

CAMPAIGNING FOR JUSTICE: ON THE ASBESTOS FRONTLINE 2014

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By a serendipitous turn of events, this conference is taking place on the 50th anniversary of the world's first international asbestos conference. The 1964 conference on the "Biological Effects of Asbestos," organized by Dr. Irving Selikoff under the auspices of the New York Academy of Sciences, marked a turning point in the global perception of asbestos.¹ Commenting on the importance of the New York meeting, medical historian Dr. Morris Greenberg wrote:

"It brought together a Who's Who of international scientists who had conducted and reported on experimental and human studies of the effects of asbestos... by bringing together a compendium of knowledge of the adverse effects of asbestos, it served further notice to asbestos-using industry of the major public health problem that they had created... Today [2003], asbestos is no longer seen as a material indispensable on technical grounds and a mainstay of industry and the economy. Its progressive banning in developed countries may be seen as the consequence of the momentum initiated in New York in 1964."²

Selikoff was one of you. To pursue his chosen career, he journeyed to Melbourne and then Glasgow, Scotland in the early 1940s to study medicine at institutions which "had made special arrangements for certain students denied training in their own countries..."³ In the United States the existence of a quota system limiting the number of Jewish medical students forced Selikoff to take this rather extreme action. You have every right to be proud of your part in the education of this outstanding physician, path breaking researcher, gifted publicist and great humanitarian.⁴

The industry quickly took note of the impact Selikoff was having; in 1965, an industry correspondent wrote:

"Our present problem is to find some way of preventing Dr. Selikoff from creating problems and affecting sales. A direct approach (attacking his character) might be more damaging than helpful and I am only suggesting that we explore, at this time, all avenues open to us."⁵

¹ It is of interest to note that although Dr. J. McNulty from Australia's Department of Public Health was listed as a delegate at the NY asbestos conference, there was a notation in the files that he was "invited, unable to attend". In the conference records Dr. McNulty's address in Perth was given as 57 Murray St. Perth Australia. This citation indicates that news of this conference had reached Western Australia and no doubt the Eastern States as well.

² Greenberg M. *Biological Effects of Asbestos: New York Academy of Sciences 1964*. Am. J. Inc. Med. 43:543-552, 2003. <http://www.ncbi.nlm.nih.gov/pubmed/12704628>

³ *ibid*

⁴ Tweedale G, McCulloch J. *Shooting the Messenger: The Vilification of Irving J. Selikoff*. International Journal of Health Services, Volume 37, Number 4, Pages 619-634, 2007. doi: 10.2190/HS.37.4.b

⁵ McCulloch J, Tweedale G. *Defending the Indefensible. The Global Asbestos Industry and its Fight for Survival*. Oxford University Press 2008. Page 92.

A few years later, a Vice-President of the U.S. asbestos giant Johns-Manville commented:

“The man Selikoff is an excellent presenter; he is in constant command of the situation and he is convincing. If you’d like to hear how convincing – I’ll gladly let you have a set of the tapes to listen to.”⁶

They couldn’t bribe him so they tried to repudiate his statements through a “positive aggressive approach” (widely circulating detailed critiques of Selikoff statements) and attack his integrity by claiming that his medical qualifications were invalid. He was “a victim of a sustained and orchestrated campaign to discredit him.”⁷

Despite the industry’s efforts, Selikoff’s integrity remained unsullied. The same cannot be said for the South African scientist Dr. Christopher Wagner, widely credited with having discovered the relationship between pleural mesothelioma and asbestos exposure. Research undertaken by historian Jock McCulloch has documented that from 1986 onwards payments by a U.S. law firm representing asbestos defendants were made to Wagner. At about the same time the monthly payments of \$7,500 began, Wagner reversed his position on chrysotile asbestos; whereas he had previously maintained that exposures to all types of asbestos were carcinogenic, he migrated towards the amphibole hypothesis or the amphibole whitewash as it is often known – an industry stratagem which exonerates chrysotile (white) asbestos at the expense of crocidolite and amosite, the other types of commercially used asbestos. Wagner’s reversal on chrysotile was warmly received by asbestos stakeholders who continued to sell chrysotile-based products with “scientific assurances” that they were safe.

