EUROPE’S ASBESTOS CATASTROPHE

Laurie Kazan-Allen

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We have been here before. Since the first asbestos conference took place in Brussels in 2001, more than 50,000 people have died of asbestos-related diseases in the United Kingdom, the country with the world’s highest per capita incidence of mesothelioma. Unfortunately, many other European countries are also suffering from asbestos epidemics; those which are not, have yet to do so.

**European Asbestos Data 1950-1990*** (tonnes)

<table>
<thead>
<tr>
<th>Year</th>
<th>Production</th>
<th>Imports</th>
<th>Exports</th>
<th>Apparent Consumption</th>
<th>% Global Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>1950</td>
<td>273,862</td>
<td>341,701</td>
<td>109,167</td>
<td>506,396</td>
<td>40</td>
</tr>
<tr>
<td>1960</td>
<td>713,644</td>
<td>657,896</td>
<td>199,240</td>
<td>1,172,300</td>
<td>54</td>
</tr>
<tr>
<td>1970</td>
<td>1,242,904</td>
<td>1,036,695</td>
<td>480,530</td>
<td>1,799,069</td>
<td>51</td>
</tr>
<tr>
<td>1975</td>
<td>2,093,713</td>
<td>1,412,792</td>
<td>809,414</td>
<td>2,697,091</td>
<td>62</td>
</tr>
<tr>
<td>1980</td>
<td>2,275,064</td>
<td>1,259,254</td>
<td>732,286</td>
<td>2,802,032</td>
<td>59</td>
</tr>
<tr>
<td>1985</td>
<td>2,706,495</td>
<td>654,961</td>
<td>429,241</td>
<td>2,932,215</td>
<td>67</td>
</tr>
<tr>
<td>1990</td>
<td>2,476,933</td>
<td>423,313</td>
<td>317,952</td>
<td>2,582,295</td>
<td>65</td>
</tr>
</tbody>
</table>

While some data is available on the asbestos disasters in older EU member states, publicly accessible information on the situation in some of the newest members is not. There is no doubt however that significant amounts of asbestos were used in Bulgaria, Cyprus, the Czech Republic, Hungary, Romania, Slovakia and Yugoslavia. Given that exposure to asbestos produces cancer and respiratory diseases in Italians, Belgians and Germans, there can be no doubt what the future holds for some asbestos-exposed individuals in Central and Eastern Europe.

The purpose of the sessions taking place today and tomorrow is to engage in a dialogue about Europe’s Asbestos Catastrophe. In pursuit of this objective, there will be a particular focus on the situation in Central and Eastern Europe countries with an emphasis on those which are already in the European Union as well as candidate and potential candidate countries. For my part, I am looking forward to hearing about innovative programs adopted in Poland and Slovenia as well as learning about the asbestos reality elsewhere. In this context, it should be pointed out that the only EU Member State to have adopted an action plan to eliminate asbestos is Poland. We have much to learn from each other.

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2 According to the most recent British statistics, there are 2,321 mesothelioma deaths in a population of 62,641,000; this produces a rate of 37 per million. Email from Michael Lees. September 2, 2012.

3 Data sourced from the United States Geological Survey.
The agenda has been constructed to take full advantage of the availability of the services provided by interpreters for eight languages. Our hope is that a frank and stimulating discussion will ensue which will be informative as well as productive. Each of the delegates taking part in this meeting has been carefully chosen for his/her expertise and knowledge. Some of us are veteran asbestos campaigners; some of us are just starting out. Despite different languages and different areas of competence, we share common goals: to support the injured and decontaminate Europe.

The concept and implementation of this event has been nearly two years in the planning. This initiative has been led by the European Federation of Building and Woodworkers (EFBWW) and in particular by Bernd Eisenbach a dedicated advocate for occupational health and safety and the EFBWW’s specialist in asbestos issues. I first met Bernd in Osasco at the world’s first ever Global Asbestos Congress. Eleven years later I met him again in Brussels; it felt like not a day had gone by.

