Black lung disease reemerges in Australian coal mines

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Thirty years ago mining companies claimed that coal workers' pneumoconiosis (CWP) or "black lung" had been eradicated in Australian mines. In the past four months, however, eight Queensland coal miners, most of whom worked in the state's Bowen Basin, have been diagnosed with the disease.

The reemergence of black lung is a result of company cost-cutting and the drive to boost production, combined with inadequate ventilation and dust-testing standards and delays in the proper analysis of miners' x-rays.

The disease is caused when dust particles accumulate in parts of the lung, causing inflammation and scarring, reducing oxygen/carbon dioxide exchange and overwhelming the organ's natural defence mechanisms. Continued dust exposure eventually leads to scleroderma, chronic bronchitis, heart problems, lung failure and a painful death.

There are currently two government inquiries into black lung in Australia—one by the Queensland state government, which will be completed in June, and the other by a federal Senate committee.

Testimony to the Senate hearing last month from black lung victims highlighted the dangerous conditions in which they worked. Percy Verrall, 73, who worked in the industry for 29 years, was the first person diagnosed with black lung in Australia in the past three decades.

Verrall said he was never supplied with masks to protect him from coal dust. "I don't want to see any other young blokes in that condition," he said. "It's got to be fixed up so they're not going to get like all the other miners with black lungs. They could finish up just the same way as me, or walking around with an oxygen bottle hooked up to them all the time."

Ian Hiscock, another victim, said mine ventilation was poor and dust-suppression systems constantly blocked up. "The dust mitigation is inadequate in the coal mines. In this day and age of technology, a $100 million long haul to use a one inch hose to try and suppress dust is insufficient," he said.

"The bane of the coal mine worker at the start of every shift is we always say we want more air, we need more air, and we're not getting it, because the act and regs [regulations] say, 'This is what you need to work to' and the companies supply the minimum amount of air. But it's not enough."

There is no cure for black lung. The only way to prevent the disease is by minimising exposure to coal dust. This means rigorous and constant testing of mine sites and the use of high-quality ventilation systems and other methods to keep the dust below occupational exposure standards. Workers and retired miners need to be regularly tested for early signs of the disease and provided with adequate medical treatment.

While coal mining has been one of Australia's largest export earners, directly employing more than 30,000 workers, the industry has no uniform coal dust standards—guidelines vary from state to state. In addition, there is no nationally-coordinated black lung testing regime and not enough specialised radiologists and qualified respiratory disease experts employed to examine miners' legally mandated x-rays.

In Queensland, the allowable level of dust exposure for a single shift is 3 milligrams (mg) per cubic metre of air. In NSW it is 2.5 mg. These standards are well above what is regarded as "safe levels" in the US and Britain.

The official level in the US is 1.5 mg per cubic metre of air, with mines supposed to be monitored 45 times per month and during 80–100 percent production levels. These standards, of course, are rarely followed. Black lung in the US continues to rise and is currently at the highest levels in four decades.

Dust monitoring in Queensland is left to individual mining companies without independent checks. Companies, moreover, are only required to conduct dust monitoring 15 times per month. This can occur during maintenance and slow-production periods, when coal dust is obviously at a minimum.

The Queensland and Senate investigations have focussed

on coal mining in Queensland, where underground mining companies have routinely exceeded allowable dust limits.

In the state's Bowen Basin, where most of those recently diagnosed with black lung have been employed, Anglo American-owned Grasstree and Grovernor mines and the Brazilian-owned Carborough Downs mine have regularly recorded dust levels above the state's "safe" 3 mg standard.

Evidence presented to the Senate hearing revealed that eight of 10 Queensland coal mines between 2012 and 2015 operated well over the standard, with one recording 6.5 mg. No action was taken by the Queensland or federal governments against any of the mine operators.

All Queensland coal miners have been legally required since 1993 to undergo chest x-rays before employment and at least once every five years after being hired. The x-rays are sent to the Department of Natural Resources and Mines (DNRM) for review. The department recently admitted, however, that up to 150,000 of these x-rays had not been checked, due to a lack of qualified specialists.

Black lung sufferer Keith Stoddard told a Senate hearing that only one of the seven x-rays taken of his lungs could be located by the DNRM. Shortness of breath forced Stoddard to leave the Grasstree mine six months ago. He sought medical advice and was informed that he only had 50 percent lung function.

Queensland's Department of Natural Resources and Mines director-general James Purtill admitted at the hearing that some of the "nominated medical advisors"—appointed to provide and examine x-rays and make medical assessments of coal miners—were paid by mining companies.

This alarming admission was underlined by Monash University Professor Malcolm Sim. He said the current medical data was "inadequate" because a large number of "nominated medical advisors" were general practitioners, not radiologists, and most were located "well away from mine sites."

Others appearing at the hearings included the Anglo American Coal head of safety Mike Oswell, who denied any problem with dust control measures at the company's Bowen Basin mines. The Queensland Resources Council (QRC) submission claimed the current monitoring system was adequate and urged the hearing to be "wary of alarmist comments."

A submission from the Construction, Forestry, Mining and Energy Union (CFMEU) called for national dust-monitoring standards and an independent statutory body to publicly name mines that violated dust standards. It also proposed a national black lung health monitoring system for current and former miners, and long-term care and support for those suffering from the disease.

Mining union officials told the media proper examination of miner's x-rays by qualified respiratory experts could reveal over 1,000 coal miners suffering from black lung disease.

Notwithstanding CFMEU warnings about black lung, the obvious question is what has been the union's role in allowing the emergence of the working conditions that produce this debilitating and ultimately fatal disease.

In 2014, Andrew Vickers, general secretary of CFMEU's Mining and Energy Division, boasted: "The CFMEU has been instrumental in ensuring some of, if not the world's, best health and safety laws in the coal industry. Indeed, at a time that pneumoconiosis—also known as 'black lung disease'—is again on the rise, Australia has not had a reported case since the early 1970s."

In fact, the union has been instrumental in undermining health and safety standards in the coal industry. In the name of maintaining "international competitiveness," the CFMEU has worked hand in glove with the mining corporations to cut costs and increase productivity. This has involved endorsing and imposing workplace agreements that extended work shifts, increased the use of contractors and part-time labour, and eroded hard-won working conditions, including those related to health and safety.

After rubber-stamping company attacks on jobs and conditions, the CFMEU has decided to call for legislation to combat black lung, in order to deflect attention from its collaboration with the corporations in imposing the very conditions that have produced a resurgence of the disease.

The author also recommends:

New US coal dust standards leave thousands of miners at risk for black lung
[2 June 2014]

Australian mining giant replaces Blackwater workers with contractors
[2 September 2015]

Job losses mount throughout Australian mining sector
[18 December 2015]