The miracle fiber exposed as a deadly threat
Some Moments in the Battle to Have Asbestos Banned from Use in Australia
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The history of the mining, manufacture and use of asbestos in Australia is a history of shameful neglect at best and at worst horrendous promotion of profit over human life. All those in touch with asbestos are at risk of contracting one of the many diseases associated with it. While asbestos was used in Australia from early in the twentieth century its use escalated dramatically after the Second World War. A substance that could withstand extreme conditions without damage was irresistible to those who sought to profit from the unprecedented growth of post-war Australia. In a booming economy the miracle fiber was used extensively in the manufacture of many products and in industrial, commercial and domestic construction. Use of asbestos in Australia was extensive compared with other countries. The legacy of this is that asbestos still lurks in backyards, in sheds, in rubbish dumps, in schools and in hospitals. Everywhere there are buildings or products that pre-date the banning of asbestos in 2003. There are few living Australians who don’t know first-hand a person who has died from asbestos related disease. 642 people died of mesothelioma in 2010 (Sydney Morning Herald, 5 September 2012), and as the number of victims continues to rise it is predicted that mortality will not peak before 2020.

The asbestos industry in Australia was involved in mining, and manufacture of products which contained asbestos largely for the building industry but also in parts for cars and machinery. There were three mines; Wittenoom in West Australia (WA) produced blue asbestos (crocidolite) from 1943 to 1966; in the seventies there was a mine at Woodsreef, and another at Baryulgil in NSW that mined white asbestos (chrysotile). None of the mines were particularly profitable. Building materials containing asbestos were made by James Hardie Industries, Wunderlich (which was owned by CSR who had also owned the mine at Wittenoom) and Goliath Portland Cement Company in Railton. Hardie were by the far the largest of these companies and their influence on the events in Australia was hegemonic. Other companies that worked with asbestos were in the manufacturing sector and included either spraying asbestos as insulation or using it for friction parts for vehicles.

Conflicted Loyalties

The problem that the history of asbestos poses to all of us interested in social change is this. Some asbestos producers were in possession of the facts of asbestos disease before the end of the second world war and acted effectively to prevent this from becoming public knowledge. In the post war period research uncovered more and more information about more and more health hazards yet this information was largely held captive by the industry. Yet why was it that medical scientists who also knew that asbestos posed lethal dangers did not communicate this fact to the general public until the 1960s, and many participated in spreading disinformation to the end? Why was it that government authorities, also long in possession of the facts, failed to put an end to asbestos production and importation until 2003, despite thousands of deaths? And even when the dangers of asbestos became public knowledge in the 1960s, on the whole, people who were exposed to asbestos fibers continued working in unsafe conditions refusing to believe that they were in danger, often until the number of deaths in their locality and among coworkers and family became overwhelming? And how was it possible for even senior managers of asbestos companies to see members of their own family die of exposure to asbestos, and yet continue to deny the dangers of asbestos and expose others to the risk? Why did low-paid, exploited asbestos workers go on exposing themselves to asbestos long after the dangers of asbestos were public knowledge, even when other jobs were available?
Neither structuralist sociology nor naïve theories of economic self-interest provide an adequate explanation of these facts. But even more significantly, such theories cannot explain how it came about that asbestos mining, importation and use, which had gone on in Australia for a century, was eventually banned, and asbestos is now universally recognized as a lethal danger and its discovery in old buildings frequently the cause of panic.

What this story brings to light is that the behavior, loyalties and beliefs found in the world of work in a capitalist economy cannot be grasped solely in terms of economic categories or theories of social reproduction. In the order of Nature, so to speak, individuals occupying the same economic position are in competition with one another. Solidarity between workers and class consciousness arise in the face of exploitation, only thanks to projects launched by activists promoting a solidaristic ideal which mitigates the exploitation and creates class consciousness, mutual aid and the commitment of workers to the class project. Employees are neither blind and loyal servants of their firm, nor uniformly imbued with class hatred of their bosses, nor solely driven by individual, family or community concerns. The extent to which one or another loyalty prevails depends on the outcome of social struggles. Employers work hard to foster the loyalty of their employees to their own project, and usually enjoy a degree of success.

Likewise, different firms fighting for a larger share of the social wealth by means of asbestos production are in competition with one another. But faced with an existential threat to their entire activity, the competitors formed an “industry,” that is, a project, a self-conscious social agent which defends the interests of asbestos producers by any means available, side by side with firms’ mutual competition in the market.

There are a plethora of sociological and psychological theories which explain how cultures and institutions maintain themselves by means of various kinds of reward-and-punishment, sanctions for noncompliance to norms of various kinds, myths, legends and moral codes — fields, traditions, frames, narratives, discourses, customs, paradigms, ideological apparatuses and so on. It is well known that members of a social group share beliefs and mutual solidarity, but how people are constituted in such groups, and what beliefs are shared still remain to be explained. Such theories explain, for example, how scientific consensus is resistant to change, how peer review and arrangements for promotion function to defend entrenched views in science. But what these theories fail (on the whole) to explain is how, under the hegemony of the Asbestos Industry, medical science which failed to warn the community of the danger of asbestos, and government health regulators who failed to protect the community, and courts which failed to award punitive damages and compensation to victims, and media which failed to disseminate important facts to the community eventually were obliged to fulfill their mission and collaborate in the complete elimination of the use of asbestos in Australia.

