

HEALTH CULTURE AT WORKPLACE: INDIA'S STAND

Written by *Harshul Khadiya** & *Simran Lunagariya***

* 2nd Year B.Com LLB Student, Institute of Law Nirma University

** 2nd Year B.Com LLB Student, Institute of Law Nirma University

ABSTRACT:

India, one of the fastest developing countries in the world, according to the 2001 census is a home to approximately 40 million factory workers which makes it important to acknowledge their occupational health. Basic Occupational Health Service was first introduced by the WHO (World Health Organisation) with a motive to protect the health of people at work, promote their well-being and prevent ill health as well as accidents. Basic Occupational Health Services revolve around certain principles which include the availability of services to all working people, services to address local needs and adapt local conditions. Developing countries like India because of rapid industrialization are going through a paramount shift in occupational health. Occupational health needs to be prioritized in such countries because it helps in boosting productivity as well as promote the safety of workers. This paper is an attempt to analyse the situation of universal health coverage in India with respect to labour. This paper will be dealing with the positioning of legislations and the policies regarding labour health, and exploring the aspirations of the government. 2019 will be a remarkable year for the labour world as International Labour Organisation is celebrating its 100th anniversary. ILO has an agenda of providing organization of services for all working people across the world. In order to achieve this goal, ILO has launched a Global Strategy on Occupational Safety and Health and ILO convention No. 187 on Promotional Framework. Every worker is entitled to the basic right of a safe work environment; currently, India is also taking various steps to acknowledge this fundamental right. Prior to 2019, the various governments in India did not find it essential to ratify a few major conventions of the International Labour Organisation which included occupational safety and health convention, 1981. This study will be analysing various laws related to the labour and the policies of the International Labour Organisation against The Occupational Safety, Health and Working Conditions code, 2019.

India has identified 17 sustainable development goals as per SDG India Index 2018 and good health and well-being are one of them. In consonance with this, the government of India has framed certain policies addressing the health of labours. The government of India has framed its national policies on Occupational Health based on DPSP mentioned in the Constitution of India which emphasise on promoting secured health at workplace. The government through this policy aims to create a safe health culture at workplaces of all sectors, to establish research capability in emerging areas of risk and providing control measures, to create Green Jobs which would contribute to sustainable development goals and many more. This paper will be analysing the steps taken by the government in the proper implementation of the policies and where the government stands in 2019. The methodology of this paper will be doctrinal and qualitative research methodology accompanied by the exploratory method through which the paper will come up with the current position of India with respect to the international conventions ratified by India and the status of Universal Health Coverage with respect to the labour class in India.

INTRODUCTION:

The advent of the industrial revolution had been a remarkable juncture in the evolution of the standards of health at workplace. Health at workplace, often regarded as occupational health aims towards the improvement of the work environment and promotion of employee's health at workplace in general and a good lifestyle.ⁱ It is a branch of healthcare that deals with the physical, psychological and social well-being of workers in all occupations.

The concept of occupational health and safety can be understood very precisely by linking it with Maslow's psychological theory of hierarchy of needs.ⁱⁱ The theory explains that the human mind desires to be physically efficient before striving for social and growth requirements. Similarly, a worker would also be more motivated to grow if he is given a healthy and safe workplace. And having a competent working class is a very essential factor to have a flourishing economy.

The matrix of occupational health initially included only a few major health and safety factors at workplace, but eventually, due to the industrialization era, it had to develop its ambit to fulfill the contemporary requirements. The aforesaid factor has been recognized by many developing countries across the globe, one of them being India. They are also taking steps in policy formation considering the new ambit.

This paper explores the current condition of occupational health, globally as well as in India.