You may say that this is all ancient history. Unfortunately it is not. The manipulation of the scientific and political process by the asbestos industry continues to this day, as do efforts to silence opponents. One month ago, three asbestos industry representatives infiltrated an international asbestos cancer conference in South Africa. One of them had actually received approval to make a poster presentation. His name was David Bernstein. This U.S. born Swiss-based toxicologist has undertaken commissions for Canadian, Brazilian, U.S. and other asbestos stakeholders and is involved in a “potential crime-fraud” currently under investigation by the New York Supreme Court.

The title of the Bernstein poster was: *“The evaluation of the biopersistence, pathological response and pleural translocation of chrysotile containing brake dust in comparison to crocidolite asbestos following short term inhalation exposure.”* The first of four conclusions was the finding that: “No significant pathological response was observed at any time point in the brake dust of chrysotile/brake dust exposure groups in either the lung or pleural cavity.” In other words, rats exposed to chrysotile brake dust over a period of 30 hours did not present with disease symptoms or inflammation. It is relevant to note that the abstract Bernstein submitted for consideration by the conference organizers did not include an acknowledgement of industry support, despite a requirement that financial disclosures be made by all authors.

⁶ Ibid Page 92.

⁷ Tweedale G, McCulloch J. *Shooting the Messenger: The Vilification of Irving J. Selikoff*. International Journal of Health Services, Volume 37, Number 4, Pages 619–634, 2007. doi: 10.2190/HS.37.4.b

At the top of the poster Bernstein exhibited was the statement: “This study was funded by Honeywell International Inc.” The 2014 paper – *Evaluation of the deposition, translocation and pathological response of brake dust with and without added chrysotile in comparison to crocidolite asbestos following short-term inhalation: Interim results* – on which this poster was based was more forthcoming about the genesis of this work:

“One of the authors, David Bernstein, has appeared as an expert witness in litigation concerned with alleged health effects of exposure to chrysotile. Honeywell is a defendant in asbestos-product litigation and its predecessor manufactured the automotive brakes used in this study. There have been periodic communications between Honeywell and the authors concerning the status of this study.”⁸

I am in no doubt that had this information been disclosed to conference organizers and delegates, the findings reported by Bernstein would have been differently received.

National Asbestos Legacies: The UK and Australia

Britons and Australians have paid a high price for their love affair with asbestos. While cumulative UK usage has been estimated at 7 million tonnes, between 1950 and 2003 Australian consumption was around 2m tonnes.⁹ Between 1945 and 1975, Australia was the highest per capita user of asbestos in the world. It is little wonder then that our two countries now have the world’s highest incidence of the signature asbestos cancer mesothelioma. According to World Health Organization data between 1994 and 2008 “the United Kingdom had the highest age-adjusted [mesothelioma] mortality rate, at 17.8 per million, followed by Australia, at 16.5 per million...”¹⁰ Annually, nearly three times as many Britons die from asbestos-related diseases as from road traffic accidents.¹¹ Canberra’s Mr. Fluffy scandal and the elevated cancer mortality created by the operations of the Wunderlich Factory in Sunshine North are timely reminders of Australia’s asbestos legacy. While deaths occurring now are the result of exposures which took place decades ago, questions remain over what the future holds. How can it be otherwise when our contaminated infrastructures, industrial landscapes, waterways and countryside remain a potent threat to human health.

An informed person might question why, given all that was known about asbestos, its use remained legal in the UK until 1999 and in Australia until 2003. This is a very good question. The answer is to be found in the long-term, coordinated and multifaceted propaganda campaign orchestrated by asbestos industry stakeholders. Brazilian Labor Inspector Fernanda Giannasi was sued when she referred to the national asbestos lobby as the “mafia.” Let’s consider the logic behind her comparison. The Oxford Dictionary of English defines the

⁸ Bernstein D, Rogers R, Sepulveda R, et al. *Evaluation of the deposition, translocation and pathological response of brake dust with and without added chrysotile in comparison to crocidolite asbestos following short-term inhalation: Interim results*. 2014. <http://dx.doi.org/10.1016/j.taap.2014.01.016>

⁹ Australian data were provided by Robert Virta from the United States Geological Survey. Email sent on March 11, 2013.

