# ARTIC CORPORT The Current Situation concerning Occupational Diseases and **Disclosure of Government Information in China**

China Labor Support Network (CLSN) September 2014

## Forward

Using relevant literature, we have been trying to understand the current situation concerning occupational diseases in China and to investigate how to improve the situation. However we have found that the information disclosed by the government is very limited. Additional information can be found in medical literature, although it does not provide more basic data, such as the number of cases of different occupational diseases and the gender, occupation and city of patients who have contracted occupational diseases. With such limited resources, it has only been possible to understand the situation by visiting the victims of occupational diseases in hospital.

## A. Overview of occupational diseases in China

a) Official data

The National Health and Family Planning Commission (NHFPC) publishes reports on the prevention of occupational diseases every year<sup>1</sup>. However, the data is not detailed. The following table shows data for new occupational disease cases in China in the past five years:

Year	2009	2010	2011	2012	2013
New Cases					
Total Number of new Occupational	18,128	27,240	29,879	27,420	26,393
Disease Cases					
Pneumoconiosis	14,495	23,812	26,401	24,206	23,152
Coal Worker Pneumoconiosis		12,564	14,000	1,163	13,955
Silicosis		9,870	11,122	10,592	8,095
Chronic occupational poisoning	1,912	1,417	1,541	1,040	904
Benzene poisoning	208	272	354	329	285
Lead and its compounds	1082	499	621	197	231
Arsenic and its compounds	165	157	290	164	232
Acute occupational poisoning	552	617	590	601	637
Significant cases of occupational poisoning accidents	188	215	182	185	230
Number of deaths in significant occupational poisoning accidents	21	28	45	20	25

#### Table 1. 2009-2013 New cases Occupational disease cases (10 Types) in China<sup>2</sup>

<sup>1</sup> http://www.moh.gov.cn/jkj/zyfsws/list.shtml

<sup>&</sup>lt;sup>2</sup> According to the List of Occupational Diseases in China《职业病目录》卫法监发[2002]108 号, and listed in order based on the number of cases

Vear	2009	2010	2011	2012	2013
New Cases	2005	2010	2011	2012	2013
Occupational ENT and oral diseases	424	347	532	639	716
Noise induced deafness	348	333	492	597	681
Occupational diseases caused by biological factors	192	201	146	293	316
Occupational diseases caused by	111	225	172	201	233
physical factors					
Heat illness		117	75	54	161
Hand-arm vibration disease		100	82	130	38
Occupational skin disease	176	226	138	148	141
Occupational eye disease	161	251	226	94	129
Chemical eye burns				64	
Occupational cancer	63	80	92	95	88
Benzene-induced leukaemia	22	49	52	53	41
Asbestos-induced lung cancer, mesothelioma	11	10	8	19	19
Other occupational disease	42	64	41	71	52
Occupational asthma			31	46	36
Occupational radiation sickness	0	0	0	32	25

b) Overview of occupational poisoning around China

As the government does not publish data for occupational diseases in individual provinces and cities, the following comparative analysis of the occupational disease situation in Guangdong Province, Jiangsu Province and Zhejiang Province is based on literature<sup>3 4 5 6 7</sup>.

<sup>&</sup>lt;sup>3</sup> 白(瑾),张恒东,丁帮梅等."十一五"期间江苏省职业病发病情况及趋势分析[J].中华劳动卫生职业病杂志, 2012,30(2):103-105. DOI:10.3760/cma.j.issn.1001-9391. 2012.02.005.

<sup>&</sup>lt;sup>4</sup>温贤忠,李旭东,黄永顺等.2006-2010年广东省新发职业病病谱分析[J]. 中国职业医学,2014,(2):157-162. DOI:10.11763/j.issn.2095-2619. 2014.02.008.

<sup>&</sup>lt;sup>5</sup> 邹华,袁伟明,方兴林等.2001 年至 2010 年浙江省职业中毒情况分析[C].//首届中国卫生应急学术论坛论文集. 2012:485-489.

<sup>&</sup>lt;sup>6</sup> 袁伟明,方兴林,张美辨等.浙江省 2006 至 2010 年职业病发病分析[J]. 中华劳动卫生职业病杂志,2013,31(4):279-281. DOI:10.3760/cma.j.issn.1001-9391. 2013.04.009.

