

## **Telegana's 'Villages of widows'**

### **What is the issue?**

In the 1970s, hundreds of women from Mahbubnagar's villages in Telegana lost their husbands to silicosis, an occupational hazard that could have been prevented if safety protocols had been followed.

### **What is the ground reality?**

- The victims were workers in a quartz-mining and crushing factory of the Andhra Pradesh Mineral Development Corporation (APMDC) at Elkatta.
- Elkatta village is in Telangana's Ranga Reddy district which was earlier in Mahbubnagar district.
- Quartz was mined at Chowlapally and brought to the crushing unit at Elkatta, where it was heated to 1,000°C in a kiln, broken into smaller pieces, and turned into fine dust in an oblong closed shed.
- This shed proved to be a virtual death trap, as the workers kept inhaling the odourless silica dust that gave them a racking cough and led to shortness of breath.
- APMDC is a public sector undertaking and now it is known as Telangana State Mineral Development Corporation (TSMDC).
- APMDC ran the mines from 1965 to 1974.
- After 1974 they shut the mines down abruptly when they saw that the workers were succumbing en masse to silicosis.
- According to the villagers, around 350 workers were employed in the mines and the crushing unit, and a majority of them were exposed to silica dust.
- Until the shutdown, whenever a worker fell sick, he was simply told that his cough was a temporary phenomenon.
- The workers were not told that they were victims of silicosis.
- The locals called the disease as "guttala bimari", or "the disease from the hills" and weren't aware that the disease was silicosis.

### **What is silicosis?**

- Silicosis is a lung disease caused by breathing in tiny bits of silica, a mineral that is part of sand, rock, and mineral ores such as quartz.
- It mostly affects workers exposed to silica dust in occupations such as mining, glass manufacturing, and foundry work.

- Over time, exposure to silica particles causes scarring in the lungs, which can harm the ability to breathe.
- Exposure to large amounts of silica can go unnoticed as it is a non-irritant and does not cause any immediate health effects.
- According to the World Health Organization (WHO) the symptoms of silicosis — shortness of breath, cough, fever and bluish skin — show up only after prolonged exposure to silica dust.
- Silicosis is incurable, and so clinical management includes removing the worker from the industry and giving symptomatic treatment

### **Did the authority turned a blind eye towards the workers ailment?**

- The government and the corporation left the workers didn't accept the responsibility and left the workers to fend for themselves.
- There was no help that was offered to the workers to take care of themselves from this disease.
- The authorities quietly abandoned the quartz-mining and crushing activities in 1974.
- Even though the mining lease was valid till 1985 and the mineral was available in abundance.
- The corporation told the workers that operating the mine had become uneconomical instead of acknowledging the toxicity of the workplace as the issue.
- The corporation laid off the workers in batches and paid paltry amounts instead of the full compensation and severance package.
- This was done to avoid the liabilities under Section 25-O of the Industrial Disputes Act of 1947 and Section 6 of the Metalliferous Mines Regulations, 1961.
- These sections mandate that the mine owner should submit a notice to the Chief or the Regional Inspector, stating reasons for abandoning the mine and the number of persons affected.

### **What were the other major negligences in this issue?**

- **Misdiagnosis:** In the local government hospitals, quartz mine workers who fell sick were wrongly diagnosed as having Tuberculosis (TB).
- SO the workers were referred to TB hospitals in Vikarabad and Hyderabad.
- There was no clinical management of silicosis as they continued to get treated for TB.
- **Bureaucratic Red tape:** Government agencies are not willing to recognize the disease as silicosis.
- Various inquiries by different group of people such as private doctors, Director General of Mines Safety etc hadn't yielded a concrete result to help

the victims and their families.

### **What is the present status?**

- As the last resort the victims approached the Andhra Pradesh High Court in 2000.
- Three petitioners helped by the Banjara Development Society NGO (BDS) moved the court under Article 226 of the Constitution.
- After more than a decade of litigation, the High Court converted the writ petition into a Public Interest Litigation.
- It directed the authorities, including the APMDC, to propose a scheme to safeguard the life and liberty of the persons suffering from silicosis.
- In response in 2013 the APMDC submitted a scheme under which it agreed to pay the silicosis-affected workers compensation as decided by the Compensation Commissioner under the Workmen's Compensation Act, 1923.
- However after 5 years only now an official team of the TSMDC has started a preliminary survey of the villages.
- The scheme submitted to the High Court speaks about submission of proof of employment and confirmation and verification of workers who suffered silicosis
- The need of documents shouldn't add to the agony of the widows as the case is to be dealt with a humanitarian concern.

**Source: The Hindu**