History of the campaign against asbestos in Australia

The project to stop asbestos mining, manufacture, importation and use in Australia was mostly carried out by health professionals and trade unionists and was most enthusiastically fought when these two streams met and formed an alliance in the Workers Health movement. The battle has been long and arduous. It has also been sporadic, as one of the most potent of the weapons used by Asbestos Industry and their supporters was their ability to derail progress toward regulation that would have saved lives. The Anti-Asbestos Movement — the Workers Health movement and the scattering of victim’s groups, legal firms, journalists and others — involved thousands of small actions in numerous settings around the country and without any coordination and very little communication between them. As identified cases of asbestos disease increased, the battle for compensation for victims emerged and became the dominant objective of the Movement as a whole. The battle to have asbestos banned required information, for the first step was to prove the extent to which it was a hazard. Litigation
required copious amounts of detailed information, and the resulting research provided the movement for banning the substance with its basic weapon.

The project which began seeking compensation, and expanded to seek the banning of asbestos in Australia could not at any stage be called a mass movement. Rather it has been groups of interested health and legal professionals, trade unionists, and victim support groups who, at various times, have made headway. Even this was erratic and inconsistent and often gains made were lost, forcing the same ground to be covered again and again. For the majority of the twentieth century, the campaign aims were to have health and safety measures adopted that it was hoped would reduce harm, rather than have the substance banned altogether. While the dangers have been known at least since the Romans made slaves working with asbestos wear masks so as to prolong their lives, leaps in scientific investigation have exposed the nature of the substance and examined its propensity to cause a wide range of diseases. As information became available, and as the death rate grew, increasingly the lethal nature of asbestos could not be ignored and calls for a complete banning of the substance also grew.

Both the campaign to have asbestos banned and the battle for acceptable levels of compensation for victims have been obstructed at every point by the Industry which has continually argued that handled with care, asbestos is not dangerous.

The growth of evidence linking asbestos and disease was marked by the play of competing interests which shaped both the research process and the reception of knowledge. (McCulloch & Tweedale, 2008)

And yet in Canada and the USA insurance companies were confident enough of its dangers to refuse to provide insurance to those who worked with the substance.

By 1918 enough was known about the dangers of asbestos to lead to the decision of US and Canadian insurance companies to stop selling life policies to asbestos workers. (Epstein, 1979)

Those who campaigned for harm minimization and banning of the substance were reliant on the information available, yet the research itself was often controlled by the Industry. Where research uncovered results that were unfavorable to the Industry, that research was either buried or the researchers were vilified.

**Mobilized Industry**

“Organized greed always defeats disorganized democracy.” (Taibbi, 2010)

In this case it was organized greed against disorganized health professionals and union representatives although it was a far cry from being everyone involved in those projects. While most of those who worked with asbestos were ignorant of its dangers, those who owned and managed the workplaces that depended on asbestos to produce goods were probably not. It is now well documented that the largest and most powerful of the companies involved in the asbestos industry worldwide had the most up to date information about the risks to health. We also know that they went to long and costly lengths to hide this information from those who worked for them, those who would consume their products and the peoples of the world at large. The maintenance of this deception required sophisticated strategies to keep governments, medical, scientific, legal, media, and union communities and activists at bay.

For almost the entire campaign, most health professionals, out of ignorance, denied the presence of asbestos when diagnosing diseased individuals. There were also health professionals who denied in the public debate that there was any danger which could not be controlled. Trade unions were a major player in the story but they also had a difficult road which often led to
neglect. Unions which intervened were sometimes met by members who were antagonistic to any activity that might end with the loss of jobs. This led some unions to fight for a penalty (hazard pay) for handling asbestos, rather than banning its handling altogether or fighting for protective handling. Furthermore, union personnel are reliant on the available information and while there was much that exposed the dangers of asbestos this was often buried beneath the mountain of counter-information released by the Industry.

As long ago as 1898, Factory Inspectors in Britain identified the dangers to workers’ health and evidence began to mount. In 1931, Dust Control Regulations for the Asbestos Industry were introduced in Britain. In 1946, the toll of known asbestos deaths in Britain reached 235 (ADFA, 2009), at the same time as, in Australia, the manager of the blue asbestos mine at Wittenoom notified head office of their first known asbestosis case (ADFA, 2009).

