

Written Testimony of the Hon. Douglas L. Parker

U.S. House of Representatives Education and Workforce Committee
Subcommittee on Workforce Protections Hearing on
“Building a Safer Future: Private-Sector Strategies for Emerging Safety Issues”

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Thank you, Chairman MacKenzie, Ranking Member Omar, and members of the Subcommittee on Workforce Protections, for the invitation to testify on private sector strategies to address emerging safety issues. For the last sixteen years I have served the public in a variety of roles working to improve occupational safety and health outcomes for U.S. workers. I held senior roles at the Mine Safety and Health Administration, was Chief of the California Division of Occupational Safety and Health, and led the Occupational Safety and Health Administration, serving as Assistant Secretary of Labor for Occupational Safety and Health from 2021 to 2025. I also served as Executive Director of a legal aid organization dedicated to worker health and safety-related rights, and have represented labor unions in various industries. I am currently a consultant on health and safety matters. I also serve as a senior research fellow at Harvard Law School’s Center for Labor and a Just Economy.

I look forward to a wide-ranging discussion of some of the many emerging issues in health and safety. For the benefit of the subcommittee I have provided a short list of some of the highlights that, from my perspective, are top of mine in ensuring that workers in the U.S. can go home at the end of shift safe and healthy.

Emerging Issue 1-The Degrading of the Health and Safety Ecosystem

The Occupational Safety and Health Act of 1970 is the cornerstone of U.S. occupational health and safety. It codifies a system of roles and responsibilities shared among government,

employers, employees, and employee representatives to address health and safety in the workplace. Under this system, employers have the responsibility to ensure a safe and healthy workplace. It is critical that employers and employer associations are proactive, thoughtful and forward-leaning in advancing workplace health and safety. We should encourage innovation, research and a scientific approach to improving outcomes for workers.

It is critical to recognize that health and safety strategies implemented by employers do not develop in a vacuum. While many employers deserve credit for their significant commitment to health and safety, it would be a mistake to think of emerging health and safety strategies as employer-developed.

Employer strategies are grounded in years of experience and study of the nature of workplace hazards. They are grounded in the demands of organized labor to improve working conditions, and in labor-management agreements that have for years improved safety programs through worker participation, input and negotiation, resulting in strong industry standards in those sectors, benefiting both union and non-union workers. They are grounded in non-profit organizations of safety and health professionals that contribute to the field. And they are grounded in world-class research into health and safety hazards and a research-to-practice approach that puts new technologies and practices in the hands of employers and workers. This knowledge is possible through the work of public institutions such as the Occupational Safety and Health Administration, the Mine Safety and Health Administration, the National Institute for Occupational Safety and Health (NIOSH), the National Institute of Environmental Health Sciences (NIEHS), and the work of numerous state agencies and public research universities.

Any discussion of emerging health and safety issues must recognize that without these public institutions, without labor, and without dedicated safety and health professionals our Nation's

workers would work in much more dangerous conditions. Particularly troubling was the Administration's recent effort to dismantle NIOSH, which would have eliminated the Nation's principal means of researching and understanding the nature of health and safety hazards for workers. Thankfully, through the efforts of the public, including leading voices from both labor and management, this decision was reversed. This non-partisan recognition of the critical role of a public institution in providing value to both workers and employers was a welcome departure from the current climate of divisiveness.

Unfortunately the Administration remains undeterred in its desire to eliminate NIOSH, which has provided the foundation for many of the advances and innovations today's panel will discuss. The President's FY 2027 budget proposes a 75% budget cut, eliminating all current occupational safety and health research programs. There are also proposed budget cuts and changes to the mission of NIEHS.

Effective cuts at other agencies are also degrading the system that Congress envisioned when it passed the OSH Act. The number of federal OSHA inspectors, which is now well below 700 compliance officers to cover the majority of the U.S. private sector, is the lowest number in the agency's history. Similar staffing reductions have impacted other parts of the agency, limiting OSHA's ability to update and modernize rules, address emerging hazards, and conduct outreach. These cuts will also impact the effectiveness of state OSHA plans. The President's FY 2027 budget further undermines any efforts by OSHA to hire inspectors, proposing a 13.5% budget cut for OSHA enforcement and a 36% reduction in health and safety inspections from 2025 levels.

Emerging Issue 2: Growing Recognition of Safety and Health Management Systems

The most important positive development in the private sector is the growing recognition of the need for employers to develop robust safety and health management systems (SHMS).

Compliance with a set of health and safety regulations is a critical part of safety, but it represents a floor, a minimum set of requirements. Unlike a compliance-focused program, a SHMS approach to health and safety embraces health and safety as a core organizational value. Its goal is continuous improvement of health and safety. While different SHMS approaches emphasize different components, they have three common themes: (1) corporate leadership and communication; (2) a systematic approach to finding and fixing hazards; and (3) active employee involvement and input.

During my tenure at OSHA we placed significant emphasis on the importance of employers adopting a SHMS approach to health and safety, holding listening sessions, encouraging information sharing, highlighting positive examples, and incorporating SHMS principles into corporate-wide settlements. We even expanded our own SHMS to include a section on mental health and mental health and wellness.

Emerging Issue 3: Injury/Illness Data and Leading Indicators

Employer efforts to develop metrics for health and safety performance developed from the same desires for a more scientific approach to better business management. There is a growing call for increased use of leading indicators as a tool for predicting and improving health and safety outcomes. I fully support this effort. During my time at OSHA I led the call to encourage employers to better use data, including the development of leading indicators, as part of a SHMS approach.

