How Canada Markets Asbestos to the Developing World

by Kathleen Ruff

Updated March 2009
Exporting Harm
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Cost $10.00

October 2008

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Preface

Many extraordinary stories surround asbestos – that deadly mineral fibre – but perhaps none more remarkable and so little known as Canada’s involvement with the product. For over a hundred years, Canada has been one of the main global suppliers of white asbestos (or chrysotile, to give it its technical term). Quebec’s vast mines and mills fed asbestos fibre to the world’s leading asbestos companies in the USA and Europe. In these countries, asbestos users enjoyed the benefits of the fire-resistant material, but soon found out that these came at a frightening cost. Canadian fibre (like any type of asbestos) causes asbestosis (lung scarring) and cancers. After the 1960s, when the virulent asbestos cancer mesothelioma began to strike with increasing frequency, industries in North America and Europe eventually stopped buying Canadian fibre and governments increasingly banned it.

As Kathleen Ruff shows in this admirable appraisal, the carcinogenicity of asbestos made little difference in Canada, where the industry, the government, physicians and even some trade unions refused to believe that white asbestos was harmful. Not only did Canadian vested interests energetically defend the product in the 1960s and 1970s – when the output of Canadian asbestos mines soared – but later, as world demand diminished, they shifted their sales pitch to the developing world. At the heart of this defence was the Asbestos Institute (now the Chrysotile Institute) – a government and industry-funded public relations group that since the 1980s has orchestrated campaigns abroad that have been aimed at extending Canada’s chrysotile exports.

The Institute’s defence involves a particular brand of Canadian science. Throughout the twentieth-century, the Canadian asbestos industry and its scientific supporters have proclaimed that asbestos-related disease was rare (or non-existent) in Canada, that local workers had ‘immunity’ to the mineral, and that any disease was due to other types of contamination. Even today, Canada asserts – while not using the product itself – that white asbestos is harmless and can be utilised under ‘controlled’ conditions. The spuriousness of these claims is revealed in this report. It shows that the Canadian industry only survives by a mixture of bad science, political manipulation, and disregard for the health of workers. The only logical conclusion, as Ruff points out, is to ‘stop exporting asbestos’. It is to be hoped that this report helps achieve that aim.

Dr Geoffrey Tweedale, Co-Author, Defending the Indefensible: The Global Asbestos Industry and Its Fight for Survival

Dr Richard A. Lemen, Assistant Surgeon General, United States Public Health Service (ret’d)

Dr T.K. Joshi, Director Occupational and Environmental Medicine Programme, Centre for Occupational and Environmental Health, New Delhi, India

Dr Domyung Paek, Professor, Occupational and Environmental Medicine, School of Public Health, Seoul National University, Korea

Dr Colin L. Soskolne, Professor, School of Public Health, University of Alberta, Canada

Professor J E Myers, Director: Occupational and Environmental Health Research Unit, Faculty of Health Sciences, University of Cape Town, South Africa

Dr. Iman Nuwayhid, Professor of Occupational Health, Faculty of Health Sciences, American University of Beirut, Lebanon

Cover photo: P. Madhavan, India, 2007
Executive Summary

Most Canadians are not aware of the global role Canada has played to promote the sale of chrysotile asbestos (the only form of asbestos still sold today) to developing countries.

Every independent scientific body in the world, including the World Health Organization (WHO), the International Labour Organization and the Canadian Cancer Society, have called for chrysotile asbestos to be banned since it is a recognized carcinogen and there is no safe way it can be used.

Chrysotile asbestos has been banned by most industrialized countries. But, undeterred by the scientific evidence of the harm it does to human health, the asbestos industry, helped by the Canadian government, is pursuing the same strategy as the tobacco industry and is aggressively marketing asbestos to developing countries.

The unsavory tactics used by the Canadian government to promote the sale of Canada’s asbestos include:

• Giving millions of dollars of public funds to the Chrysotile Institute to promote asbestos sales in developing countries;
• Disseminating misinformation about the hazards of asbestos in order to “manufacture uncertainty”;
• Preventing people handling Canadian asbestos from being warned that it is hazardous;
• Using intimidation, trade threats and political interference in the affairs of other countries to prevent the banning or regulating of asbestos;
• Destroying a Strategic Assistance Plan for disaster-prone areas of the world, aimed at cleaning up asbestos-contaminated debris after the deadly 2004 tsunami in Asia;
• Denying help to Canadian victims of asbestos exposure;
• Making a secret deal to exploit Canada’s good international image in order to increase asbestos sales;
• Attempting repeatedly to sabotage a U.N. Convention so as to prevent developing countries being informed of the hazards of chrysotile asbestos.

We as Canadians want our government to be a force for good in the world. But when it comes to asbestos, we as a country are doing the opposite. We are doing harm in the world.

It’s time to stop exporting harm. It’s time to stop Canada’s asbestos trade.
Introduction

Canada has at times played a pivotal leadership role on the world stage.

Examples that come to mind are the creation of the U.N. Peacekeeper role, for which Prime Minister Lester Pearson won the Nobel Prize. Under Prime Minister Brian Mulroney, Canada was the leader in bringing into being the U.N. Convention on the Rights of the Child. Thanks to determination shown by Foreign Affairs Minister Lloyd Axworthy, Canada led the world in bringing about the Convention to Ban Land Mines.

These examples of our country’s international leadership are well known and are a source of pride.

Yet one of the most powerful roles Canada has played globally is unknown to most Canadians. And if they knew, they would, without question, feel no pride.

Canada has been the world leader in the marketing and sale of a deadly substance whose impact on human health has been well-documented for more than 50 years: asbestos.

Until the year 2000, Canada was the world’s biggest exporter of asbestos. Today, it is fourth – after Russia, Kazakhstan and Brazil.

As industrialized countries have increasingly moved to ban or severely restrict asbestos, Canada has shifted its focus to become the lead promoter of asbestos exports to developing countries.

In their recently published book "Defending the Indefensible, The Global Asbestos Industry and its Fight for Survival," academic researchers, Dr. Geoffrey Tweedale and Prof. Jock McCulloch, note that over the past three decades, “There have been two constants: the struggle by labour in developing countries for safer work conditions and the malevolent role played by Canada in promoting asbestos use in the developing world.”

The Canadian government’s service to the asbestos industry has been aggressive and ruthless, a very far cry from our international image of the “nice Canadian”.

This report is an exposé of the shocking ways that service has been rendered.

Brief History of Asbestos:
Hiding the Dangers in the Name of Profits

Asbestos is a naturally occurring mineral that has been commercially valuable since the end of the 19th century because of its strength and resistance to heat. It comes in two forms – amphibole (which includes amosite, crocidolite and other varieties) and serpentine (of which chrysotile asbestos is the only form).

Ninety-five per cent of all the asbestos ever mined and used commercially in the world is chrysotile asbestos. Today, chrysotile asbestos is the only form of asbestos used commercially.

The asbestos industry therefore has no problem with the banning of other forms of asbestos, since they are of no commercial value. The industry is, however, determined to continue selling chrysotile asbestos, regardless of the public health catastrophe it is creating in developing countries, where working conditions are grim and health protections usually non-existent.

All forms of asbestos break down into ever finer fibres that cannot be seen by the human eye. If breathed in, they can cause several deadly diseases for which there is, at present, no cure: asbestosis, lung cancer and other forms of cancer, including mesothelioma.

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These diseases often take decades to appear, so that in countries where there is little or no awareness of the hazard asbestos presents, it is easy for the asbestos industry to hide the harm being caused until it is too late. Even when people start dying from exposure to asbestos, the cause of the deaths may go unnoticed, especially in poor countries, just like it did, and continues to do, in so many industrial countries.

The threat that asbestos poses for human health was first noted by factory inspectors in the U.K. in 1898. By the 1930s a number of significant articles had been published in medical journals that clearly described asbestos-related disease. By the 1960s there was widespread documentation of asbestos-caused cancer among workers and bystanders, including workers’ family members.

Yet around the world, the asbestos industry suppressed this information from their employees and from the public. Just as the tobacco industry did, asbestos corporations exploited “medical uncertainty” by employing a host of medical and scientific experts who were prepared to lie and to protect corporate interests at the expense of the health of the exposed populations. 3

As late as 1972 Johns-Manville, the world’s biggest asbestos company, which operated asbestos plants in Canada, had a corporate policy of not telling employees when their medical examinations showed they had asbestosis. In 1978 the company was still maintaining that reports of people being harmed by asbestos in the environment were fantasy and sensationalism. 4

In 1982 asbestos disease lawsuits led the company to declare bankruptcy, whereupon David Austern, the court-appointed lawyer in charge of the Manville Trust, found from the company’s documents that they had corporate knowledge from 1934 that asbestos is a deadly hazard. 5

In a memo, Austern stated “The content and tone of the documents demonstrate that Manville officers, directors and employees…held secret information that had it been revealed, would have prevented the deaths of thousands of people.” 6

A similar cover-up of the dangers of asbestos occurred in Quebec.

