



International Labour Organization



# Reaching out to miners with TB and HIV programmes: Eastern Coalfields Ltd. India

Eastern Coalfields Limited (ECL) is a subsidiary of Coal India Limited (CIL) India, a state- owned coal mining company which is the largest producer of coal in the world. ECL operates in the coal belt of Durgapur-Asansol in West Bengal. It is one of the leading public sector companies in India engaged in protecting miners from TB and HIV in collaboration with the national TB and HIV programmes and the ILO.



"When it comes to combating infectious diseases and associated risks in the work environment, a workplace intervention acts as the keystone.

At ECL, we are fully committed to keeping our workers healthy. Our response to TB and HIV, governed under the overarching policy of Coal India Ltd., is part of this endeavour. We have an open-door policy not just for our regular employees, but also for contractual workers as well as for the local communities, living within a radius of 25 kilometres of the company."

> **Ajay Kumar Singh,** Chairman-cum-Managing Director, ECL

ECL currently has a total workforce of over 64,000. In addition, the company engages a large number of contractual workers. Believing in an integrated health care and wellness response, the company provides healthcare to employees, their dependants and contractual workers, focussing on HIV, TB as well as hypertension and diabetes through dedicated in-house programmes.

ECL's corporate social responsibility initiatives are directed towards the economically vulnerable, land evictees and Project Affected People (PAPs) staying within a 25-kilometer radius of ECL. Projects include construction of toilets, provision of drinking water facility in private and government schools as well as in gram panchayats in the area; livelihood enhancement and women's empowerment; construction and repairs of roads, water tanks, school buildings; support to the differently-abled through the Asansol Braille Academy, a unit of Asansol Prevention of Blindness Society; regular health camps and medical activities for the community; creation of solid waste management and organic waste management systems, among others.

Since 2008, ECL has successfully implemented the HIV and AIDS workplace policy and programme in collaboration with the ILO. The ILO has trained a cadre of master trainers and peer educators in the company who conduct regular





awareness programmes for miners in the collieries and promote voluntary counselling and testing for HIV. In collaboration with the National AIDS Control Organization and the West Bengal State AIDS Control Society the company has set up a model Integrated Counselling and Testing Centre (ICTC) at Central Hospital, Kalla. The centre has an open-door policy not just for regular ECL workers, but contractual workers as well as for the local communities. Workers who are tested positive are referred to the Bardhaman Medical College for Antiretroviral therapy (ART) and other related services. The management's involvement, through the effective dissemination of policy and presence at important events, has played a key role in the success of the HIV programme.

### Getting grips on tuberculosis

Miners are especially at the risk of TB since they usually work in cramped, underground mines, where ventilation is compromised and temperatures are extreme. Additionally, prolonged exposure to chemicals and coal dust also weaken their lungs considerably.

The company provides quality diagnostic and treatment services for TB to all the employees through a well-established medical set-up: two Central Hospitals – one each at Sanctoria and Kalla; seven Area Hospitals catering to around 12-14 collieries; and 114 operational dispensaries at the colliery level.

ECL follows the Revised National Tuberculosis Control Programme (RNTCP) guidelines to treat indoor patients and refers the outdoor patients to the District TB Cell. There is a budgetary provision for delivering comprehensive medical services. For specialized TB tests not available at ECL, patients are referred to the empanelled tertiary care hospitals. Medical reimbursements are given to employees who have purchased medicines privately.

## Detection

Initial as well as Periodic Medical Examination of employees, which includes a chest X-ray and sputum exam, are conducted at the time of induction and on a periodic basis, respectively.

ECL provides free quality diagnostics and treatment to all those who come in with symptoms of TB. Although X-ray and pathology facilities are available at the Area Hospitals, too, for an ultimate diagnosis, patients visit the Central Hospitals. If they are coming from a faraway colliery – for instance, at Central Hospital, Kalla, patients come from as far as Pandaveswar, which is 50 kilometres away - then they are admitted for the duration that they are undergoing the tests.