While considering the case of India, it is noticed that the increase in the labor force has been directly proportional to the growth of the economy, ranging from 330 million to 500 million from 1990 to 2014. ⁱⁱⁱ These statistics depict the importance of labour class but in the past, enough attention was not provided to their health. The government had made several policies and schemes to address this sector all these years but there was no effective and desired outcome as per the labor investigation report. Moreover, the policies formed were elementary and not well structured to address advanced needs. There were several flaws like shortage of infrastructure, money distribution and reliable social order.^{iv}

ILO is celebrating its 100th anniversary this year and it has recognized “OHS for future” to be its main agenda this year. The paper will analyze the role of ILO in the field of OHS. The paper will also analyze the role of existing legislations and the Indian government presently in the field of OHS. After analyzing international as well as national scenario the paper will remark on the existing challenges in India in OHS and come up with suggestions to address those lacunae in functioning.

OCCUPATIONAL HEALTH AT A GLANCE:

The concept of occupational health has marked its existence from the industrial revolution happened in the late 18th and 19th century. This industrial revolution paved the way for a variety of health issues to the labour class such as long working hours, use of dangerous chemicals, harmful gases and had a negative impact on their physical, social and psychological health. Although the impact of the industrial revolution in many countries resulted in increased GDP, the health of the industrial workers was neglected by almost all the countries in the world. The need to address the occupational health issues emerged after World War 1. This resulted in the creation of the International Labour Organization in 1919 and the World Health Organization in 1948. ILO and WHO identified the definition of Occupational Health as “the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations by preventing departures from health, controlling risks and the adaptation of work to people, and people to their jobs.”^v

But it becomes an essential need to address the issue at present times where the population and industries are increasing at an increasing rate. Across the world, Acts, Legislations, and

policies were adopted with the intention of protecting the rights of the workers and maintaining a safe work environment for all workers. In India, The Factories Act, 1948 was enacted with the objective of regulating health, safety welfare and special provisions relating to women and children who work in the factories.

In the year 2015 General Assembly at United Nations adopted Agenda 2030 which included 17 Sustainable goals. The third sustainable goal is Good Health and Well-being, since then every country and Labour organisations have worked in consonance with the SDG goals. The director-general of ILO proposed five programs focussing on strengthening the impact and efficiency in the work area of occupational health and safety. The operational area as identified by the programs were mostly in developing countries, specifically where work-related diseases are more vulnerable and where the rights of the workers are being compromised. While there has been remarkable progress over the last 100 years, the issue of creating and maintaining a healthy and safe workplace still exists. Similarly WHO members in order to formulate a new global strategy on occupational health met up twice. Here is the glimpse of the top priority objectives of occupational health as identified by the world in unison

1. Enhancement of international as well as national policies for safety and health at workplaces.
2. Introduction of regulations and adopting a certain basic set of occupational health and safety standards to ensure minimum requirements for health protection.
3. Increase accessibility to occupational health services and the development of human resources for workers' health.
4. Promotion and maintenance of the highest degree of physical, mental, and social well-being of workers in all occupations.
5. Establishment of support services for occupational health and proper functioning of redressal forums.

ANALYSIS OF POLICIES OF ILO AND INDIA FOR OCCUPATIONAL HEALTH IN THE NEW MILLENNIUM:

In the 21st century, OHS has been an important issue for governments, the coverage of occupational health has not been limited to mere control and prevention of diseases and accidents at workplace but it has expanded to overall well-being including social, scientific, legal and economic aspects of worker's life.^{vi} This factor makes it important to have an efficient framework to address this multi-dimensional ambit of OHS. The occupational health has rejuvenated and emerged as a blend of social tradition of stability and productivity.

In the global sphere, the major body representing the labor force is the International Labour Organization, ILO was found after World War 1. OSH was one of the principle reasons for the creation of ILO. They consider safety and health at workplace to be a driving force for sustainable development in today's time.

According to ILO reports it has been noticed that in past 100 years addressing the increase in the number of accidents, diseases, and deaths related to occupational health has been the greatest challenge in getting social justice and sustainable development. The report suggests that there was an increase in deaths from 2.33 million in 2014 to 2.78 million in 2017. ILO thinks investing in occupational health will help them achieve their agenda related to sustainable development, 2030. Majorly focusing on goal number 3, to ensure healthy lives and promote the well-being of all ages and goal number 8, to promote inclusive and sustainable economic growth and employment for everyone.^{vii}

In all these years ILO has adopted several conventions and practices. Half of these are related to OHS, out of these more than 40 conventions and about 40 codes of practices are related to OHS.