¹⁰ Delgermaa V, Takahashi K. et al. *Global mesothelioma deaths reported to the World Health Organization between 1994 and 2008*. Bulletin World Health Organization 2011. <http://www.who.int/bulletin/volumes/89/10/11-086678/en/>

¹¹ Using data retrieved from HSE online resources, it was calculated that asbestos-related deaths in 2013 could reach 5,000 (this does not include deaths from cancers of the larynx or ovary). In 2013, there were 1,730 road accident fatalities.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/255125/road-accidents-and-safety-quarterly-estimates-q2-2013.pdf

“mafia” as an “organized international body of criminals... having a complex and ruthless behavioural code... exerting a hidden sinister influence.”

Mafia vs. Global Asbestos Lobby

Mafia

Asbestos Lobby

Profits from criminal enterprises:
e.g. - sales of narcotics.

Profits from criminal enterprises:
e.g. – sales of carcinogens

Organizes commercial operations on a global scale via mafia “families”

Set up a global conspiracy, awarding regional spheres of influence to asbestos conglomerates – e.g. Johns-Manville, Turner & Newall, Eternit

Uses extreme methods to silence critics

Opponents receive death threats, lawsuits, hate mail, public vilification, verbal and physical intimidation, pay-offs

Colludes with other “families” to maximize profits

Organized cartels and pseudo-scientific bodies to divide markets, fix prices, propagate doubt science and influence decision makers

Corrupts law makers, civil servants, police and judicial officials

Corrupts politicians, scientists, doctors, trade unionists, historians

Pursues a “ruthless behavioural code” to achieve goals

Buries the truth along with the bodies

The asbestos industry pioneered many of the strategies and tactics employed by “Big Tobacco” to create the political and economic climate in which sales of their products could flourish despite mounting death tolls. Asbestos lobbyists and the public relations firms they employ are still at it. In May 2013 I attended a meeting of the Rotterdam Convention, a United Nations protocol designed “to promote shared responsibility and cooperative efforts among Parties in the international trade of certain hazardous chemicals in order to protect human health and the environment from potential harms...” I was part of a group of civil society representatives who were accorded observer status as members of a group called The Rotterdam Convention Alliance.

Our brief was to monitor developments relating to the listing of chrysotile asbestos as a hazardous material on Annex III of the Convention. Throughout the discussions, it was clear that a coordinated campaign led by Russia was in play to block progress, an easy enough task because action can only be taken as a result of a unanimous decision. Again and again, spurious arguments were advanced by a handful of countries – nicknamed “The Dirty 7.” On May 9, 2013, during the final plenary discussion on chrysotile it was clear that the industry veto would hold; it seemed as if the chamber had been swamped by a tidal wave of hopelessness which had paralyzed the will to take action and the verbal capacity of delegates, the vast majority of whom supported the listing of chrysotile.

Finally, the Australian delegation was recognized. Spokesman Andrew McNee made a succinct and cogent argument that highlighted the immense economic and human cost to Australians of his country's asbestos heritage. McNee concluded by stating:

“In summary, the criteria for listing have been met, this is not a ban, the costs of listing are negligible, but the costs of inaction are potentially huge. The reasons given for standing in the way of this process are not tenable or defensible given what the Convention is and what it is not.

We urge that Parties reconsider their views, and noting ... that all requirements for listing are met, chrysotile asbestos must be listed in Annex III of the Convention to enable the process of information sharing to begin.”

The impact of this intervention spread around the chamber as one country after another raised their flag to express support for Australia's position. Those that stood up to be counted included: the European Union, Switzerland, Norway, New Zealand, Cameroon, Gabon, Kenya, Costa Rica, Liberia, Nigeria, Venezuela, Sudan, Israel, Benin, Paraguay, El Salvador and Qatar. Following a recommendation by Costa Rica, seconded by El Salvador, countries were requested to raise their flags if they wished to show support for the Australian statement. This “virtually unprecedented” action made clear the overwhelming desire of the majority of Convention Parties. Of course, it was too little too late but for the very briefest of moments, delegates had seized back control from the asbestos bullies.¹²

What can Australia do?

