



Public Health Association
AUSTRALIA

Public Health Association of Australia
submission to Inquiry into the
Hazelwood Coal Mine Fire

Hazelwood Mine Fire Inquiry
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3 August 2015

Contents

Introduction	3
Public Health	3
The Public Health Association of Australia	3
Ecology and Environment Special Interest Group of PHAA	3
Advocacy and capacity building	4
Submission to the Hazelwood Mine Fire Inquiry	4
1. Whether the Hazelwood Coal Mine Fire contributed to an increase in deaths	4
2. Short, medium and long term measures to improve the health of the Latrobe Valley communities	4
Short and medium term.....	4
Longer term.....	5
3. Anglesea Mine for the 2015/2016 summer season.....	6
Conclusion	7
References.....	8

Introduction

The Public Health Association of Australia Incorporated (PHAA) is recognised as the principal non-government organisation for public health in Australia and works to promote the health and well-being of all Australians. The Association seeks better population health outcomes based on prevention, addressing the environmental and social determinants of health, and promotion of equity principles.

Public Health

Public health includes, but goes beyond the treatment of individuals to encompass health promotion, prevention of disease and disability, recovery and rehabilitation, and disability support. This framework, together with attention to the social, economic and environmental determinants of health, provides particular relevance to, and expertly informs the Association's role.

The Public Health Association of Australia

PHAA is a national organisation comprising around 1900 individual members and representing over 40 professional groups concerned with the promotion of health at a population level.

Key roles of the organisation include capacity building, advocacy and the development of policy. Core to our work is an evidence base drawn from a wide range of members working in public health practice, research, administration and related fields who volunteer their time to inform policy, support advocacy and assist in capacity building within the sector. PHAA has been a key proponent of a preventive approach for better population health outcomes championing such policies and providing strong support for the Australian Government and National Health and Medical Research Council (NHMRC) in their efforts to develop and strengthen research and actions in this area across Australia.

PHAA has Branches in every State and Territory and a wide range of Special Interest Groups. The Branches work with the National Office in providing policy advice, in organising seminars and public events and in mentoring public health professionals. This work is based on the agreed policies of the PHAA. Our Special Interest Groups provide specific expertise, peer review and professionalism in assisting the National Organisation to respond to issues and challenges as well as a close involvement in the development of policies. In addition to these groups the Australian and New Zealand Journal of Public Health (ANZJPH) draws on individuals from within PHAA who provide editorial advice, and review and edit the Journal.

Ecology and Environment Special Interest Group of PHAA

This submission has been developed by PHAA's Ecology and Environment Special Interest Group (SIG). The Ecology and Environment SIG is an active part of PHAA on several topics. Overall activity focuses on promoting an ecologically sustainable human society as a foundation for long term human health. Acting for a safe climate by advocating for a rapid, ordered transition from fossil fuels to renewables; opposing expansion of the nuclear industry and supporting sensible discussion on wind turbines as an energy source are priorities. Environmental chemical, including lead, exposures is an emerging topic.

PHAA submission to Hazelwood Mine Fire Inquiry

We work with the Climate and Health Alliance on several projects, including the Energy Choices and Health Collaboration. This project assesses the potential impacts on health of all the major energy sources, with a particular focus on fossil fuel extraction and use. Immediate, direct and longer term global health effects are equally important. We also inform the public about the wider health implications of rising greenhouse gas emissions.

Advocacy and capacity building

In recent years PHAA has further developed its role in advocacy to achieve the best possible health outcomes for the community, both through working with all levels of Government and agencies, and promoting key policies and advocacy goals through the media, public events and other means.

Submission to the Hazelwood Mine Fire Inquiry

In this submission we address the Terms of Reference 6, 7 and 11, which are the health related ones.

1. Whether the Hazelwood Coal Mine Fire contributed to an increase in deaths

- 6. Whether the Hazelwood Coal Mine Fire contributed to an increase in deaths, having regard to any relevant evidence for the period 2009 to 2014.*

Given the nature of health impacts from exposures to coal smoke, and that the conditions take many years to manifest except where the impact is from acute exposures such as carbon monoxide or other toxins, it is difficult to provide accurate answers to this Term of Reference, beyond repeating the known evidence of ill health effects of longer term exposure to emissions from coal mining and coal combustion^{1,2}. This accords with the conclusion of the 2014 Inquiry: “The long-term adverse effects of exposure to the smoke and ash from the mine fire are unknown and are of great concern to the community”. The Study being undertaken (2014 Inquiry Recommendation 10 - Extend Health Study) may need revision to further extend its methodology to be able to properly detect any differences in mortality and morbidity between residents of the Latrobe Valley and a comparison region.

2. Short, medium and long term measures to improve the health of the Latrobe Valley communities

- 7. Short, medium and long term measures to improve the health of the Latrobe Valley communities having regard to any health impacts identified by the Board as being associated with the Hazelwood Coal Mine Fire.*

Short and medium term

PHAA considers that most of the relevant health issues are adequately covered in the initial Inquiry’s recommendations. However we would like to re-emphasise the ones we consider important for this new Inquiry and draw the Inquiry’s attention to aspects that might be strengthened.

Prevention is a key component of health protection.

PHAA submission to Hazelwood Mine Fire Inquiry

In 2012 Australia's peak Environmental Health advisory group **enHealth**, released "Environmental Health Risk Assessment: Guidelines for assessing human health risks from environmental hazards"³. The enHealth members overseeing the development of these guidelines included Ms Jan Bowman, then Director of Environmental Health for the Victorian Department of Human Services and PHAA representative, Dr Liz Hanna, among others. This document clearly articulates risk management approaches to protect human health. It involves identifying hazards and risks and the required series of vital steps required to minimise health harm.