Australian asbestos firms were well connected with the Industry internationally. Although competitors in the market place, the risky business of profiting from the production and use of asbestos fostered close bonds of collaboration. At the end of the second world war, as the asbestos industry in Australia expanded rapidly, several hundred scientific papers had already been published around the world detailing the dangers of asbestos that had been established by research and warned of the dangers. Warnings had been published by organizations ranging from the international asbestos industry’s internal journal, *The Asbestos Worker*, which reported on a “new form of chronic pulmonary fibrosis among asbestos workers,” to the International Labor Organization which wrote: “All processes, from extraction onward, unquestionably involve a considerable hazard” (Hills, 1989). This information was publicly available as far back as 1938 when a book titled “Silicosis and Asbestosis” was published in Australia as well as overseas. The book included detailed descriptions of the symptoms of asbestosis, noted that these were often misdiagnosed and made links between asbestos and lung cancer. The author, Dr. Lanza, was described in the Preface as an adviser on industrial hygiene to the Commonwealth of Australia (McCulloch, 1986).

The Industry’s approach was typified by their response to a six-month strike in 1949 by asbestos miners in Thetford, one of the mining areas of Quebec. One of the demands of the strikers was “some company action to check the spread of lung choking silicosis caused by exposure to asbestos” (Marsh, 2010). Months before the strike, Kenneth Smith, a doctor who worked for Johns Manville, one of the companies involved in the strike, undertook research in the town of Asbestos and found only 4 workers in the whole town with healthy lungs. Smith recommended that men not be told of their condition and wrote to Johns Manville:

> As long as the man is not disabled it is felt he should not be told of his condition so that he can live and work in peace and the company can benefit by his many years of experience. Should the man be told of his condition today there is a very definite possibility that he would become mentally and physically ill simply through the knowledge that he has asbestosis. (Peacock, 2009)

A situation emerged around the world and in Australia where knowledge of the dangers of asbestos would come to the fore and remedial action would be attempted. Sometimes this action led nowhere and sometimes it led to a tightening of regulations on exposure to asbestos. For many years, the major focus in setting regulations, which was initiated and enthusiastically supported by the Industry, was the setting of ‘safe’ levels of airborne particles. The difficulties which were involved in setting, measuring and maintaining a ‘safe’ level kept many well-intentioned people occupied at the expense of providing possibly life-saving information to those who were being exposed.

In 1950, the Third International Conference on Pneumoconiosis was held in Sydney with an agenda that included several papers on the health risks of asbestos (McCulloch, 1986). The
same year the WA Commissioner for Public Health reported to his Minister that “Asbestos dust, if inhaled, constitutes a very grave risk and is, if anything, worse than silicosis” (ADFA, 2009).

Throughout the 1950s a number of significant developments in knowledge of the asbestos health hazard were made and led in many places to health regulations being introduced for the asbestos industry. In 1951, the British medical journal, The Lancet, carried an article that discussed cancer of the lung among asbestosis sufferers and within two years the journal had listed asbestos as a carcinogen. In 1955, an epidemiological study of a group of British asbestos workers confirmed the risk of lung cancer (McCulloch, 1986).

An example of the way that a determined, though sporadic struggle to keep workers safe from asbestos can be frustrated is seen in the Victorian Railways. In the mid-1950s, the Victorian Department of Health and a number of unions became concerned about what the newly exposed information about asbestosis meant for those who worked with asbestos. After an initial investigation, Doctor Douglas Shiels of the Victorian Health Department became particularly concerned about asbestosis and commissioned Doctor Leslie Gordon Thomas to undertake further research. Thomas carried out a radiological survey of all workers in the ‘dusty trades’ and the results showed high levels of disease in those working with asbestos. One third of 300 asbestos workers had asbestos bodies in their sputum and 15% showed lung damage on X-Rays. In one workplace a further examination showed that 20 out of 44 cases were positive for asbestosis. The results were published in The Age in January 1956 and a year later a full report of the findings was published in the Medical Journal of Australia. Thomas argued in this article that disease was more widespread than had previously been known and was a danger, not only to those involved in the production of asbestos products, but also to those who used the products. He particularly mentioned “sawing, cutting and finishing,” any products containing asbestos such as brake linings, asbestos sheeting and insulation materials (Haigh, 2006).

Disappointed with the lack of action taken by the Industrial Hygiene Department in Victoria, Thomas took it upon himself to inform workers of the risks to health and addressed the Victorian Trades Hall Council. As a result, the Secretary of the Tramways Union intervened in the case of a member who had lung problems. He had been employed as a motor mechanic and had been using a rotary buffing machine to grind down asbestos brake linings. When the union insisted, as a result of Thomas’s address, that the man have an extensive series of sputum tests, it was proved without doubt that the man’s lungs had been ‘dusted with asbestos’. Workers Compensation was paid to him.

However Thomas also informed the Secretary of the Australian Railways Union, J. J. Browne, that in 1954 the Industrial Hygiene Department had conducted tests on railway workers at the Newport Workshops. A report showing that asbestos was a menace in two locations at the Railway Workshops had been secretly given to the Railway Medical Section, but the Union had not been informed. Once this information was disclosed the Union were able to take action which involved fighting for compensation for sufferers. However it also involved a battle over on-going work on railway carriages. It was noticed that the railway carriages were lined with asbestos and that men were knocking holes in the material to put in rivets. Six of the men were given sputum tests and X-Rays and two were found to have asbestos disease. The Union established that neither of these men had worked with asbestos before and the Victorian Railways agreed they should have regular medical tests and that the results of the tests should go to the Union. Later it was agreed that all men working on the carriages were entitled to medical tests without loss of time if they requested them.

