbestos exposure. The total number of inquiries since July 8, 2005, when the MHLW announced a new effort to address the asbestos problem, was 1,518 as of August 25, 2005. Of these, 629 were inquiries from employers regarding asbestos exposure policies, 853 were questions from employers regarding the analysis of asbestos content, and 36 were queries from individuals. The nature of the inquiries has ranged widely from questions regarding the use of buildings that contain asbestos, to queries about occupational health policies for machines that use asbestos, to inquiries regarding the harmfulness of asbestos substitutes. JISHA will continue to respond to inquiries regarding the technical aspects of policies for preventing exposure to asbestos and asbestos substitutes.

# Labour Administrative Activities

## MHLW Calls for Inspections of Safety and Health Management Among Railway Companies Nationwide

The Ministry of Health, Labour and Welfare (MHLW) has issued a call through the prefectural labour offices for about 150 railway companies nationwide to conduct inspections of their safety and health management systems. The Osaka Labour Office and Labour Standards Inspection Office conducted on-site inspections following the derailment and collision on the Fukuchiyama line of the West Japan Railway Company, and this new round of inspections is being called for based on the problem areas identified by those previous inspections.

The MHLW asked the railways to inspect:

1. The establishment of safety and health committees, the convening of committee meetings, and meeting attendance; and to determine whether the labour representatives serving on the safety and health committees were named to their posts based on recommendations from labour.
2. Investigations and discussions aimed at accident prevention.

When the results of these inspections indicate problems, the employers will be required to implement measures for improvement and to report them, along with the inspection results, to the director general of the prefectural labour office.

The following guidance was issued to the West Japan Railway Company as a result of the on-site inspections conducted by the Osaka Labour Office:

1. Nominate labour representatives to serve on the safety and health committee based on recommendations from labour.
2. The safety and health committee is to discuss health impairment prevention policies and mental health policies for workers, known cases of near misses, and everyday safety activity results.
3. Conduct systematic and organized safety and health education programs.
4. Create a strategy for ensuring that all workplaces are fully aware of all safety and health policies established by top management.
5. Report on provisions for discipline, which are a part of the employment regulations, and ensure that all employees are fully aware of them.

## Minister of Health, Labour and Welfare Issues Urgent Request to Industrial Associations to Prevent Serious Occupational Accidents

In light of the rise in serious occupational accidents, then-Minister of Health, Labour and Welfare Hidehisa OTSUJI invited industrial associations and industrial accident prevention organizations to visit the MHLW in June, the month prior to National Safety Week, and made an urgent appeal to them to curb the increase in serious occupational accidents (June 13, 2005). At the outset of the meeting, Mr. Otsuji explained the need to make a direct appeal to the leaders of these organizations, due to the increasing occurrences of serious occupational accidents.

In his urgent appeal, Mr. Otsuji highlighted the need for employers to promote safety and health activities based on the following principles:

1. Ensuring worker safety and health is a matter of the utmost concern for corporate management, and top management nationwide needs to demonstrate strong leadership by taking the initiative in the promotion of safety and health activities.



2. It is important for top management to prepare safety and health guidelines that are highly practical, not abstract; to ensure that those guidelines are disseminated to each and every worker; to enable labour and management to work together to address safety and health related issues; and to create a corporate culture that places the highest priority on worker safety and health.

## MHLW Issues Measures for Responding to Health Impairments Caused by Asbestos

A prohibition against the manufacture and use of asbestos (except in certain cases) was issued in October 2004. The Ordinance on Prevention of Hazards Due to Asbestos was enacted in July 2005 because of the increasing number of buildings containing asbestos materials that are being torn down. Companies that used to manufacture or deal with asbestos have repeatedly publicized cases of health impairments such as lung cancer and mesothelioma among their employees, and cases have appeared that clearly show the impact of these workplaces on nearby residents. Because it takes time before health impairments caused by the inhalation of the asbestos dust become noticeable, there are concerns that the

number of affected persons may continue to rise.

Based on this information, the MHLW has issued a current policy to deal with this problem and has announced the creation of an office to address individual inquiries regarding cases of health impairment. Building on these efforts, the MHLW will require employers to adhere to the Ordinance on Prevention of Hazards Due to Asbestos and will ensure that the authorities are fully aware of all situations of asbestos-related health impairments. It will also ensure the widespread dissemination of information about the personal health record system and workmen's accident compensation system. The MHLW will work with JISHA and other relevant organizations to respond to inquiries regarding health impairments.

