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Struggle Over Black Lung Disease

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Digging Our Own Graves
Coal Miners and the Struggle Over Black Lung Disease

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ABSTRACT

The *Journal of Appalachian Health* is committed to reviewing published media that relates to contemporary concepts affecting the health of Appalachia. Coal mining and black lung disease have long been a central topic of both political and health communities in Appalachia. The book, *Digging Our Own Graves* (Coal Miners and the Struggle over Black Lung Disease) by Barbara Ellen Smith, is a well-known title, now updated; its newest edition is reviewed.

Keywords: Appalachia, black lung, coal workers' pneumoconiosis, book review

MEDIA TYPE: BOOK

CITATION

Smith BE. *Digging our own graves: Coal miners and the struggle over black lung disease*. Haymarket Books, 2020

Cost: \$19.95 paperback, \$18.99 e-Edition, \$41.66 Hardcover

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ABOUT THE REVIEWER

Michael McCawley, PhD, is an Associate Professor at West Virginia University in the School of Public Health. He is also a retired researcher with the National Institute for Occupational Safety and Health. Most recently he was a panelist for the National Academies of Science, Medicine, and Engineering report on Monitoring and Sampling Approaches to Assess Underground Coal Mine Dust Exposures, investigating the causes of the recent increases in black lung cases seen in the Appalachian coal fields.

ABOUT THE AUTHOR

Barbara Ellen Smith is the author of a number of articles and books on labor struggles, especially in Appalachia. This book marks its second edition with Smith having added two new chapters to update the original, and many would say seminal, work on the history of black lung disease in Appalachian coal miners. Smith is also an Emerita Professor at Virginia Tech and currently resides in Charleston WV.

THE REVIEW

The book, *Digging Our Own Graves* (Coal Miners and the Struggle over Black Lung Disease) by Barbara Ellen Smith, is a well-known title, now updated and published in its newest edition. It is an unflinching telling of the history and struggles by underground bituminous coal miners in Appalachia for the protection and compensation they feel is due them.

It is clear that Smith is firmly in their court. The history she tells is compelling reading, especially for those outside Appalachia, where the story is likely to be novel to the reader. Coal companies at the beginning of the twentieth century and throughout much of its first half held sway in the hollers (valleys) of Appalachia. The miners often felt as if they were chattel, referring to themselves on occasion as slaves, as Smith tells it. The central curse looming over all their hardships was “black lung,” a term which Smith consciously uses instead of coal workers pneumoconiosis (CWP), referring to a fibrotic disease of the lung. She

relates miners' views of what they believed to be ineffectual union efforts to stem the tide of disability the disease causes. She also reports on miners' frustration over medical waffling in accepting what the miners consider to be clear evidence of the disease in their bodies and recalcitrant enforcement by the government of the regulations meant to limit the cause. Local activism surged as a response to those issues in the coal regions in the 1960s and 1970s. Nurses from the small black lung clinics dotting the region and from the union medical funds assisted in caring for miners many of whom were jobless and too sick to work. Their illness and joblessness due to a job done so productively it ironically increased their exposures and assured their disability.

Smith points to miners' complaints with the doctors and epidemiologists in tracking disease. However, she does acknowledge the work done by one physician who alerted all concerned about a disturbing reversal at the beginning of the 21st century in the steady downward trend of disease that had been seen in 1980's and 90's. She also points out the legitimization of a broader definition of black lung the National Institute for Occupational Safety and Health (NIOSH). This definition, along with updated recommendations for exposure limits and updated criteria documentation for coal mine dust (in which this reviewer had a small part) led to the subsequent updating of regulations. NIOSH followed up, as well, with an investigation into the reported increase in disease, which spurred a National Academies of Sciences, Medicine and Engineering report to Congress in 2018 on the underlying causes (for which this reviewer was a panelist) on which Congress has yet to substantially act.

Smith reports that the activists want a definition of black lung that pushes the definition of disease beyond a purely physical event to "...encompass the social relations of the coalfields (p. 170)." In Smith's explanation, "(miners and their families')... broad, experiential definition of disease contrasts vividly with the medical construction of a single , clinical entity, CWP, and the associated emphasis on a single diagnostic tool, the X-ray(p. 170)."

What Smith seems to be indicating is that the miners believe they are owed compensation not only for the limited definition of disease the law allows but also for the general conditions, dangers and impairments they have suffered. This broadened definition of the disease acknowledges, in name, the ramifications of a definite societal need for the benefits of a coal economy. While this belief may seem, to those unfamiliar with the coal fields of Appalachia, to be tinged with irrationality, the miners seem to believe that the position in which they find themselves daily is absurdly out of balance. Smith's point is that their demands seek to restore that balance. This reviewer's conversations with the

miners and those heard during the National Academies' meetings supports that statement. Barbara Ellen Smith's retelling of the history of Appalachian underground coal mining, has made the case that the miners are in the fight for the long haul. It does, after all, appear to be the fight of their lives.

Relevance to Health in Appalachia:

Black lung disease, also known by its medical term, coal workers' pneumoconiosis, has long been a hotly debated and central topic of both political and scientific communities in Appalachia. In some ways it is the lock on the shackles that ties the working class in Appalachia, inseparably, to the coal mining industry. It is discussed in contrary terms as both a scourge and as a benefit, depriving many of the retired miners of the ability to enjoy the benefits that compensation for the disease was to provide by robbing them of their health. Most recently the debate has become intensely focused on the sudden rise in the rates of disease, reversing a previously decades-long downward decline in the trend. Adding to the anxiety the upward trend in disease rates causes, is the looming specter of a permanent decline in the future production of coal that could provide compensation for the now increased rates of those with the disease and those who may be developing the illness. It is the coal miners, the past and proud symbol of Appalachian productivity, who find themselves chained, perhaps, to this foundering vessel, without a key to unlock the shackles of disease and unemployment. This book seems to offer the possibility of a very bleak prospect for the future, indeed.