


Procedure file

Basic information		
INI - Own-initiative procedure	2012/2065(INI)	Procedure completed
Asbestos related occupational health threats and prospects for abolishing all existing asbestos		
Subject		
4.15.15 Health and safety at work, occupational medicine		
4.20.05 Health legislation and policy		

Key players				
European Parliament	Committee responsible	Rapporteur	Appointed	
	EMPL Employment and Social Affairs		16/02/2012	
		S&D HUGHES Stephen		
		Shadow rapporteur		
		PPE BACH Georges		
		ALDE PAKARINEN Riikka		
		Verts/ALE DELLI Karima		
		ECR CABRNOCH Milan		
	Committee for opinion	Rapporteur for opinion	Appointed	
	ENVI Environment, Public Health and Food Safety			
European Commission	Commission DG	Commissioner		
	Employment, Social Affairs and Inclusion	ANDOR László		

Key events			
20/04/2012	Committee referral announced in Parliament		
24/01/2013	Vote in committee		
30/01/2013	Committee report tabled for plenary	A7-0025/2013	Summary
14/03/2013	Results of vote in Parliament		
14/03/2013	Decision by Parliament	T7-0093/2013	Summary
14/03/2013	End of procedure in Parliament		

Technical information	
Procedure reference	2012/2065(INI)
Procedure type	INI - Own-initiative procedure
Procedure subtype	Initiative
Legal basis	Rules of Procedure EP 54
Other legal basis	Rules of Procedure EP 159
Stage reached in procedure	Procedure completed

Documentation gateway

Committee draft report		PE496.439	20/09/2012	EP	
Amendments tabled in committee		PE498.022	18/10/2012	EP	
Committee opinion	ENVI	PE494.492	10/01/2013	EP	
Committee report tabled for plenary, single reading		A7-0025/2013	30/01/2013	EP	Summary
Text adopted by Parliament, single reading		T7-0093/2013	14/03/2013	EP	Summary
Commission response to text adopted in plenary		SP(2013)442	29/07/2013	EC	

Asbestos related occupational health threats and prospects for abolishing all existing asbestos

The Committee on Employment and Social Affairs adopted the own-initiative report drafted by Stephen HUGHES (S&D, UK) on asbestos related occupational health threats and prospects for abolishing all existing asbestos.

According to WHO estimates, the number of cases of asbestos-related diseases in the EU is 20 000-30 000 per year and has not yet reached its peak. Increased cancer risks have been observed in populations exposed to very low levels of asbestos fibres, including chrysotile fibres. Hence the reason why initiatives are necessary to effectively combat the risk of exposure to asbestos.

Screening and registration of asbestos: Members note that despite the ban on the use of asbestos, it is still found in many ships, trains, machinery, bunkers, tunnels, galleries, pipes in public and private water distribution networks and especially in buildings, including many public and private buildings. They call on the EU to develop, implement and support a model for asbestos screening and registration in accordance with [Directive 2009/148/EC](#) and to request owners of public or commercial buildings to:

- screen buildings for the presence of asbestos-containing materials;
- prepare plans to manage the risks they present;
- ensure that such information is available to workers who may disturb such materials;
- in the case of Member States who already implement compulsory screening schemes, to increase the efficiency of such schemes.

Members recommends the EU to develop models for monitoring existing asbestos in private and public buildings including residential and non-residential housing as well as in the air in the workplace, built-up areas and landfills, and fibres present in drinking water supplied through asbestos cement pipes.

They urge the EU to conduct an impact assessment and cost benefit analysis of the possibility of establishing action plans for the safe removal of asbestos from public buildings and buildings providing services which require regular public access by 2028, and to provide information and guidelines to encourage private house owners to effectively audit and risk-assess their premises for asbestos-containing materials (ACMs), following the example of Poland.

The Commission is urged to: (i) integrate the asbestos issue into other policies, such as EU policy on energy efficiency and on waste; (ii) recommend the Member States develop public asbestos registers which would serve to provide relevant information on asbestos risks to workers and employers prior to renovation work being undertaken and complement existing health and safety protections required under EU law; (iii) ensure the effective and unhindered implementation of European asbestos legislation and to step up official inspections; (iv) provide the necessary support to ensure protection for the entire EU workforce, given that SMEs are particularly exposed as regards to the implementation of health and safety legislation; (v) promote the establishment throughout the EU of centres for the treatment and inertisation of waste containing asbestos, combined with phasing out all delivery of such waste to landfills. The EU is urged to make differentiation between friable and non-friable asbestos compulsory.

