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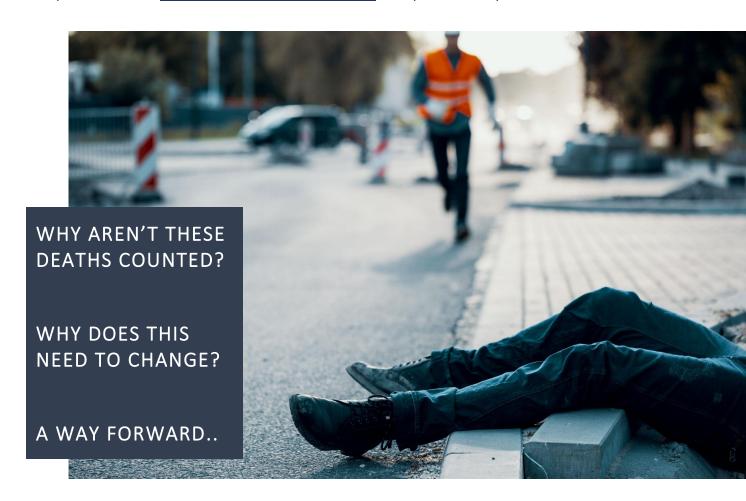
Recent coverage of <u>fatal silicosis in stone bench top installers</u> and <u>black lung in coal miners</u> has shocked the Australian public. But should we be shocked? Unfortunately, overseas data tells us that it is likely that thousands of Australian workers are dying from occupational disease every year, while even more are suffering ongoing debilitating illness. How could this be? We argue that because occupational diseases are not required to be adequately tracked and reported to Australian workplace regulators, attention and resources are not directed at efforts to prevent their occurrence. Unless this flaw is rectified, this silent and tragic epidemic will continue to harm and kill Australian workers.

## WHAT'S WRONG WITH THESE GRAPHS?



The above charts summarise workplace deaths from illnesses and accidents experienced in the <u>United Kingdom</u>, <u>New Zealand</u> and <u>Australia</u>, as reported by the respective national health and safety and compensation bodies. It can be seen that while occupational illness is easily the most significant health and safety issue in the United Kingdom and New Zealand, it appears to cause zero deaths in Australia according to official figures. According to the UK's workplace regulator, <u>in 2018</u> there were approximately 13,000 occupational disease deaths in the UK and 541,000 new work related illnesses. Are we so much better than the UK and New Zealand? Our population is <u>25 million</u> compared to <u>66 million</u> in the UK, but we have more workplace fatal injuries – <u>190 in 2017</u> - compared with <u>144 for the UK in 2017 / 2018</u>. If we assume the same rate of occupational disease in Australia as in the UK, this would mean a staggering 4900 Australians are dying every year from occupational disease. So why isn't our data showing this?

Actually, Australia does record deaths from one workplace disease, mesothelioma from asbestos exposure. These are recorded in the <u>Australian Mesothelioma Registry</u> and the figures are shocking – in 2016 there were <u>651</u> mesothelioma deaths, the vast majority of which would have been work related. However, as seen above, even though Safework Australia <u>funds</u> the register, these deaths are currently not counted as workplace fatalities in Safework Australia's official statistics. The question is why?



## WHY AREN'T THESE DEATHS COUNTED?

Australians losing their lives prematurely from workplace illnesses can be difficult to monitor. This is because symptoms for many occupational illnesses such as respiratory diseases, cancers and noise induced hearing loss take a long time to present following exposure. There also may have been contribution from multiple workplaces and from non-occupational exposures. To address these challenges, regulators in New Zealand and the United Kingdom use population-based studies and data from death certificates and cancer and disease registries to measure annual occupational illness deaths. Unfortunately, unlike these regulators, SafeWork Australia explicitly excludes occupational illnesses from its fatality data and openly admits that when it comes to

its fatality data and openly admits that when it comes to occupational respiratory disease, the major contributor of British occupational disease deaths, the extent and incidence in Australia is unknown.

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## WHY DOES THIS NEED TO CHANGE?

Australia's hidden occupational disease epidemic has enormous "impacts on workers and their families but also on businesses and society itself. Dying from an occupational disease such as mesothelioma is a horrific experience. Death, although often certain, often does not come quickly causing immense suffering and distress and there are massive impacts on carers and

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families. Economic impacts from occupational diseases are equally sizeable, estimated to cost the United States \$46 billion annually, comparable to the impact of all cancer-related costs. What is most tragic about this situation is that almost all of these deaths would have been easily preventable with simple control methodology that has been understood for decades.

Unfortunately, because Australian occupational disease fatality data is neither measured nor published there is currently limited public or industry concern or understanding. This means available financial and human resources cannot be directed at preventing these deaths. For example, today there are an estimated 4000 members in the safety profession in Australia where the focus is primarily on preventing traumatic occupational injuries. However, occupational hygienists, who are trained to prevent occupational disease, number barely 400 in Australia. There are around 500 occupational physicians and a handful of epidemiologists. Another downside of a lack of accurate data is that regulators and researches cannot develop effective policies to combat occupational disease, something which has recently been acknowledged by SafeWork Australia.

## A WAY FORWARD

We believe in the idea put forward by Peter Drucker that "You can't manage what you don't measure". Accordingly, we call on SafeWork Australia to join with us and other bodies including the <u>AFOEM and TSANZ</u> in developing and funding quality studies and data collecting mechanisms to paint an accurate picture of occupational disease deaths in Australia. With this data, regulators, business, unions along with workers and their family will be able to come together to tackle the problem with our eyes wide open. We hope our call is heard, as thousands of Australians' lives depend on it.