Important conventions include:

- Convention 155: occupational safety and health convention, 1981
- Convention 161: occupational health services convention, 1985
- Convention 187: a promotional framework for occupational safety and health convention, 2006.

These conventions are made for the member states to introduce a promotional model for OHS in order to help them improve their policies and existing structure and reduce occupational accidents, diseases and deaths by consulting various labor and employee organizations, national policies, national systems, and program. In light of this, it should also be considered

that the foundation for convention 187 is promotion of prevention of occupational safety and health culture and convention 155 and its protocol of 2002, convention 187 and convention 161 are based on the fundamental principles of OHS.^{viii}

Since the establishment of ILO in 1919, India has been its member. India has ratified a few conventions of ILO on occupational safety and health including,

- C045: underground work (women) convention, 1935
- C115: radiation protection convention, 1960
- C127: maximum weight convention, 1971
- C174: prevention of major industrial accidents convention, 1993

It is important to consider that still India is lacking in ratifying many other important conventions such as convention number 187, 155, 161 because these are the forefronts of establishing OHS in general.

Tracing back to the history in India, there were no recognized health policies made by the government until 1983. The most infamous incident of the Bhopal Gas Tragedy of 1984 became a revolutionary juncture in the timeline of occupational health and safety. It was this time when the government gave an urgent call towards the formation of policies and measures to uplift the OHS situation in India. But the services which were provided were not appropriated because of the improper strategies and supervision of authorities.

Later, in 2002 again a national health policy was framed. Policies of 1983 as well as 2002 both had occupational health as one of its components but these policies failed to do their part.^{ix}

The reviews to these issues indicated that the reasons behind these flaws were dismantling of demands, the influence of power, market overseas and the flexibility of workers. India has been a follower of equity. Equity in OHS is achieved by distributive justice. It was an alarming condition for the country to improve its policies so that eventually distributive justice is achieved in due course of time.

In recent years the government has progressed towards fulfilling equity. They have planned efficient policies. The 12th five-year plan by labour and employment ministry had provided special agendas in industrial sectors and mines, the composition of the working group as well as it provided a report of unorganized sectors and its agencies along with special

recommendations.^x The plan schemes for DGFASLI proposed its five-year plan having OHS in its title. It aimed at monitoring OHS in factories, ports, and docks, creating OHS awareness and information efficiency in all these sectors.^{xi} With the belief that OHS is vital for economic growth, the ministry of labour and employment proposed national policy on safety, health, and environment at workplace in 2009. The policy with reference to the Indian constitution, outlines a set of goals referring to building and maintaining a national inhibitory safety and healthy culture. Additionally, it provided measures for improvement of safety, health, and environment at workplace. The government put forth this policy with a purpose for continuously reducing threats related to OHS in India, increasing the health coverage at workplace, promoting awareness at workplace and most essentially creating green jobs at a workplace in relation to the SDG program. The implementation of the policy is divided into 8 distinct areas, few of them are:

- National standards
- Data collection
- Research and development
- Familiarity
- Observance
- Skill development

A special provision is attached to this policy, regarding the review of the policy at an interval of every five years. This would help the government cope up with addressing the changing trends at workplace. ^{xii}

In 2016 the government had also adopted a special ILO provision to formalize unorganized workforce in the country. Later that year ILO had appreciated the Labour reforms of the Modi government but also warned them that their success will lie in their ability to move towards universal social security and formalization of their workforce.^{xiii}

Moving to the other contributions of the government in the recent past, this year PM has approved an MoU between India and Germany in the field of OHS. The tie-up will help to analyze the aptitude to overcome OSH challenges. Along with helping in the improvement of overall OHS in various sectors, it will strengthen DGFASLI by improving infrastructure. Parallel to this tie-up labor ministry entered into another tie-up with SIMTARS, Australia.

