

INDONESIA

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1. Introduction

This report was compiled by the Local Initiative for OSH Network (LION), based in Bandung, Indonesia. Information contained here was collected from media reports, government reports and interviews with workers and union representatives.

During 2011, there were many incidents of occupational hazards affecting workers in Indonesia. Ironically, work injuries and illnesses continue to occur, even though the government promotes safety with banner campaigns and a National Occupational Safety and Health Month (Bulan K3 Nasional). The workplace injuries and illnesses recorded in the media, however, show that the number of workplace accidents in Indonesia is quite high. Furthermore, most victims of the work-related accidents do not receive adequate compensation.

There is a considerable number of issues related to OSH in Indonesia, such as unprotected workers exposed to toxic and hazardous materials in the production process, weak law enforcement of existing regulations, and the lack of inspection by government officials, which have remained mostly unaddressed. There has been no significant breakthrough to improve the safety of workers. Every year the number of work-accidents in Indonesia remains very high causing disabilities and deaths. This perpetuates the disturbing image that the workplace is a killing field where workers are slaughtered gradually.

2. Conditions in the Field

Workplace death rates are high and underreported. An official Indonesian government statement says that more than nine people die each day in workplace accidents. The actual death rate is expected to be far higher because the

government social security agency, PT Jamsostek, takes into account only those workplace accidents in which the victims are its members.¹ Many companies do not register their workers with PT Jamsostek, so the number of deaths reported to the government remains low. This was acknowledged by the Department of Labour of Bogor Regency: In the two thousand industrial districts of Bogor, only two companies periodically reported their OSH activities to the agency.²

The number of accidents reported by the Government is as follows:

Work-Accident Cases in Indonesia - 2001-2010

(Number of persons unless otherwise specified)

Year	Total Number of Workplace Accidents	Deaths	Full-Disability	Partial-Disability	Functional-Disabilities	Recuperated
2001	104,774	1,768	280	4,923	7,363	90,440
2002	103,804	1,903	393	3,020	6,932	91,556
2003	105,846	1,748	98	3,167	7,130	93,703
2004	95,418	1,736	60	2,932	6,114	84,576
2005	99,023	2,045	80	3,032	5,391	88,475
2006	95,624	1,784	122	2,918	4,973	85,827
2007	83,714	1,883	57	2,400	4,049	75,325
2008	93,823	2,124	44	2,547	4,018	85,090
2009	96,314	2,144	42	2,713	4,380	87,035
2010	86,693	1,965	31	2,313	3,662 (+)	78,722

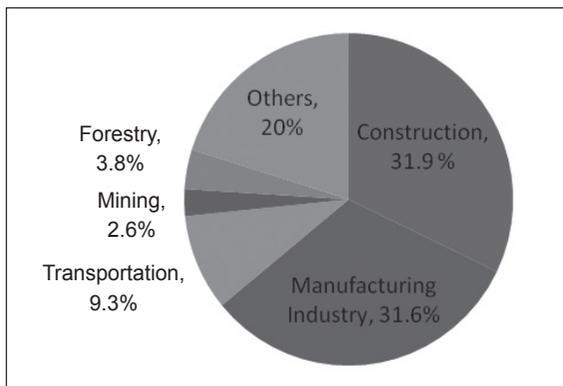
Source: PT. Jamsostek (Social Security Agency) and the Ministry of Manpower Affairs of Indonesia Republic

On average, there have been nearly 100,000 cases of occupational injury each year reported to Jamsostek. The data above is taken from 9 million formal workers who are members of the Jamsostek program. This means that there are 90 million Indonesian workers whose health and work safety are not recorded in the above statistics. The majority of unrecorded workers are from the informal sector, with more vulnerable labour relations than formal workers, both in terms of wages and working conditions.³ It is estimated that these figures would be much higher if all workers were included in the data.

In some areas in Indonesia, in the first half of 2011, there was an increased incident rate compared to previous years. For example, Karawang alone, through May 2011, witnessed as many as 1,355 cases of occupational injuries, 883 of which occurred during the production process and 472 were traffic accidents. Four cases involved workplace deaths and twelve cases involved deaths on the highway⁴. Occupational accidents in East Java in August 2011 rose to 9,846 cases⁵.

Sectorally, the majority of workplace accidents occur in construction and manufacturing. In 2010, the Ministry of Manpower and Transmigration recorded that workplace accidents were most frequent in construction services (31.9 percent) and the manufacturing industry (31.6 percent), with lesser percentages in transportation (9.3 percent), mining (2.6 percent), forestry (3.6 percent), and others (20 percent)⁶.

