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Testimony before the House Appropriation Subcommittee on Labor-HHS-Education on the FY 2011 budget for the Department of Health and Human Services; National Institute for Occupational Safety & Health

Hearing Date & Time: May 12, 2010, 2:30 PM

Summary: The purpose of this testimony is to request from the House Appropriations Subcommittee on Labor-HHS-Education support for increased funding for the National Institute for Occupational Safety & Health (NIOSH), and its construction research program.

Mr. Chairman, members of the Committee. My name is **Robert J. Pleasure** and I am the Special Assistant to The President of the Building and Construction Trades Dept. AFL-CIO (BCTD).

The purpose of this testimony is to request your support for increased funding for the National Institute for Occupational Safety & Health (NIOSH), and its construction research program,

Despite some improvements in workplace safety and health, nearly 15 American workers die each day from workplace injuries, and another 134 die from work-related diseases. Four out of those 15 killed every day are employed in the construction industry.

Indeed, construction has the dubious distinction of being the single most hazardous industry in the United States accounting for some 1,200 construction workers killed on the job each year. While construction workers make up only 8 percent of the U.S. workforce, they account for more than 22 percent of all work-related deaths.

Moreover, due to exposures to an array of toxic and hazardous substances, construction workers have unacceptably high levels of occupational disease including cancers, silicosis, asbestosis, and other heart, lung and neurological diseases.

In addition to the human tragedy, the economic costs are staggering. The total cost of fatal and nonfatal injuries and disease in the construction industry has been estimated at nearly \$13 billion annually. And, that does not count the costs of workers' compensation, which, at \$30 billion a year, are twice that of manufacturing and three times that for all industries.

NIOSH is the only federal agency responsible for conducting research and making recommendations for the prevention of work-related injury and illness. Yet it is one of the most under funded health research agencies in the federal government, and is hamstrung by being buried in the bowels of the Center for Disease Control (CDC) bureaucracy where it remains an orphan.

Except for a special \$80 million increase for the World Trade Center (WTC) health program and some \$7 million for nanotechnology research, the President's FY 2011 NIOSH budget request remains at last year's level.

While we support both the WTC and nanotechnology programs, we think it's high time for the Congress to review the entire NIOSH program with an eye towards dramatically improving both its structural place within the Department of HHS and its funding.

With respect to funding, especially funding for the NIOSH National Occupational Research Agenda (NORA) program, we recommend a \$25 million increase over the president's static \$124.5 million NORA request.

We particularly ask your consideration of expanded NORA funding for the "construction

initiative” that seeks to (1) identify safety and health problem areas and obstacles to prevention and (2) translate that research into practice via partnerships and field studies across a variety of construction trades.

A recent National Academy of Sciences’ Institute of Medicine review of the NIOSH construction program, recommended:

- Increased funding for the program.
- Strengthening NIOSH's internal management of the program.
- Retaining “The National Construction Center” as the main focus for "research to practice" (R2P) activities.

Between 1997 and 2007, funding for the Construction Research Program averaged about \$17.8 million annually. The NAS report concluded that *the committee finds the funding level inadequate and recommends that high-level attention be given to determining how to provide program resources that are commensurate with a more robust pursuit of the program’s goals...*

Given the research agenda outlined and recommended by the NAS Review Committee, we believe that the construction program should be placed on a sounder financial footing and recommend that it receive additional funds from the NIOSH/NORA budget increase we have requested.

To address the many construction safety and problems in our industry, the BCTD research arm – The Center for Construction Research and Training (CPWR)-- has, for many years, been working with NIOSH through the NORA construction research initiative. The CPWR was recently awarded another 5-year extension of its NIOSH contract to serve as the “National Construction Center” to coordinate the “Research to Practice” program.

We strongly believe that the best way to address what has become a safety & health crisis in our industry is through targeted and applied research to better understand the causes of construction-related incidents and illness and to find ways to implement solutions on construction sites.

While there is certainly an additional need for better standards and enforcement by the Department of Labor, NIOSH construction research is the critical first step towards a safer and healthier construction workforce.

As you consider the FY 2011 Labor-HHS-Education appropriation bill, we urge you to take some time to consider the safety & health of our building and construction workforce. The current situation is simply unacceptable and, in light of demands for increased public spending for construction projects to stimulate the economy, the safety & health pressures on our workers will only become more intense.

Thank you.

Fatalities in the U.S. Construction Industry

	2003	2004	2005	2006	2007
Construction	1171	1278	1243	1297	1239
Transportation	>800	>800+	>800	<900	<900
Manufacturing	>400	>400	<400	>400	400
Agriculture	>700	>600	>700	>600	600
Mining	>100+	>100	>100	200	<200

Source: Center for Construction Research and Training

Safety & Health Facts*

- The construction industry employs only 8% of the workforce but it suffers **22% of all work-related deaths**.
- Low-skilled, low-paid workers suffer the most fatalities.
- Construction establishments with less than 20 workers account for 55% of all fatalities.
- **Lung cancer deaths are 50% higher** among construction workers than the U.S. population, adjusted for smoking.
- Construction workers are **two times more likely than the general population to have chronic obstructive lung diseases**.
- Construction workers are **five times more likely than the general population to have a cancer** of the lung lining (mesothelioma) and 33 times as likely to have asbestosis, an incurable and fatal lung disease.
- 30-40% of construction workers suffer musculoskeletal disorders and **chronic pain**.
- 50% of construction workers have noise-induced **hearing loss**.
- Construction workers account for 17% of workers with elevated blood lead levels/
- Welding fumes are responsible for 75% of boilermakers, 15% of ironworkers and 7% of pipefitters exceeding the accepted 8-hour level for manganese exposure; a known neurotoxin.

* Source: **Construction Chart Book**, Center for Construction Research and Training (2007)