<sup>&</sup>lt;sup>7</sup> According to the China Labour Statistic Yearbook《中国劳动统计年鉴》, in 2010, Guangdong, Jiangsu and Zhejiang had the highest urban employment rates of 24 million, 21 million and 16 million respectively.

Table 2. 2006-2010 New Occupational Disease Patient Cases in Guangdong, Jiangsu and Zhejiang					
	Guangdong Province	Jiangsu Province	Zhejiang Province		
The gender of the workforce aged 16 and above in 2010 <sup>8</sup>					
Male	56%	54%	58%		
Female	44%	46%	42%		
Total number of work injuries identified as due to occupational diseases	2,335	2,552	917		
Total number of new occupational disease cases	1,847	5,469	1,866		
Male	82%	-	88%		
Female	18%	-	12%		
Median age of onset of disease	36	-	-		
Male	37	-	-		
Female	30	-	-		
Percentage with age of onset below 45	81%	-	57%		
Median duration of employment before onset	4	-	-		
Male	4.6	-	-		
Female	4.1	-	-		

## Table 2. 2006-2010 New Occupational Disease Patient Cases in Guangdong, Jiangsu and Zhejiang

## Table3. 2006-2010 Classification of new cases of occupational poisoning in Guangdong, Jiangsu and Zhejiang

	Guangdong Province		Jiangsu Province		Zhejiang Province		
Acute occupational poisoning	Number of cases	148	Number of cases	255	Number of cases	63	
	Dimethyl formamide, ses chloroform, and 67% dichloroethane poisoning	Dimethyl formamide,	Dimethyl Carbon ormamide, monoxide	Carbon monoxide	12%	Dimethyl formamide	19%
Main diseases		67% Hydrogen sulfide	7%	Organic tin	17%		
Chronic occupational poisoning	Number of cases	366	Number of cases	713	Number of cases	392	

<sup>&</sup>lt;sup>8</sup> Data source: Men and Women in Chinese Society – Fact and data (2012) 《中国社会中的女人和男人一事实和数据 (2012)  $\,\,$  , women constitute 45% of the working population above 16 in the country.

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	Guangdong Prov	vince	Jiangsu Pro	ovince	Zhejiang Pr	ovince	
			Carbon disulfide <sup>9</sup>	48%	Lead and its compounds	64%	BON
	Benzene, n-		Hexane	20%	Benzene	21%	VID.
Main diseases	hexane, and lead poisoning	88%	Mercury and its compounds	12%	Carbon disulfide	11%	
			Benzene	6%			
Occupational Dermatology	Number of cases	157	Number of cases	105	Number of cases	21	
Main diseases	Trichloroethylene dermatitis, chemical skin burns and contact dermatitis	94%	-	-	-	-	
Occupational cancer	Number of cases	116	Number of cases	20	Number of cases	5	
Main diseases	Benzene-induced leukaemia	96%	-	-	-	-	

## Table 4. 2006-2010 Top 3 industries<sup>10</sup> contributing to new cases of occupational poisoningin Guangdong, Jiangsu and Zhejiang

Region		Acute o	occupational po	bisoning	Chronic occupational poisoning			
Indust	ry	Guangdong Province	Jiangsu Province	Zhejiang Province	Guangdong Province	Jiangsu Province	Zhejiang Province	
	Name of industry	Light Industry	Chemical Industry	Light Industry	Light Industry	Light Industry	Machinery Industry	
1st	Number of new cases		99	28		312	155	
	Constituent ratio		39%	45%		44%	40%	
	Name of industry	Electronics Industry	Light Industry	Chemical Industry	Electronics Industry	Electronic s Industry	Electronics Industry	
2nd	Number of new cases		49	22		157	77	
	Constituent ratio		19%	35%		22%	20%	
	Name of industry		Machinery Industry	Building Materials Industry	Machinery Industry	Ordnance industry	Light Industry	
3rd	Number of new cases		37	9		65	74	
	Constituent ratio		15%	14%		9%	19%	
Total	Total number of new cases	117	185	94%	336	534	306	
	Constituent ratio	79%	73%	59%	92%	75%	78%	

<sup>&</sup>lt;sup>9</sup> In industrial use it is yellow in colour and has the smell of rotten turnips. It is mainly used for the production of viscose fibre. During production of cellophane and carbon tetrachloride, vulcanisation, grain fumigation, varnishing and extraction of grease from organic solvent, there can be contact with carbon disulfide.

