

November 27, 2013

Minister of Health & Family Welfare, Shri Ghulam Nabi Azad
Minister of Labour & Employment, Sis Ram Ola
Minister of Forests & Environment, Jayanthi Natarajan
Government of India

Dear Minister of Health & Family Welfare, Minister of Labour & Employment and
Minister of Forests & Environment:

We respectfully wish to bring to your attention our deep concerns regarding
efforts currently underway to promote the use of chrysotile asbestos in India.

On December 3 and 4, the International Chrysotile Association, which represents
the interests of the global asbestos industry, together with the Asbestos Cement
Product Manufacturers' Association of India, will be holding a conference in New
Delhi to promote use of chrysotile asbestos in India and to put forward the claim
that scientific research shows that chrysotile asbestos can be safely used.

This claim is utterly false. The world scientific community has overwhelmingly
concluded that chrysotile asbestos causes deadly diseases, such as asbestosis,
mesothelioma and lung and other cancers, and that it cannot be safely used.

The International Agency for Research on Cancer and the World Health
Organization have called for an end to all use of chrysotile asbestos in order to
prevent further tragic epidemics of asbestos-related diseases.

To name just a few leading organisations, the World Federation of Public Health
Associations, the International Commission on Occupational Health, the
International Social Security Association, the Union for International Cancer
Control (representing 770 member organisations in 155 countries, including the
Indian Cancer Society and the Cancer Aid and Research Foundation of India),
the International Trade Union Confederation (representing 175 million workers in
151 countries), the Collegium Ramazzini, the Joint Policy Committee of Societies
of Epidemiology and the Indian Association of Occupational Health have all
called for an end to the use of chrysotile asbestos.

Chrysotile asbestos represents 95% of all asbestos used over the past century
and today represents the entirety of the asbestos trade. In every country in which
it has been used, chrysotile asbestos has left behind a legacy of terrible human
suffering and billions of dollars of economic costs for health care and
compensation for victims and for removal of deteriorated asbestos from

buildings. For this reason, the World Bank recommends against the use of chrysotile asbestos.

The International Chrysotile Association is a lobby organisation, based in Quebec, Canada and headed by Mr. Jean Leblond, a long-time salesman for the Quebec asbestos mines. The Association has been condemned by medical experts in Quebec and around the world for putting forward deadly, deceptive misinformation that will cause suffering and loss of life for years to come.

Not a single reputable scientific agency in the world supports the claim put forward by the International Chrysotile Association and the Asbestos Cement Product Manufacturers' Association that chrysotile asbestos can be safely used.

In the face of the demand by Quebec and other health experts to end its export of asbestos, the Quebec government last year closed down the last asbestos mines in Quebec. Quebec and the rest of Canada virtually stopped using asbestos many years ago. However, because of the long latency period for asbestos-related diseases, 70% of deaths from occupational disease in Quebec continue today to be caused by asbestos.

In the face of the public health disaster caused by asbestos, 54 industrialized countries have banned any use of asbestos. Other countries, such as the United States and Canada simply stopped using it. Consequently, the asbestos industry, in order to ensure its continued profits, is aggressively targeting Asian countries for sales. Just six Asian countries – China, India, Indonesia, Vietnam, Thailand and Sri Lanka – now represent 70% of world asbestos consumption.

While the asbestos industry pretends that asbestos is widely used, in fact, just eight countries represent 87% of global consumption: China, India, Brazil, Indonesia, Russia, Vietnam, Thailand and Sri Lanka.

India imports more asbestos than any other country on the planet, with imports having risen from 253,382 tons in 2006 to 473,240 tons in 2012, an increase of 186%. These vast amounts of asbestos, being placed in homes and schools across India, are a deadly time bomb that will go on causing suffering and deaths for decades to come, as well as causing a financial drain on India.

While Russia and Brazil reap the profits of exporting asbestos, it is India that will pay the price in human suffering and in financial costs.

While there is no systematic monitoring and reporting of asbestos related diseases (ARD) in India, 225 cases of mesothelioma, a rare form of cancer found in people exposed to all forms of asbestos fibres, have been reported by the Indian cancer registry, the Gujarat Cancer Institute and the Tata Cancer Institute. Independent studies in Mumbai, Madhya Pradesh and Jharkhand of former asbestos product manufacturing factory/mine workers have identified over 500

cases of asbestosis, some of whom have also been compensated for contracting ARD due to work related exposure. New data being collected by independent health organisations show diseases amongst family members of workers due to secondary and environmental exposures. Several legal cases are pending in labour and civil courts in Gujarat, Maharashtra and Rajasthan.