The 1976 Report of the Beaudry Commission of Inquiry into Health Issues in the Asbestos Industry, set up after strikes by Quebec asbestos miners, said: “They (employers) have kept available information about the dangerous effects of asbestos dust away from the workers and the unions.” 7

Everywhere asbestos has been used – Europe, the United States, Japan, Australia, Brazil, South Africa and elsewhere – it has left in its wake a horrific public health catastrophe. It has cost, and continues to cost, hundreds of billions of dollars for health care for its victims, compensation, removal from buildings, remediation and legal costs.

The WHO estimates that between five and ten million people will ultimately die from asbestos-related diseases. 8

Scientists have conservatively estimated that more than half a million cases of mesothelioma (a cancer caused only by asbestos) and asbestos-related lung cancer will occur throughout Europe between 1995 and 2029. 9

Among B.C. workers alone, it is estimated that 1,500 workers will die from asbestos-caused disease over the next five years. And it is known that many cases of asbestos-caused disease are not recognized as such and not captured in the figures. 10

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5 McCulloch and Tweedale (2008), page 267
6 D.T. Austern memo re. Manville Documents, Feb. 8, 1988
8 World Health Organization, Occupational Health: Ethically Correct, Economically Sound. Fact Sheet Number 84
10 Prof. Paul Demers, UBC School of Environmental Health, BC Construction Unions Raise Alarm about Asbestos Exposure, Vancouver Sun, Feb. 4, 2008
The hundreds of billions of dollars presently at stake in court cases in industrialized countries, involving victims from past asbestos use seeking compensation, are a powerful incentive for the industry and its paid experts to continue denying the harm caused by chrysotile asbestos.

In the U.S., for example, by 2002, approximately 730,000 people had filed claims representing hundreds of billions of dollars of potential liability for American corporations. According to one estimate, over 10,000 Americans die each year from asbestos-caused disease. A Senate bill to create a $140 billion dollar compensation fund failed, in part because the sum was insufficient to cover the vast number of claims for asbestos-related diseases.\(^{11}\)

Currently, as one small example of costs, Canadians are paying hundreds of millions of dollars to have asbestos removed from the Parliament Buildings. Apparently, our government believes that asbestos is not harmful to people in developing countries, but is harmful to Canadian MPs.

Or perhaps it believes that the lives of MPs matter, whereas the lives of impoverished people in developing countries do not.

What makes this tragedy especially heartbreaking is that it is unnecessary. It has been known for many decades that all forms of asbestos are deadly, and that Canada’s claim that asbestos can be safely used has no credibility.

Canada has played the lead role in this tragedy. Other key allies of the asbestos industry – Kazakhstan, Zimbabwe, India, Russia – do not enjoy the international cachet of Canada. Unfortunately for people around the world who are being exposed to harm because of our country’s endorsement of “safe” asbestos, Canada still has an undeserved reputation for being trustworthy.

In their history of the “world-wide cover-up and continuing tragedy” of asbestos, authors McCulloch and Tweedale note: “The Canadian industry, strongly supported by its national government, has played a key role in promoting the fiction that white fibre (chrysotile asbestos) is harmless. To that end it has manipulated the medical record and corrupted public debate.”\(^{12}\)

### How the Canadian Government has Marketed Asbestos to Developing Countries

1) **GIVING MILLIONS OF DOLLARS TO FUND THE ASBESTOS LOBBY**

By 1984, the deadly consequences of asbestos use had become undeniable in industrialized countries. Consequently, in that year, the Canadian government along with the Quebec government, the asbestos industry and Quebec unions, created the Asbestos Institute to improve sales opportunities by promoting the message that chrysotile asbestos is a safe and attractive product for developing countries.

The Chrysotile Institute is central to the Canadian government’s strategy to market asbestos to the developing world.

A number of the institute’s board members are appointed by the federal government. Since 1984, the Institute has received more than $50 million from Canadian and Quebec taxpayers. And there’s no sign of that abating: in February 2008, the Canadian government announced a new grant of $750,000 over three years for the Institute (now re-named, so as to avoid any unpleasant reference to asbestos, the Chrysotile Institute). A few weeks later, the Quebec government gave the Institute an additional $600,000 over three years – for a total of $1,350,000 of public funds.\(^{13}\)

In addition to funding the Institute every year, the Canadian government assists it in other ways. For example, the government offers Canadian embassies in developing countries to the Institute to hold asbestos promotion events. With such useful support and powerful endorsement, the Institute has held promotional events in more than 60 countries, including Bangladesh, Pakistan, Malaysia, Algeria, Colombia, and Senegal. Only industry-friendly experts are allowed to speak. The message is always the same: Quebec’s asbestos can be safely used and is a beneficial product for developing countries.

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12. McCulloch & Tweedale (2008), page 258
2) PROMOTING MISINFORMATION

All forms of asbestos are known to be carcinogenic. The World Health Organization,\textsuperscript{14} the International Labour Organization and the Canadian Cancer Society,\textsuperscript{15} among others, have called for an end to the use of all forms of asbestos, pointing out that there is no possible way this deadly product can be used safely.

Over 40 countries have banned chrysotile asbestos. In industrialized countries such as Canada for example, public awareness of its hazards, coupled with severe restrictions on use by government, means that asbestos is virtually no longer used.

No credible organization in the world supports the position, promoted by Canada and the Chrysotile Institute, that chrysotile asbestos can be safely used.

Yet the Institute claims that there is “wide international consensus” for its position and talks about “the good and true news about chrysotile”.

In the article \textit{Smoke and Mirrors – Chrysotile Asbestos is Good for You – Illusion and Confusion but Not Fact}, Dr Richard A. Lemen, former Assistant Surgeon General, U.S. Public Health Service, meticulously exposes the ways in which the industry disseminates misleading information, data out of context and without references and statements that Doctor Lemen calls simply “not true”.

Says Lemen: “The chrysotile lobby relies on misinterpretations, false claims and undocumented statements to advance its global propaganda campaign for the continued use of chrysotile asbestos. ... the obfuscation of scientific truth resulting from such practices can have grave consequences when evaluating the risk of disease and death for those exposed to the hazards of asbestos. In a profit-driven frenzy, the asbestos alchemists peddle their toxic wares to ill-informed governments and consumers. But blow away the smoke…. and the truth emerges for all to see: asbestos is deadly, there is no safe concentration of exposure identified, industry propaganda is unreliable and the continued use of chrysotile is unconscionable.”\textsuperscript{16}

The Canadian government’s misrepresentation of scientific information on the hazards of chrysotile asbestos to suit its political agenda paves the way for corrupt public policy.

On October 9, 2008, 85 scientists from across Canada signed an open letter calling on political leaders to end what they see as the increasing politicization of science by the Canadian government.\textsuperscript{17}

St. Michael’s Hospital research scientist Dr. Stephen Hwang declared:

“The policy of claiming uncertainty or doubt with scientific results was successfully used by the tobacco lobby of the past when arguing that no ill side-effects existed through second-hand smoke. I strongly oppose the distortion of scientific evidence as has been the policy of the current federal government, and we can no longer stand idle while ideology trumps scientific proof.”

3) USING INDUSTRY PAID AND DUBIOUS “EXPERTS”

While every recognized health institution in the world takes the position that chrysotile asbestos is a deadly carcinogen and its use should be ended, the credibility of the experts put forward by Canada and the Chrysotile Institute to espouse the opposite viewpoint is questionable.

\textsuperscript{14} World Health Organization, \textit{Elimination of Asbestos-Related Disease} http://whqlibdoc.who.int/hq/2006/WHO_SDE_OEH_06.03_eng.pdf
\textsuperscript{15} Ross Marowits, \textit{Canadian Cancer Society calls for asbestos ban}, Toronto Star, July 11, 2007
\textsuperscript{16} \textit{Smoke and Mirrors – Chrysotile Asbestos is Good for You – Illusion and Confusion but Not Fact}, Dr Richard A. Lemen in India’s Asbestos Time Bomb, page 16
\textsuperscript{17} Paul Jay, \textit{Canadian Researchers Call for an End to ‘Politicization’ of Science}, CBC, Oct. 9, 2008
Prof. John Bridle

On July 21, 2008 The Chrysotile Institute sent out a media release promoting an event it planned to hold in Bangkok that day entitled *Thailand: Understanding 21st Century Science in Support of the Correct Use of Chrysotile*.

“Recent scientific data clearly demonstrates that chrysotile, as used today, presents no measurable risk to human health,” the Institute assured the Thai public. “Chrysotile is often confused with amphibole fibres creating a climate of fear around products which present no measurable risk to health. Chrysotile is the same mineral as talcum powder.”

One of the two experts to be featured at the Bangkok event, Prof. John Bridle, stated that “Chrysotile products present no measurable risk to health under any conditions used today.” He derided concern about any risks to human health as “the great asbestos scam.”

In its media release, the Institute lavished astonishing praise on Prof. Bridle, stating that he had recently been awarded a prestigious honorary degree in ‘Asbestos Sciences’ by the Russian Institute of Occupational Health. “His new professorship makes him the foremost authority on asbestos science in the world,” boasted the Chrysotile Institute.

This is quite surprising for someone who has never published a single scientific paper on asbestos. In fact, for forty years Mr. Bridle has been the director of a number of U.K. firms which import and distribute asbestos.