<sup>&</sup>lt;sup>10</sup> Industrial classification is based on GB/T 4754 Standard Industrial Classification (SIC) Codes《国民经济行业分类》.

## B. Analysis of information of hospitalised workers with occupational diseases in Guangzhou

As the government only discloses limited information about occupational diseases, we visited hospitalised workers at the Guangdong Prevention and Treatment Centre for Occupational Diseases and the Guangzhou Prevention and Treatment Centre for Occupational Diseases in late March 2014 to conduct research and analysis of occupational diseases.

- a) The workers' background
  - 1. Number of hospitalisations: 74 (Male: 46%, Female 54%)<sup>11</sup>
  - 2. Average age: 37 (Oldest: 55, Youngest: 17)
  - 3. Place of origin: Mainly Sichuan (12%), Guangdong (10%), Henan (10%), Hunan (10%)
  - 4. Education: In general not high, 76% below middle school
  - 5. Working hours and working age: 12 hours a day on average, 74% work 8 hours or more, 45% works 12 hours or more. As they contact highly concentrated toxic and hazardous substances over long hours, 50% workers had contracted an occupational disease after less than 5 years, while 25% workers had contracted an occupational disease after less than 1 year

## Table 5. Distribution of diseases among workers being interviewed at the two centres inGuangzhou

Diseases	Gender	Number	Percentage	Entire work life		Years of occupation	contact onal ha:	with zards	
			Median	Min.	Max.	Median	Min.	Max.	
	Male	16	22%	8	3	26	5.8	2.8	19.1
Benzene	Female	9	12%	5	4	15	5.6	3.7	14.3
poisoning	Total	25	34%	7	3	26	5.7	2.8	19.1
N hoveno	Male	1	1%						
noisoning	Female	23	32%	3	1	7	1	0.6	4.8
poisoning	Total	24	32%	3	1	7	1	0.6	4.8
	Male	14	19%	7	3	25	5.3	1.8	23.1
Pneumoconiosis	Female	0	0%						
	Total	14	19%	7	3	25	5.3	1.8	23.1
	Male	0	0%						
Benzene-induced	Female	5	7%	7	2	11	4.7	1.3	8.3
leukaemia	Total	5	7%	7	2	11	4.7	1.3	8.3
Occupational	Male	2	3%	6	5	6			
noise induced	Female	1	1%	4	4	4			
deafness	Total	3	4%	5	4	6			
Hand arm	Male	2	3%						
vibration disease	Female	0	0%						
vibration disease	Total	2	3%	5	4	5			
Other	Male	1	1%	7	7	7	7.3	7.3	7.3
occupational	Female	2	3%	14	14	14	4.7	0.3	9
diseases	Total	3	4%	11	7	14	7.3	0.3	9

<sup>&</sup>lt;sup>11</sup> 2 of the workers had both occupational noise induced deafness and hand-arm vibration disease at the same time.

- b) Situation of workers' factories
  - 1. Location: 96% located in Pearl River Delta region<sup>12</sup>
  - 2. Distribution of industry:

Industry	Percentage
Electronic	37%
Process and manufacturing	29%
Chemical	8%
Metal	5%
Mining	4%
Ceramics	4%
Construction	3%

3. Factory size: the percentages of small, medium and large enterprises<sup>13</sup> were 48%, 7% and 30% respectively. Small private enterprises are particularly weak in labour protection conditions. The occupational health protection in large foreign enterprises is also not good enough.

Size of enterprise	Type of enterprise	Percentage	
Small enterprise			48%
	Private enterprise	32%	
	Foreign enterprise	10%	
	Joint Ventures	2%	
Medium enterprise			7%
	Foreign enterprise	4%	
	Joint Ventures	3%	
Large enterprise			30%
	Private enterprise	7%	
	Foreign enterprise	16%	
	Joint Ventures	3%	
	State enterprise	3%	

- 4. In 2012, there was an outbreak of an occupational disease at an electronics factory in Dongguan. 38 workers suffered from n-hexane poisoning and were sent to Guangdong Prevention and Treatment Centre for Occupational Diseases. 24 out of them were still hospitalised when this research took place.
- c) Status of labour protection
  - 1. 60% of workers did not get the appropriate labour protection measures.
  - 2. Only 44% of workers received occupational health examinations, and only 34% of them knew their results.