As a result of increased use of asbestos in Asia, Dr. G.V. Le, Dr. K. Takahashi et al have warned: “A surge of ARD in Asia should be anticipated in the coming decades. Asian countries should not only cease asbestos use but also prepare themselves for an impending epidemic of ARD.”¹

In order to promote its false claim that chrysotile asbestos can be safely used, the International Chrysotile Association financed a paper to be written by Dr. David Bernstein, who has worked for decades for the tobacco industry and for the asbestos industry. [Dr. Bernstein will present his paper](#), *Health Risks of Chrysotile Revisited*, supporting use of chrysotile asbestos, at the New Delhi conference. A New York court has recently ruled that a number of scientific papers written by Dr. Bernstein, financed by an asbestos products company, were intended to cast doubt on the capability of chrysotile asbestos to cause cancer, and constituted potential crime-fraud.

When he testified in court on behalf of an asbestos company, Dr. Bernstein admitted to the judge that not a single scientific body anywhere agreed with his views on chrysotile asbestos.

The asbestos industry is concerned to protect its profits. Our concern is the protection of public health. We respectfully urge you, as Minister of Health, Minister of Labour and Minister of Environment for India, to put the health interests of the people of India ahead of the vested interests of the asbestos industry.

We urge you and the government of India to support the recommendation of the World Health Organization and the worldwide, reputable scientific community and ban the use of any asbestos in India in order to prevent further unnecessary suffering and death. We urge you to join the vast majority of countries in the world who have adopted an enlightened policy, based on the overwhelming scientific evidence, to ban all use of asbestos in order to protect public health for generations to come.

We would be happy to provide our support to you in any way that might be useful. Please do not hesitate to call upon us.

¹ Le, G.V., Takahashi, K. et al, Asbestos use and asbestos-related diseases in Asia: Past, present and future, *Respirology* (2011) 16, 767–775.

Respectfully

Copies to:

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Director, National Institute of Miners Health, Nagpur
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**SIGNED BY THE FOLLOWING INDIVIDUAL SIGNERS AND
ORGANISATIONS**

Note: The following individual signers are listed in alphabetical order.
Titles and affiliations are given for identification purposes only. Some of
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THE FOLLOWING ORGANISATIONS HAVE ENDORSED THE LETTER:

- Akila India Kattida Thozhilalar Madhiya Sangam, India
- All Himachal PWD and IPH Workers Union, India
- American College of Occupational and Environmental Medicine, USA
- Asangathit Karamchari Union, India
- Asbestos Disease Awareness Organization (ADAO), USA
- Asbestos Victims Association Andalucía, Spain
- Asbestos Victims Association Galicia, Spain
- Asbestos Victims Association Madrid, Spain
- Asbestos Victims Association Valladolid, Spain
- Asia Monitor Resource Centre - regional labour rights Non Governmental Organisation, Hong Kong
- Asian Citizen's Center for Environment and Health, South Korea
- Asian Network for the Rights of Occupational and Environmental Victims (ANROEV), India
- Associação Brasileira de Saúde Coletiva, ABRASCO - Public Health Association of Brazil
- Associated Labor Unions-Trade Union Congress of the Philippines
- Association de Défense des Victimes de l'Amiante du Golfe de Fos, France
- Association Henri Pézerat, France
- Association Nationale de Défense des Victimes de l'Amiante (ANDEVA), France

- Associazione Familiari Vittime Amianto, AFEVA (Asbestos Victims and Relatives Association), Italy
- A Walk to Remember Victims of Asbestos - Canada/USA. Leah Nielsen - Utah, USA
- Ban Asbestos France
- Ban Asbestos Network Korea, South Korea
- Ban Asbestos Network of India (BANI), India
- Bandkam Mazdoor Sangathan, India
- Bangladesh Building & Wood Workers Federation (BBWWF), Bangladesh
- Bangladesh Free Trade Unions Congress (BFTUC), Bangladesh
- Bangladesh Occupational Safety, Health & Environment Foundation (OSHE), Bangladesh
- Barrow Trades Union Council, UK
- Belgium Asbestos Victims Association (ABEVA), Belgium
- Bernie Banton Foundation, Australia
- Bhatha Mazdoor Sabha, India
- Bhawan Nirman Karmkar Mazdoor Union, India
- Bhopal group for information and action, India
- Bhopal gas peedit mahila stationery karmchari sangh, India
- Bhopal gas peedit nirashrit pension bhogi sangharsh morcha, India
- Bhopal gas peedit mahila purush sangharsh morcha, India
- Building and Woodworkers International
- Canadian Association of University Teachers / Association canadienne des professeures et professeurs d'université, Canada
- Canadian Environmental Law Association, Canada