The Secretary of the Australian Railways Union, J. J. Brown, then wrote letters to all branches of the union to inform them of the dangers that workers may face. He also wrote to other unions and Labor Party Branches to spread the information. Nevertheless, the information and the warnings were somehow lost. Many years later, in 1977, when ABC journalist Matt Peacock publicized the presence of blue asbestos in trains operating on the Melbourne
suburban lines on the ABC, the Shadow Transport Minister, Tom Roper, demanded that they be removed. However, the Victorian Railways claimed that the train service would grind to a halt if the trains were removed, and instead they were inspected and ‘sealed’. In full knowledge of the danger to workers and passengers, the authority kept trains in service until 1988.

As the 1960s dawned, research led to new awareness about the health risks of exposure to asbestos. Research from South Africa threw a spotlight on a previously unknown and highly alarming asbestos-related disease, mesothelioma. It was always fatal, was only caused by exposure to asbestos fibers and it only needed a single fiber to lodge in the wrong place for a person to contract it (McCulloch, 1986). The South African findings were supported by an epidemiological study at the London School of Hygiene and Tropical Medicine which found that of 76 patients who had died from mesothelioma in the London Hospital at least 40 had worked with asbestos or had lived in the same house as an asbestos worker (Byrne, 1965).

Landmark research was also taking place in the USA. Irving Selikoff had led a team that investigated the files of union members in the insulation and asbestos industries who had died in the Mount Sinai Hospital in New York. The results were published in medical journals and then released at an international conference held in New York in October 1964 which shook the industry and threatened its future. The health records of men who were on the union files in 1943 were traced up to 1962.

… they showed that insulators had an excess death rate of 25 per cent, with a heavier mortality than normal not only of asbestosis, but also lung cancer, mesothelioma, and stomach/colon/rectal cancer (McCulloch & Tweedale, 2008).

These results were corroborated as the findings of further studies became available. Selikoff’s research had proved, beyond doubt, that asbestos was a killer and potentially lethal to everyone who was exposed to it. Selikoff’s collaboration with the IAHFIAW, the union representing insulators, laggers and asbestos workers, proved to be the archetype of the Anti-Asbestos Movement.

In Australia, the regulatory bodies were closely allied to the asbestos industry whose activity they were supposed to be regulating. Likewise, when the National Health and Medical Research Council established an occupational carcinogens sub-committee, it included Terry McCullough of Hardies and Gersh Major whose institute received funding from Hardies. This committee published recommendations for ‘safe’ levels of asbestos dust. They also recommended that all employees exposed to asbestos dust should have pre-employment X-Rays and regular X-Rays throughout the period of employment (Council, 1961). In 1962, one of the first clinical case reports connecting mesothelioma and asbestos exposure was published in the Medical Journal of Australia. Between 1961 and 1965 more than 100 cases of lung disease were diagnosed among current and former Wittenoom miners. This was more than for all other mines in Western Australia put together and publicity about the dangers of asbestos mining now began to seep into the public sphere (ADFA, 2009).

One of the most successful strategies of the Industry was to create confusion in the minds of regulators. This was relatively easy. The distribution of information was fragile and interested parties often received sporadic and fragmented pieces of the whole. This left gaps which could be easily filled with contradictory or divergent information that caused regulators to doubt the information they had. Secondly, confusion was sown by the distribution of highly technical information that was difficult to confirm or refute. The Industry framed the problem of one of developing ‘safe’ working environments, and the science of dust monitoring became a pervasive preoccupation, diverting attention from epidemiological and medical findings that no level of dust was safe. Employers maintained that they could provide a safe workplace by controlling the concentration of fiber in the air.
These strategies of the Industry were so successful that opposition to the use of asbestos was easily marginalized. However, the work of Selikoff gradually began to receive more and more exposure and was taken up by the trade union movement. In 1968, The Australian newspaper published a detailed article about the Selikoff research beginning: “The Australian Council of Trade Unions might have better cause than it imagines for asking for an investigation into the harmful effects of asbestos on those who work with it.” The article went on to outline the types of disease associated with asbestos exposure, gave a history of asbestos research, particularly the work of Selikoff and listed the uses of asbestos. The article ended: “today’s children are almost certainly inhaling more asbestos than their parents did and we now know that if a person inhales significant amounts of asbestos dust, he carries a burden that will provide a latent potential for the development of cancer for the rest of his life” (GPCC). Similar articles were duly published in other newspapers around the country.

In 1974, the first major mass media story about the dangers of blue asbestos was published in The Bulletin. It was called: ‘Is this Killer in Your Home?’ and written by Tim Hall. Surely, by now anyone who worked with asbestos would be aware of the lethal danger they faced.