Australians know that ultimately the only way to protect human beings from asbestos is to ban its use and eradicate its presence. At a meeting last month with Labour Party politicians in Westminster, the Australian Asbestos Safety and Eradication Agency was held up as a model which we in the UK would do well to emulate. Unique campaigning organizations and innovative programs to address Australia's asbestos legacy have mobilized the asbestos victims' community, trade unions, medical specialists and technical experts;¹³ the synergistic effect of these collaborations can be seen by the wide range of activities taking place during November 2014 – Asbestos Awareness Month. Where we have an unofficial day to raise awareness of one asbestos cancer – Action Mesothelioma Day – you have a month.

Unfortunately, elsewhere in the region little if anything is being done to address the tragic asbestos legacy even as deadly exposures continue to occur. New Zealand Minister for the Environment Dr. Nick Smith and former Minister for the Environment Amy Adams are both on record as denying the risk posed by the unmonitored import of asbestos-containing products. In February 2013, Adams wrote:

“The strict controls placed on asbestos and asbestos products already in New Zealand, and the declining level of international trade in these products will both assist in managing the

¹² Kazan-Allen L. *The Rotterdam Convention – An Activist's Diary*. May 21, 2013. <http://ibasecretariat.org/lka-rotterdam-convention-an-activists-diary-may-2013.php>

¹³ Included amongst these groups are the: Asbestos Safety and Eradication Agency, Asbestos Diseases Society of Australia, other local and regional asbestos victim support groups, National Asbestos Summits 2010 & 2012, Parliamentary Group on Asbestos-related Diseases, Australian National Centre for Asbestos-Related Diseases, Australia-Asia Asbestos Research Cooperative, Asbestos Diseases Research Institute, Asbestos Free Future Initiative and Asbestos Hazard Awareness and Action in Vietnam and Lao PDR.

risks posed by asbestos. However, if future evidence warrants further restrictions, your suggestion of stopping the importation of asbestos products remains a possibility.”¹⁴

The contents of these letters suggests that the New Zealand Government remains in denial about asbestos; the fact that the authorities in Christchurch have sanctioned post-earthquake repairs which leave hazardous asbestos products in place, confirms this sad state of affairs.¹⁵

The Global Asbestos Trade 2014

An analysis of global trade data reveals salient facts about trends in asbestos production and consumption, national asbestos policies and regional variations.¹⁶ When we compare asbestos use in 2012 to that in 2000 we can see that the largest increases in consumption have taken place in Asian countries.

Asian Countries Showing Marked Increases in Annual Asbestos Consumption, 2000 to 2012 (averaged data)¹⁷

	2000 (tonnes)	2012 (tonnes)	Increase
China	387,000	580,000	50%
India	143,000	378,000	163%
Indonesia	37,000	147,000	300%
Uzbekistan	35,000	67,000	91%
Vietnam	24,000	66,000	175%
Sri Lanka	13,000	46,000	251%
Total	639,000	1,284,000	100%

In 2011-2013 Asia accounted for 72% of global asbestos consumption; even more remarkably, during this period around 90% of all exported asbestos ended up in Asia.

Throughout Asia the majority of asbestos-related diseases go unrecognized, untreated and uncompensated. Although work by activists in Japan and South Korea have succeeded in banning asbestos and achieving benefits for the injured, elsewhere in Asia progress is slow. The majority of the 2 million tonnes of asbestos used in 2013, was consumed in Asian countries with few, if any, controls on hazardous exposures. A 2013 “Medical Skill and

¹⁴ Letters sent by Minister Nick Smith to Laurie Kazan-Allen March 23, 2011 and by Minister Amy Adams to Deidre vanGerven February 14, 2013. Also see: Appendices 1 & 2.

