Australia: Mounting evidence of black lung cover-up

Oscar Grenfell 25 November 2016

Over the past months, information has emerged indicating the extent of the pneumoconiosis health crisis among coal miners in Queensland, Australia, and a decades-long cover-up by successive governments, the major mining companies and the Construction Forestry Mining and Energy Union (CFMEU).

Coal workers' pneumoconiosis, also known as black lung, is caused by the build-up of dust particles in the lung. There is no cure for the condition. In its advanced stages, it can lead to scleroderma, lung problems, chronic bronchitis and heart failure. The disease results in an excruciatingly painful and prolonged death.

This month, BHP Billiton, the transnational mining company, confirmed to a Queensland state parliamentary committee that three of its current miners and two former employees are affected by the disease.

The official acknowledgement follows confirmation in October that a former miner who worked at the BHP Billiton Mitsubishi Alliance Goonyella Riverside mine had been diagnosed with black lung. He had only ever worked in open-cut mines.

The case exposed the claims by the mining companies and government regulators that only a relatively small number of miners who worked on below-ground sites were potentially affected. Forty of the 53 coal mines in Queensland are open-cut.

Paul Head, the diagnosed miner, said he was "shocked." He told the *Daily Mercury:* "I just thought it was underground, from what I'd heard about it, that's what everyone thought."

Head noted the ubiquity of coal dust, stating: "Everything you touch, you get black stuff on you... Even walking from the car into the mine, all you got to do is look at the cars in the car park and it tells you how much dust is around."

Testimony to a current Queensland parliamentary

inquiry into the disease corroborated Head's comments. This week, Nathan Leotta, a former miner told the inquiry: "In 2009 and 2008, they were telling us at inductions to go underground ... and that it was eradicated because they haven't had any cases in 15, 20 years."

Speaking on the evasive safety practices of the major mining companies, Leotta said: "Let's say that the inspectors were coming on a Wednesday. It's our last shift on a Tuesday night, we'd down tools for four hours and hose down."

Last year, several suspected cases were reported in Queensland. They contradicted claims by the mining industry, government regulators and the unions that the disease was eradicated in the 1980s. The official number of confirmed cases has since risen to 16. The CFMEU claims it knows of at least 30 miners hit by the condition who will not speak out for fear of losing their job.

It rapidly emerged that incidents of the disease had been suppressed by government authorities. In 1984, just before the declarations that "black lung" was eradicated, a Queensland health department study found 75 suspected cases of the disease among former and then-employed miners. The information was apparently never acted upon.

Testimony to a federal inquiry earlier this year revealed that eight of ten coal mines in Queensland operated above the 3 milligram limit for daily exposure to coal dust, between 2012 and 2015, with one registering 6.5 milligrams. No company was ever prosecuted, and the mandated level was not enforced by consecutive Labor and Liberal-National governments or the trade unions, which play a central role in overseeing health and safety practices.

In July, a Monash University study into the disease

found "a major system failure at virtually all levels" of the Queensland Coal Mine Workers Health Scheme. It said the system was designed to find "fitness for work rather than the detection and management of early CMDLD (black lung)." Spirometry tests were generally carried out by unqualified practitioners unable to detect black lung.

The damning report followed earlier revelations that as many as 100,000 chest x-rays of miners conducted under the health scheme had not been examined by any medical personnel.

The CFMEU, mining companies, state Labor government and Liberal National opposition have all scrambled to cover-up their culpability. The union has demagogically denounced the companies for failing to enforce safety standards, while remaining silent on its own knowledge of the breaches, which went on for years.

Queensland CMFEU official Stephen Smythe recently declared: "Black Lung sufferers are victims of a deadly disease inflicted on them by employers who failed to ensure a safe workplace for them and by successive state governments that failed them." The union called for a compensation fund to be established. But it has collaborated with the major mining companies for decades in enforcing the destruction of jobs, wages and conditions and the erosion of basic safety standards.

Material uncovered by the ABC's "7:30" program in August revealed four compensation claims for black lung between 2007 and 2012, making clear that successive governments and the unions were aware of the disease.

Last month, at the Queensland parliamentary committee hearing, Paul Goldsbrough, the executive head of the state's Office of Industrial Relations, admitted that his department confirmed a case of black lung in 2006.

The Liberal-Nationals have sought to capitalise on the obvious complicity of former Labor governments, which were in office from 1998 to 2012, and the CFMEU. Liberal-National opposition leader Tim Nichols denounced "a failure in the detection of black lung by the department, government, unions and health professionals."

Yet, the conservatives were themselves in office from 1957 to 1989, 1996 to 1998 and 2012 to 2015. Equally

hypocritically, some Labor MPs have called for a royal commission and postured as defenders of the victims of the disease.

The plight of coal miners struck by the illness is an indictment of the capitalist profit system and the entire political establishment. The official cover-up of the disease coincided with the mining boom, which was invoked as proof that Australia had escaped the global financial crisis of 2008, and delivered the major mining companies billions of dollars in profits.

Now that the boom has imploded, with thousands of jobs slashed across the sector nationally, the reemergence of black lung underscores the reality that the super-profits came at the direct expense of the coal miners themselves.

Scientists have called into question the existing safety standards within the industry. Professor Lou Irving, clinical director of the University of Melbourne's Lung Health Research Centre, stated in September: "There are regulations limiting the amount of dust that coal miners can be exposed to, but they have no basis in science." He commented: "We simply do not know at what point exposure to dust triggers lung stiffening, or fibrosis and we urgently need to address this so we can catch it before it becomes incurable."

Irving said black lung rates in Australia may be comparable to those in the United States. Incidences of the disease in West Virginia, Kentucky and other impoverished mining states have soared in recent years. Following the Upper Big Branch mine disaster in West Virginia in 2010, autopsies showed 71 of the miners who perished had signs of the disease.

In 2008, at the height of the mining boom, some 36,700 workers were employed in the Australian coal industry. In addition to coal dust, underground miners come into contact with high concentrations of diesel fumes. A study last month found that, resulting from the fumes, they face 38 times the accepted occupational risk for lung cancer.



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