Isolated but powerful bits of information circulated around the trade union movement and as it was exposed it often led to industrial action and policy development that began to change the way asbestos was viewed in the workplace. A trade union trainer in Western Australia, Bill Deller, provides an example of how this took place. He remembers first hearing about the dangers of asbestos.

In 1975, I was shown a documentary that had been made about Dr. Irving Selikoff for the Canadian Steel Workers Union. At the end of that documentary I no longer had any doubts about the dangers of asbestos. (Deller, 2013)

After this Deller made a presentation and showed the video to the National Executive of the Builders Laborers Federation which was meeting in Perth. A motion was immediately adopted to have the spraying of asbestos banned by all union members. This reverberated around the country. One year later, Deller provided trade union training to a group of workers from a James Hardie factory in Perth. As a result of the information he provided they began industrial action and have protective clothing and harm minimization practices put in place.

In 1977, ABC reporter Matt Peacock became aware of the dangers of asbestos and, with Mark Aarons, produced a series of radio programs that were quickly taken up by other media outlets (Peacock, 2009). These broadcasts became landmark exposures which began by discussing the dangers and quickly moved to exposing the Industry’s involvement in the concealment of those dangers.

One of the radio programs discussed the need for labeling of products to warn consumers of the dangers. This call was taken up by Workers Health Action Groups around the country. In Sydney and Melbourne they printed bright yellow stickers warning: ‘Danger: dust from this product can cause cancer’ (Peacock, 2009).

The consumer magazine Choice, called for regulations to warn do-it-yourself and domestic users of products like asbestos cement sheets of their potential cancer hazard. The magazine published a large color photograph of the warning label used in the UK (Peacock, 2009).

Pressure was building around the world to have ever-tighter restrictions on asbestos use. In 1978, the Lidcombe Workers Health Action Group in Sydney published a Fact Sheet on asbestos which outlined the dangers was widely circulated throughout the union movement around the country.

Another group of workers who had become concerned when faced by the effects of asbestos on the health of their members was the Waterside Workers Federation. The conditions under which wharf laborers handled asbestos were extremely hazardous. Originally, the raw material
arrived in paper bags which were often pierced with the hooks used for unloading ships. Dust would waft out of the torn bags and over the workers. The Union made several local agreements but at the end of 1979 they called for national action to tighten restrictions on transport methods. Industrial action took place in Victoria and the Waterside Employers group issued a policy:

…that from 1st January 1980, no asbestos imports will be handled by Melbourne Branch members unless the asbestos is totally enclosed in airtight containers.

By 1980, exposure of the realities of the health hazard had become widespread and governments, unions, industry bodies, and consumer groups introduced policies, bans and regulations, designed to counter the hazard. At Goliath, sales were deteriorating while consumers and the workforce were asking questions about the safety of asbestos fiber. Asbestos product manufacturers began to phase out the use of asbestos and union bans increased. Regulations were tightened in various states.

Until the 1990s, Occupational Health and Safety regulations were largely state matters. With the first OH&S Act introduced in Victoria in 1985, and there was inconsistency from state to state. By the mid-1990s, a Federal government registration agency for new chemicals was established – the National Industrial Chemicals Notification and Scheme (NICNAS). This body oversaw the regulation of asbestos on a national level.

Regulations continued to be tightened at both national and state levels, but fell short of a total ban.

The End of Asbestos Use in Australia
The Case Study of Asbestos Brakes

Australian Manufacturing Workers Union (AMWU) Occupation Health and Safety Officer, Deborah Vallance who was involved in these activities throughout said:

The history in terms of the actual ban was much more located within the union movement and the health and safety bureaucracy. Most of the work was done behind the scenes, individuals in the union and in the health bureaucracy researched tirelessly to find out how many parts were being imported, how overseas countries were dealing with similar situations. This was all done by people behind the scenes, not high profile, but trudging away doing the preparatory work. Unless that work happens, nothing happens but it isn’t public, it just bubbles along. (Vallance, 2013)

While the building industry, under pressure from the building workers’ unions had legislated and regulated against the use of asbestos it was still being used in other, less obvious ways and this wasn’t stopped until 2003 when the Federal Government finally passed legislation that totally banned the importation of all asbestos and products which contained asbestos. While it might seem that this event would have been a simple matter of creating consistency across all industries and as such a formality, the legislation was only enacted after a campaign by unions and the Anti-Asbestos Movement generally.

The AMWU represents maintenance workers and tradespeople in a range of industries where the use of asbestos lagging and friction products was entrenched. Asbestos was used extensively as insulation in the power industry and in shipbuilding and also in the manufacture of brakes, clutches, and gaskets. As the manufacturing sector in Australia declined, the jobs of these workers were fragile. Their employment depended on the importation of raw chrysotile which continued long after it was stopped for the manufacture of asbestos cement sheeting and
CONCLUSION: TIME AND ACTIVITY

insulation. Similar products were manufactured overseas and so for the members of the AMWU, banning the raw substances only would cost them jobs as imported asbestos-containing brakes and clutches would command market dominance. AMWU members were concerned that they would suffer job losses if there was a phase-out of the use of raw asbestos without a ban also on the importation of asbestos-containing products from overseas. As well as this, requests from unions for a phase-out of all importation was met by Industry claims that non-asbestos products were not as safe and would put Australian motorists at risk.