The primary measure to improve the health of the Latrobe Valley communities is to avoid a repeat exposure, as re-exposure risks remain. PHAA's primary recommendation therefore is that these Guidelines are adhered to, and elevated to enforceable standards, in Victoria and indeed, nationally. This process must apply to all known health hazards within the State.

Additionally, we would offer the following specific suggestions:

- Overt recognition of increasing fire threat from global warming in planning responses
- Adequate fire prevention / fighting installations in operating mines
- Adequate rehabilitation of closed mine sites
- Implement Recommendation 7 of the 2014 Inquiry concerning carbon monoxide response protocols
- Expanding this to assess other potential harmful gas and particulate products of smoke and use this information in planning the response and making the threat / risk assessment that would inform the communications strategy and advice about evacuations
- Act on Recommendations 8 (Smoke Protocols), 9 (Smoke Guidelines) and 10 (Extend Health Study)

Unsubstantiated reports suggest that four residents received a diagnosis of lung cancer in the previous month. This may well instil a sense of foreboding and panic among the residents, as they worry about "who will be next?" The ensuing, or exacerbation of underlying, moral outrage needs to be addressed urgently, compassionately, respectfully and most importantly, honestly – based on the best evidence available (not a quick scan of easy reach information).

This also underpins the necessity to engage in a detailed longitudinal study of this population, and a matching population. Initially detailed health assessment should have been undertaken at time zero. If this has not commenced, then it should be immediately, accompanied by routine follow up. After 10 years, the follow up study could be transitioned into a local cluster within routine state-wide health monitoring, so that their health progress is monitored in an ongoing basis.

Health services must be provided as required and all health costs should be covered by those responsible; the company, with contribution by the state.

Additional services will be required by these communities, and the state has a responsibility to provide these. These include psychological as well as physical health, and social services to accommodate the increased disadvantage that will inevitably ensue. Intergenerational disadvantage arising from this event must be prevented. Attention is required for the children, by the provision of additional learning programs, and educational opportunities to minimise potential degradation in scholastic achievement.

Longer term

PHAA recognises the health benefits afforded by employment that extend beyond the individual to their family and community.

PHAA submission to Hazelwood Mine Fire Inquiry

PHAA also recognises international developments in energy policy trending away from fossil fuel energy generation, and the subsequent high probability of further closures of mines in the Latrobe Valley and other regions of Victoria (and indeed throughout Australia). This inevitability presents an additional health risk through the social determinants of health pathway arising from (relatively) sudden mass unemployment among Latrobe Valley communities. The Latrobe Valley has bountiful renewable energy resources, and its natural environment offers unique advantages in further extending its existing reputation for “clean” foods, and “healthy living”. Governmental foresight could be demonstrated by pro-actively encouraging renewable energy companies, and working in partnership with Latrobe Valley communities to support the extension and development of a range of industries to boost employment. PHAA suggests that the situation in the Latrobe Valley gives the Victorian government the opportunity to showcase reparation of a community, and the mandate to raise this in COAG forums. Active participation in preparing for and managing this transition will reap broad social as well as mental and physical health benefits among Latrobe Valley residents.

3. Anglesea Mine for the 2015/2016 summer season

11. Sustainable, practical and effective options that could be undertaken by the mine operator to decrease the risk of fire arising from or impacting the Anglesea Mine for the 2015/2016 summer season, noting the impending closure of the mine on 31 August 2015.

PHAA would observe the advice from the Australian Bureau of Meteorology that this summer is likely to be particularly severe because of the developing El Nino event. Based on this assessment and experience of last year’s fire at Hazelwood, we would advise generally that a range of measures to prevent fires generally and specifically around the Anglesea mine site be undertaken. While we acknowledge the need for specific advice from relevant experts we would highlight the following needs:

- Firefighting installations and equipment be adequate for the potential of a serious fire
- Assessments of the content of the coal to advise what possible smoke may contain in the event of a fire
- Communications plans for briefing the community of unfolding events, and to include assessments of realistic risks from exposures to smoke are developed in advance, extending the 2014 Inquiry Recommendation 11 (Communications Strategy)
- Safety warnings and evacuation plans are prepared and that the local communities have been involved in the decisions and preparations of these plans, extending 2014 Inquiry Recommendation 12 (Community Engagement) so the local communities are engaged as participants in planning not just responders

Conclusion

PHAA suggests that the 2014 Inquiry Recommendations be fully implemented and also extended to cover additional aspects:

- Review the methodology of the health study to ensure it has the power to find any adverse health impacts over a longer period of time
- Recognise the increasing fire threat from global warming and incorporate this in prevention and response planning
- Include monitoring of gases other than carbon monoxide and also ultrafine particulates in development of health advisories; this may require a priori evaluation of the content of each particular coal bed
- Partner with local communities and industries to pro-actively support the development of alternative employment options in renewable energy and other 'healthful' industries in order to deliver a comprehensive industry transition plan (from fossil fuel based occupations to alternative ones) for Latrobe Valley residents as part of a longer term health maintenance plan
- Adhere to the national *Environmental Health Risk Assessment: Guidelines for assessing human health risks from environmental hazards*. Enact that companies responsible must put aside a sum adequate to cover the health costs of victims, and ensure that all industries abide by the safety guidelines and standards via enforceable regulation
- Ensure the lessons learned from the Hazelwood fire are implemented at Anglesea in the coming summer

PHAA appreciates the opportunity to make this submission and would welcome the opportunity to address the Inquiry if necessary.

Please do not hesitate to contact us should you require additional information or have any queries in relation to this submission.



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