

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

STARRED QUESTION NO:314  
ANSWERED ON:13.12.2006  
HEALTH HAZARDS IN AND AROUND COAL MINES  
Rijju Shri Kiren

**Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:**

- (a) Whether families living in and around coal mines in the country are facing health hazards ;
- (b) If so, the details thereof and the reasons therefor ;
- (c) The diseases which are prevalent in and around the coal mines particularly, Jharia ;
- (d) The agencies deployed to treat the affected families and workers of these coal mines ;
- (e) The budget allocated for the purpose; and
- (f) The steps taken by the Government to check malnutrition among children in the mining areas?

**Answer**

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. PANABAKA LAKSHMI)

(a) to (f) : A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 314 FOR 13TH DECEMBER, 2006

(a) & (b): Persons working in and around coal mines are exposed to occupational health hazards like airborne dust, gas, noise etc. In addition, exposure to excessive heat is also an important health hazard in summer season. The prevalence of diseases in coal mines including Jharia Coal Mines is due to non-conductive working environment

(high levels of dust, heat, noise and humidity) and awkward body posture during loading operation etc. Mining activities causes deterioration in quality of environment which also affects the health of people living around the coal mines areas.

(c) Persons associated with coal mining activities are mainly exposed to coal dust hazard. Diseases prevalent in families living in coal mines are :-

Coal Workers Pneumoconiosis ;

Noise induced hearing loss ;

Various respiratory ailments ;

Musculoskeletal Disorders ;

Backache; and

Anaemia,

Diseases prevalent in families living around coal mines are :-

Respiratory;

Skin; and

Eye diseases

(d) Coal India Limited (CIL) and its subsidiary companies provide medical care to its employees in the hospitals/dispensaries run by them. Hospitals managed by State/ Central Government and industrial hospitals take care of health of the local population residing in and around coal mines. Besides, under community development programme, free health camps are organized for the underprivileged section of the population residing in and around the coal mines. Coal India has an ongoing project, Environmental and Social

Mitigation Project, under which resettlement sites are being provided with basic amenities, such as access roads, schools, health clinics, water supply and electricity (street lights), drain ponds, etc.

(e) CIL has provided adequate budget to provide medical facilities to its employees. Revenue expenditure in CIL for the last six years is as under:

(Rs. In lakhs)

Year	Revenue Expenditure
2000-01	6994.8
2001-02	8372.86
2002-03	9266.62
2003-04	10138.55
2004-05	14938.00
2005-06	14182.00

(f) Malnutrition is a multifaceted problem, the determinants of which vary from food insecurity, female illiteracy, poor access to health care, safe drinking water, sanitation and poor purchasing power. In order to check the mal-nutrition, Ministry of Women and Child Development, Government of India have undertaken following steps to restore the health nutrition status;

In Jharia mines area of Dhanbad District, 144 anagwadi centres have been sanctioned by the Ministry of Women and Child Development Government of India.

Integrated Child Development Scheme (ICDS) provides mid-day meal program, employment guarantee for 100 days, public distribution system for cheaper food grain and micronutrient supplementation program.