A NICNAS report was released that called for changes to the labeling of products, employee induction training, an increase in control measures to decrease the exposure of workers to chrysotile and health surveillance of these workers. However the recommendations were not acted on by the National Occupational Health and Safety Commission (NOHSC). For the next years, the trade union movement continued to lobby to have action taken. In November 2000, the ACTU resolved to work towards a ban on the importation of asbestos and asbestos products, rather than simply a ban on manufacture of asbestos products.

During that time the trade union movement resolved to bring attention to the fact that asbestos was still being imported. A community campaign was initiated by the AMWU that reached out to the asbestos support groups, sympathetic labor lawyers other interested community members.

The support groups and labor lawyers had more appeal than the unions did. The asbestos support groups have always been groups of people who come and go, self-help groups often are, that’s partly their nature. We knew who those people were, we had good links with good legal companies who do the asbestos litigation so we were able to organize public events. People who had ‘meso’ [mesothelioma] were involved in public action and those people have since died and they were amazing, because this wasn’t about their health, but about the health of other people. There were existing links because our members are part of those groups, unions have been on the committees of those groups.

We had a post card and a T-shirt campaign. The post cards were signed by different people and sent to Tony Abbott who was Minister for Employment and Workplace Relations at the time. The T-shirts were designed to bring attention to the issue. We did stuff during Asbestos Awareness Week which is in November, and also for International Workers Memorial Day which is April 28. In 2001 the ACTU hosted the international trade union official function for Workers Memorial Day. We held a public ceremony on the steps of the state library. We called on people to sign the post cards and then we listened to speakers from the Latrobe Valley Asbestos Support Group. There was also little events, little media events. Once we went to the Department of Employment and Workplace relations and laid wreaths. We had asbestos removal workers in their gear and we sent post cards. One of the people who laid a wreath was an asbestos disease sufferer and that’s very powerful.

In my opinion there are a lot of unsung heroes. The Workers Health movement was essential in the first place. It was a group of health activists and trade unionists. (Vallance, 2013)

Towards the end of 2000, the matter was raised at an ACTU Executive meeting. The Secretary of the Maritime Union was present and was confident that all asbestos importation had ceased. But once it was established that chrysotile was still coming in through the ports, packed in such
a way that waterside workers had not identified it, the Maritime Union threatened immediate
industrial action to ensure that Canadian chrysotile was no longer imported into the country.
This was problematic for the AMWU whose members would certainly lose jobs if the ban was
placed only on raw asbestos. However, at the same time the strength of the threatened industrial
action was such that if the ban had gone ahead, the industry would have been without asbestos
within a matter of weeks. This forced all parties to the table and in May 2001 negotiations led
to an agreement for a phase out of asbestos to be completed by the end of 2003.

Despite a high incidence of asbestos-related disease, it was the threat of
industrial action that eventually persuaded Australian governments to
impose a ban. (Vallance, 2004)

On 31 December 2003, the importation of chrysotile asbestos and asbestos containing products
was finally banned by the Federal Government. This action followed a long campaign by the
Australian Manufacturing Workers Union, and would never have happened except for the
militancy of the union campaign and the strong support that the unions enjoyed in workplaces
and in the community at large.

The life-course of the project
The life-course of the Anti-Asbestos Movement is typical of that of any project.
For a long period of time until the alliance between the trade union and medical scientists was
forged, there were only isolated cases in which workers sought compensation and were either
silenced or died before succeeding. There was no social movement, although the conditions
were crying out for such a movement.

Once the medical scientists, who had acquired the knowledge, and the unions, who could take
that knowledge to the shop floor workers who needed it, entered into a collaborative
relationship with each other, a social movement, albeit fragmented and discontinuous, was
launched. Despite the extensive knowledge and commitment of the activists in the Anti-
Asbestos Movement from the beginning, the objective of the project went through a series of
stages before realizing its ultimate objective.

• At first the object was to win compensation for victims, which involved proving the
  lethal nature of asbestos. This provided the evidence needed to take the project further.
• Once asbestos was exposed as a dangerous substance, the Industry found common
  ground with Anti-Asbestos Movement in seeking ‘safe levels’ of exposure and other
  measures typical of the OH&S approach at the time.
• Then claims for punitive compensation were taken up, which required proving that the
  employer knew the dangers they were exposing workers to. This provided the impetus
to demonstrate the ineffectiveness of regulation.
• Demands were then taken up for the banning of the mining of asbestos and production
  of asbestos products altogether.
• A ban on the importation of asbestos and the production of asbestos products was
  demanded, and
• ultimately, the importation of asbestos products as well as raw asbestos was to be
  banned.