At the same time, I am concerned with the suggestion from some corners that leading indicators represent a “silver bullet,” or that good use of leading indicators means less focus on injuries. To respond to some of those claims I have a few key points:

1. The U.S. lacks a comprehensive surveillance system to understand the health effects of work. The lack of such a system severely curtails our ability to understand, or even count, the number of occupational illnesses in this country.

2. Our ability to track injuries and serious injuries exists but is limited. Our understanding of injuries on a national or industry-wide scale is primarily based on sampling. Efforts to count injuries are limited by inconsistencies in employer reporting, some of which are driven by inconsistent rules and some which are driven by incentives to undercount injuries.

3. Despite the limitations, tracking injuries and illness are our best available method of tracking health and safety outcomes.

4. Injury and illness data are sometimes referred to as “lagging indicators.” It is important to note this statement, “lagging indicators,” is incomplete. One must complete the sentence, “lagging indicators of _____” to understand this reference. It almost always means future injuries or illnesses, but can also refer to catastrophic events.

5. For example, if an employer has a high number of ergonomic injuries and implements a new ergonomic program, the number of past injuries is a lagging indicator of future ergonomic injuries. In addition to being a lagging indicator, it has limited predictive value in determining how the new program will work. However, it remains a critical benchmark for future performance. It is

also a record of past outcomes, and represents worker suffering, lost income for the worker, and lost economic value for the employer.

5a. If the employer has a high number of ergonomic injuries and makes no changes, past injury rates are still both a lagging indicator of future performance and a benchmark. However, in this scenario a lagging indicator is a stronger indicator of future performance, assuming the injury rates are statistically significant. And the larger the sample size, the more relevant lagging indicators tend to become.

6. The best leading indicators track implementation of SHMS. They track things like maintenance, worker participation in safety, efforts to audit hazards, and adoption of innovative solutions to address hazards. But any effective approach includes both leading and lagging indicators. There is not “silver bullet,” and indicators should not be confused with definitions. They are predictive tools, not outcomes. The only relevant outcome is how safe and healthy workers are.

I applaud efforts by the private sector to develop stronger leading indicators. But in adopting them we cannot abandon fundamentals of health and safety, such as tracking injuries and illnesses.

Emerging Health and Safety Issue 4: Silica

The debilitating effects of silica dust on workers’ lungs is hardly an emerging issue - the impact on stonecutters was documented in the Roman Empire. What has emerged in recent years however is a form of exposure to respirable silica dust that is killing and disabling workers at a shockingly young age. The exposure occurs among workers who cut and shape engineered stone, a composite material made with crushed stone - typically silica-containing quartz -

binders, and resins. The "recipe" for this material radically concentrates respirable silica, creating dangerous exposures at moderate levels of dust. At OSHA I characterized this hazard as America's next Black Lung if we do not take decisive action. The victims are typically immigrant workers who take jobs in small operations of only a few employees. These operations are widely dispersed, making enforcement and outreach difficult. While there are technologies and processes that can protect workers from dust, as a practical matter workers will continue to have adequate protections in this industry. The nature of the supply chain of these products places the greatest risk on the workers at the smallest employers with the least access to the significant capital needed to invest in improvements. It is also unclear to me whether the current economics of the industry allow for these sorts of improvements. This is the type of hazard where emerging strategies and leading indicators implemented by larger, more sophisticated employers mean little.

A similar trend exists in the coal mining industry, where changes in mining methods have introduced higher levels of silica-containing quartz dust into the mine environment. After years of progress in preventing coal miners' pneumoconiosis, one of several respiratory diseases known as Black Lung, there has been an alarming increase in the rate of Appalachian coal miners stricken by Black Lung at younger and younger ages because of exposure to respirable silica. While MSHA finalized a rule to put stronger protections and better health surveillance in place across the mining industry, implementation has been paused by this Administration. In the meantime, miners wait for relief.

Emerging Health and Safety Issue 5: Artificial Intelligence

AI dominates the conversation about new technology in the workplace. It is a powerful tool with real potential to reduce injuries and illnesses. But if AI is not grounded in fundamental safety

principles and an ethical framework, it can introduce significant physical and psychological hazards into the workplace.

I support using new technologies to protect workers. I have witnessed how collaboration between government and the private sector has brought technology into the workplace that saves lives. But many of the AI tools on the market focus on modifying worker behavior instead of addressing the root causes of hazards. While these tools can be a helpful part of a safety program, the first question in addressing a workplace hazard is whether the danger can be eliminated, isolated or controlled through engineering. Skipping those steps and simply training workers to adapt to hazards makes workplaces less safe. Safety-purposed AI can also undermine safety by chilling employee involvement in safety efforts if used to monitor and discipline employees instead of for improving safety.

Employers must also ensure new technology does not introduce new hazards into the workplace. Algorithmic management tools that track worker activity can create physical and psychosocial hazards. Fear of surveillance, loss of privacy, and anxiety about job loss affect mental health. Physical injuries and illness can result from production pressures that cause workers to skip needed rest breaks or work at unsafe speeds. These risks can be reduced through prevention by design. Practical strategies for prevention by design in AI include development of risk assessment tools, auditing standards, and a safety certification process focused on ensuring technology does not harm workers. And employees should have a seat at the table. Transparency and understanding are key.

Other Emerging Issues

Workers continue to face new and growing hazards, including from heat, workplace violence, particularly in health care, and new chemical compounds introduced into the workplace. These

hazards require a robust approach from employers and our worker protection agencies. OSHA should continue its work developing standards to protect workers in all of these areas, but needs additional funding to do so adequately.

Thank you again for the opportunity to come before the subcommittee and offer my perspective.

I look forward to the discussion.