SIMSTAR is known for its training and research capabilities, it has specialized professionals from different sectors of OHS. These policies and tie-ups of India in OHS are one of the forefronts to achieve the SDG index proposed by NITI Aayog especially the third goal of SDG related to coverage of health.^{xiv} Recently a collaboration of NIMH and ICMR was proposed by PM, to increase expertise in the field and manage public money.^{xv}

The occupational safety, health and working condition code of 2019 was introduced in parliament. The code proposes to have at least 10 workers in mines and docks. It denied apprentices. The bill provided distinct provisions to establish classes of employees and it also repealed and replaced 13 labor laws related to OHS.^{xvi} This is one of the four codes of labor laws identified by labor and employment ministry. The labor ministry has also taken steps to establish a national board for the safety of workers this is a step with an aim to provide a burden on the employers to make sure that all basic requirements to workers are provided.

The government of India in the past decade has taken effective steps towards its policy development and achieved success in many areas of OHS. It has also strived to represent the Indian labor force internationally. This year has been a special year for ILO being its 100th century. India has also made remarkable tie-ups this year. Though ILO and India are working distinctly they are moving forward towards sustainable development of health at workplace as a common agenda.

LAWS AND REGULATIONS PREVAILING IN INDIA

Constitutional Commitment

The Indian Constitution mentions labour as a subject under the concurrent list where both the state and the central government have the authority to enact legislation. The constitution from article 36 to 51 i.e. Part IV, lays down the principles for the governance called Directive Principles of State Policy. The state under article 39, 42, 43A shall direct its policy to ensure that adequate measures are being taken to make sure that the tender age of children and health of workers are not abused and that citizens do not engage in avocations unsuited to their age, to provide just and humane conditions of work and provision for maternity relief, to secure workers participation in management, respectively^{xvii}.

In the landmark judgment of **Consumer Education & Research v. Union of India**^{xviii}, three-judge bench discussed article 21 of the Indian constitution with respect to the right to health

and held that the expression 'Life' written in the article has a wider meaning and it includes better standard of living, hygienic conditions in the workplace and hence the court laid down that health and safety of the workers are an integral facet of the right to life. Also in the case of **corporation v. Subhas Chandra Bose**^{xix}, justice K.Ramaswamy in his dissenting judgment highlighted that health is a human right enshrined in the universal declaration of human rights and that "maintenance of health is a most important constitutional goal".

The government of India in consonance with the Directive principles as well as international conventions formulates national policy and has enacted statutes relating to occupational health and safety at workplaces. The major acts enacted for achieving the purpose of protecting the health and safety of workers are the Factories Act 1948 and the Mines Act 1952.

The Factories Act, 1948

The soul and heart of this act is labor welfare; the main objective of the makers of this act at the time of its enactment was to protect the workers employed in factories from atrocities common in the factories. Under this act, the local government has the authority to appoint an inspector to keep a close eye on the functioning of the factory to ensure that provisions of the act are not being violated. The act was amended in 1987 after the Bhopal gas tragedy took place and it brought a revolutionary change with respect to the health and safety in India^{xx}. A specific chapter related to occupational health and safety was introduced in the act. Chapter III and IV of this act contains provisions related to health and safety measures, almost every fundamental principle of basic hygiene has been covered under the act. To begin with, section 11 provides the provisions related to cleanliness which says that every factory shall focus on maintaining an environment free from effluvia arising from privy, drain or other nuisance and that every floor shall be cleaned at least once in a week, wall be repainted or re-varnished at least once in every period of five years. For the factories carrying out processes that require disposal of wastes and effluents, section 12 provides the manner in which the disposal should be carried out. Open defecation has always been a concern for India and for a long time India is striving to become open defecation free and finally on 2nd October 2019, PM Modi is going to declare India open defecation free. The factories act has also taken this into consideration and under section 19 calls for separate washrooms for men and women. The act has enshrined all the essential standards to ensure humane and decent working conditions in the factory. The implementations of these provisions are generally ensured by section 92 of the act, which

covers the majority of contraventions mentioned in the act. The scope of this provision needs to be widened to cover more specific situations, as non-adherence to certain standards may adversely harm the labor in the factory. This will also minimize confusion and misinterpretation and will ensure the best interest of both the workers and employer as they will be liable for the exact misconduct done.