The BBC reported how Mr. Bridle has claimed on his resume to have “recently been awarded a prestigious honorary degree in Asbestos Sciences from the Russian Academy of Sciences, the world’s leading authority on asbestos related disease… His new professorship makes him the foremost authority on asbestos science in the world.”

The Russian Academy of Sciences is a world renowned scientific establishment akin to the Royal Society in England. But Mr. Bridle’s claim to hold an honorary professorship from the Russian Academy of Sciences was exposed by the BBC as being fraudulent. The Academy has never heard of him. Mr. Bridle’s claimed authority on asbestos “is based on lies about his credentials, unaccredited tests and self aggrandisement,” said the BBC.

The Chrysotile Institute’s press release makes a small, but extremely significant, change. Instead of the award coming from the prestigious Russian Academy of Sciences, the award now is identified as coming from the Russian Institute of Occupational Health. This is an Institute linked to the chrysotile industry. The director of the Institute, Nikolai Izmerov, was in fact the first president of the Russian Chrysotile Association, an industry lobby group and the Russian counterpart of the Chrysotile Institute, according to the BBC report.

As well as his false claim to the professorship from the Russian Academy of Sciences, Mr. Bridle claimed to be a consultant to an institute at the University of Glamorgan, to be the chief asbestos consultant for an asbestos centre in Lisbon, and to be a consultant to the Vale of Glamorgan trading standards department.

All of these claims were likewise exposed by the BBC as being completely untrue.

The institute at the University of Glamorgan and the centre in Lisbon do not exist. And far from being a consultant to the trading standards department, Mr. Bridle had twice been taken to court by them and convicted under the Trades Description Act for falsely claiming qualifications he did not possess.

In its February 2008 newsletter, the Chrysotile Institute praises “Prof. Bridle” for his presentation at a Mexico City December 2006 conference *Chrysotile: Safe-Use Today*, in which Mr. Bridle ridiculed concerns over chrysotile asbestos as “fear-mongering, fed by alarmists.”

Joining Mr. Bridle as a speaker at the Mexico Conference was Patrick Chevalier from the Canadian Dept. of Natural Resources.

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19 BBC Radio 4, You and Yours, October 18, 2006
Christopher Booker

Another expert favoured by the Chrysotile Institute is Christopher Booker, a columnist for the U.K. Sunday Telegraph.

In order to spread Mr. Booker’s message to a wider audience, the Institute made special arrangements to reprint a chapter of his book, Scared To Death: From BSE to Global Warming – Why Scares Are Costing Us the Earth.

In the longest chapter of the book, Mr. Booker ridicules what he calls the unnecessary “panic over global warming”. The second longest chapter in the book is an account, says the Institute, “of the colossal scare which has been whipped up in recent decades over asbestos – a scandal which Christopher Booker has in recent years repeatedly exposed in his column in the London Sunday Telegraph, aided by one of Britain’s leading practical experts on asbestos, John Bridle.”

This is the same Mr. Bridle whose fictitious credentials were exposed by the BBC.

Ironically, the Chrysotile Institute (funded by the asbestos industry as well as Canadian taxpayers), says that Scared to Death provides a shocking insight into how those who say that chrysotile asbestos is harmful have systematically perverted “the science of asbestos…to serve commercial ends.”

Dr. David Bernstein

The expert that the Canadian government and the Chrysotile Institute promote the most heavily is Dr. David Bernstein, whose research on rats injected with chrysotile asbestos is regularly quoted as evidence that while other forms of asbestos are harmful, chrysotile asbestos poses little risk.

In describing Dr. Bernstein’s credentials, the Chrysotile Institute states that Dr. Bernstein “has also served as an expert panel member for international agencies and governments including the U.S. EPA (Environmental Protection Agency) and the WHO’s recent assessment of synthetic vitreous fibres.”

In fact, Dr. Bernstein was not an expert panel member of the WHO’s panel on synthetic vitreous fibres. Instead, he attended as a paid observer for the American Forest and Paper Association.

Nor has he ever been a member of an EPA expert panel on asbestos.

Dr. Bernstein describes himself as an independent consultant advising governments.

Over the many years of service that Dr. Bernstein has rendered for the Canadian government and the Chrysotile Institute, he has been less than forthcoming in revealing who has funded his research that is so helpful to the industry, particularly in its efforts to defeat claims for damages from people harmed by chrysotile asbestos.

Under cross examination in an October 2007 court case in Texas, Dr. Bernstein was required to answer this question. The case involved a victim of mesothelioma (a cancer whose only known cause is asbestos) claiming damages against Georgia Pacific (a company which manufactured products containing chrysotile asbestos that came from a Union Carbide mine in California). Dr. Bernstein testified as an expert witness on behalf of Georgia Pacific.

The transcript contains some illuminating information.

Richard Nemeroff (the asbestos victim’s attorney): The chrysotile study that you have been talking about with this jury, those are studies that have been done at the request of Union Carbide, a Brazil chrysotile mining interest, The Asbestos Institute and The Canadian government; is that correct?

Dr. Bernstein: That’s correct

When questioned on who funded his other studies, Dr. Bernstein would not give a clear answer, even after having been shown documentation of payment by Union Carbide, until finally Judge Gene Knize, in exasperation, intervened with strong language to compel him to provide an answer.

Mr. Nemeroff: Would it refresh your recollection if I showed you Union Carbide’s responses to interrogatories in litigation where they say they paid you $400,623.20? (…)

Judge Knize: Listen. Can you hear me? Can you see and hear me? Read my lips. How much did Union Carbide, through their attorneys, pay you?

Dr. Bernstein: I don’t have the exact total in front of me. I remember that it was about 100,000 Swiss francs. (…)

Nemeroff: Now, these scientific studies that you keep telling us about, and you have said this repeatedly, that the E.P.A. (Environmental Protection Agency) and the European Commission came to you to do something. Neither the E.P.A. nor the European Commission ever came to you to do an asbestos study, did they?

Dr. Bernstein: No, they have not.

Mr. Nemeroff: So if the jury were left with the impression that the E.P.A. or the European Commission came to you for your opinions on asbestos, that would be incorrect, right?

Dr. Bernstein: Yes. 21

At the trial, Dr. Bernstein had to admit that all his studies on chrysotile asbestos have been funded by the chrysotile asbestos industry and by corporations facing litigation cases for harm caused by chrysotile asbestos.

Dr. Bernstein also admitted that not a single scientific body anywhere agreed with his views on chrysotile asbestos.

Mr. Nemeroff: So the jury (are) to understand all of your opinions as they pertain to chrysotile asbestos come from the three recent studies that you’ve done at the request of the mining (chrysotile mining companies) or defendants in litigation; is that correct?

Dr. Bernstein: Four studies, yes.

Mr. Nemeroff: And you agree with me that as we sit here today you can show this jury no scientific body that has accepted your conclusions with respect to chrysotile asbestos; isn’t that right?

Dr. Bernstein: That’s correct.

Mr. Nemeroff: In all the years, we’re not talking months, I’m talking years since you published your work, nobody, not one scientific organization, not one scientific body, not one government, not one agency, not one anyone has accepted your view of chrysotile as you’ve explained it to this jury today; isn’t that correct?

Dr. Bernstein: That is correct.

As part of his work, Dr. Bernstein produced a slide with smiley faces.

At the trial, he explained that the macrophage (macrophages attempt to digest inhaled particulate matter in human lungs) readily gets rid of chrysotile asbestos fibres, so it is very happy from the experience:

Dr. Bernstein: “The reason the smiley face is on the chrysotile -- is on the macrophage, is the macrophage is back in its natural state and it’s a happy macrophage.”

A “NEW REALITY” FOR CHRYSOTILE ASBESTOS

Dr. Bernstein was the keynote speaker at a closed, invitation-only, symposium Chrysotile Fiber: Recent Research, Strong Data and New Reality held in Jakarta in March 2006. The event was sponsored by the Canadian government, the Chrysotile Institute, the Fiber Cement Manufacturers’ Association and the University of Indonesia. It included a Networking Cocktail at the Canadian Embassy in Indonesia by invitation of the Canadian government. The conference program, decorated with the Canadian flag, featured an attractive photo of a healthy child playing happily in the open air with his parent.

Dr. Zulmiar Yanri, head of the Occupational Health and Safety Centre for Indonesia, requested that an independent expert in nearby Australia, Dr. Douglas Henderson, be included as a speaker at the conference. Dr. Henderson is a recognized expert on chrysotile asbestos who has testified at hearings before international bodies, including the World Trade Organization. The request was denied. Dr. Yanri refused to attend the event. 22

Only industry-friendly experts were allowed to speak at the symposium. As keynote speaker, Dr. Bernstein put forward “the new scientific reality” that “everything has changed for chrysotile,” and that it can be safely used. 23

When speaking of Brazil’s chrysotile asbestos, Dr. Bernstein’s words were music to the ears of Brazilian asbestos magnates. “Recent studies confirm the fact that Brazilian chrysotile is the least harmful to human health in the world,” he affirmed, adding that on the basis of his studies with rats, chrysotile asbestos is quickly and easily expelled from human lungs. 24

In 1999, when taking part in a public hearing on chrysotile asbestos in the Chamber of Deputies in Brasilia, Dr. Bernstein described himself as an independent researcher.