Ensuring qualifications and training: Members call for a real effort as regards training so as to develop minimum asbestos-specific qualifications for civil engineers, architects and employees of registered asbestos removal companies, etc. Information about existing asbestos legislation should be improved and practical guides should be provided.

Training for anyone involved in work that may involve asbestos should cover the properties of asbestos and its effects on health. Members call on the Commission, in cooperation with the Member States, to propose a specific directive with minimum requirements for the vocational training of construction and maintenance workers. Occupational physicians should be properly trained.

Development of removal programmes: Members call for the establishment of national actions plans for the removal of asbestos including:

- proposals for legislation;
- education and information;
- training for public employees;
- national and international training;
- programmes to fund asbestos removal;
- awareness-raising activities relating to the removal of asbestos and products containing asbestos (including during removal from buildings), public amenities and sites of former asbestos factories;
- cleaning premises and building installations for the destruction of asbestos and asbestos-containing debris; monitoring of the effectiveness of existing legal requirements; exposure assessments of at-risk personnel; and health protection.

Member States are called upon to move forward with the phasing-out of asbestos in the shortest possible timeframe. Other technical measures are outlined in the report including those to remove asbestos from the workplace, promote studies and research and ensure good management of asbestos waste, notably in landfills.

Recognition of Asbestos-related Diseases: Members deplore the lack of information from several Member States that impedes a reliable prediction of mesothelioma mortality in Europe.

Stressing that all types of asbestos-related diseases such as lung cancer and pleural mesothelioma have been recognised as a health hazard and can take several decades, and in some cases more than 40 years, to become apparent, Members urge the Member States to ensure that all cases of asbestosis, mesothelioma and related diseases are registered by means of systematic data collection on occupational and non-occupational asbestos diseases.

Members call on insurance and compensation entities to adopt a common approach to recognition and compensation of asbestos-related occupational diseases.

Further measures include:

- putting forward a proposal to amend [Directive 2004/37/EC](#) on the protection of workers from the risks related to carcinogens and mutagens at work, ensuring that the health of workers at risk of being exposed to carcinogens be protected and safeguarded through the promotion and exchange of best practices in prevention and diagnosis;
- not to place the burden of proof on asbestos victims but to establish wider rights to claim compensation;
- support an EU network of asbestos victims.

Strategies for a global ban of asbestos: for Members, regardless of the source of exposure or the employment status of the person exposed, all EU asbestos victims and their relatives deserve the right to receive swift and appropriate medical treatment and adequate financial support from their national health schemes. More generally, they call for the concept of health and safety of employees to be taken into account by national law and to constitute a performance obligation for employers with reference to [Framework Directive 89/931/EC](#).

The report calls on the EU to make the listing of chrysotile in Annex III of the Rotterdam Convention a top priority.

It is also necessary to: (i) address the unacceptable dumping of asbestos on developing countries at forums where trade agreements are being discussed, in particular at the WTO; (ii) promote worldwide high levels of health and safety at the workplace; (iii) support the export of non-asbestos technologies to developing countries; (iv) ensure that vessels carrying asbestos as cargo in transit can neither dock nor use port facilities or temporary storage within the EU.

Lastly, Members condemn European financial investment in global asbestos industries.

Asbestos related occupational health threats and prospects for abolishing all existing asbestos

The European Parliament adopted by 558 votes 51, with 5 abstentions, a resolution on asbestos related occupational health threats and prospects for abolishing all existing asbestos.

According to WHO estimates, the number of cases of asbestos-related diseases in the EU is 20 000-30 000 per year and has not yet reached its peak. Increased cancer risks have been observed in populations exposed to very low levels of asbestos fibres, including chrysotile fibres. Hence the reason why initiatives are necessary to effectively combat the risk of exposure to asbestos.