Article 21-41 of the act deals with the safety provisions concerning the machinery. Factories operate with heavy machinery which requires sufficient precautions and restrictions to ensure the safety of the workers^{xxi}. The rapid advancement of technology has definitely increased the quality and productivity of the goods and has also impacted the efficiency of the workers positively but at the same time, they possess a danger of fatal injury in case of any technical issue. This act contains strict safeguards in situations of malfunction of machinery as well as in case of leak of a toxic, hazardous or noxious substance. The act has provided for monetary fines in case of any contravention of the aforesaid provisions and places a lot of accountability, responsibility, and liability on the employer.

In the case of **Bhikusa Kshatriya v. Union of India**^{xxii}, the court stated that the basic purpose of this act is to protect workers engaged in factories against industrial and occupational hazards. It imposes certain restrictions and duties on the employer to secure workers and to take precautions for the safety of the workers.

Mines Act, 1952

The Mines Act 1952 requires the formation of safety committees in every mine which consists of more than 100 workers and also mandates for providing a notification of accidents (section 23) and the appointment of inspectors by the manager. This act makes it the duty of the owner or manager, as mentioned in section 18 of the act to remove any danger or defective situation as per the directions of the inspector. Also, it provides under section 45 that children below the age of 18 years are prohibited from any kind of mining activity and miners should undergo a medical examination and a notice has to be given for any notifiable diseases. The central government has the authority to appoint a directorate for mines whose responsibility is to conduct surveys in the mines and find out the necessary information on occupational health and safety. Section 7 of this act confers the power to an inspector to keep a check on the functioning of mines to ensure that no contraventions are being done to the provisions of this act. The act is governed by the ministry of labour and employment through the Directorate

General of Mines Safety (DGMS). DGMS is concerned with the safety of workers in mines and oil fields. It regularly conducts inspections and issues competency tests to determine the appointment of various posts in the mines, conducts seminars/conferences on various safety aspects. This agenda of DGMS is to minimize the risk of occupational diseases and to provide decent conditions of work to ensure the safety of the workers, health standards and performance.

CURRENT DEFICIENCIES IN THE PREVAILING POLICY AND LEGISLATION:

Currently is having comprehensive legislation on OHS which majorly covers four sectors that is, manufacturing, mining, ports, and construction but legislations in India does not cover other important sectors such as the agriculture sector, transport sector, service sector, etc. As per the census of 2011 around 106,775,330 workers were engaged in the agricultural sector alone so this leaves a huge gap in ensuring the health and safety of all workers in the country.

The national policies on OHS majorly include occupational accidents and diseases but they fail to integrate provisions addressing the physical, psychological and social well-being of the workers. In the past few decades, there has been a prevalence of noncommunicable diseases at workplace. The government is not having a proper framework of policies that address non-communicable diseases. Moreover, the government has been facing budgetary issues while implementing the existing policies.

Despite the fact that India has a large number of legislation for the protection of workers, the number of accidents is very high because most of the labor unions are not aware of the ramifications of these provisions and are unable to take advantage of the laws to the full extent.

Also, these laws are not implemented properly due to the lack of factory inspectors.

The negligence and use of power in policy formation indirectly affect occupational health. This means that the one in the power won't provide enough attention to the person with less power. The reasons for lack of recognizing demands are lack of funding deteriorates tasks undertaken towards OHS and corruption among workers regarding the implementation of policies.