The MHLW is currently engaged in the following efforts:

1. To prevent the occurrence of new health impairments caused by asbestos, the MHLW is monitoring and offering guidance to workplaces that are currently manufacturing or handling asbestos to ensure that they are in full compliance with the Ordinance on Prevention of Hazards Due to Asbestos. The MHLW is also ensuring the widespread dissemination of information regarding the personal health record system and the workmen's accident compensation system.

2. When health impairments occur as a result of asbestos even at workplaces that are not currently manufacturing or dealing with asbestos, the MHLW conducts on-site surveys to confirm the range of workers that used to be involved in such work as the manufacture of asbestos and to verify the health management conditions at those workplaces.

3. To prevent health impairments due to asbestos, employers are being asked to provide health examinations even to retirees who were once involved in the manufacture or handling of asbestos. The MHLW is advising all current workers who are believed to have been involved in the manufacture or handling of asbestos in the past to undergo a medical examination. In conjunction with this, the Ministry is disseminating information about the personal health record system and the workmen's accident compensation system.

4. To appropriately implement these measures, the MHLW is asking for the cooperation of industrial associations and the Japan Medical Association.

5. To achieve a complete prohibition against asbestos, the MHLW is also requesting the cooperation of the Ministry of Economy, Trade and Industry (METI) in promoting the use of substitute products. The MHLW is requesting the cooperation of METI and the Ministry of Land,

Infrastructure and Transport (MLIT) to ensure the complete dissemination of policies based on the Industrial Safety and Health Law and the Ordinance on Prevention of Hazards Due to Asbestos in the industries under their jurisdiction, and is also asking for their cooperation in the dissemination of information regarding the personal health record system and the workmen's accident compensation system.

### 2005 White Paper on Health, Labour and Welfare

The MHLW has issued its 2005 *White Paper on Health, Labour and Welfare*, whose central theme is "Social Security in the Future: Working with Communities to Provide Support." The white paper provides an overall survey of social security from the perspective of local communities, and examines the division of roles between organizations in various policy fields as well as issues regarding the links between those organizations. The white paper concludes that, in a society where the population is rapidly aging, various measures will be required to build communities where people can feel secure in their everyday lives. These include accurately ascertaining the diverse needs of residents, understanding the roles of the various

constituents of the society, and creating a system of social security that works with communities to provide support.

### Proposal Regarding Employment and Labour Policy Issues over the Next Decade

The MHLW's employment research council recently issued a proposal regarding the direction of employment and labour policies over the next decade. The title of this proposal is "Employment and Labour Policy Issues Under Conditions of Population Decrease." In addition to the "Year 2007 Problem," which refers to the various challenges posed by the retirement of the baby-boomer generation, 2007 is the year in which the population is expected to start to decline in Japan. Thus, policies have been developed to try to avoid the socioeconomic stagnation that is expected to occur as a result of a decline in the quality of human resources available for sustaining industry as well as a decline in available labour power.

Specifically, the council has proposed that the MHLW should: (1) provide employment support for all people who have the ambition and ability to take advantage of employment opportunities, including young people,

women, and senior citizens; (2) promote the procurement and training of human resources, such as efforts to create local jobs and to develop people's vocational skills; and (3) develop a system of rules that enables workers to work safely and fairly, such as the development of working condition standards that address issues of safety and health. The MHLW accepted these proposals and hopes to utilize them in the development of future policies.

# Research and Statistics

## 2003 National Health and Nutrition Survey in Japan Shows That More Than 30% of Men in Their 30s and 40s May Have Upper-Body Obesity

The Ministry of Health, Labour and Welfare (MHLW) has issued a summary of the 2003 National Health and Nutrition Survey results. This survey was conducted to identify the nutrient intake and lifestyle habits of the Japanese and to obtain basic information for promoting healthier lifestyles. According to the survey, the age group of men with the highest percentage of respondents at risk of upper-body obesity based on the body mass index and abdominal circumference measurements were those in their 40s, at 32.1%, followed by those in their 30s, at 29.0%. The percentage of men who exercise regularly was likewise lowest among those in their 40s, at 20.5%, followed by those in their 30s, at 22.6%. Nearly 30% of men in their 50s (28.7%) and in their 60s (27.8%) were also found to be at risk of upper-body obesity.