Dr. Bernstein is also always presented as independent expert by the Chrysotile Institute and by the Canadian government, who one more time used his services in early 2008, naming him to sit on a Health Canada panel mandated to examine whether chrysotile asbestos is less dangerous than other forms of asbestos.

**Dr. Ruth Kava**

Dr. Ruth Kava is Director of Nutrition for the American Council on Science and Health (ACSH), an industry-funded organization that rejects, as fear-mongering, health concerns about chemicals in foods and children’s toys, and concerns about junk food contributing to childhood obesity.

Dr. Kava writes articles printed in the media that support of genetically engineered foods and the use of bovine growth hormone in cows. Major food corporations are among ACSH’s supporters.

According to SourceWatch.org, Nicolas Martin, who was administrative director for ACSH during parts of 1988 and 1989, reported that he saw instances when funders were intimately involved in ACSH projects. Mr. Martin stated, for example, that the Stroh Brewery Company helped edit a booklet ACSH produced on alcohol and health. No acknowledgement of the company’s involvement was disclosed in the publication. 25

In a 1992 internal memo sent to Shell Oil Company Foundation, ACSH founder and current president Elizabeth Whelan wrote: “When one of the largest international petrochemical companies will not support ACSH, the great defender of petrochemical companies, one wonders who will.” 26

In 2007 the ACSH published a report, *Asbestos Exposure: How Risky Is It?*

The report gives no indication as to who wrote it. The only information it provides is that the report was edited by Ruth Kava, the ACSH director of nutrition, who has no apparent qualifications in the issue of chrysotile asbestos.

The report espouses the views of the Chrysotile Institute on the safety of chrysotile asbestos and is featured prominently on their website as an important new piece of scientific research. The Institute’s February 2008 newsletter praises the report, saying that it calls for “a paradigm shift” on chrysotile asbestos.

A reasonable question is whether this study, written by an anonymous author, was in any way funded, aided or drafted by the Chrysotile Institute.

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23 *A Review of the WHO’s Document on the adverse health effects of exposure to asbestos and WHO’s recommendations on the prevention of asbestos-related diseases*, page 5, Chrysotile Institute website

24 *Asbestos Fibre Types and Health Risks, Are Perceptions Related to FACTS?* page 5, Chrysotile Institute website


26 *Cancer Wars*, Robert Proctor, 1995, p. 290
4) MAKING A SECRET DEAL WITH OTHER ASBESTOS-SELLING COUNTRIES

A recent Freedom of Information request produced briefing notes for the federal Minister of Natural Resources Gary Lunn, albeit with parts blacked out that the government did not wish people to see.

The notes were prepared by Assistant Deputy Minister, Gary Nash – the founding president of the Chrysotile Institute. They revealed that the international asbestos industry was intentionally keeping the price of chrysotile asbestos inflated so that Canadian asbestos mines could remain competitive and thus allow the Canadian government to use its international standing to promote and protect the global industry: “Foreign producers tolerate higher-cost Canadian producers because of Canada’s leadership and credibility in promoting the safer use of chrysotile.”

In other words, Canada’s international reputation is considered a useful resource to be exploited by the global asbestos industry in order to increase trust in their product.

5) DELIBERATELY PREVENTING PEOPLE HANDLING EXPORTED CANADIAN ASBESTOS FROM KNOWING IT IS HAZARDOUS

Pressure on Thailand to Remove Warning Labels

For years, Canada has exported asbestos to Thailand. Recent photos showing working conditions in the industry there resemble the worst conditions of industrialized countries in the past.

In 1984 the Thai government decided to label bags of imported asbestos with the skull and crossbones in order to warn workers that the bags contain a hazardous material. These bags sometimes split and workers’ clothes get covered in dust, which is carried into their homes and, as has been clearly documented, endangers the health of their families. The workers sweep up the spilled asbestos, breathing in clouds of the toxic dust.

The Asbestos Institute wrote a position paper opposing the Thai government’s proposed skull-and-crossbones requirement. The Institute passed on its position paper to the Asbestos International Association so as to facilitate a united global stance by the industry to oppose labeling requirements.

Canada advised the Thai government that the skull-and-crossbones label would be an “excessive” warning – and succeeded in pressuring the Thai government to abandon its labeling initiative.

In the government’s view, clear warning labels might be a deterrent to Canada’s asbestos sales.

Thailand’s per-capita asbestos use today is among the highest of any country in the world.

Pressure on South Korea to Remove Warning Labels

In 1997, in the face of a growing world epidemic of asbestos-caused disease and death, instead of seeking to increase warning notices for workers, the Canadian government sought to block efforts by South Korea to require warning labels on bags of asbestos.

The Canadian embassy in Seoul was successful in pressuring the South Korean government to withdraw its legislation that required labeling about the dangers of chrysotile asbestos.

Ten years later, faced with a growing epidemic of asbestos diseases, South Korea has enacted a ban on asbestos, which will take effect at the end of 2008.

27 M. Mittelstaedt, Documents Contradict Ottawa on Asbestos, Globe and Mail, November 26, 2006: A7
29 B. Castleman, Asbestos, Medical and Legal Aspects (2005), page 789
30 McCulloch & Tweedale (2008), page 227
6) USING INTIMIDATION TACTICS

With financial help from the Canadian and Quebec taxpayers, the Chrysotile Institute is currently suing an organization of asbestos-exposure victims in France (Association nationale de défense des Victimes de l’Amiante, or ANDEVA) for saying on their website that the Chrysotile Institute is an organ of propaganda and corruption.

The Institute retained a Swiss lawyer to send the victims’ group a letter in November 2007, threatening legal action unless the group withdrew the words “propaganda” and “corruption” from its website and promised to never apply those words again to the Chrysotile Institute. 31

The group refused and now faces legal proceedings which carry the risk of a jail sentence or a fine.

The ANDEVA website describes the information disseminated by the Institute as being “corrupt science.” They are not the only ones to hold that opinion.

As described earlier in this report, internationally respected scientists, such as Dr. Richard Lemen, have documented that the information disseminated by the Chrysotile Institute is misleading and incorrect and is part of a campaign for the continued use of chrysotile asbestos.

In his book Asbestos, Medical and Legal Aspects, which is recognized worldwide as the text of record on the asbestos industry, Dr. Barry Castleman refers to “the publication of lies by the Asbestos Institute,” such as the Institute’s claim that hand-operated tools, used on asbestos-containing products at construction sites in developing countries, are not a major problem as they do not generate respirable dust. 32

The Chrysotile Institute has never threatened to sue Dr. Castleman or any other of the world-eminent scientists who have called its information “corrupt science.” Instead, it prefers to threaten a victims’ group, who would appear to be more vulnerable to intimidation tactics.

The Chrysotile Institute is taking ANDEVA to court for using the word “propaganda” to describe the Institute’s information. The Institute meanwhile says that those who call for a ban on asbestos are expressing “propaganda.”

The Institute regularly makes totally unsupported accusations that those who oppose the continued sale of asbestos products have corrupt motives and are working on behalf of the commercial interests of alternative product manufacturers.

7) USING TRADE THREATS TO PREVENT COUNTRIES FROM BANNING ASBESTOS

WTO Case Against France

The asbestos that Canada exports to developing countries is mined in Quebec.

The issue of sovereignty and the right to set one’s own policies has strong political and emotional resonance in Quebec.

There is some irony, therefore, in the fact that the Quebec asbestos industry, with the support of the Quebec and Canadian governments, has aggressively and repeatedly sought to deny the sovereign right of countries to set their own policies on asbestos.

After France banned asbestos in January 1997, the Canadian government submitted a request to the World Trade Organization that France should rescind its “irrational and disproportionate” ban on asbestos.

This proved unsuccessful. Canada then filed a complaint with the WTO Dispute Settlement Panel, claiming that France did not have the right to ban asbestos. “The current uses of chrysotile do not constitute a detectable risk to human health,” Canada claimed, arguing that a ban would therefore unjustly restrict Canada’s trade rights.

31 Letter of Nov. 26, 2007 to ANDEVA from Pascal Dévaud, lawyer for the Chrysotile Institute
32 Castleman (2005), page 799
Canada was not so much seeking to strike down the ban in France, where the public would no longer tolerate asbestos and sales opportunities had disappeared; more than anything Canada was seeking to establish a ruling that would take away the right of developing countries to ban asbestos.

WTO panels are closed hearings, where almost all decisions favour unfettered trade over environmental and health concerns. This was a notably industry-friendly forum for Canada's attack on the right of France, or any other country, to exercise their own sovereignty regarding the banning of asbestos.

To back up its claim of “safe, controlled use”, Canada filed a confidential statement with the Panel. The statement asserted that asbestos product manufacturers “police downstream users in cooperation with the government” by regularly monitoring and reporting on their customers’ performance.

When asked at the hearing to provide an example of such policing of asbestos, Canada was unable to come up with a single example.33

In September 2000, the Panel dismissed Canada’s case, ruling that chrysotile asbestos is a proven carcinogen, that there is no safe level of exposure to chrysotile asbestos and that “controlled use” was not a realistic alternative, not having occurred anywhere in the world.

Canada did not give up. It appealed to the WTO Appellate Body and lost again. Ultimately, its case was dismissed.