India has still not reached satisfactory levels of OHS because of the stringency of legislations i.e., centrally drafted legislation is not suitable local situations. Workplaces differ from one another so the legislations which do not take these differences into consideration pose a serious problem which results in the imposition of high costs on some workplaces, while others still remain unsafe despite complying with the requirements.

The economic growth of India has been commendable in the previous decade but when talking about the number of jobs quality produced is not up to the mark. The major task on the part of the government is to provide quality jobs. The other major challenge for the government is to formalize increase social security for all workers. The government has to increase job appointments in order to meet SDG standards. The government is lacking in understanding the working patterns and trends prevailing at workplace, hence it has to work in this sector to establish full coverage of OHS.

RECOMMENDATIONS TO IMPROVE PREVAILING DEFICIENCIES ON OCCUPATIONAL HEALTH AND SAFETY:

There have been many apertures existing in the formation as well as the implementation of policies made by the government. There are certain recommendations in order to address these lacunae such as; there should be an integration of occupational health (including well-being at workplace) into primary health making it the integral component of social and economic development,

There should be a creation of proper infrastructure related to OHS which may include the establishment of research institutions with efficient expertise,

The government should organize health checkup and awareness programs at regular intervals,

The government should indulge in a social conversation and frame the policies accordingly to address different factors impacting labor.

The government should recognize and set up policies that would address the arbitrary traditions followed at all workplaces.

According to ILO, approximately 600 million new jobs should be created by 2034 to achieve SDG, India is one of the fastest-growing economies of the world and hence it should adopt measures to fulfill the SDG standards of ILO as well as national SDG index.

India has adopted a National Policy on Safety, Health, and Environment at Workplaces in 2009^{xxiii}, it provides general guidelines to develop a safety culture and environment in the workplace. The existing legislation can be amended in consonance with the national policy adopted for better safety and health protection of the workers. In the past, steps have been taken to amend the existing provisions like the factories act 1948 was amended in 1987 after the Bhopal gas tragedy which led to the inclusion of separate chapters of occupational health and safety. Today also, the factories act needs an amendment to cater to the current needs of workers and to reach satisfactory levels in OHS.

A major problem that appeared after writing the paper with respect to OHS is that the country's majority population is unaware as to what OHS is in its true sense and what all laws deal with OHS. The stakeholders such as employers, employees, and the general public need to be made aware about the OHS, it can be done through various ways such as, through mass media, OHS training, and effective awareness campaign to enlighten unorganized class, video films, booklets, and manuals can also be prepared and distributed.

A majority of Indian medical practitioners lack the skills to diagnose occupation-related diseases because the infrastructure and other aspects in India are not sufficient to train doctors. So in order to overcome this challenge postgraduate courses in occupational health needs to be accelerated.

Though India has been slow in adopting the high standards of occupational health and safety, the present situation says that it is going on the right path and is improving with time. I firmly believe that India will be able to achieve the higher standards of Occupational Health and Safety and will be able to attain the sustainable goal third that is right to health for all by 2030.

REFERENCES

ⁱ Tee L. Guidotti ed., *Global Occupational Health*, 5, OXFORD UNI. PRS., (2001).

