

Chapter 1

Introduction

1.1 On 25 June 2014, the Senate established the Senate Select Committee on Health.¹ The final reporting date for the committee is 20 June 2016. The committee's resolution allows the committee to make interim reports such as this one.

Public hearings

1.2 The committee has completed 50 public hearings to date. A list of hearings which focused on Coal Workers' Pneumoconiosis (CWP) is at Appendix 1.²

1.3 Through its extensive program of public hearings, the committee has taken evidence from many health experts, practitioners, consumers and communities. The public hearing program has also enabled the committee to engage the wider Australian community, including those in rural and regional areas which may not normally be able to directly engage with the parliamentary process.

1.4 The committee's high level of activity allows it to be responsive to issues in health as they arise. An example of this is the committee's inquiry into the proposed privatisation of Australian Hearing (Third Interim Report). In this fifth interim report, the committee again examines a specific health issue: the re-emergence of CWP, or black lung, in Australia. To examine this issue, the committee held two full day hearings and one part day hearing:

- 7 March 2016, Brisbane;
- 8 March 2016, Mackay; and
- 23 March 2016, Campbelltown (this hearing looked at both hospital funding and CWP).

Submissions

1.5 The committee has received 204 submissions since the beginning of its inquiry. In relation to the re-emergence of Coal Workers' Pneumoconiosis, the committee has received ten submissions. The committee also received 172 emails in support of the Construction, Forestry, Mining and Energy Union's (CFMEU) 'Dust to Dust: Make Black Lung History' campaign. A list of submissions relating to the re-emergence of CWP is at Appendix 2.³

1.6 The committee's terms of reference are wide-ranging. It is the committee's intention to explore various issues in depth over the course of its inquiry.

1 *Journals of the Senate*, 25 June 2014, pp 996–998.

2 Public hearing details can also be accessed via the committee's website: www.aph.gov.au/Parliamentary_Business/Committees/Senate/Health/Health/Public_Hearings.

3 The submissions received by the committee can be accessed via the committee's website: www.aph.gov.au/Parliamentary_Business/Committees/Senate/Health/Health/Submissions.

1.7 Additional information, tabled documents, correspondence and answers to questions on notice received by the committee to date and related Coal Workers' Pneumoconiosis are listed at Appendix 3.⁴

Structure of this report

1.8 This is the fifth interim report of the Senate Select Committee on Health. Summaries of the committee's previous interim reports are detailed in Appendix 4.⁵ This report focuses on the re-emergence of Coal Workers' Pneumoconiosis in Australia. While seemingly very specific in focus, this issue is important in the wider area of public health. The issue highlights not only the clear relationship between regulation and public health priorities but also the need for properly funded public health infrastructure which can respond to the re-emergence of a disease thought eradicated in Australia. In addition to this introductory chapter, the report includes three chapters:

- background—the re-emergence of coal workers' pneumoconiosis in Australia and the independent review being undertaken in Queensland (Chapter 2);
- the issues raised in the committee's inquiry, through submissions and evidence in public hearings (Chapter 3); and
- discussion of the committee's conclusions and recommendations (Chapter 4).

Notes on references

1.9 References to submissions in this report are to individual submissions received by the committee and published on the committee's website. References to the committee Hansards are to the proof transcripts.⁶

Acknowledgements

1.10 The committee thanks all those who participated in the public hearings regarding the re-emergence of coal workers' pneumoconiosis. In particular the committee wishes to thank Mr Percy Verrall and his wife Mrs Daphne Verrall, and Mr Keith Stoddart and his wife Mrs Danielle Stoddart who shared their experiences of being diagnosed with coal workers' pneumoconiosis. The committee sincerely appreciates that these witnesses shared their time and experiences with the committee, despite their ill health.

1.11 The committee also wishes to thank Mr Ian Hiscock and Mr Chris Carter who shared their experiences of being coal miners. Their evidence helped the committee understand the reality of working in the coal mines of Queensland.

4 The submissions received by the committee can be accessed via the committee's website: www.aph.gov.au/Parliamentary_Business/Committees/Senate/Health/Health/Additional_Documents.

5 The previous four interim reports tabled by the Senate Select Committee on Health can be accessed via the committee's website: www.aph.gov.au/Parliamentary_Business/Committees/Senate/Health

6 Committee Hansards can be accessed via the committee's website: www.aph.gov.au/Parliamentary_Business/Committees/Senate/Health/Health/Public_Hearings.

1.12 The committee also thanks all those who emailed as part of the CFMEU's 'Dust to Dust: Make Black Lung History' campaign and showed their support for the sufferers of coal workers' pneumoconiosis and for those working to improve conditions in Australian coal mines for workers.



Mr Percy Verrall, who spoke to the committee at its Brisbane hearing on 7 March 2016, holds up an x-ray of his lungs showing the development of CWP.⁷

7 Photo sourced from the 'Dust to Dust – Make Black Lung History' CFMEU campaign website: <http://dusttodust.org.au/>

