

CHANGING BRITAIN'S ASBESTOS LANDSCAPE

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Presented at the international conference: A World without Asbestos
Casale Monferrato, Italy
April 28, 2011

Developments in Britain which have changed the public perception of asbestos and improved the plight of asbestos disease sufferers have occurred as a result of decades of hard work. Accomplishing the major paradigm shift from “controlled use” of asbestos to “no use” has required the mobilization not only of asbestos victims and their supporters but of public health campaigners, scientists, environmentalists, doctors, civil servants, trade unionists, engineers, technicians, lawyers, journalists and academics. The personal and professional network which was created to progress the ban asbestos agenda was the result of methodical, intelligent and detailed work which necessitated thousands of public meetings, private conversations, planning sessions, demonstrations, campaigns, letters, faxes and emails. There were no short-cuts.

Since 1990, the growing network of civil society groups working to obtain justice for asbestos victims and prevent further exposures has accomplished a huge amount. An attempt to quantify these improvements has been attempted. The assertions in the questionnaire were circulated to a list of people in the UK who have a long-term involvement with the asbestos campaign. They included asbestos victims' campaigners, health and safety activists, trade unionists, medical professionals, solicitors, representatives of local community groups and environmental campaigns. Having noted the grades given by the respondents, the average for each achievement was calculated and is noted below.

The campaign by British asbestos activists has:

- revolutionized the public perception of asbestos by raising awareness that the only safe exposure to asbestos is no exposure – 68%;
- redefined the discussion about asbestos from a historical issue affecting retired working class men to a matter of public health affecting everyone – 65%;
- visualized the plight of victims by bringing asbestos-related issues into the mainstream media, local press and academic journals and making sure these issues achieved a high priority on the country's political and medical agendas – 68%;
- identified unfairness and mistreatment in government schemes for diagnosing and compensating victims and worked to improve social security and medical protocols – 78%;
- highlighted legal loopholes and time-consuming procedures which led to many victims dying before their cases were resolved – 77%;
- investigated, publicized and acted on financial manoeuvres which would disadvantage asbestos claimants – 75%;

- identified legal cases which could impact on claimants and participated in national campaigns to expose wrongdoers – 73%;
- exposed faulty regulations which perpetuated the asbestos epidemic such as the continuing use of asbestos and achieved a national ban in 1999 – 89%;
- campaigned for preventive measures for constructions workers, electricians, plumbers and others working in high-risk trades – 77%;
- researched asbestos contamination of schools and forced reluctant local authorities, government agencies and government ministries to acknowledge the hazardous situation – 71%;
- initiated and administered annual Action Mesothelioma Days as educational and networking events for grassroots groups around the country – 78%.

How were changes brought about?

Social Change – Grassroots Mobilization

Grassroots mobilization of asbestos victims and affected communities increased throughout the 1990s with the establishment of new groups in asbestos hotspots like Manchester, Liverpool, Nottingham, Plymouth and Sheffield. Nowadays, there are around 20 groups working throughout England, Scotland, Wales and Northern Ireland.

In 2005, asbestos victims' groups from England and Wales formed a campaigning body called The Asbestos Victims Support Groups Forum (the Forum). Forum members work together to improve the range of services and advice available to victims and offer sufferers opportunities to share their experiences and provide mutual support. This umbrella group is now widely regarded as the genuine voice of British asbestos victims. The Forum has an eminent position which has been well used to press for changes in discussions with politicians, civil servants, medical professionals, the legal community and the media.

Political Change – Parliamentary Lobby

In democracies, elected representatives respond to pressure from voters. As a consequence of this political fact of life, in constituencies where asbestos was widely used, such as shipbuilding areas or centers of industrial production, asbestos issues are a hot topic, especially during election campaigns. To increase the network's access to Members of Parliament, Ministers and government agencies, a Parliamentary group – the Asbestos Sub-Group – was set up (2000). This body, which holds working meetings three times a year in the House of Commons – the very heart of the British Government – enables issues of concern to victims to be raised in face-to-face meetings with MPs.

Through the Asbestos Sub-Group subjects such as the double diagnosis of mesothelioma victims, delays in obtaining state benefits, inequitable government regulations and lack of funding for research and treatment of asbestos-related diseases have been raised. When an issue has been tabled, MPs discuss ways to address the grievances, often deciding to bring the topic up with relevant Ministers or civil servants.

Through this process many issues have been resolved. The Sub-Group was pivotal in raising awareness of the potential impact of the inequitable decision by the House of Lords in the notorious Fairchild case. Working closely with the Forum, trade unions, NGOs and others a nationwide campaign was spectacularly successful when, within less than 8 weeks, Parliament acted to restore victims' rights. Such a quick response by Parliament to a Law Lords' decision was virtually unheard of.