Trade Threats Against South Africa

Even after a resounding defeat at the WTO, the Canadian government continued its efforts to threaten to use the WTO as a means to pressure other countries to reverse their decisions to ban asbestos.

In February 2006, Canada notified the WTO of its concern that South Africa’s planned regulations to ban chrysotile asbestos were not the “least trade restrictive” measures and that in “today’s regulated work practices, it is unnecessary to ban chrysotile to fulfill the objective of protecting human health.” WTO rules require countries to adopt policies that are the “least trade restrictive” possible.

Having lived through a long history of white domination and oppression, the African National Congress government was not amenable to letting Canada dictate its policies. It reminded Canada that the WTO had already ruled against Canada’s case on chrysotile asbestos, and said that it felt entitled to make its own decisions on how to protect its citizens’ health.

8) USING DIRECT POLITICAL INTERFERENCE TO CHANGE OTHER COUNTRIES’ POLICIES ON ASBESTOS

Chile

In 2001, when Chile announced that it would introduce regulations to ban asbestos in July of that year, Canada’s political interference took place at the highest level. On June 29, 2001, Prime Minister Jean Chrétien personally telephoned Chilean President Ricardo Lagos in an attempt to pressure him to abandon the prohibition on chrysotile asbestos.34

But citizens in Chile also have recent experience of oppression, and do not take kindly to such bullying tactics. On July 12, 2001, Chileans demonstrated outside the presidential palace calling on their President to resist Canada’s interference. They then went to the Canadian embassy and presented Canada’s ambassador to Chile with a letter for Prime Minister Chrétien, signed by the leaders of Chile’s trade union movement and environmental and asbestos victims’ organizations. The letter asked:

“Why is it necessary to place pressure on developing countries and on poor nations to accept a mineral that has been scientifically proven to pose a great threat to those who handle it? Risky and toxic products for Canadians will have an even greater impact in developing nations with poorly developed health and safety regulations and enforcement mechanisms.”35

33 Castleman (2005), page 802
35 Ibid, page 175
In an editorial the following day, the Toronto Star commented:

“Not only is it embarrassing to see Chrétien shilling for the asbestos industry, it raises troubling questions about Canada’s respect for the health and safety concerns of other countries.”

Brazil

Canada’s asbestos industry demonstrates notable vigilance in taking every opportunity to intervene in other countries’ affairs in order to silence those who call for asbestos to be banned.

In April 2001, the Director of the Asbestos Institute, Denis Hamel, wrote to the Brazilian Minister of Labour, Francisco Dornelles, requesting that he “take the necessary measures” to stop a labour inspector, Fernanda Giannasi, who is also founder of a Brazilian asbestos victims’ group, from speaking out about the numbers of people dying from asbestos and calling for it to be banned.

At around the same time, Ms. Giannasi was also being subjected to civil and criminal charges, as well as death threats, for her efforts to bring to public attention the asbestos tragedy in Brazil.

However, the letter from Canada’s Asbestos Institute was leaked, and a huge international outpouring of support followed. A few months later, Ms Giannasi was given the prestigious Claudia Award for Brazil’s Woman of the Year, and was elected a Fellow of the renowned Collegium Ramazzini.

Lebanon

In 1996 the townspeople of Ras-El-Metn, Lebanon held a peaceful sit-in and prevented asbestos-cement pipes from being used for their water and sewage systems.

The Canadian Embassy took action to promote use of asbestos-cement products in Lebanon, and in 1998 it organized a seminar entitled “The Responsible and Safe Use of Chrysotile Asbestos.”

Daniel Marchand, the Canadian Ambassador to Lebanon, opened the session by informing everyone that there is a scientific consensus that chrysotile can be used “safely.” He was followed by Denis Hamel who reassured delegates that the industry had a Memorandum of Understanding which prevented asbestos from being sold to companies that misused it.

9) OFFERING FALSE ASSURANCES

The Canadian government states that “A Memorandum of Understanding between the Government of Canada, as represented by the Minister of Natural Resources, and JM Asbestos Inc. and LAB Chrysotile Inc., was signed by all Parties on March 3, 1997. To this day, the chrysotile industry still does not export to companies that do not use chrysotile in a manner that is consistent with Canada’s controlled-use approach.”

In actual fact, this Memorandum of Understanding is meaningless, because the government and the industry do nothing to enforce it. In the face of indisputable evidence that asbestos use in the developing world is uncontrolled, the Memorandum of Understanding lacks credibility.

When confronted with explicit, documented evidence of chrysotile asbestos being handled without the “rigorous enforcement” of Canada-style regulations, which the government pretends exist, the government simply washes its hands of any responsibility and says that “implementation of domestic measures to ensure workplace health and safety is a sovereign responsibility of importing countries.”

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37 The Asbestos War, page 181
39 Official government response, April 2008, to Petition 226 from David Berliner to the Commissioner of the Environment & Sustainable Development
The assurance contained in the Government’s Memorandum of Understanding is fraudulent. It reflects hypocritical and heartless indifference to the lives of Canadian asbestos-exposed people in the developing world.

10) FAILING THE REALITY TEST

Canada tries to justify its sale of asbestos to developing countries through claims summarized as follows:

- Safe controlled use of chrysotile asbestos is possible, and is practiced around the world.
- The epidemic of asbestos-caused disease and death that is happening worldwide is because of bad working conditions, and lack of controls over the handling of asbestos in industrialized countries in the past. Such working conditions and lack of controls are no longer the case today in the countries buying Canada’s asbestos.
- Most asbestos sold today is encapsulated with cement, so that dangerous asbestos fibres are not released into the air.
- Other forms of asbestos are hazardous; chrysotile asbestos is not.

These justifications do not stand up to scrutiny. “Safe, controlled use” of asbestos has never been achieved anywhere in the world. Working conditions in the developing countries to which Canada ships its asbestos are as bad as anything ever seen in the past in industrialized countries.

Asbestos-cement materials do not safely “encapsulate” this toxin: the materials deteriorate over time; trees fall on buildings; typhoons and other calamities happen. People drill and saw through asbestos-cement sheets and pipes while building and renovating their homes and schools.

In developing countries, everything gets re-used again and again. Nothing is wasted. People have no way of knowing that the materials they are re-using contain asbestos and are hazardous.

“Safe controlled use” in Quebec

Quebec belongs to the affluent, industrialized world, with government regulations and controls to protect public health, a trade union movement, labour laws, high levels of literacy, an independent media, democratic government, technical expertise, resources and all of the other privileges we associate with wealthy countries.

If “safe, controlled use” is possible anywhere in the world, it would certainly be practiced in Quebec.

The Institut National de Santé Publique (INSPQ) is Quebec’s leading health authority. A June 2005 Report by the INSPQ, The Use of Chrysotile in Quebec, states that:

“The safe use of asbestos is difficult, perhaps impossible, for industries such as construction, renovation and asbestos processing.”

Referring to how well the government is keeping its commitment to keep track of where chrysotile asbestos has been placed, the report continues:

“The diversity of settings raises questions of the magnitude of the problem and the impossibility of documenting it, and the lack of a ‘memory’ of the places where this material was installed in the past.”

The report refers to the “under-reporting” of cases of asbestos-caused disease. It says that “the data on asbestos exposure in Quebec are incomplete, and difficult to obtain.”

The report also recommends that, because chrysotile asbestos is carcinogenic and its use difficult to effectively monitor or control, the Quebec Ministry of Health should oppose the policy of the Quebec government to promote increased domestic use of chrysotile asbestos.40

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40 INSPQ, The Use of Chrysotile in Quebec, June 2005
A 2004 INSPQ report found rates of mesothelioma among men in Quebec to be 9.5 times greater than for the rest of Canada and the rate for women to be amongst the highest in the world.\(^{41}\)

A 2008 report done for the INSPQ by researchers at the University of Montreal, documents that there is a failure of surveillance on asbestos exposure for construction workers in Quebec. It highlights the need for the government to set up a registry of buildings containing asbestos, and a registry of trades where there is potential exposure to asbestos.\(^{42}\)

Just as Canada was unable to provide the WTO with a single example anywhere in the world of “safe controlled use” of asbestos, it is likewise not being practiced in Quebec itself.

If safe controlled use is not possible in Quebec, which in international terms enjoys a high degree of social and economic advantage, who could expect that safe controlled use of Canada’s asbestos is happening in Bangladesh?

Who, with any integrity, could assert that developing countries have the resources to keep registries of all places asbestos has been installed; monitor levels of people's exposure to asbestos; or conduct and keep records of x-rays to detect whether people exposed to this toxin are falling victim to asbestos-caused disease?

### How Canada’s Asbestos is Used in Developing Countries

Canada exports 95% of its asbestos. Most of it gets shipped to India, Indonesia, Bangladesh and other Asian countries where it is mixed with cement to make asbestos-cement products, often sheets used for roofs.

The Tamil Nadu Asbestos Sheet Unit fabricates such sheets, using chrysotile asbestos from Canada and Zimbabwe. Photographic journalist P. Madhavan documented workers feeding asbestos from bags into a machine which splinters the fibres before they are mixed with cement.

