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## **An introduction to occupational health and government involvement.**

State intervention is , as an organized system with respect to occupational health and safety protection for the whole working population ; came into being from the industrial revolution (at first in the textile industry then gradual progression beyond the textile industry),, with the Shaftesbury legislation in England in the 19<sup>th</sup> Century., this brought forward a system of an inspectorate with powers of enforcement backed up by legislation.

But over the past 20 years or so many governments around the world have moved to replace older style prescriptive legislation with broader requirements based on duty of care and consultation .Using the Roben's report as a basis and its objective of which are.

In brief:

1: to create a unified and integrated statutory to increase the effectiveness of the state's contribution to occupational health and safety.

2: to create a framework for a more effective self regulating system. (ref 2)

Since our modern civilization and society in general is dynamic and is evolving almost geometrically, discarding old technology and adopting new technological systems and their associated chemicals and by-products at an unbelievable pace , our society's occupational health and safety system is limping behind; vainly trying to cope with and catch up with many new types of work places, discoveries: with many different life styles totally unheard of nor even remotely possible in the past, which directly impact upon the workplace. (Ref 5,7)

Examples like for example: AIDS, blood borne disease are still being discovered (ref: 3) genetically modified foods,(are being discussed); gene manipulation , modern pharmaceutical breakthroughs, drugs many legal and more illegal being in the workplace; and now threats by terrorists that is: "911" , and the US letters with anthrax, or accidents (like Bhopal in India , which killed or maimed tens of thousands), deep vein thrombosis on long haul aircraft flights , chemical, biological and nuclear weapons: (ref:4); commercial profits (when in opposition to occupational health and safety by disclosure ref 1) and environmental and or nuclear accidents, hazards and so forth.

### **More occupational health and safety factors identified:**

There are more factors introduced like 'cigarette use, excessive alcohol consumption, taking of prescription and non prescription drugs and other conditions which often; impacts upon the workplace.

Protecting the health of the public against environmental and occupational hazards in the future will depend upon:

'1) research into the acute and long term health effects of thousands of substances being released into the environment'.

2) surveillance for the occurrence of these hazards in the environment and the workplace.

3) development and implementation of techniques for eliminating or neutralizing these hazards.

4) laws to mandate the implementation of control strategies for the reduction of hazardous exposures.'

*(note : 'That there are 5,000,000 compounds with only ~5% having had toxicological studies with 50,000 being added each year.', ...so man may have to end up as a guinea pig!') (Ref 11)*

*(Ref 7)*

### ***Roben's Report and the impact upon society***

In as much as the impact of the Roben's report has standardized the approach of the occupational health and safety in Australia, (with some exceptions)(Ref 2) , the weakness seems in my experience as a 'injured worker ' (in NSW) that leaving the system as a self regulating one; has the disadvantage that self interests predominate (ie: the insurance industry and the medico-legal area seem to have a 'cosy' working relationship). The no fault system also leaves the injured worker at a severe disadvantage; having to prove (under legal cross examination); beyond a reasonable doubt that he/she has indeed suffered and as 'user – pays' in this new regime of worker's compensation; the injured worker usually ends up with nothing but pain and more indignity. Therefore the self regulation is fatally flawed, and in my observation and experience; corruption could seem to flourish. The no-fault system could also instill that the employer could be as negligent as he/she wants with impunity. (although this seems to be shifting here in WA in light of the recent deaths in construction and mining industry)

This could be confirmed in the 'new' interim report on 'National Worker's Compensation and Occupational Health and Safety Frameworks' to be released on Tuesday 21<sup>st</sup> October,2003 . 'It will set out the Commission's initial analysis and preliminary recommendations for scrutiny and comment. Public hearings to receive comment on the interim report will start at the beginning of December,2003' . The web site is: <http://www.pc.gov.au/current>

It is interesting to see that the majority of the written submissions are from predominately the 'self-interest' groups with no or little representation from the actual injured workers. (I intend to submit my observations.)

### Conclusion:

In a classic paper to the Harvard School of Public Health a noted academic stated that: ' Among the forces which make history, one of the most obvious is human need. Some would say that need sets the goals of human health. New needs emerge and evoke the measures which will satisfy them,... we cannot satisfy all of the needs we recognize.... For techniques not only enlarge our responses; they mold our expectations. Most obvious is the impact of therapeutic and preventative techniques,... every new technique ,... awakens a need,... at least in our western culture , where in matters of health we have a highly developed sense that whatever is possible for any should be available for all,... ***I believe that the history of public health might well be written as a record of successive redefinings of the unacceptable***' (Ref. 12)

This could also apply to the worker's compensation and attached is a web site for the latest national worker's compensation and occupational health and safety frameworks  
<http://www.pc.gov.au/inquiry/workerscomp/index.html>

There is no feedback from the injured worker to the worker's compensation systems overseer to give relative assessment of the judgement and the resultant 'compensation' for example in my case I received \$30 after all bills were paid while the barristers received \$1,500/day! I have not been able to re-start employment and it seems that now; that I never will, due to the serf or slave like payment paid. This has directly or indirectly leads to major social dislocation, family breakdown and suicide. And most importantly has been an unnecessary drain upon the social welfare, while the insurance company executives receive \$13,000,000 payoffs for retirement. (in the case of GIO). (Ref 13)

Therefore governments should be interested in all of the 'players' in worker's compensation, not only just the 'self interest' groups.

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### References

- 1: (Scientific American August 2003 pp 12 13)
- 2: Roben's Report circa 1970
- 3: [www://cdc.gov mm5232](http://www.cdc.gov/mm5232)
- 4: (Chemical Weapons degradation byproducts)
- 5: ( Roben's report circa 1970)
- 6: (Roben's Report circa 1970)
- 7: <http://www.bt.cdc.gov>
- 8: <http://www.hse.gov.uk>
- 9: <http://www.nih.gov>
- 10: Detels and Breslow (circa 1991)
- 11: *Scientific American June, July, 1995*
- 12: (VICKERS circa 1958)
13. NSW worker's compensation case <details if required >