- Canadian Society for Asbestos Victims (CanSAV.ca), Canada
- Canadian Unitarians For Social Justice, Canada
- Canadian Voices of Asbestos Victims, Canada
- Center for Research on Occupational Diseases, Tehran University of Medical Sciences, Tehran, Iran
- Children against Dow Carbide, India
- Construction, Forest, Brick Kiln & Wood Workers Union, India
- Council of Canadians, Canada
- Cumbria Asbestos Related Disease Support Group, UK
- Delhi Asangathit Nirman Mazdoor Union, India
- Delhi Jal Mal Kamgar Sangharsh Morcha, India
- Ecolife, Baku, Azerbaijan
- Environics Trust, India
- European Federation of Building and Woodworkers (EFBWW), Brussels, Belgium
- European Work Hazards Network
- Families Against Corporate Killers, UK
- Forest Wood and Building Workers Association, India
- German Victims Organisation, Germany
- Gujarat Forest Produces Gatherers and Forest Workers Union Adivasi, India
- Healthwatch Forum, Uttar Pradesh, India
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- Hind Khet Mazdoor Panchayat, India

- Indian National Building, Construction, Forest and Wood Workers Federation, India
- Indian National Rural Labour Federation, India
- Institute for Occupational Health and Safety Development from the Philippines
- Inta Bhattha Karamchari Union, India
- International Ban Asbestos Secretariat, UK
- International Campaign for Responsible Technology, USA
- International Society of Doctors for the Environment, Switzerland
- Karnataka State Construction Workers Central Union, India
- Kerala Kettida Nirmana Thozhilali Congress, India
- Korea Federation for Environmental Movement, Friends of the Earth, South Korea
- La Red de Acción sobre Plaguicidas y Alternativas en México (RAPAM) - Centro de Análisis y Acción en Tóxicos y sus Alternativas (CAATA), Mexico
- Liverpool Trades Union Council, UK
- La Déclaration de Berne, Switzerland
- London Hazards Centre, UK
- Mahanagar Asangathit Mazdoor Union, India
- Maharashtra Bandhkam Va Lakud Kamgar Sangathan, India
- Maharashtra Building Construction Forest and Wood Workers Congress, India
- Merseyside Asbestos Victims Support Group, UK
- MiningWatch Canada
- National Union of Public and General Employees, Canada

- Nikhila Orissa Bidyut Sramik Mohasangha, India
- Nirman Mazdoor Panchayat Sangam, India
- Occupational and Environmental Health Network of India (OEHNI), India
- Occupational Health & Safety Association, India
- Ontario Humanist Society, Ontario, Canada
- Peoples Training & Research Center, India
- Prevent Cancer Now, Canada
- Nirman Mazdoor Sanghna, India
- Northeast Asbestos Support & Awareness Group, UK
- Orissa Forest and Minor Forest Workers Union, India
- Orissa Kendupatra Karamchari Sangha, India
- Orissa Nirman Mazdoor Sabha, India
- Rajasthan Patthar Khan Evam Nirman Mazdoor Sangathan, India
- Rideau Institute, Canada
- RightOnCanada.ca, Canada
- Rural Workers Organisation, India
- Sambhavna Trust, India
- Scottish Hazards Campaign, Scotland
- SEWA Rural, Society for Education, Welfare & Action Rural, Bharuch, Narmada and surrounding districts, south Gujarat, India
- Shevaroys General Employees Union, India
- Shilpi Kendra, Silicosis Peedit Sangh, Madhya Pradesh, India
- Sierra Club Canada

- Syndicat national des mineurs CFDT, France
- Spanish Federation of Associations of Victims and Groups against Asbestos, Spain
- Tamil Maanila Kattida Thozhilalar Sangam, India
- Thamizhaga Kattada Thozhilalargal Mathiya Sangam, India
- The McLeod Group, Canada
- The South African Mesothelioma Interest Group, South Africa
- The People's Health Movement Circle of Canada
- ToxicsWatch Alliance (TWA), India
- Trade Union Confederation of Workers' Commissions, Spain
- Trade Union Confederation of General Workers Unions, Spain
- UK National Hazards Campaign, UK
- United Front for Rural, Plantation and Construction Workers, India
- Uttar Pradesh Gramin Mazdoor Sangathan, India
- Victims of Industrial Disease, Southwestern Ontario, Canada
- WECF International, Germany, France and Netherlands