None of the workers wore protective gear and dust was everywhere, noted Madhavan. There were no notices informing workers about safety measures, nor any training program to instruct them how to handle asbestos at less risk to their lives.\(^{43}\)

*Globe and Mail* journalist, Martin Mittelstaedt, and former *Globe & Mail* photographer, Louie Palu, reported similar conditions when examining how asbestos is being used on the ground in India:

“At one of the asbestos-cement plants Palu visited, run by U.P. Asbestos, he arrived unannounced and asked the manager for a tour. Here, there was ‘dust all over the place,’ he said, and fans blowing it about. No photographs were permitted, but on his way out Mr. Palu photographed workers with no protective equipment filing down asbestos-cement sheets.”\(^{44}\)

“Anyone who says there’s controlled use of asbestos in the Third World is either a liar or a fool,” says Dr. Barry Castleman, an independent consultant who was an expert in the WTO case against Canada.

### Women and Children Exposed to Asbestos Harm

It is not just workers in asbestos-cement factories in developing countries who are exposed to harm from Canada’s asbestos.

The World Health Organization has expressed particular concern over the use of asbestos cement in construction because the products are widely dispersed, deteriorate over time and pose a risk to people carrying out alterations, maintenance and demolition.

Usually, the first thing people do with asbestos-cement roofing sheets is to drill or cut holes in them, in order to attach them to a building. Families then live, often in cramped quarters, directly under the broken asbestos roof which sheds deadly carcinogenic fibres down on them for decades.

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\(^{42}\) INSPQ, *Surveillance de l’exposition à l’amiante dans les métiers de la construction* (*Surveillance of exposure to asbestos in the construction industry*), Beaudry, Bégin, Moldovana, Gérin, Faculté de médecine, Université de Montréal, Feb. 12, 2008

\(^{43}\) P. Madhavan, *Views from the Asbestos Front Line, in India’s Asbestos Time Bomb*, page 32

Nick Clark of Christian World Service reports how in Bangalore, India, many retailers did not even know that the roofing sheets they sold contained chrysotile asbestos. Others repeated the promotional information they had been given by suppliers: that asbestos-cement roofing is safe and causes no health problems.45

Most people purchasing the asbestos-cement roofing have no information whatsoever as to its hazards. They saw through it; their children play with discarded parts; they patch it up if it gets damaged in a storm; they cut holes in it; they re-use it. And they breathe in the dust.

Denying that Chrysotile Asbestos is Hazardous

The argument put forward by Canada and the asbestos lobby that chrysotile asbestos is, unlike other forms of asbestos, safe to use is not shared by a single scientific organization in the world.

In a soon to be published editorial, Dr. Leslie Stayner, one of the scientific experts appointed in early 2008 to the Health Canada panel on chrysotile asbestos, whose report the government has still not released, says:

“What should be truly embarrassing to the Canadian government and people is their position that exposure to chrysotile asbestos is safe and that there is no need to warn the developing countries that it exports to, about the hazards associated with its use. There is simply no scientific evidence to support this position. The banning of asbestos is the only means for preventing a tragic repeat of the epidemic of asbestos-related diseases that is still occurring in the U.S. and Europe in the developing countries that are currently importing and using chrysotile asbestos from Canada and other countries.”46

11) REFUSING HELP FOR POST-DISASTER ASBESTOS CLEAN-UP

After the 2004 tsunami in Asia, people pleaded for help to deal with the piles of asbestos-contaminated rubble still surrounding them years later. An emergency international meeting, organized by the U.N. Environmental Program, took place in September 2007.

At the meeting, a strategic plan was presented, titled Sound Management of Asbestos Wastes with emphasis on Measures to be taken in Disaster-prone Areas.47

The plan included immediate expert assistance for the tsunami victims, and an ongoing mechanism to provide emergency asbestos clean-up after disasters in any part of the world. It also proposed discouraging the use of asbestos waste and promoting the use of safer substitutes in areas prone to earthquakes and other natural disasters.

Canada opposed any measure that would discourage use of asbestos or draw attention to its hazards, since this might have a negative effect on Canada’s asbestos sales. The Canadian delegation, along with the delegations from Russia and India, refused to let the plan go ahead, saying “More research is needed” as to whether asbestos is hazardous.

No one in the world, not even the asbestos industry, denies that breathing in dust from asbestos debris is a threat to human health. Yet, in order to protect the asbestos industry, Canada killed the emergency assistance plan. The plan was due to start in 2008. Thanks to Canada’s efforts, “The Working Group agreed that it should not make any decisions on asbestos at its current session.”48

Once again, the Canadian government put the interests of the asbestos industry ahead of protecting people’s lives.

45 N. Clarke, Potential Health Hazards of Asbestos Cement Roofing for India’s Poor, in India’s Asbestos Time Bomb, page 36
47 UNEP, Proposed workplan on the sound management of asbestos wastes with emphasis on measures to be taken in disaster-prone areas, UNEP/CHW/OEWG/6/23
12) DENYING HELP TO CANADIAN ASBESTOS VICTIMS

“If Canada was not so hell bent on peddling asbestos to developing countries, the government would probably do a better job of protecting people at home,” says Barry Castleman.

While other industrialized countries are finally acting to deal with their asbestos disease epidemics, the Canadian government is lagging behind and showing a callous indifference to Canadian victims.

Raven ThunderSky

In the late 70s and 80s the federal government promoted the use of Zonolite insulation. It gave grants to home-owners who installed it, and the Department of Indian Affairs placed it in housing on First Nations reserves and army bases.

It was later learned that the Zonolite, which was made from vermiculite ore drawn from W.R. Grace's Libby mine in Montana, contained asbestos.

Raven ThunderSky lived in a house on the Ojibwa reserve, 350 kilometres from Winnipeg, in which the Department of Indian Affairs had placed Zonolite. Four members of Ms. ThunderSky’s family have died from mesothelioma, another died from lung cancer and she herself has asbestosis.

For years, Ms. ThunderSky lobbied the federal government to take action to protect others from harm caused by asbestos-laden Zonolite.

The government refused to act. So in 2005 Ms. ThunderSky filed a lawsuit in the Canadian courts against W.R. Grace’s Canadian subsidiary and against the Canadian government. Her suit asked for damages, and for the government to send out an information package to Canadians about the dangers of Zonolite, which could be in their attics.

The government has fought relentlessly and successfully to prevent her case from being heard, saying that she should pursue her complaint in the U.S.

“I want the prime minister to call an inquiry before I’m fed to a foreign court system,” said Ms. ThunderSky. “I want to know how it is they allowed five of my family members -- five Canadians -- to die alone and abandoned.”

Lack of Surveillance and Support for Victims

Asbestos-related disease is the most significant contributor to occupational mortality in Canada.

The government has not, however, set up a national registry to track the increasing number of Canadians who are falling sick and dying from asbestos-caused disease. Nor has the government taken any action to create a public registry of buildings that contain asbestos, so that greater vigilance can be shown when these buildings deteriorate and so that asbestos can be properly removed if it is a threat to public health.

The majority of workers who are suffering from asbestos-caused disease are not even receiving the help they are entitled to receive from provincial compensation boards. This failure has serious consequences for individual workers and their families, as well as for the general public.

It means that workers are abandoned and employers are not held accountable. And it means that hundreds of millions of dollars of treatment costs, that should be covered by the corporate compensation insurance system, are instead paid by the public health care system.

49 CBC news, February 22, 2008
50 J. Brophy, M. Keith, J. Schieman, Canada’s Asbestos Legacy at Home and Abroad, Int J Occup Health, Vol 13/No 2, April/May 2007
13) MAKING USE OF ACADEMICS

Unfortunately, academics have been part of the Canadian government’s efforts to promote chrysotile asbestos as a safe, desirable product for the developing world.

One academic who has been central to the government’s asbestos campaign over the years is Prof. Michel Camus of the University of Montreal.

In a letter to the *Canadian Medical Association Journal*, Prof. Camus wrote: “It seems desirable to caution the countries to which we export such materials and products against incorrect uses and careless exposures. Such cautions would apply to both asbestos and substitute products. However, it is not obvious how to do this without being paternalistic. This problem may be addressed by better labelling, cooperative education, training programs and improvements in the ‘traceability’ of products. International laws might be enacted to hold producers and exporters responsible for the detrimental health effects of their products.”

Prof. Camus’ concern not to be “paternalistic” shows sensitivity. He did not, however, demonstrate publicly a similar concern about paternalism when he was part of the Canadian government delegation pursuing its case before the WTO tribunal, when Canada sought to eliminate the right of countries to make their own sovereign decisions to ban asbestos, nor when he was an official member of the Canadian delegation that refused to allow countries their right under the Rotterdam Convention to be informed that chrysotile asbestos is hazardous.

Prof. Camus did not write to the CMAJ expressing concerns over Canada’s political interference into the sovereign right of Thailand and South Korea to require warning labels to be placed on bags of asbestos. Nor did he apparently object to the paternalistic interference of Canada to try to force South Africa and Chile to drop their planned laws banning asbestos.

Prof. Camus was the administrator in charge of the Health Canada study examining chrysotile asbestos that was completed in March 2008, which still has not been released. Dr. David Bernstein, sat on the panel which carried out the study, as did Dr. Graham Gibbs, who has also done international work for many years for the Canada’s asbestos industry.

