

Rates of black lung highest in 25 years among Appalachian coal miners

By Tom Hall
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The rates of black lung disease among coal miners in the central Appalachia states in the US are now at their highest levels in a quarter century, according to a new report by government researchers.

More than one in five miners with more than 25 years experience live with the fatal and incurable condition known officially as coal workers' pneumoconiosis (CWP), which is caused by irreparable damage to the lungs through long-term exposure to coal dust. The deadly disease continues to ruin more lives in West Virginia, Kentucky and Virginia.

Because black lung develops over time and can take years before victims begin to exhibit symptoms, the researchers warn that their findings actually underestimate the true extent of the disease among active miners. "What you see now in active miners is what you'll see later in former miners, and potentially greater disease and more progression," coauthor Cara Halldin told National Public Radio (NPR). "And so, this is probably an underestimate of what we'll see in the future." The authors did not mince words in their report, commenting that "[w]e can think of no other industry or workplace in the United States in which this [level of workplace-caused illness] would be considered acceptable."

Until the late 1990s, black lung disease had fallen by more than 90 percent over the course of nearly three decades, after a series of miners' strikes and mass protests forced the passage of 1969 federal legislation and later regulations recognizing black lung as an occupational illness and limiting exposure to coal dust. Since the late 1990s, however, the disease has made a rapid and dramatic comeback.

Earlier this year, the National Institute for Occupational Safety and Health (NIOSH) announced that it had identified the largest cluster of patients

diagnosed with black lung ever recorded, with 416 cases diagnosed at three clinics between 2013 and 2017. A social worker told NPR that they now see as many cases in two weeks as they used to see in a year, and that they have had 154 new cases since the end of the government's study.

The growing number of black lung cases is all the more remarkable given the steep decline in the number of active miners in the region, as decades of mine closures have left the total workforce at a small fraction of its postwar height of nearly 500,000.

The previous decline in rates of black lung was the product of significant, protracted struggles by coal miners for access to healthcare and safer working conditions over the course of many decades. A three-week wildcat strike in February 1969 forced the passage of the Coal Mine Health and Safety Act, the first federal legislation on black lung. The law enforced limits on exposure to coal dust, created a compensation program for miners with black lung, and created a voluntary x-ray monitoring program to help track the prevalence of the disease.

Federal regulations, however, were always inadequate to completely eradicate black lung and sick miners were often put through tests aimed at denying them benefits. Mass protests organized by retirees and widows erupted in the early 1970s, culminating in the 111-day strike in 1977-78 where miners defied both the United Mine Workers leadership and the back-to-work order by President Jimmy Carter.

After his election in 1982, UMW President Richard Trumka sabotaged one struggle after another. In place of the nationwide strikes, which had been common in earlier times, Trumka introduced the disastrous "selective strike" policy, isolating miners at individual mines and ensuring their defeat. The union also did

nothing to defend militant miners who were framed up and jailed or even murdered by company thugs.

The cozy relationship between the UMW and the coal bosses was exemplified by its endorsement of billionaire coal magnate Jim Justice for governor of West Virginia. Both Trumka, now the president of the AFL-CIO, and the UMW under current president Cecil Roberts have endorsed Trump's trade war policies, under the bogus pretext that they will protect "American" jobs. Trump's Commerce Secretary, billionaire investor Wilbur Ross, was the owner of the Sago Mine in 2006, when an explosion resulted in the deaths of 12 miners.

Since the 1990s, recommendations from NIOSH to cut maximum coal dust exposure limits in half have been simply ignored. Moreover, existing limits on exposure have often been flouted. Earlier this month, federal prosecutors indicted executives from Armstrong Energy in western Kentucky for falsifying coal dust samples in its reporting to the federal government.

Later this year, a 55 percent reduction in production taxes on coal operators, which funds the federal Black Lung Benefits Program is scheduled to go into effect. The Government Accountability Office estimates that as a result of the tax cuts, the fund, which is already \$4 billion in debt, will see this deficit quadruple over the next thirty years.

Kentucky lawmakers have recently passed legislation that will ban pulmonologists who are federally certified to read black lung x-rays from working in state workers' compensation claims. The new state requirements leaves only 7 pulmonologists in the entire state who will be allowed to work on these claims. Most of these have previously done work on behalf of the coal and insurance companies, numerous media outlets have reported.

The resurgence of black lung disease is only the most dramatic expression of the dramatic reversals in living standards in the Appalachian coalfields. Decades of mine closures and the destruction of what had been one of the only decent-paying jobs in one of the poorest regions of the country has created a massive social crisis. Appalachia is one of the centers of the opioid epidemic and has the second-lowest life expectancy in the country.

There are growing signs, however, that the period in which the UMW and other unions could suppress the

class struggle is coming to an end. It is significant that the mining areas of southern West Virginia, which have been hardest hit by the resurgence of black lung, were also the centers of the West Virginia teachers' strike earlier this year, where a central demand was full funding for the public employee healthcare program.

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