# Notification

Diagnosed TB cases are referred to the District TB Cell. The notification happens from the DOTS centre near the patient's home, from where his/her medication is administered. For patients admitted at the TB ward in the Central Hospitals, the doctor in-charge contacts the zonal TB Home Visitor (TBHV), appointedby the District TB Officer (DTO), and coordinates notification and medication.



## Treatment adherence

While DOTS medication is monitored by the TB Home Visitor, who supplies medicines at the patients' doorstep and updates the treatment card, he is also instructed to direct the outdoor ECL patient to go back to the Central Hospital for the follow up. Additionally, it's mandatory for all patients who are positively diagnosed at ECL to come back in six months for a re-examination.

To ensure that employees are motivated to seek and finish treatment, ECL provides special leave with half-pay. Initially, it is given for six months, extendable up to another six months. Those who apply for special leave have to visit the doctor every month for leave extension.

In case an employee develops physical disability (as in the case of TB of the spine or brain or any other chronic illness), the employee is entitled to alternate employment as part of the policy on providing reasonable accommodation. The Job Suitability Board, which comprises the Chief of Medical Services, specialist doctors, and members of the personnel department looks into such cases. A confidential report is prepared after inquiry and on the basis of its recommendation, the personnel department takes appropriate action on providing reasonable accommodation to the concerned employee.

## Strengths of the response

- Management's commitment to the overall health and well-being of the employees and the policy of covering communities under CSR.
- Partnerships with the District TB Cell and the State AIDS Control Society.
- Collaborations with the ILO for institutionalizing a rights-based workplace programme for HIV and TB; training of master trainers and peer educators; and facilitating partnerships with national HIV and TB programmes.
- Focus on creating a nondiscriminatory environment for TB as well as HIV, which



"As ECL employees, patients receive several benefits that are essential to combat the disease. Competent salaries, free housing and medical care, special leave – for a working person these make all the difference as they are free of financial burdens and job insecurity and can concentrate on recovery."

Ashok Mahato,
TB Home Visitor

encourages workers to come forward to seek diagnosis and treatment.

- Presence of a committed cadre of medical staff and medical infrastructure.
- The policy of reasonable accommodation aids employees in seeking treatment.

### Key lessons

- An integrated response to TB and HIV is essential.
- Workplace programmes driven by management commitment and a rightsbased policy are sustainable.
- Employers' support in the form of providing job security, benefits such as special leave; the provision of reasonable accommodation; and focus on a stigmaand discrimination-free workplace make it easier for workers to come forward to seek counselling/testing and treatment.
- The supportive and caring attitude of co-workers greatly contributes



to treatment completion and on-time recommencement of duty. For a working professional, this becomes a great motivator to overcome the illness fully before re-joining.

- The availability of medicine, diagnostics and treatment facilities at the workplace makes treatment more approachable.
- Linkages with the government's TB and HIV programme are essential to ensure quality of services and broaden the reach of the interventions.

### Next steps

- ECL is gearing up to sign a memorandum of understanding with the Paschim Bardhaman District TB Cell to certify the company's dispensaries and hospitals as linked DOTS centres. This will enable workers to pick up their medication from within the ECL set-up and will allow the medical staff to closely monitor the treatment compliance.
- The company is planning to strengthen its prevention activities by organizing colliery-based events and integrating HIV and TB training into its Vocational Training Centres.
- Despite excellent treatment facilities, adherence is a major issue, driven by rampant alcoholism in the collieries.
  ECL is considering conducting periodic de-addiction camps as well as setting up de-addiction centres with trained doctors and para-medical staff in the long-term.



"I had help from staffers as well as from the company in terms of benefits like free treatment and paid leave. The doctors were agreeable to giving me short breaks to rest. For a worker suffering from TB, such backing at the workplace is paramount."

> – Tapan Adhikary (left), an employee

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The Union Television on Long Disease