Breakdown of Workplace Accidents by Sector (%), 2010



Source: PT. Jamsostek (Social Security Agency) and the Ministry of Manpower Affairs of Indonesia Republic

Work fatigue, ignorance of safety procedures, and a lack of personal protective equipment cause injuries and deaths in the construction sector. The high incidence of accidents in the construction services sector can be attributed to long work-shifts and strict timelines for completing construction projects. Workers often extend their shifts to 12 or 16 hours per day, sometimes even working 24-hour shifts causing fatigue among workers. In addition, the lack of protective equipment and low awareness regarding the importance of OSH aggravates the situation. Many occupational hazards in the construction services sector occur because workers are killed falling from a height; they do not use fall

protection equipment, or fall protection barriers are not available. To cite recent examples of such incidents – one worker died and two were injured at the site of the rebuilding of Trans Studio in Bandung⁷; on another site, two workers fell from the ninth floor of a building project in Surabaya⁸; and another worker died after falling from the 15th floor of an apartment development project in Depok⁹.

In the manufacturing sector, production machine operators are the most vulnerable to workplace accidents. An example is Agus (22 yrs), a production machine operator of PT Bintang Fajar, Jakarta, who died after being crushed by a paper pressing machine¹⁰. In another tragic case, Yayan Rohyana (32 yrs), a worker at PT PMTI, Bandung Regency, died after a dye machine that was being transported upward on the forklift fell off and crushed him.¹¹

Another cause of death among workers, which was quite common and well-known in the year 2011, is a high number of workers being poisoned by food provided by employers. At PT Newmont Nusa Tenggara (PT NTT), 50 workers became victims of food poisoning; this also happened at PT Shyang Ju Fung where 500 people were killed. Finally, at PT KMK Global Tangerang, thousands of workers lost their lives. In all these cases, the employees were poisoned by consuming food provided by their respective companies.

In the mining sector, many accidents occur in mines in the informal sector, where landowners send untrained workers into mines to collect precious metals. Many workers have been buried in landslides. Referring to the records of Bangka Post from January to July 2011 in the province of Bangka, 21 accidents occurred in these mines and 26 people lost their lives. Notes made by the Wahana Lingkungan Hidup Organization reveal that in the Bangka Province more than 150 people die each year in mining of tin ore in this province¹².

The government has not disclosed the data on the number of victims of occupational diseases, as required under Law No. 22 of 1993 concerning disease due to work, which defines the types of injuries and illnesses that need to be reported. However, the figure is undoubtedly very high given a low rate of implementation of OSH management systems by companies in Indonesia as well as a widespread use of hazardous and toxic materials in production processes.

The information above confirms the 2008 International Labour Organization (ILO) report, which identified Indonesia as the country with the second highest number of work-related accidents among the 53 countries surveyed¹³.

The Story of a Victim

In October 2010, Samsuri (36 years) who should have been resting at home, was instead working through pain to support his family. He was diagnosed by a hospital doctor in Medirusa Bekasi with occupational back injury due to his shifting spine. The worker had already experienced more than 13 years of work at PT Rapipack and had undergone dozens of physiotherapy sessions and other treatments in an attempt to restore his health.

Samsuri had been serving as an operator in cardboard box factories since 1997. His job consisted mainly of moving raw materials from storage to the place of production. He had to lift materials or sago flour sacks weighing 50 kilograms each and amounting to a total daily load of 2.4 tons.

In December 1999, he met with a workplace accident and fell off a four-meter high ladder. In the fall, he broke his arm, fractured his right hand in three places and sustained hip injuries. For more than three months, he received outpatient treatment before he was finally declared fully recovered and able to work again.

However, in 2007, he often felt that his hip or spine was sore. He initially thought that the pain was only caused by fatigue. At that time, he was seeing a general physician who prescribed some medicine and advised rest. His hip pain, however, got worse, to the point where he could not even walk, so the general practitioner referred him to a specialist of neurological, orthopedic and rehabilitation medicine in April 2009.