While Health Canada asked members of the panel to fill in disclosure forms to ascertain whether they had any financial conflicts of interest, such as being funded by the chrysotile asbestos industry, the department has never released those forms or any general information regarding conflicts of interest by panellists, nor has the Minister of Health released the report submitted by the panel.

14) CHEERLEADING AND DOUBLE STANDARDS FROM CANADIAN POLITICIANS

Canada’s policies on asbestos have nothing to do with science, health or integrity. They relate to the politics of votes in Quebec in Canada.

While both the New Democratic Party (NDP) and the Green Party support banning asbestos, the Conservative, Liberal and Bloc parties engage in an enthusiastic endeavour to show Quebec that they are the most fervent chrysotile asbestos cheerleaders and fully support marketing it to developing countries.

In a 2006 House of Commons debate on whether taxpayers should give $250,000 to the Chrysotile Institute, Liberal MP Roy Cullen trivialized chrysotile asbestos by comparing it to Bavarian sausages. “Do we ban Bavarian sausages? They are probably carcinogenic as well.”

In the same debate, Bloc MP André Bellavance stated: “I also must point out that there is no serious study showing that chrysotile, used safely, represented any health risk at all. The only people who claim to have studies showing the contrary are (…) the petrochemical industries that manufacture chrysotile substitutes.”

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51 M. Camus, letter to CMAJ, Oct. 30, 2001: 165(9), page 1193
52 M. Camus, letter to Kathleen Ruff, March 17, 2009.
Bellevance compared chrysotile asbestos to cognac, saying: "This is like telling someone to stop drinking cognac, an alcohol, because it is dangerous to drink ethanol, another alcohol. What we are talking about tonight is the exact same thing. Of course one has to drink cognac in moderation and be careful to drink prudently, just as one must use chrysotile safely."

Pat Martin, an NDP Member of Parliament who worked at an asbestos mine and has led a lonely fight in the House of Commons for Canada to ban asbestos, was subjected to derision and insults. He was accused repeatedly of being a “demagogue”, being “in bad faith” and for practicing “partisan politics” for his opposition to Canada’s continued export of asbestos.

**Blatant Double Standards**

Public Works Canada is the federal government department responsible for managing buildings on behalf of the Canadian government.

Bloc MP André Bellavance noted with chagrin during the House of Commons debate on funding the Chrysotile Institute that when Public Works Canada calls for tenders, it always stipulates that contractors must not use chrysotile asbestos. There are very strict standards in that regard. 54

Canada Post likewise forbids the use of chrysotile asbestos in its buildings.

The government of Canada spends millions to market asbestos to developing countries, but it will not allow it to be used in government buildings.

**Some Children Matter; Others Matter Less**

The Conservative Party recently mailed flyers to Canadian households, informing them that a top priority for the Conservative government is to ban harmful chemicals in order to protect Canadian children.

The Conservative government shows no such concern for children in developing countries who are being exposed to a hazardous chemical: Canadian asbestos.

The Liberal Party, likewise, shows no concern.

When it formed government, the Liberal Party supported the asbestos industry. It took the case to the WTO tribunal, seeking to remove the right of countries to ban asbestos.

The leader of the Liberal Party, Stéphane Dion, promotes himself as someone who will adopt courageous new policies, based on integrity and the environment. He states that he will take action to protect people from hazardous chemicals.

Mr. Dion tries to avoid the issue however, when it comes to asbestos.

In an email to a coalition of labour and environmental groups calling for asbestos to be banned, Mr. Dion did not take a stand on the continuing export of asbestos, saying that this is an issue “that inspires passionate opinions”, and that the Liberal Party will continue to study the matter. Further, Mr Dion raised the issue of conflicting data on asbestos. 55

When it comes to the Rotterdam Convention, neither Conservative leader Stephen Harper nor Liberal leader Stéphane Dion support the right of countries to be informed that chrysotile asbestos is a hazardous chemical.

This is a “sensitive issue”, says Mr. Dion’s senior policy advisor, Dahlia Stein. 56 In fact, the real sensitivity is federal politicians’ fear of losing votes in Quebec. Political expediency is more important than health, the environment or integrity.
Canada’s one remaining, operative asbestos mine is in the Thetford area of Quebec. It is a single-industry area. As Canada’s asbestos sales have diminished in recent years, only around 700 miners continue to work, sometimes part time. Wages have been cut to around $14 an hour.

Single-industry towns hold workers and communities hostage. The Canadian government has recently come out with funds to assist single-industry towns facing difficulties. The Quebec asbestos-mining community was not included.

Why not? Thetford’s asbestos miners should be offered funding and assistance to create alternate economic initiatives. Funds should be allocated for asbestos-waste clean-up, so that the area can attract other businesses.

It is time for the leaders of Canada’s two major political parties to stop what Barry Castleman describes as the Canadian government’s “exploitation of ignorance and poverty for a quick buck. …What began as a commercial lie through most of the past century has become an official lie.”

It is time for some political integrity.

15) REPEATED ATTEMPTS TO SABOTAGE A U.N. ENVIRONMENTAL CONVENTION

The Rotterdam Convention deals with environmental justice.

As use of all forms of asbestos has been either banned or severely restricted in industrialized countries, the asbestos industry, just like its tobacco industry cousin, is now aggressively targeting developing countries and Eastern Europe to increase sales and profits.

The industry knows that asbestos can be cheaply used in these countries, because there are no troublesome safety regulations or controls. Most of the workers are impoverished day-workers who have not been informed of the dangers, and who have no say over working conditions. Few, if any of them, have any chance of having their illnesses diagnosed as occupational in origin, much less win compensation by industry for themselves or their families.

The workers, their families and their communities continue to live alongside asbestos waste dumps and toxic pollution, without any protection at all.

Governments of poor countries have few resources available to safely monitor and control hazardous chemicals imported into their country. At the same time, their overburdened health systems deal with the tragic public health consequences.

The Rotterdam Convention addresses this injustice, whereby the most vulnerable people in the world are the ones being exposed to the greatest risk of harm from hazardous chemicals.

Under the Convention, extremely hazardous chemicals and pesticides that have already been banned or severely restricted in various parts of the world, and that meet all the scientific criteria of the Convention, are put on a special list.

Countries must then first obtain “Prior Informed Consent” before they can export these hazardous products to another country. In other words, the Convention simply requires that intended recipient countries be informed of the hazards and have the right to refuse entry of the hazardous chemical, if they believe they are not able to handle it safely.

The Convention’s expert scientific committee has repeatedly called for chrysotile asbestos to be placed on the list.

Canada, believing that this might interfere with its asbestos sales, has refused to allow chrysotile asbestos to be listed as a hazardous chemical. With the support of a handful of other asbestos-allied countries – Kyrgyzstan, Iran, the Ukraine, India and Peru – Canada blocked the move of more than 100 countries attending the Rotterdam Convention Conference in 2006, and refused to allow chrysotile asbestos to be listed.

“Chrysotile meets all the criteria for inclusion,” said Anita Normark, General Secretary of Building Workers International, “so it is quite outrageous that this is being blatantly and persistently blocked by Canada, simply because they can. Canada wants to protect and expand their market in developing countries by misinformation and deception.”

“Canada had all but destroyed the Convention,” state McCulloch and Tweedale.

57 Castleman (2005), page 794
58 McCulloch & Tweedale (2008), page 272
Canada has spent over $50 million propagating the fiction that chrysotile asbestos is a safe and desirable product for developing countries to use. It does not reflect well on our ethical values as a country when we then deny developing countries their right, under the Rotterdam Convention, to be informed of its hazards?

Quebec places high importance on the issue of Quebec sovereignty within its borders. Prime Minister Harper places high importance on Canada’s sovereign right to protect its borders in the Arctic. How is this consistent with the refusal of both the Quebec and Canadian governments to respect the sovereign right of countries, under the Rotterdam Convention, to control their borders with regard to the import of hazardous chemicals and pesticides?

In refusing to allow chrysotile asbestos to be listed as a hazardous chemical, the Quebec and Canadian governments do not have the support of a number of leading health figures in Quebec itself.

In August 2008, no fewer than 25 health professionals from the Universities of Montreal, Laval and Sherbrooke, as well as from public health institutions in Quebec, signed an unprecedented petition expressing their support for the listing of chrysotile asbestos under the Rotterdam Convention. The health professionals stated:

“We join with international authorities, all agreeing that airborne chrysotile asbestos causes a potentially fatal lung scarring disease, asbestosis, as well as lung cancer, and malignant mesothelioma. We do so at this time because the accumulated body of evidence to date would make us, as professionals and researchers in public health, remiss in failing to do so. Our obligations include protecting the public interest in Quebec, in Canada and internationally. In so doing, we believe that we are serving Quebec and Canada well at this historic moment as the two-year review of the Rotterdam Convention in Rome, Italy, October 27-31, 2008 approaches.”

The Association pour la santé environnementale du Québec / Environmental Health Association of Québec, has also expressed its support for listing chrysotile asbestos, as has Quebec’s leading human rights organization, La Ligue des Droits et Libertés.