Bernd’s EFBWW colleagues speak of his willingness to listen to others, his genuine interest in people, his charisma and optimism. I remember his sparkling blue eyes and his kindness; when my PowerPoint presentation crashed at the European Parliament last year, it was Bernd who fixed it. Our friend Bernd died suddenly on May 20, 2012; we are grateful for the time we spent with him and dedicate this event to his memory.

Throughout the planning process, the International Ban Asbestos Secretariat worked closely with Bernd and his trade union colleagues. Other partners were the: European Trade Union Institute and the Belgian Asbestos Victims Association, ABEVA. It is significant that amongst the four partners two represent asbestos victims and two represent trade unions. This composition reflects the collaborative spirit and shared ethos which is responsible for much of the progress made by the global asbestos campaign.

In recent weeks we have seen ban asbestos victories in Russia, Canada and Brazil, major asbestos-producing countries. During the week beginning August 27th, ban asbestos campaigners were active in each of these countries; an invasion scarcely dreamt of a decade ago. Closer to home, however, things look less positive. In the UK, economic constraints are being used to justify the elimination of thousands of workplace inspections.4 On September 10, it was announced that as of April 2013, health and safety checks at “low-risk workplaces,” will end. Scrapping 3,000 regulations and cutting bureaucracy will, say the Government, save companies “millions of pounds.” In such a climate, there is absolutely no doubt that short-cuts will be taken and lives put at risk from exposures to asbestos.

The European Union Charter of Fundamental Rights asserts the right to life, the right to the integrity of the person as well as workers’ rights to information. The European Convention on Human Rights clearly states that “everyone’s right to life shall be protected by the law.” And even so, throughout the EU people are dying in their thousands from avoidable diseases caused by asbestos. In many cases, we cannot say who or where they are as data from many

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EU member states is lacking. This in itself is an unacceptable situation and something which needs to be addressed by the EU.

In the information vacuum which exists, we rely on predictions made by European epidemiologists. Using their figures for mesothelioma mortality as a starting point and adding deaths from a range of other asbestos diseases in both men and women, it is not unreasonable to suggest that in Western Europe alone, more than 500,000 people will die from asbestos-caused diseases in the current 35 year period (1995-2029).\(^5\) This equates to the elimination of the entire populations of Sheffield, Grenoble, Nuremburg or Bologna.

Tomorrow I will be one of four witnesses to address the Committee on Employment and Social Affairs, European Parliament. Amongst the recommendations I will be making are the following:

1. EU legislation should be enacted which mandates the human rights of asbestos victims regardless of the source of their exposure, their employment status or the type of asbestos-related illness.
2. EU policymakers should recognize the role of asbestos victims’ groups, allocate funding for their work and include them as stakeholders in discussions regarding the EU’s future asbestos policy.
3. The European Parliament’s Committee of Employment and Social Affairs should establish an Asbestos Sub-Committee to act as a conduit between asbestos victims and their elected representatives in Brussels. The Asbestos Sub-Committee would oversee the setting up of a body to coordinate an EU Asbestos Action Plan; as part of this process, a European Centre for Asbestos-related Disease Research (ECARD) would be established.\(^6\)
4. The Asbestos Sub-Committee should be tasked with producing an EU strategy for eliminating asbestos-related diseases; a 2023 deadline for Europe’s asbestos decontamination is proposed.

We were here in 2001 and 2005. In 2012, we again convene in Brussels to call to account the politicians, bureaucrats and officials whose inaction continues to endanger the lives of millions of Europeans. We know what needs to be done; it is about time they did too.


Australia, a country of 22 million people which is expecting 18,000 mesothelioma deaths between 1945 and 2020, has been proactive in confronting the asbestos challenge while the European Union, with a population of 500+ million of whom more than 250,000 will die from mesothelioma by 2029, has implemented no dedicated medical research, diagnosis or treatment program for asbestos-related diseases.