The specialist found that his spine had shifted down three spaces and the bottom part of his spine was colliding with his tail bone; the bottom of the spine was worn and the tail pinched. He again underwent treatment as an outpatient at the Medirusa Hospital, but the team of doctors there recommended surgery to remount the hinges on two vertebrae so that his spine could be restored to its original position. The opinion of orthopedists and neurologists, as well as the rehabilitation medic, was that the 36-year-old man had an occupational injury. Such operations are very costly, approximately 380 million Indonesian rupiah (IDR) (about US\$39,000), and have only a 50 percent chance of success.

The doctors' recommendation was conveyed to the company, and the result was predictable in that the company objected to paying for such an operation. Social Security could not bear the entire cost, as the maximum coverage for work-related accidents is only IDR 12 million. The Social Security agency reprimanded the doctors who dealt with the patient, questioning the period of hospitalization, the course of physiotherapy and the cost of expensive drugs. To

address these concerns, the doctors and the hospital invited the employee and the Social Security agency and explained how the injury was an occupational disease and how the recommended procedures and medicine followed the standards prescribed by Jamsostek (Social Security Agency).

What happened to Samsuri traumatized his family because the pain did not subside and the company did not take responsibility for his care or surgery. Samsuri says that since he first experienced the pain, his work productivity has decreased, and he can no longer lift and hold anything weighing more than 5 kgs. However, Samsuri must continue to work the best he can to support his family, despite the fact that he is in a constant pain.

In Samsuri's current workplace, there are 3 more people diagnosed with the same occupational disease. Dozens of others have experienced similar symptoms, especially those aged 30 years with 7 years of experience working with corrugating machine and boiler operations. Samsuri states that the union at his workplace lacks OSH advocacy. The union only advocates issues regarding personal protective equipment (PPE). In the future he plans to pursue his case legally.

3. A Ripple of Resistance

Based on the monitoring of the Local Initiative for OSH Network Indonesia, reviews from the media, and discussions with some union activists at the regional level, it has been found that accidents and occupational diseases continued to occur at an alarming rate in various regions of Indonesia in the first half of 2011. A variety of threats to health and safety at workplaces exist in Bandung¹⁴, Banjarmasin¹⁵, Cilacap¹⁶, Tangerang, Malang¹⁷, and other areas.

However, in many areas, workers are beginning to realize the importance of health, safety, and injury compensation. Workers have started demanding an enforcement of occupational safety and health insurance and compensation regulations (Jamsostek). This new emphasis on safety may be attributed to workers' increased awareness about their basic human rights at workplace, such as breaks, access to food, and fair pay. As witnessed in Medan¹⁸, Jakarta¹⁹ and West Bandung²⁰, workers demand not only certainty of work but also job security and compensation in the case of injury.

At a time when low wages, mass layoffs and the increasingly widespread conversion of formal workers into informal workers are considered to be central to the neoliberal industrial regime and growth, the demand for improvements

in working conditions and occupational safety and health insurance continues to be a formidable point of struggle.

A rampant violation of the basic rights of workers and the informalization of the workforce is reflected in the case of PT Daya Mekar Tekstindo in the West Bandung Regency of West Java. Workers took action because they were not paid Social Security money (Pikiran Rakyat Daily Newspaper, 01/12/2011).

From some of the information collected, it was noted that since its establishment in 1991, PT Daya Mekar Tekstindo has been treating its workers poorly. In 2003, two workers had their fingers chopped off in work-related accidents. In 2008, one worker died, and his family was not duly compensated. In 2010, two more workers died.

An enterprise does not consist of just permanent workers. More and more workers are being substituted gradually but regularly by contract labourers. Workers at PT Daya Mekar Tekstindo are not registered for Social Security. Many work-related accidents suffered by the workers are resolved “amicably” – but the amount of compensation is far less than the losses suffered by the victims. Moreover, these victims are not rehabilitated; in fact, in many cases, they are immediately laid off. The labour market and industrial vulnerabilities that workers generally face today (mainly in the form of informalization) force them to acquiesce to employers’ demands easily, so that they can save their jobs for themselves and their families. Many workers are laid off due to their involvement in organizing protest actions against company policies. The danger of being laid off is a scourge that haunts every worker all the time, and acts as a deterrent against taking any drastic and sustainable united action.

However, a series of accidents in PT Daya Mekar Tekstindo prompted the workers to unite and support each other. In 2003, two workers had their fingers amputated; in 2008, one worker died but his family did not get Jamsostek compensation; and again in 2010, two workers died, and their families remained uncompensated. All these incidents cumulatively led the workers to protest against entrepreneurial inaction on January 12, 2011. It was the first industrial action undertaken since the textile mills were established in West Bandung.