The Asbestos Sub-Group holds an annual asbestos seminar during which MPs are updated on medical, legal, environmental, corporate and political news from around the world. This year's event, which will take place on June 7, will feature eagerly anticipated presentations on the subjects of:

- **Asbestos Litigation: Trends and Developments** by Senior Master Steven Whitaker and Master Roger Eastman of the Queen's Bench Division, High Court;
- **Asbestos in UK Schools – Update**, Annette Brooke, MP and Chair of the Asbestos in Schools Group;
- **Employers Liability Insurance Bureau**, Lord Freud, Parliamentary Under Secretary of State for Work and Pensions (tbc);
- **Asbestos Issues in Brazil** by Mauro de Azevedo Menezes, Director-General Alino & Roberto e Advogados (Lawyers), Brazil.

Changes in Medical Dialogue, Treatment and Research

UK mesothelioma treatment, which had developed in an ad hoc way throughout the 20th century, was still in the dark ages well after the 21st century dawned. In 2003, UK medical specialists reported that:

- most mesothelioma patients never saw a mesothelioma specialist doctor;
- mesothelioma patients were frequently told: "there's nothing we can do for you";
- few patients were offered chemotherapy even though new protocols have been effective at relieving symptoms and prolonging life;
- although surgery to remove the affected lung could sometimes prolong life and improve the quality of life, there were only ten thoracic surgeons in the UK who could perform this operation; these operations were further hindered by a lack of NHS surgical beds, operating time, equipment and nurses;
- there was little funding for mesothelioma research in the UK.

A well-attended summit on mesothelioma (2005) provided an ideal opportunity for concerned groups to consult with medical experts, civil servants and politicians over ways in which improvements could be implemented. As a result of the discussions which took place, important decisions were made:

- a Mesothelioma Charter, featuring recommendations for the care and well-being of mesothelioma patients, was drafted; two years later, a Mesothelioma

Framework was implemented in England (2007) detailing protocols to be adopted for the diagnosis, treatment and care of mesothelioma patients;¹

- an annual day dubbed “Action Mesothelioma Day” was designated for holding events to raise public awareness of mesothelioma; the organizational skills and imagination of campaigners led to balloon releases, church services, information sessions and conferences, throughout the country.

The work of charities such as Mesothelioma UK, the June Hancock Mesothelioma Research Fund and the Mick Knighton Mesothelioma Research Fund have been pivotal in addressing the practical as well as medical needs of patients with asbestos-related diseases and generating funds for innovative research projects for the diagnosis and treatment of these diseases.

Continuing Challenges

Unfortunately as much of the British infrastructure remains contaminated, the asbestos hazard continues to be a potent threat. The inappropriate and poorly regulated demolition of asbestos-riddled buildings, such as those at the old Marley-Eternit site on Derby Road, Widnes, continues to expose new generations to the deadly dust.² Government cut-backs have already lead to reductions in on-site inspections and combined with financial pressure the recession is putting on companies, more and more regulations will be flouted. The high cost of dumping asbestos waste does not encourage compliance with the law.

As the incidence of mesothelioma in Britain rises, and epidemiologists predict it will continue to do so for some years to come, asbestos defendants and their insurers will work even harder to develop legal strategies to minimize payouts to asbestos victims. As a result of their work, more than a billion pounds has already been stolen from pleural plaques sufferers. Of the thousands of victims of asbestos-related lung cancer in Britain, only a handful receive official recognition or compensation for their work-related illnesses. In the current economic climate, the legal help available to claimants from government-funded schemes and victims groups is shrinking. With the reduction of charitable contributions from members of the public, grass-roots groups, already working on shoestring budgets, may need to curtail their services; at least one such organisation has had to close. In other words, there will be more victims and fewer services.

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http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_072348

² The manufacturing of asbestos-cement goods with the Eternit process began in Britain in 1907 on the Derby Road site, Widnes. For more than 80 years, industrial operations at this plant were based on the commercial exploitation of various types of asbestos: amosite, crocidolite and chrysotile asbestos went into the pipes, roofing and building materials produced here.² Asbestos liberated during the transport of raw material, processing and disposal of waste at this location was responsible for widespread environmental contamination. Local people in Widnes are engaged in a frustrating battle to force the Marley-Eternit company to decontaminate buildings currently earmarked for demolition and clean-up the area.

Concluding Thoughts

Asbestos is, as Danish trade unionist Lars Vedsmand said, a never-ending story. To overcome the complex challenges it poses requires a long-term commitment and a thirst to obtain justice for those whose lives have been sacrificed by the asbestos industry. In Britain a broad-based social movement powered by grassroots activists has evolved to progress these objectives; to optimize the effectiveness of our campaigns we have collaborated with social partners, individuals as well as groups, to develop programs for addressing areas of mutual concern. If we have succeeded, and I would argue that we have made substantial progress, it has been the result of these joint efforts.

Much remains to be done in Britain and abroad. The financiers, corporations and institutions which profited from the global asbestos trade must be held to account. The Italian trial against former Eternit executives gives us hope that ways will be found to apportion personal liability for the deaths caused by the asbestos industry. The continuing trade in asbestos must be ended and the national governments, regional authorities and international agencies which, for so long, condoned a situation that led to disability and early death must not only face the consequences of their actions but also make amends. At upcoming meetings in Germany, Kyrgyzstan, Switzerland, Belgium and Turkey we will progress these goals. Calls will be made for the European Union, the WHO and ILO to mount coordinated strategies to tackle the multi-faceted asbestos hydra.