CLIMATE COUNCIL:

JOINT STATEMENT OF THE HEALTH EFFECTS OF COAL IN AUSTRALIA





Joint Statement of the Health Effects of Coal in Australia

We, the undersigned, accept the clear evidence that:

- coal mining and burning coal for electricity emits toxic and carcinogenic substances into our air, water and land;
- 2. coal pollution is linked to the development of potentially fatal diseases and studies show severe health impacts on miners, workers and local communities;
- Australia's heavy reliance on coal for electricity generation and massive coal industry expansion present significant risks to the health of communities, families and individuals; and
- emissions from coal mine fires, like the recent Hazelwood mine fire in Victoria, and the release of heavy metal and organic compounds, pose health risks for surrounding populations, such as respiratory and heart disease, cancers and other health conditions.

We believe that Federal and State governments must urgently research and account for these risks to human health starting with consistent air, water, soil quality monitoring at and around every coal mine and power station in Australia.

We are calling on governments and industry to acknowledge the significant human health risks associated with the whole lifecycle of coal production – mining, transportation, combustion and the disposal of waste – and to urgently fund research and account for these risks in policy, planning and investment decisions in Australia.

While we recognise the role coal played in the industrial revolution – as an important energy source helping advance economies and improve livelihoods – studies now show that every phase of coal's lifecycle presents major human health risks and contributes to ecological degradation, loss of biodiversity and climate change.

In addition to the release of greenhouse gases, which are the primary cause of climate change, coal mining and electricity generation emit known toxic and carcinogenic substances into our air, water and land. These emissions include mercury, lead, cadmium, arsenic, nitrogen oxides and inhalable airborne particulates.

Authoritative studies in Canada, China, Europe, India and the United States show severe health impacts from coal emissions on miners, workers and local communities. These studies link coal pollution to the development of potentially fatal diseases, resulting in thousands of premature deaths and costing national economies tens to hundreds of billions of dollars every year. In the United States, the Physicians for Social Responsibility found that coal contributes to four of the five leading causes of mortality: heart disease, cancer, stroke and chronic respiratory diseases.

Health risks are not limited to mining and combustion. Emissions from coal mine fires are linked to lung cancer, bronchitis, heart disease and other health conditions.

At home, despite Australia's heavy reliance on coal for electricity generation – it provides

75% of our electricity supply – research and monitoring of the resulting health effects is limited. Most research has been conducted overseas, whereas in Australia, one of the world's leading producers, consumers and exporters of coal, the Burden of Disease remains under investigated. Furthermore, the disease burden will escalate as the massive coal industry expansion underway in Australia presents additional risk to human health in Australia and overseas.

The significant health costs associated with coal are not currently reflected in the price of coal-fired electricity in Australia. In 2009, the Australian Academy of Technology, Sciences and Engineering (ATSE) estimated coal's health impacts cost taxpayers \$2.6 billion every year.

A dire lack of monitoring and research in Australia is letting down coal mining communities.

Recommendations

- 1. National standards for consistent air, water and soil quality monitoring at and around every coal mine and power station in Australia conducted by an independent body with no relationship to the coal industry.
- 2. Adequate funding allocated for research to evaluate the health, social and environmental impacts of coal in coal mining communities.
- Coal's human health risks must be properly considered and accounted for in all energy and resources policy and investment decisions.
- 4. We also encourage the investment in education and training opportunities to support coal mining communities to transition away from fossil fuel industries towards new industries.

We say the time has come for coal's human health risks to be properly considered and accounted for in all energy and resources policy and investment decisions.

This joint statement is signed by Professor Tim Flannery, Professor Fiona Stanley, the Climate Council of Australia and the Climate and Health Alliance representing 27 health organisations¹.



Professor Tim Flannery, Chief Councillor, The Climate Council of Australia



Professor Fiona Stanley,
Distinguished Research
Professor School of
Paediatrics and Child Health
(SPACH), The University of
Western Australia and the
Founding Director of the
Telethon Kids Institute



Dr. Liz Hanna,President of the Climate and Health Alliance





¹ Climate and Health Alliance member organisations: Alliance for Future Health; Australian Association of Social Workers (AASW); Australian College of Nursing (ACN); Australian Council of Social Service (ACOSS); Australian Healthcare and Hospitals Association (AHHA); Australian Health Promotion Association (AHPA); Australian Institute of Health Innovation (AIHI); Australian Research Alliance of Children and Youth (ARACY); Australian Women's Health Network (AWHN); Australian Medical Students' Association (AMSA); Australian Nursing Federation (ANF); Australian Physiotherapy Association (APA); Australian Psychological Society (APS); Australian Rural Health Education Network (ARHEN); CRANAplus; Doctors Reform Society (DRS); Friends of CAHA; Health Consumers' Network (Qld); Health Issues Centre (HIC); Koowerup Regional Health Service (KRHS); Public Health Association of Australia (PHAA); North Yarra Community Health (NYCH); School of Public Health and Community Medicine, University of NSW; Services for Australian Rural and Remote Allied Health (SARRAH); Women's Health East (WHE); Women's Health in the North (WHIN); World Vision Australia.