4. Working Conditions in Indonesia

In the light of the above information, there are some issues in Indonesia that should be emphasized. First, the threat to the safety and health at work

is still very high. Hazardous materials (chemical, biological, toxic and other harmful substances) are widely used in production processes. Asbestos is still allowed in the country, while it has already been prohibited in many countries because it is considered one of the most dangerous carcinogens in the world. Poor OSH management systems in companies have further led to a reckless use of toxic and dangerous materials.

In some places, the victimization of workers occurs repeatedly and even affects the local community. In Malang, East Java, an ammonia gas leak on January 19 2011, at PT Bumi Menara Internusa, caused 51 workers to collapse. Similarly, in 2006, another leak at this shrimp processing plant caused 45 workers to fall unconscious²¹. Poor OSH systems in industries are not only having a negative impact on workers in the factories, but also on the environment around the factories. Dozens of residents living in the vicinity of PT Semen Andalas Indonesia (PT SAI) were forced to evacuate because they were no longer able to tolerate the coal smoke produced by the cement factories and one of them was admitted to hospital because of shortness of breath that was allegedly caused by inhaling emissions from the plant.²² These various incidents show how poor the safety and health management systems were in the company.

There are, of course, some companies trying to apply proper occupational safety and health systems. However, many people suspect that compliance is due to pragmatic concerns, such as to avoid a reprimand or fine from the government or to meet a requirement of the buyers. Some countries applying free and fair trade regimes require the formal certification of a Quality Management System that includes safety, such as ISO 9001 Series, ISO 14000 Environmental Management System Series, and OHSAS 18001.

5. Government Programs and OSH

Protection of workers as provided by the government is still discriminatory and limited: It is mainly applicable to a fraction of the labour force. Of the 30 million formal workers in Indonesia, just 9 millions are registered with the government Social Security injury compensation program, Jamsostek. Meanwhile among more than 70 million informal workers, only one percent is protected by the social program.²³

Membership in Jamsostek is not mandatory, so many workers are left without protection in the event of workplace injuries. There is no negative impact on a company that does not register its workers with Jamsostek. They

are not penalized by the government or the Social Security Agency for non-compliance in this regard. There is no incentive for companies to enroll their workers, which results in a low membership of only about 30 percent of the total formal workers in Indonesia. In some areas enrollment is drastically low, such as in Lumajang, East Java. Of the 600 operating companies there, only 150 firms have registered as participants in the Social Security program²⁴. In Cimahi, West Java, only 10 percent of the companies enroll their workers in this program²⁵. Even in the construction services sector, which is highly vulnerable to workplace accidents, membership in the program is still very low. According to the Social Security data, only 10 percent of the total Social Security participants come from construction firms on private projects. Most construction industry participants in Jamsostek are from government construction projects, as the provision for health insurance is required in the bidding process²⁶. Most private construction workers have no recourse in case of a workplace injury.

Many companies do not register all their workers in Jamsostek. A member of Commission IV DPRD Cimahi City, Ike Hikmawati suspected irregularities in providing social security coverage to all workers by the company, and he found that there are some companies which do only a token registration of some of their employees in Jamsostek. Legally, every company is required to register all their employees²⁷.

Additionally, the OSH surveillance system run by the Government is not optimal. This can be seen from the low number of OSH supervisors in the field compared to the number of industries in Indonesia. The 216,547 companies registered by the Ministry of Manpower and Transmigration are supervised by only 2,384 labour inspectors consisting of 1,460 general supervisors, 361 regulatory specialists and 563 civil servants²⁸. Furthermore, they are not evenly distributed throughout the country. For example, Batam Island, which is an Exclusive Economic Zone, has six superintendents of industrial relations, while there are about 2,500 companies with about 266,000 workers.²⁹ The city of Malang has 7 inspectors, including 3 supervisors who oversee 860 industrial companies³⁰. In some areas, there is not a single supervisor who is specifically knowledgeable in the field of OSH.

Another problem is the lack of government programs addressing employment issues. A research study conducted by Yayasan Wahyu Sosial Foundation found that the budget allocated to the Department of Labour in Semarang is minimal and as much as 70 percent is allocated to facilitate the interests of employers seeking new employees in the form of job fairs. Only 10

percent of the budget is allocated to conduct surveillance of several thousand factories operating in the area.