- ⁱⁱ Hital R Meswani, *Safety and Occupational Health: Challenges and Opportunities in Emerging Economies*, IND. J. O. OCP. & ENV. MED., (2008), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2796774/>.
- ⁱⁱⁱ Martin Hyde ed., et al., *Work and Health in India*, 1, POL. PRS., (2018).
- ^{iv} Ashish Kumar Mandal, *Strategies and Policies Deteriorate Occupational Health Situation in India: A Review Based on Social Determinant Framework*, INDIAN JOURNAL OF OCCUPATIONAL AND ENVIRONMENTAL MEDICINE, (2009), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2796774/>.
- ^v *A Brief History of Occupational Health*, HLT. MNG. LTD., (Sept. 20, 2019, 5:00 PM), https://healthmanagement.co.uk/sites/default/files/paragraph/image/Health-Management_brief-history-occupational-health.pdf.
- ^{vi} Tee L. Guidotti ed., *Global Occupational Health*. 3, OXFORD U. P., (2011)
- ^{vii} *Safety, And Health At The Heart Of The Future Of Work*, 1, I. L. O., (2019), https://www.ilo.org/global/topics/safety-and-health-at-work/events-training/events-meetings/world-day-for-safety/WCMS_686645/lang--en/index.htm.
- ^{viii} *International Labour Standards on Occupational Safety and Health*, I. L.O. (Sept. 25, 2019, 8:00 PM), <https://www.ilo.org/global/standards/subjects-covered-by-international-labour-standards/occupational-safety-and-health/lang--en/index.htm>.
- ^{ix} Ashish Kumar Mandal, *Strategies and Policies Deteriorate Occupational Health Situation In India: A Review Based on Social Determinant Framework*, 13(3), IND. J. of OCP. & ENV. MED., (2009), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2796774/>.
- ^x *Report of Working Group on Occupational Safety and Health for Twelfth Five Year Plan (2012 To 2017)*, MNS. of LBR. & EMP. (Sept. 25, 2019, 10 PM), http://planningcommission.nic.in/aboutus/committee/wrkgrp12/wg_occup_safety.pdf.
- ^{xi} Directorate General, *Strengthening of DGFASLI Organisation and OSH in Factories, Ports and Docks*, FACTORY ADV. SRV. & LBR. INST. (Sept. 25, 2019, 10:30 PM), <https://labour.gov.in/sites/default/files/PlanSchemesDGFASLI.pdf>.
- ^{xii} *National Policy of Safety, Health and Environment at Work Place*, MNS. OF LBR. & EMP. (Sept. 24 2019, 5:00 PM), <https://labour.gov.in/sites/default/files/SafetyHealthandEnvironmentatWorkPlace.pdf>.
- ^{xiii} Yogima Seth Sharma, *PM Narendra Modi's Labour Reforms gets Thumbs Up from ILO*, ET, (Jul. 07, 2019), <https://economictimes.indiatimes.com/news/politics-and-nation/pm-narendra-modis-labour-reforms-gets-thumbs-up-from-ilo/articleshow/53100578.cms>.
- ^{xiv} PTI, *Cabinet Nod for Pact with Germany on Occupational Safety and Health*, ET, Mar. 07, 2019, <https://economictimes.indiatimes.com/news/politics-and-nation/cabinet-nod-for-pact-with-germany-on-occupational-safety-and-health/articleshow/68305460.cms>.
- ^{xv} PTI, *Govt approves the merger of NIHM with ICMRNIOH*, ET, Jul. 24, 2019, <https://economictimes.indiatimes.com/news/politics-and-nation/govt-approves-merger-of-nimh-with-icmr-nioh/articleshow/70363224.cms>.
- ^{xvi} *The Occupational Safety, Health and Working Conditions Code, 2019*, MNS. OF LBR. & ENV., (Sept. 20, 2019, 5:00 PM), http://164.100.47.4/BillsTexts/LSBillTexts/Asintroduced/186_2019_LS_Eng.pdf
- ^{xvii} IND. CONST. art 39, cl. e.
- ^{xviii} *Consumer Education & Research v. Union of India*, (1995) SCC (L&S) 604.
- ^{xix} *corporation v. Subhas Chandra Bose*, (1992) 1 SCC 441.
- ^{xx} *J.K. Industries Limited Etc. V. The Chief Inspector of Factories* (1966) 6 SCC 665
- ^{xxi} *State Insurance Corporation v. M/s Mysore Premier Metal Factory* AIR (1966) Mad 380 at 381.
- ^{xxii} *Bhikusa Kshatriya v. Union of India* (1963) AIR 1591.
- ^{xxiii} *National policy on safety, health and environment at workplace*, (Sept. 21, 2019) <http://www.dgfasli.nic.in/info.htm>