¹⁵ *Christchurch homes asbestos a ‘landmine.’* January 9, 2013. <http://www.theaustralian.com.au/news/breaking-news/christchurch-homes-asbestos-a-landmine/story-fn3dxix6-1226550585633>

¹⁶ The basis of our calculations is data sourced from United Nations trade statistics and supplied by the United States Geological Survey (USGS). Both bodies have reported difficulty in obtaining reliable production and export data from some countries, including Kazakhstan and Russia. Wild variations from year to year underline the unreliability of some of the figures; annual figures may provide a snapshot of the current status quo but for a more accurate understanding of trends it is considered preferable to average data over a period of years.

¹⁷ Based on USGS data averaged over 3 year periods (e.g. data shown in table for 2012 = average of 2011, 2012, 2013 USGS data).

Assessment Report of Asian Occupational Health and Safety Capacity” was categorical about the:

- “extreme problems” faced by workers to obtain a correct diagnosis and correct medical treatment of occupational diseases like asbestosis; throughout most of Asia, mesothelioma is virtually unknown (undiagnosed);
- prohibitive costs of travel to healthcare centres, medical tests and treatments;
- ignorance of most doctors about occupational diseases;
- shortage of diagnostic equipment, laboratories and specialist doctors;
- long delays in obtaining diagnoses and certificates of illness;
- lack of awareness amongst workers and doctors of benefits available for work-related diseases and/or the legal rights of the injured.

Timeline of Recent Asian Asbestos Developments (2014)

Despite ruthless marketing by the asbestos industry to persuade, bully and bribe Asian citizens into accepting the status quo, opposition to the use of asbestos has been growing at a speed not previously seen.

July 30, 2014: India

The news released on July 30 that the world’s largest maker of asbestos cement roofing, a former British-owned company called Hyderabad Industries Ltd., now known as HIL Ltd., is transitioning to asbestos-free technology marked a defining moment in the campaign to protect human beings from the deadly asbestos hazard. According to Managing Director Abhaya Shankar:

“Presently, our fibre cement roofing products account for 80 per cent of our revenue, while the green products make up the rest 20 per cent. We see this ratio becoming 60:40 in the next three to four years.”

There is no doubt this will have a huge impact on global asbestos sales as India is the world’s biggest importer of raw asbestos consuming an average of 375,000/tonnes per year between 2011 and 2013. Research undertaken for this presentation revealed that between 1960 and 2013, India’s usage of asbestos totalled 7+ million tonnes.

August 5, 2014: Vietnam

A letter was sent by the Representative of the World Health Organization (WHO) for the Western Pacific and the Representative of the International Labour Organisation (ILO) Regional Office for Asia and the Pacific to Prime Minister Nguyen Tan Dung to urge him to ban the use of chrysotile (white) asbestos in construction materials in Vietnam. Quantitatively and geographically Vietnam is an important asbestos market; average annual consumption over the last three years was nearly 66,000 tonnes; in 2013, Vietnam was Asia’s 5th biggest asbestos importer after India (1), China (2), Indonesia (3) and Uzbekistan (4).

Reports from Vietnam colleagues detail intense pressure being exerted on government officials by industry lobbyists from Russia and Kazakhstan who wish to continue sales of chrysotile asbestos to Vietnam.

September 29 to October 1, 2014: Indonesia

The 7th International Seminar of the Asian Asbestos Initiative took place in the Indonesian capital from September 29 to October 1, 2014; Indonesia is Asia's 3rd largest consumer of asbestos. This meeting was held in collaboration with the Inter-Agency Workshop on the Sound Management of Industrial Chemicals, with Special Emphasis on Asbestos, for the Asia-Pacific Region. Sponsors of the event included the Rotterdam Convention, the Basel Convention, the International Labor Organization, the World Health Organization, the United Nations Environment Programme and the Japan Society for the Promotion of Sciences. The participants were mainly officials from the Ministries of Environment, Health and Labor from the Governments of China, India, Indonesia, Malaysia, Philippines, Sri Lanka, Thailand and Vietnam.