Weak law enforcement is also an issue. Rampant violations of the rights of workers, especially with regard to OSH, affect thousands of workers each year. This is essentially condoned by the government because sanctions are not strictly applied to companies that violate OSH regulations. These omissions provide relief to companies who take refuge behind the excuse of lacking funds or having a reduced production for not applying the rules that protect workers. Lack of legal sanctions against companies that violate the rules of OSH is the product of existing legislation. Until 1973, Indonesia still used Law No. 1 of 1970 on Occupational Safety and Health. In this act, the sanction provided for violators is only a fine of IDR100,000 (about US\$10.50) and/or six months imprisonment. A more recent piece of legislation raises the fine substantially: Law No. 13, Year 2003, Manpower Chapters 86 and 87, states that violators will be fined IDR 500 million (about US\$52,000). But presently, companies' rampant OSH violations are taken to court. The Ministry of Manpower and Transmigration only issues warnings to companies that commit offenses.

The transition to home-based work has led to less safety protection for workers and more environmental threats to the community. In the past, factories were responsible for all aspects of the production of goods. Now the factories outsource the work to home-based workers, who lack Jamsostek membership or any form of worker protection. An example would be a garment producer who provides sewing work for home workers to complete on a piece rate basis. Also, toy and electronic manufacturers employ community based workers to assemble their products. Production can require use of chemicals or solvents, which can contaminate the household or the village.

The informalization of work, with more and more jobs being transferred from the formal to the informal sector, changing the employment status of regular workers into temporary workers and the transfer of jobs to home-based industries – these are the main characteristics of the labour relations today. Such methods of changing work status get its legitimacy under the Law Number 13 Year 2003 on Manpower which permits the chartering of jobs and employment for a specified time. With the rise of flexible work systems, various losses are experienced by the workers, especially related to one's basic rights in the workplace. Meanwhile, through these systems, the companies can easily avoid their obligations to protect workers from occupational injuries and illness.

One major factor perpetuating diminished safety protection is of course the weakening of trade unions. As recognized by several trade unions in 2010, the labour movement has been on the decline - a decrease in the number of workers protests, a decrease in the size of demonstrations, and demands still too much focused on basic wage issues³¹. The weakening of the trade union was also a result of the decline in membership. In 2010, many union members, who were fired, were replaced by contract workers. The situation is exacerbated by the fact that trade unions have not organized home-based community workers: they were still based in the formal sector and their internal union system was not accommodative enough for workers toiling under informal labour situations.

6. Looking Forward

Of course, a union has to respond to the problems of employment in the new industrial set up that is emerging. In addition to maintaining the number of available members, it will have to take into consideration the swelling number of informal workers. And for this it will have to rethink the established model of organizing.

In many ways, demanding a wage increase is still very useful to improve workers' and their families' opinions about unions. However, a great salary cannot compensate for a family member in poor health. Therefore, the union must re-design its agenda to lobby for health programs for workers and their families. A program should not be limited to a token and technical healthcare, but it should be based on the principle that every citizen has the right to get affordable and quality healthcare.

The country needs to see OSH as a fundamental right of the worker. The government, employers and trade unions all have the responsibility to provide the requisite skills and knowledge to raise awareness about decent working conditions. Currently, very few unions have OSH education programs for their members. Information collected by the Local Initiative for OSH Network in 2009 showed that generally unions included only very basic OSH programs, such as training in the use fire extinguishers and how to register for Social Security. Trade unions do not see OSH as a priority: they do not view it as an integral part of the basic rights of workers, thus they are unable to understand OSH in the framework of their struggle.

Issues related to OSH and its importance as a basic right should also be addressed by employers and the country. The government and

employers also view OSH very simplistically, and this must change. They see it as an added cost to business and as something that can be addressed by a quick token gesture like providing gloves or a dust mask. Safety is not considered an important aspect of the company culture, even when zero accident campaigns are espoused that are not actually true³². It would be better if the companies and the government embraced safety at a deeper level, beyond awards and banners. Programs that address the root cause of workplace accidents and create a safety culture should be promoted and implemented, and all workers should be covered under the Jamsostek program.



Sulphur mine worker in Ijen Mountain, East Java, Indonesia.