Screening and registration of asbestos: Parliament notes that despite the ban on the use of asbestos, it is still found in many ships, trains, machinery, bunkers, tunnels, galleries, pipes in public and private water distribution networks and especially in buildings, including many public and private buildings. It calls on the EU to develop, implement and support a model for asbestos screening and registration in accordance with [Directive 2009/148/EC](#) and to request owners of public or commercial buildings to:

- screen buildings for the presence of asbestos-containing materials;
- prepare plans to manage the risks they present;
- ensure that such information is available to workers who may disturb such materials;
- in the case of Member States who already implement compulsory screening schemes, to increase the efficiency of such schemes.

Parliament recommends the EU to develop models for monitoring existing asbestos in private and public buildings including residential and non-residential housing as well as in the air in the workplace, built-up areas and landfills, and fibres present in drinking water supplied through asbestos cement pipes.

Members urge the EU to conduct an impact assessment and cost benefit analysis of the possibility of establishing action plans for the safe removal of asbestos from public buildings and buildings providing services which require regular public access by 2028, and to provide information and guidelines to encourage private house owners to effectively audit and risk-assess their premises for asbestos-containing materials (ACMs), following the example of Poland.

The Commission is urged to: (i) integrate the asbestos issue into other policies, such as EU policy on energy efficiency and on waste; (ii) recommend the Member States develop public asbestos registers which would serve to provide relevant information on asbestos risks to workers and employers prior to renovation work being undertaken and complement existing health and safety protections required under EU law; (iii) ensure the effective and unhindered implementation of European asbestos legislation and to step up official inspections; (iv) provide the necessary support to ensure protection for the entire EU workforce, given that SMEs are particularly exposed as regards to the implementation of health and safety legislation; (v) promote the establishment throughout the EU of centres for the treatment and inertisation of waste containing asbestos, combined with phasing out all delivery of such waste to landfills. The EU is urged to make differentiation between friable and non-friable asbestos compulsory.

Towards a new Directive on professional training for workers exposed to asbestos: Parliament calls for a real effort as regards training so as to develop minimum asbestos-specific qualifications for civil engineers, architects and employees of registered asbestos removal companies, etc.

Information about existing asbestos legislation should be improved and practical guides should be provided.

Parliament calls on the Commission, in cooperation with the Member States, to propose a specific directive with minimum requirements for the vocational training of construction and maintenance workers, including managers and construction professionals working incidentally with asbestos, as well as of employees at landfills for the disposal of waste containing asbestos and at centres specialising in the treatment, safe removal and disposal of asbestos waste, and also to work with and support the social partners and other stakeholders to improve implementation of Article 14(2) of [Directive 2009/148/EC](#) through raising awareness of the need for appropriate training and to develop information and materials to provide this; such training must be provided at regular intervals and at no cost to workers.

Occupational physicians should be properly trained.

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Stressing that all types of asbestos-related diseases such as lung cancer and pleural mesothelioma have been recognised as a health hazard and can take several decades, and in some cases more than 40 years, to become apparent, Parliament urges the Member States to ensure that all cases of asbestosis, mesothelioma and related diseases are registered by means of systematic data collection on occupational and non-occupational asbestos diseases.

Recalling that many workers are exposed to asbestos in their work, particularly in the maintenance and decontamination sectors, Parliament calls on insurance and compensation entities to adopt a common approach to recognition and compensation of asbestos-related occupational diseases.

Further measures include:

- putting forward a proposal to amend [Directive 2004/37/EC](#) on the protection of workers from the risks related to carcinogens and mutagens at work, ensuring that the health of workers at risk of being exposed to carcinogens be protected and safeguarded through the promotion and exchange of best practices in prevention and diagnosis;
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The resolution calls on the EU to make the listing of chrysotile in Annex III of the Rotterdam Convention a top priority.

It is also necessary to: (i) address the unacceptable dumping of asbestos on developing countries at forums where trade agreements are being discussed, in particular at the WTO; (ii) promote worldwide high levels of health and safety at the workplace; (iii) support the export of non-asbestos technologies to developing countries; (iv) ensure that vessels carrying asbestos as cargo in transit can neither dock nor use port facilities or temporary storage within the EU.

Lastly, Parliament condemns European financial investment in global asbestos industries.