September 30, 2014: Vietnam

At a meeting of civil society partners in Hanoi, it was decided to establish a new campaigning organization: the Vietnam Ban Asbestos Network (VM-BAN). This body will play its part in regional efforts alongside: the International Ban Asbestos Secretariat, the Asian Ban Asbestos Network, Ban Asbestos Japan, Ban Asbestos Korea, the Indonesian Ban Asbestos Network, the Bangladesh Ban Asbestos Network, the Ban Asbestos Network of India, the Philippines Ban Asbestos Network and our civil society partners.

October 3, 2014: Philippines

At the beginning of October 2014, trade union leaders derailed an attack by the Philippines Chrysotile Information Center (CIC) on plans to lower asbestos threshold limit exposure levels in the Philippines. CIC representative Paul Roxas attended a working group meeting at the Department of Labor and Employment tasked with finalizing the National Programme for the Elimination of Asbestos-Related Diseases. Citing industry propaganda, he asserted that chrysotile (asbestos) was not toxic. Fortunately, his arguments were countered by medical and union experts present at the meeting.

In a trade union press release, it was noted that in August 2014 CIC representatives from Thailand and the Philippines, including Mr. Roxas, accompanied a Philippine lawmaker and his wife, one environmental and two occupational health officials to the Eternit Manufacturing Plant and open-pit chrysotile mine in Minaçu, Goiás, Brazil under the Sama Mines Open Door Program.

October 4, 2014: Japan

The 10th anniversary of the Japan Association of Mesothelioma and Asbestos-related Disease Victims and Their Families was marked in Tokyo on October 4, 2014. Attending the celebrations were delegates from the Korean National Network of Asbestos Victims and Indonesia, including one asbestosis victim and one member of Ina-Ban. When the Japan Association of Mesothelioma and Asbestos-related Disease Victims and Their Families was formed in 2004, there were three branches; in 2014, there are fourteen branches throughout the country with hundreds of members. The efforts and support of the Association were pivotal in the organization of the Global Asbestos Congress 2004, an event that kick-started the Asian movement to ban asbestos and helped facilitate action by the Japanese Government to ban asbestos; a total ban on the use of all types of asbestos was achieved in 2012.

October 5, 2014: Thailand

Thai ban asbestos activists organized the screening of asbestos documentaries in Bangkok; the films were available to be viewed in person or online. One of the documentaries highlighted the situation in Thailand, Asia's 6th biggest asbestos consumer, covering topics such as the chrysotile public health risk, growing support for a ban and unfulfilled government promises to end asbestos use. After the films, a seminar was held which was gatecrashed by Mathee Udthayopat, a representative of the Chrysotile Information Center. The industry lobbyist was adamant that the use of chrysotile asbestos did not pose a health hazard to workers or the public.

Thailand is a key asbestos battlefield. Imports peaked in 2005 at 176,000 tonnes. By 2007, imports had dropped to 86,000 tonnes in the aftermath of the Bangkok Declaration which was issued at the Asian Asbestos Conference that our network held in July 2006; they have continued to fall ever since.

October 9, 2014: Japan

On October 9, 2014, Japan's Supreme Court issued a historic judgment which condemned the Government for failing by 1958 to have legislated that factories be equipped with mechanical measures to remove asbestos dust from the air; guidelines which had been issued were advisory and not mandatory.

The Government's failure to take timely and appropriate action was "extremely unreasonable" as well as "illegal." As a consequence, the Government was liable for asbestos-related diseases contracted by plaintiffs occupationally exposed to asbestos prior to 1971. This decision will ensure that many of the injured obtain compensation. This is the first such case to succeed in Asia; other legal actions against national governments have been successful in Malta, Switzerland, Italy and France.

October 9-10, 2014: Korea

In October, a Korean delegation of senior health physicians and environmental scientists with particular interest in asbestos embarked upon a fact-finding trip. Their goal was to better understand European models for the provision of social and healthcare systems for asbestos victims. During their visit to London on October 9 and 10, they held discussions with staff from Help the Hospices and visited St. Joseph's Hospice where they consulted with key personnel including a hospice physician, the marketing manager, director of care services, social work manager and physiotherapist. They also learned about the operations of the hospice at home services during discussions with Dr. Helen Clayson, former Medical Director of St. Mary's Hospice, Ulverston, Cumbria. Despite Korea's asbestos ban (2009), it is clear that a multiplicity of challenges remain.