Endnotes

1. Media Indonesia – 26 January 2011
2. LIPS, notes on OSH Network Workshop in Indonesia, July 2009
3. See Report of AKATIGA research on the informal sector labour relations in 2003.
4. www.poskota.co.id - 9 June 2011
5. www.surabayapost.com – 15 September 2011
6. Suara Merdeka – 13 April 2011
7. A construction worker at Trans Studio rebuilding projects Bandung Supermal (BSM) was killed, due to falling from a height. Meanwhile, two other people were seriously injured (Pikiran Rakyat Daily, 12/12/2010).
8. Two Navvies fell from the 9th floor of a building on the street in Kertoarjo 44. A porter was killed while another was seriously wounded. Both victims fell while pulling plywood. (www.surabaya.detik.com - 20 Januari 2011)
9. www.poskota.co.id – 23 Mei 2011
10. Tribunnnews.com – 11 June 2011
11. www.pikiran-rakyat.com – 2 August 2011
12. Bangkapos.com – 19 August 2011
13. www.indopos.co.id - 3 April 2008
14. BANDUNG – Eight workers were chemically poisoned . “I was working in that house. I saw people who were making the emblem suddenly stagger. They opened a chemical substance. They continued to stagger. I was quite far from the substance, but still I felt dizzy. But, I did not feel that awful. Those six workers were taken to hospital,” said Amung when found at the scene (Tribun Jabar Daily, 17 January 2011).

15. BANJAR MASIN - Five Telkom employees died of electric shocks. According to one worker who joined the Telkom Project, Husin (41), five employees were climbing the Telkom pole on Friday (21/1/2010) when the pole suddenly touched the electric cable and they were electrocuted (Kompas, 21 January 2011).
16. CILACAP – Tuesday (13/9) midnight, an accident happened in Pertamina Refinery Unit (RU) IV Cilacap, causing three deaths; four others went into coma. One of the deceased was a foreign national (www.detik.com – 14 September 2011)
17. MALANG - At least 51 workers of PT Bumi Menara Internusa (BMI) Concurrent fell unconscious after inhaling ammonia gas in the shrimp processing plant in Jalan Pahlawan, Dampit, Malang Regency, Wednesday (19 / 1). All of a sudden, they sensed a foreign smell, like the smell of medicine for rebonding curly hair. “Suddenly my throat was dry, sore and I felt nauseated,” said Susiana (45), a packing worker, while being treated at the health center Dampit (Surya Daily, 20 January 2011)
18. MEDAN – after the death of Tri Ardiansyah, a labourer of PT Siantar Top Tbk, his family was not compensated on grounds that the head of the product development company did not participate in the Social Security program. As a result, the Alliance of Labour Deli Attack (ABDES) criticized and condemned PT Siantar located in Jalan Medan-Tanjungmorawa 12.8 km for not registering employees in the Social Security program as provided in Law No. 3 of 1992 on Social Security (waspada.co.id, 16 January 2011)
19. JAKARTA – Hundreds of workers at PT Rismar Daewoo Apparel KBN Cakung held a strike demanding that the company abide by the rules agreed upon for overtime (which had not been compensated for two years), implementation of the JPK program, leave entitlements, THR, better salaries and no change in overtime compensation work day policies (Pos Kota Daily, 13 January 2011)
20. BANDUNG BARAT – a total of 250 workers of PT Dayar Mekar Asih Tekstindo at Giri Road, Village Giriasih, District Batujajar, West Bandung, demonstrated at the main entrance of the company. They demanded payment of Social Security money which since 2003 had not been paid to them. It was said that the total bill required for employees amounted to IDR 167 million. The action was triggered after two workers of PT Daya Mekar Tekstindo died in workplace accidents and their dependents were unable to withdraw compensation due to them (Pikiran Rakyat Daily, 12 January 2011)
21. www.surya.co.id , accessed on 20 January 2011
22. www.nasional.inilah.com, accessed on 6 August 2011
23. Republika,- 24 December 2010
24. www.jaringradio.suarasurabaya.net, as accessed on 26 May 2011
25. www.antarajawabarat.com, accessed on 21 July 2011
26. www.solopos.com, as accessed on 26 May 2011
27. www.antarajawabarat.com , as accessed on 21 July 2011
28. www.poskota.co.id, as accessed on 12 March 2011
29. Kompas, as accessed on 9 April 2010
30. www.mediaindonesia.com, as accessed on 27 February 2011
31. This fact was admitted by trade union activists during our discussions with them in the District of Serang on 9 January 2011.
32. In our discussions with union activists in West Bandung regency of West Java in 2009, we were told that OSH was no longer a problem, because every year there were competitions on OSH for zero accidents, even though accidents continued to take place at an alarming rate.