This study asked respondents about lifestyle factors such as obesity and exercise, their nutrient intake, and their food intake by food group, but this year's study paid particular attention to

respondents' smoking habits. The percentage of respondents who smoke regularly was 46.8% of men and 11.3% of women. More than 50% of women indicated that they are "very concerned" about the impact of smoking on their health, while 30-40% of men indicated the same. Among respondents who smoke regularly, one in four men and one in three women indicated that they "want to quit," while one in four men and one in five women indicated that they "do not want to quit."

## Sense of Crisis Regarding Year 2007 Problem Felt Among 30% of Manufacturers

The results of a basic survey of skill development conducted in 2004 were published recently by the MHLW, indicating that 22.4% of all the companies surveyed are feeling a sense of crisis regarding the "Year 2007 Problem," which refers to the various ways that the start of en masse retirement of baby-boom generation workers will impact society. In the manufacturing industry, the figure was even higher, at 30.5%.

This survey is conducted to identify the status of skill development among companies and workers. The most recent survey was sent to 10,000 companies with 30 or more employees nationwide. Valid responses were

received from 1,405 companies. The results show that 22.4% of all companies are feeling a sense of crisis regarding the Year 2007 Problem, while 61.6% are not. The larger the company, the greater the sense of crisis tends to be. Among companies with 300 or more full-time employees, 37.4% reported a sense of crisis, while that number was only 22.9% among companies with 100 to 299 employees.

The percentage of companies in the manufacturing industry that have a sense of crisis was 30.5%. Among those, the highest sense of crisis was reported by companies in the chemical industry, at 47.8%, followed by general machinery and tool manufacturers, at 40.5%, and metal product manufacturers, at 35.1%. By size, the highest levels were reported by companies with 300 or more employees, at 41.4%, followed by those with 100 to 299 employees, at 29.5% and 50-99 employees, at 32.5%.

The most frequently cited basis for the companies' concerns were "the difficulty of securing ambitious young and middle-aged workers to play a central role in the company," reported by 63.2% of respondents (64.5% among manufacturing companies), fears that "the transmission of skills will take time and will not go smoothly," reported by 51.1% (68.5% among manufacturing companies, and the most cited concern among them), and "a large gap in age or skill level

that will make communication difficult,” reported by 35.9% of respondents (41.9% among manufacturing companies).

### Fewer than 40% of Workplaces Have Non-Smoking Cafeterias and Break Rooms

The MHLW has released the results of a survey of smoking measures in the workplace. The results show that more than 80% of workplaces are implementing some kind of smoking measures, but that fewer than 40% of workplaces with cafeterias and break rooms have designated those areas as non-smoking areas. These findings show that efforts to prevent secondhand smoke remain inadequate.

Of the 1,805 workplaces that submitted valid survey responses, 82.5% (1,485 workplaces) are implementing smoking measures. Of these, 92.2% report that they have “established smoking areas and prohibit smoking in all other areas,” and 62.6% report that workers can “smoke in specified smoking areas where ventilation fans have been installed.” On the other hand, only 10.2% of workplaces have “prohibited smoking throughout the workplace.” Of the workplaces that

have cafeterias and break rooms, only 39.6% and 34.8%, respectively, have designated those areas as non-smoking areas.

Guidelines for Measures on Smoking at Work were issued in 1996 to address the issue of smoking measures in the workplace. New guidelines were issued in May 2003, based on the enactment of the Health Promotion Law in that same month. The new guidelines recommend creating smoking rooms that prevent cigarette smoke from moving into non-smoking areas, and suggest that companies install devices to keep the speed of air moving toward smoking areas at 0.2 m/s or higher. The guidelines also recommend taking workplace air quality measurements, and establish the standard for dust particulate concentrations at less than 0.15 mg/m<sup>3</sup> and for carbon monoxide concentrations at less than 10 ppm.

This study also examined the implementation of air quality measurements, and revealed that 87.0% of workplaces are not measuring the speed of air moving from non-smoking areas into smoking areas, 71.4% are not measuring dust particulate concentrations, and 72.2% are not measuring carbon monoxide concentrations. Based on these findings, the MHLW is striving to ensure that the new guidelines are distributed via the prefectural labour offices and is promoting measures to prevent secondhand smoke.

### Number of Suicides Exceeds 30,000 for Seventh Consecutive Year

According to the summary of suicide cases in 2004 recently released by the Tokyo Metropolitan Police Department, the total number of suicides in Japan in 2004 was 32,325, exceeding the 30,000 mark for the seventh consecutive year. However, the number was down 2,102 from the peak number of the previous year.