As each new goal came forward, this did not mean that earlier goals were abandoned. On the
contrary, the battle for suitable or adequate compensation continued long after the final total ban
on asbestos production and importation was in place.

Finally, no kind of “social movement,” even one as diverse as the Anti-Asbestos Movement
could exist once the total ban was legislated. Because of the existence of asbestos in old
buildings, constant vigilance is required to protect workers and the public, and many of the former campaigners are now occupied in ‘policing’ the safe eradication of asbestos. But this work is now supported by legislation and regulation, rather than being aimed at changing the law. Just as the residue of the industry’s product – lethal fibers tucked away in public buildings, telecom trenches and homes will be with us for a century, thousands more will suffer a painful death from mesothelioma and other asbestos-related disease. But the eternal legacy of the Anti-Asbestos Movement is the new concept of asbestos which is now part of our culture, legislated and objectified in new laws and regulations and a new range of work skills and knowledge about asbestos and new solutions to the applications formerly used by asbestos. Many of the activists, notably members of the victim support groups, never lived to see the benefits of their struggle to expose the real nature of asbestos. C’est la vie. But asbestos, is now almost universally regarded not as a ‘miracle fiber’, but as a lethal threat, a concept so engrained in the community that discovery of old asbestos during renovations or public works may trigger panic. We say “almost universally,” because, for instance, the town of Wittenoom, in remotest outback of Western Australia, until 2006 when public utilities were turned off, still had 37 inhabitants who continued to live in what is no more than a giant dump of blue asbestos 140 kilometers from anywhere, still in dogged denial of the lethal nature of asbestos. This brings us to the next issue.

Dying for the boss

Long after the lethal nature of asbestos was public knowledge, workers in the asbestos plants continued to work in dense clouds of lethal dust, and took their work clothes home to be cleaned, thereby spreading the disease to their wives and children, all the time denying the dangers and viewing union officials, journalists or even fellow-workers who warned of the dangers as trouble-makers. Eventually, unfortunately often when it was too late to avoid a painful death by mesothelioma, most were won to the cause of the Anti-Asbestos Movement. But a couple of cases will illustrate how the loyalty of these workers to their employers deserve the Victoria Cross for “the most conspicuous bravery, daring or pre-eminent acts of valor or self-sacrifice, and extreme devotion to duty.”

Consider the case of Ozzie Allan, Mine Manager at Wittenoom. In 1959, Dr. Jim McNulty, Head of WA’s Public Health Department, had told CSR’s managers to stop allowing tailings to be dumped around Wittenoom, but was ignored. McNulty succeeded in bringing the matter before the WA Parliament, but nothing was done. He also advised at least 100 of the miners that their X-Rays showed evidence of asbestos disease, and advised them to leave Wittenoom. Not one miner took his advice. Ozzie Allen was manager of the mine for most of his later life, and was among those who McNulty advised to leave. Allen was told in no uncertain terms of the dangers, but colluded in ensuring that the full extent of the health risks was kept from the men. He died of mesothelioma in 1987, a few days after wheezing his way through cross-examination in the Supreme Court, perjuring himself to defend CSR’s claim that they had no knowledge of the dangers of asbestos exposure in Wittenoom (Hills, 1989, pp. 48, 54-55, 113-14, 169).

Likewise, Paul Thomas, Mine Superintendent at Wittenoom from 1966 to 1979, did not even seek (no fault) workers compensation for the asbestosis of which he died in 1988. According to McCulloch & Tweedale (2008, p. 199): “At James Hardie, a number of managers, safety officers and personnel directors died from the disease.” It is remarkable that the owners and directors of these companies have escaped charges of manslaughter, but under Australian law (ComLaw, 1995, 1995a; Blunden, 2012), while a company can be deemed responsible for such deaths due to a ‘culture’ of criminal negligence, the directors of such companies are deemed to be as much victims of that culture as employees and not deemed personally responsible for the creation and maintenance of a culture of criminal negligence. Companies like Hardies can hide behind the corporate veil, move off-shore as they have, and put down compensation to the costs...
of doing business. Hardies remains a very profitable firm to this day, though it is questionable whether their asbestos business has contributed to that profitability.

What is evident is that when workers go to work in an Industry they make a commitment to the norms and conventional wisdom of that Industry. They may become as loyal to the Industry and their mates as any soldier, even to the point of sacrificing their life. This even extends to loyalty to a firm, a project whose only object is the accumulation of capital. Hardies for example, easily diversified out of asbestos production in Australia when it became profitable to do so, but many of their employees remained loyal. It was only the intervention of the Anti-Asbestos movement which after a long and arduous struggle, shook that loyalty and made knowledge of asbestos disease accessible and believable for those who worked with asbestos.