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<sup>&</sup>lt;sup>12</sup> The Pearl River Delta includes the 9 cities of Guangzhou, Shenzhen, Foshan, Dongguan, Zhongshan, Zhuhai, Huizhou, Jiangmen and Zhaoqing.

<sup>&</sup>lt;sup>13</sup> Notice on Classification Standards for Small and Medium Enterprises – Industrial 《关于印发中小企业划型标准规定的通知》: 工业. Small and medium enterprises are those which have less than 1,000 employees or an operating revenue of less than 4 billion. Enterprises with 300 or more employees and 200 million operating revenue are medium enterprises. Small enterprises have 20 or more employees and 3 million operating revenue .....

- d) Compensation for occupational injury
  - 1. 77% of workers received wages during injury, however a majority did not receive their full pay. The difference was RMB 1,042 per month on average.
- sir 2. The table shows the proportion who received compensation for their occupational injuries

Compensation	Percentage
Medical expenses	86%
Food subsidies during hospitalisation	66%
Nursing care during hospitalisation	33%
Wages during injury	77%

## C. Conclusion

Although, at the national level, the number of new occupational disease cases is decreasing according to official statistics, in economically developed regions new occupational disease and occupational poisoning cases are still increasing, particularly in light industry and electronic industry. On the one hand, the supervision role of the government is poor and enterprises do not take responsibility for occupational disease prevention, meaning that workers are more likely to suffer from occupational hazards. On the other hand, in Guangdong, Jiangsu and Zhejiang, the majority of workers work in labour intensive enterprises and labour mobility is relatively high. These workers also lack the channels for understanding occupational hazards and lack the awareness of occupational health and disease prevention. Therefore, this group of workers have a high risk of suffering from occupational diseases.

- a) Present sources of information on occupational health and safety in China include:
  - 1. The NHFPC annual report on prevention of occupational diseases for the previous year.
  - 2. China Labour Statistical Yearbook data related to social security information, for example, the working population, numbers of occupational injuries identified.
  - 3. Statistical analysis of occupational diseases around the country from the Chinese Journal Full-text Database.
  - 4. Information from the community collected by NGOs.
- b) Difficulties in data collection
  - 1. Authenticity of figures

Diagnosed cases of occupational diseases are generally reported through the 'Occupational hazards monitoring system'. However, there should be errors in the number of cases of occupational diseases due to many workers not undergoing diagnosis, enterprises concealing the workers' cases, unfair diagnosis<sup>14</sup>, government concealing information, and error in reporting etc.

<sup>&</sup>lt;sup>14</sup> For example, the better ear's frequency audiometry is adopted for diagnosis of occupational noise deafness.

If statistical analysis is done based on occupational poisoning according to magazines or mass media, the problem of authenticity is greater as there is no way to check and verify the figures. For instance, there are different figures from various literatures on the number of cases of chronic occupational poisoning in Zhejiang in 2010.

2. Lack of analysis on gender ratio, age of onset and duration of employment before onset

At present, only the total number of different types of occupational disease cases is disclosed, there is no analysis on gender ratio, age of onset and duration of employment before onset. There is a lack of data support when analysing related issues.

3. Lack of community information

At the end of 2012, the employed population in China numbered 0.77 billion, but only 0.19 billion had bought occupational injury insurance. The coverage rate was only 25%. It is common for enterprises not to buy insurance for workers in order to save costs. Occupational injury insurance is less common for migrant workers who have high mobility.

c) Disclosure of information

As an NGO, our support to occupational disease patients not only includes supporting workers to protect their lawful rights, but also includes the voice and empowerment of the entire community. In this process, the group needs to further explore and practice in order to develop open and sustainable ways to improve occupational health and safety in the current environment. One of the alternatives is to demand information disclosure from the government, including the number of various types of occupational diseases around the country, the gender ratio, and high risk enterprises. The research and analysis of civil society organisations can fill the role temporarily.

Related government departments should disclose occupational disease information in detail, so that different parties can use the information to do research and analysis in order to make recommendations for improvement.

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