Amnesty International Canada has joined in the call for the government to reverse its position, which now threatens to destroy the Convention. Alex Neve, Secretary General of Amnesty International Canada, states:

“As a country committed to human rights, Canada has a responsibility to promote and respect the human rights of its own people and of people in other countries. That includes the right of everyone to the enjoyment of the highest attainable standard of health. In living up to that responsibility Canada should stand behind recommendations of the Rotterdam Convention’s Chemical Review Committee and fully support the listing of hazardous chemicals that have been proven to impair enjoyment of the right to health.”

Around the world, in fact, people are deeply offended by Canada’s behaviour.

On September 10, 2008, the tenth anniversary of the adoption of the Rotterdam Convention, over 150 respected leaders in the scientific, health and academic communities around the world signed a World Call of Conscience to the Canadian Prime Minister. They expressed deep dismay that Canada is preventing the listing of chrysotile asbestos as a hazardous chemical under the Rotterdam Convention:

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59 Petition, Quebec, Canada, August 2008
“If such a clearly hazardous chemical cannot be listed under the Convention, what can?…This is not in keeping with the values Canada claims to uphold in the world.”

At the moment of the writing of this report, Prime Minister Harper refuses to say whether Canada will once again block the listing of chrysotile asbestos as a hazardous chemical when the Rotterdam Convention Conference of the Parties takes place October 27-31, 2008.

**Conclusion**

As McCulloch and Tweedale comment in their history of toxic corporate crime, “The most striking feature of the asbestos tragedy – and the most poignant – is that there has never been any shortage of information. What has been lacking are the social and political safeguards to enable that knowledge to be used for public benefit.”

We are at a tipping point in Canada. By putting political ambition ahead of human decency, our political leaders are not representing the values of Canadians or the people of Quebec.

Few, if any, Canadians would want our public funds used to help sue a victims group such as ANDEVA, or to have warning labels removed from asbestos so that workers are put at greater risk of harm. Nor is it likely that Canadians would oppose a plan to help clean up deadly asbestos debris surrounding survivors of tsunamis or earthquakes.

Canadian taxpayers do not want their tax money used to support politicized science that denies global warming and the harm caused by asbestos. Nor do they want to deny countries their right under the Rotterdam Convention to be informed that chrysotile asbestos is hazardous, and that it can kill them.

But our government is doing these things in our name.

Asbestos “tells you everything you need know about the reality of our economic system, what it values and what it fails to protect,” says Jim Brophy, who as an occupational health expert in the asbestos-contaminated Sarnia region of Ontario has too many times seen up close the human tragedy of asbestos-caused illness and death.

We must, as Canadians show what kind of people we are. We must, once and for all, tell our political leaders that enough is enough – that there have been too many lies and too much corruption and heartlessness.

The Canadian government must without delay:

• stop funding the Chrysotile Institute
• introduce legislation to ban the use and export of asbestos
• create a national registry for asbestos disease
• provide just and adequate transition assistance to workers and communities involved in the asbestos industry
• ensure that fair compensation is provided to all people across Canada with asbestos-related disease
• take responsibility for harm caused by asbestos placed in houses on First Nations reserves and on army bases
• support the listing of chrysotile asbestos under the Rotterdam Convention

Says Bob Sass, one Canada’s great health and safety leaders: “To fail to act makes us bystanders to a criminal policy.”

Most moral, religious and human rights teachings share a fundamental value: that of doing no harm.

It’s time to stop exporting harm. It’s time to stop Canada’s asbestos trade.

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60 McCulloch & Tweedale (2008), page 275
World Call of Conscience to Prime Minister Harper

TO STOP OBSTRUCTING THE ROTTERDAM CONVENTION

To Prime Minister Harper:

September 10 marks the tenth anniversary of the adoption of the U.N. Rotterdam Convention on the Prior Informed Consent Procedure for Certain Hazardous Chemicals and Pesticides in International Trade. Canada ratified this Convention in 2002. Instead of being a day of pride for Canadians, September 10 is a day of shame because of Canada’s continued sabotage of the Convention. We urgently call on you and your government to stop blocking the Rotterdam Convention and allow it to do its important work of protecting human lives.

As you know, the Convention gives countries a legally binding right to be informed about, and to refuse, hazardous chemicals and pesticides. The right to prior informed consent is a right that is recognized and enforced in Canada. And it is a right that Canada promised to uphold globally when it ratified the Rotterdam Convention in 2002. This basic right is crucial to protect people and the environment from harm, especially people in poor countries where increasingly these toxic substances are being shipped. The Convention is about environmental justice. It is based on respect for the right of countries to control their own borders with regard to the import of hazardous chemicals and pesticides.

With deep dismay we note the destructive role that Canada has played in vetoing the recommendation of the Convention’s expert scientific body to put chrysotile asbestos on the list of hazardous chemicals, even though chrysotile asbestos meets every scientific and legal requirement of the Convention and has been banned by over forty countries. If such a clearly hazardous chemical cannot be listed under the Convention, what can?

Canada’s obstruction, which had the support of five other countries (Kyrgyzstan, Iran, India, Ukraine and Peru) out of the more than one hundred nations that have ratified the Convention, has forced the Convention Secretariat to circulate options for dismantling the Convention and creating a double standard with a Canada asbestos exemption.

If a double standard system of exemptions is created, the global right to know about hazardous chemicals and pesticides will be destroyed and Canada will have played the lead role in its death.

This is not in keeping with the values Canada claims to uphold in the world. This would be an ugly smear on Canada’s reputation.

In six weeks’ time, at the upcoming Rotterdam Convention meeting in Rome, the recommendation by the expert scientific body to put chrysotile asbestos on the Convention’s list of hazardous chemicals will once more be put forward. If, once more, Canada blocks it, the Convention will have to be dismantled.

At this critical moment, we call on you, as Prime Minister of Canada, to show responsible leadership and end Canada’s obstruction of the Convention.

We call on you to uphold Canada’s legal and moral commitment to the global right to be informed about hazardous chemicals and pesticides.

SIGNED:

- Dr J.C.A. Davies, Professor Emeritus, University of the Witwatersrand, Johannesburg, South Africa
- Dr Ronald B. Herberman, MD, Director, University of Pittsburgh Cancer Institute and UPMC Cancer Centers, Associate Vice Chancellor for Cancer Research, Professor of Medicine and Pathology, University of Pittsburgh, U.S.
- Jimm Simon, National President, Canadian Cancer Society

Appendix I
- Barb Whylie, Chief Executive Officer, Canadian Cancer Society
- Dr. David Suzuki, Co-founder, David Suzuki Foundation, Vancouver, Canada
- Dr David C. Christiani, MD, MPH, MS, Professor, Harvard School of Public Health; Professor, Harvard Medical School; Physician, Massachusetts General Hospital
- Dr Richard A. Lemen, M.S.P.H., Assistant Surgeon General, United States Public Health Service (ret’d)
- Prof. Devra Davis, Director of the Center for Environmental Oncology, University of Pittsburgh Cancer Institute
- Dr Arthur Upton, former Director, U.S. National Cancer Institute; professor at New York University, U.S.
- Dominique Peshard, Président, La Ligue des Droits et Libertés, Québec
- Dr Rose H. Goldman, M.D., M.P.H., Chief, Occupational & Environmental Medicine Cambridge Health Alliance; Associate Professor of Medicine, Harvard Medical School; Associate Professor of Environmental Health Sciences, Harvard School of Public Health, U.S.
- Stephen Lewis, Professor in Global Health, McMaster University, Canada
- Dr Bernard D. Goldstein, Professor of Environmental and Occupational Health; Dean Emeritus, Graduate School of Public Health, University of Pittsburgh, U.S.
- Dr Colin L. Soskolne, PhD, FACHE, Professor (Epidemiology), Department of Public Health Sciences, School of Public Health, University of Alberta, Canada. President (2007-2009), Canadian Society for Epidemiology and Biostatistics, Canada.
- Professor Elihu D Richter MD MPH, Hebrew University-Hadassah School of Medicine, Jerusalem, Israel
- Dr T. K. Joshi, Director Occupational and Environmental Medicine Programme, Centre for Occupational and Environmental Health, New Delhi, India
- Dr Philip J. Landrigan, MD, MSc, Professor and Chairman, Department of Community & Preventive Medicine; Professor of Pediatrics; Director, Children's Environmental Health Center, Mount Sinai School of Medicine, U.S.
- Meyer Brownstone, Professor Emeritus University of Toronto, Chair Emeritus Oxfam Canada
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- Dr Louis Drouin, Responsable secteur Environnement urbain et Santé, Direction santé publique, Montréal, Québec, Canada
- Dr Yamina Tahmi, Résidente en santé communautaire, DSP Montérégie, Longueuil, Québec, Canada
- Dr Yv Bonnier-Viger, Professeur de clinique, Médecine sociale et préventive, Université Laval, Québec, Canada
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- Theresa McClenaghan, Executive Director and Counsel, Canadian Environmental Law Association, Canada
- Dr V. Ramana Dhara, MD, ScD, MPH, Adjunct Clinical Professor, Morehouse School of Medicine & Rollins School of Public Health of Emory University, Atlanta, U.S.
- Pastor Peter Lysy, Theological Advisor of Protestant Entrepreneurs in Bavaria, Germany
- The Very Reverend Christian Schreiner, Dean and Rector of Quebec, Anglican Church of Canada

* Institutions listed for identification purposes only.