Tolerance of Risks with a Long Latency Period

There is no doubt that if asbestos dust had been as immediately active as nerve gas, asbestos production would never have happened. But the long latency period associated with asbestos disease does not by itself explain people’s willingness to tolerate the risk of asbestos disease. A broad literature on moral panics (e.g. Douglas & Wildavsky, 1983) and on risk-taking behavior (Lightfoot, 1997) has established that belief or access to evidence is not the predominant issue in determining what people fear and what risks they tolerate. Tolerance or avoidance is predominantly a function of ethical commitment or disgust. An asbestos worker’s indifference to the danger of mesothelioma is not due so much to ignorance of the mechanism of the disease, but rather to their commitment to their firm, the Industry and their community (often company towns) and the trust which accompanies commitment. These commitments can lead them to regard scientists, union officials and journalists who warn of the dangers of asbestos as trouble-makers and scaremongers. Acceptance of the lethal danger of asbestos meant not only the loss of their job (although frequently it did not) but abandonment of a way of life and commitments to profession, family and community. In the order of Nature, so to speak, asbestos workers would work themselves to death. It was only the determined intervention of the Anti-Asbestos Movement, and in particular the collaborative project formed by the union movement and medical science, and their penetration of the justice system, the press and the government bureaucracies, that created conditions under which asbestos workers could be won to the cause of Anti-Asbestos. Irving Selikoff (McCulloch & Tweedale, 2008, p 275) said that knowledge can only be effective if it is in the hands of the people who work with dangerous materials. Many arms of the Anti-Asbestos movement contributed to placing that knowledge into the hands of the workers themselves, but the trade union arm of the Movement was key. Nonetheless, those workers also have to be made ready to accept that knowledge. Public information of scientific matters is never enough to change someone’s mind when science runs contrary to ethical, religious, political or even professional and work commitments.

But Deborah Vallance also points to the difficult conditions for workers who have to decide on who to trust in making these decisions:

“[A]t Bintex Mentix, [t]he union opposed the use of asbestos but the workers were told, which was true, that the substitutes had dangers as well i.e., a mixture of lead and synthetic mineral fibers that meant they would have had to have regular blood lead levels done – lead is probably one of the oldest known industrial poisons – and during the 1980s the union movement was also raising grave concerns about some synthetic mineral fibers. So ... the workers were rather in an invidious position. I do not wish people to judge workers without any understanding of the lack of choices people felt they had, despite the dangers of asbestos. It’s easy not being the person having to make a choice between safety, health and food on the table.

(Vallance, 2013a)
Conflict and collaboration

The history of asbestos is one of the formation of and collaboration and conflict between projects, by which a cultural belief in the benefits of the ‘miracle fiber’ was transformed into revulsion at the residue of the asbestos industry left hidden in our buildings. Having been legally designated a lethal threat to public health, asbestos is never to be produced or imported and is remediated with the utmost care.

How did the Industry nobble its potential enemies? In the first place, competing firms formed a collaborative Industry project to protect themselves from regulation. Three main tactics were then used. In the first place, the Industry worked very hard at fostering the loyalty of their employees and the residents of company towns. They were also active contributors to the local community (while poisoning them to death). Usually, they employed new immigrants or Aboriginal people, grateful for the employment but lacking political muscle, or older workers who would retire by the time they became ill. Secondly, they systematically interfered with the dissemination of knowledge about asbestos. In particular, the focus on ‘safe’ levels of dust and adapting to a rising culture of Occupational Health and Safety (itself a gain finally institutionalized in the 1980s by trade union action). This had the effect of subverting the objective of the Anti-asbestos Movement, recruiting many well-meaning activists into the fake project of achieving ‘safe’ levels of exposure. Thirdly, they bought off potential opponents, sometimes with monetary rewards, but usually with rewards of prestige and recognition.

How did the Anti-Asbestos Movement achieve its aims? As Deborah Vallance outlines, it involved long and arduous ‘back room’ work, assembling evidence and winning over individuals. In particular, it meant collaboration between the two main existing projects – the trade union movement, whose mission was to defend the working conditions of working class people, and institutions of the medical science, whose mission included the discovery of the real causes of disease. Only by means of the collaboration of these two projects was it possible to form a collaborative project which could overthrow the hegemony of the Industry. The collaborative project created by the alliance of unions and medical scientists was then able to recruit individuals from the regulatory authorities, a few members of government, individual journalists, victims and their families and labor law firms into the Anti-Asbestos Movement even while the majority of their associates remained passive. This counter-hegemony established by the Anti-Asbestos Movement eventually prevailed.

Where did individual workers and their families stand in this? There were some who already had a strong commitment to the Union Movement and they played an important role. But for most of them, their life-project entailed raising a family, leading a good life in their community, with a respectable job in a good industry. The struggle over asbestos entailed a battle for the loyalty of these people above all. Public information was never enough; for a long time these workers and their families were cruelly and tragically deceived and their lives destroyed.

But alliances were formed, and minds changed by a successful collaborative project. The world we live in is the product of such collaborative projects, whose products are institutionalized in the concepts, institutions, customs, laws, land and infrastructure that has been built up over many generations, while all the time threatened by projects of self-enrichment and self-promotion. This cultural world continues to change thanks to the activism of those who commit themselves to right what is wrong and find that they are not alone, but remains threatened by projects like that of the Asbestos Industry.

References


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