Categorized by age, most suicides, or 10,994 (34.0%), were committed by those in their 60s or older, followed by 7,772 (24.0%) among those in their 50s, 5,102 (15.8%) among those in their 40s, and 4,333 (13.4%) among those in their 30s. By job type, most suicides were committed by those who were unemployed, at 15,453 (47.8%), followed by those who were employees, at 7,893 (24.4%), those who were self-employed, at 3,890 (11.9%), and housewives/househusbands, at 2,690 (8.3%).

Health problems were indicated by 4,087 individuals, or 39.1% of those who left suicide notes, as their reason or motivation for committing suicide, up 197 from 3,890 in the previous year. The next most common reason cited was economic or everyday life problems, indicated by 3,436 people

(32.9% of those who left notes), down 218 from 3,654 in the previous year.

### **Rise in Mental Health Problems Over Past Three Years Reported by 70% of Labour Unions**

The Japan Productivity Center for Socio-Economic Development has released the findings of its questionnaire survey on “the mental health efforts of labour unions.” The findings show that 68.7% of labour unions have witnessed an increase in “mental health problems” among workers over the past three years. This figure is up 1.5 points from 67.2% in the last survey conducted in 2003. The most frequently cited causes of these mental health problems were “personal relationships in the workplace” (30.4%), “work problems” (18.6%), and “workplace environment problems” (12.7%). The factor with the most impact in terms of negatively affecting mental health in the workplace was “a decrease in communication,” which at 49.9% was cited much more frequently than other factors such as “an increase in workload” (15.8%), “a lack of guidance from management personnel and supervisors” (12.3%), and “an increase in work hours” (8.8%).

# Domestic Topics



## **Woman Diagnosed with Sick Building Syndrome Receives Workmen's Accident Compensation**

A former female employee of the Institute for Global Environmental Strategies (IGES), a foundation under the jurisdiction of Ministry of the Environment, was diagnosed with sick building syndrome and filed a workmen's accident compensation claim for time taken off work. The Yokosuka Labour Standards Inspection Office recognized the relationship between her work and her illness, and approved the claim.

Immediately after moving to her newly constructed workplace (a laboratory), the woman began complaining of dizziness, headaches, and insomnia, and was diagnosed with sick building syndrome. The cause of her illness was traced to the presence of the chemical substance formaldehyde in the workplace.

Six workmen's accident compensation claims for sick building syndrome have been approved, but this is the first to be approved involving new construction.

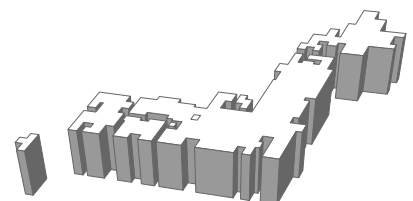
## **Workmen's Accident Compensation Approved for Undocumented Foreign Worker Who Suffered a Heart Attack**

An undocumented Bangladeshi worker suffered a heart attack while working on a civil engineering project. Deeming his disease to be a result of overwork, the Sagami-hara Labour Standards Inspection Office approved his claim for workmen's accident compensation. The worker arrived in Japan in 1996 and continued working for a civil engineering firm even after his visa had expired. Since workers who are residing illegally in Japan are still covered by Japanese labour-related laws, he consulted with a labour union that deals with problems concerning foreign workers and filed a claim with the Labour Standards Inspection Office.

Migrant foreign laborers are often subjected to harsh working conditions, but few file workmen's accident compensation claims. Undocumented workers are sometimes awarded workmen's accident compensation for injuries, but it is extremely rare for a claim involving heart disease to be approved.

### Asbestos-Related Illnesses Escalate

Asbestos, which has been widely used for many years in construction work, is becoming a major social problem. The problem continues to emerge as mesothelioma, a type of lung cancer, appears in employees (including retired employees) and other businesspeople who worked at or spent time around the premises of major machine makers who had once manufactured water pipes and other construction materials containing asbestos. Over the past 10 years, 51 people are believed to have died of asbestos-related diseases. A later survey found that as many as 500 workers at about 50 companies have died thus far, and asbestos is also suspected of impacting those workers' families and the residents who lived nearby the factories. Thus, the asbestos problem is beginning to show signs of developing from a workmen's accident compensation issue to a public health issue.



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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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