October 12-16, 2014: Malaysia

In mid-October, a training session took place in Penang for occupational and environmental physicians who had been nominated to participate by grassroots groups. This innovative project, which was organized by the Asia Monitor Resource Center, the School of Public Health at the University of Illinois at Chicago, the University Sains Malaysia and the Asian

Network for the Rights of Occupational and Environmental Victims, was intended to help build much-needed medical capacity amongst doctors “committed to working with their communities to prevent and treat occupational illnesses and injuries.” Asbestos-related illnesses were amongst the topics under discussion.

November 24-25, 2014: Thailand

Next week an international asbestos conference will be held in Bangkok, entitled: *Freeing Society from the Asbestos Hazard*. International scientific, medical, epidemiological and technical experts will make presentations; Thai authorities from several ministries, national agencies and civil society groups will also take part. Representatives from the ILO and WHO will detail new resources and strategies for implementing national programmes for the elimination of asbestos-related diseases.

Discussion

As can be seen by the diversity of stakeholders involved in the activities described above, the sheer number of developments reported and the increasing cross-border collaboration, there can be no doubt about the energy and resources being allocated to the ban asbestos campaign in Asia. During this discussion, we have seen examples of how the industry continues to fight its corner. What we have not seen are the backroom deals being done and the pressure being brought to protect Asian asbestos markets. Talk of suitcases full of cash being delivered to decision-makers and scientists in key countries has been heard and believed.

Action Points

Australian expertise needs to be shared with its neighbors. At a conference in South Africa last month (October 2014), it was exciting to hear about a project undertaken by Australian researchers with the Vietnamese Ministry of Health to identify cases of mesothelioma. Despite a denial about the existence of asbestos cancer cases, the evidence was to the contrary – people in Vietnam *have* contracted mesothelioma. These findings could prove decisive in the path that Vietnam decides to take. What about the failure of New Zealand to ban asbestos and take seriously the threat to the public, emergency responders and workers involved in the remediation of earthquake-damaged buildings.

Following up on the leadership shown by Australia at the 2013 meeting of the Rotterdam Convention, planning needs to be underway now on how to affect changes to a Convention which is in the grip of malevolent forces determined to prioritize short-term economic gains at the expense of global public health.

Australia is one of 21 members of the Asia-Pacific Economic Cooperation (APEC) forum,¹⁸ a “premier forum for facilitating economic growth, cooperation, trade and investment in the Asia-Pacific region.” In 2003, it became the 3rd APEC country to ban asbestos after Brunei (1994) and Chile (2001). The majority of APEC countries (15 out of 21; 71%) have not prohibited the import, production, sale or use of asbestos. Negotiations organized within

¹⁸ APEC's 21 Member Economies are the United States; Australia; Brunei; Canada; Chile; Hong Kong, China; Indonesia; Japan; Malaysia; Mexico; New Zealand; Papua New Guinea; Peru; The Philippines; Russia; Singapore; Republic of Korea; Taipei; Thailand; and Viet Nam.

these intergovernmental meetings could provide an ideal opportunity for progressing efforts to eliminate asbestos use within APEC countries. Discussions on this subject should also be encouraged within the framework of other economic, political and commercial protocols such as might have been offered by Australia's membership in 2013 and 2014 of the United Nations Security Council.

Concluding Thoughts

In 2014 the asbestos dialogue, formerly a discussion confined to the fringes of occupational health, has become a mainstream discourse encompassing fundamental matters such as human rights, public health, social justice and economic sustainability. Whether or not the use of asbestos is sanctioned is as much a political, social and environmental decision as it is an economic one. Those people and communities sacrificed to the asbestos gods are rising up to demand justice. That so many victories have been achieved in the face of a ruthless and rich industry lobby that will spare no one in its pursuit of profits is testament to the resolve of all those who have worked together in this broad-based grassroots movement. Our goals remain a global ban on asbestos and justice for all asbestos victims. An asbestos-free future is possible.