

Death of the Asbestos Industry

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It's almost impossible to comprehend, but little more than a quarter-century ago, asbestos was still referred to as the "magic mineral." The dozen or so major corporations that were major asbestos miners and/or producers of asbestos-containing building materials, such as Johns-Manville, Cetrain-Teed, GAF, National Gypsum, and Raybestos-Manhattan, were rich, sassy, and riding high. Asbestos was used everywhere, in floor tile, in pipe, in brake linings, in a dozen different types of insulation, in acoustical tile, in house siding. It was in our homes, our schools, the places we worked, our cars and trucks, our planes, our ships ... everywhere. If there was a dark cloud on the horizon, it might be that housing starts were down or commercial construction was slowing. A handful of scientists in the U.S., Great Britain, and South Africa were starting to uncover some disturbing things about the consequences of inhaling too much asbestos fiber, but few were listening to their concerns.

Overview

Today that industry is dead. The major asbestos corporations have either been driven into bankruptcy by billions upon billions of dollars in liability claims or have long since moved into other ventures, abandoning the use of asbestos altogether in most products. Once flourishing asbestos mines in Canada, the United States, and southern Africa lie abandoned or are operating at a fraction of their previous output. Where it was once treasured, it is now dreaded. A multibillion-dollar industry has arisen for the sole purpose of removing it from wherever it is found. The Environmental Protection Agency (EPA) has even proposed banning its use in any product anywhere in the United States, but was rebuffed by the courts on a technicality.

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What happened? What drove that once mighty industry into the dust? It's simple. During a relatively short period of time from the mid-1960s through the early 1970s, the "magic mineral" was exposed for what it really was - probably the most hazardous industrial material ever unleashed on an unsuspecting world. I know. I was there.

The Right Place at the Right Time

In June 1965 I took a job as an assistant editor in the public relations department of the Johns-Manville Corporation in New York City. The man who hired me, William P. "Bill" Raines, the head of public relations, had recently joined J-M from the Koppers Company in Pittsburgh. Like myself, he had done his undergraduate work at the University of Pittsburgh and had worked on the school newspaper.

My job was not very demanding. I was the number two man on the company's monthly employee magazine. Mostly I traveled around the country from J-M plant to J-M plant, taking pictures and interviewing plant personnel for stories on a new product line or new plant addition. If nothing else, I got to know the company pretty well: where asbestos was used, how it was handled, what products it was in and why, although it never occurred to me at the time how valuable that knowledge was to become in later years. In 1967 my boss was promoted to head of all J-M publications and I was given the editor's job on the employee magazine. Life was fine and uncomplicated. And then it happened.

In the late summer of 1968 I was called into the office of Jack Solon, who was Raines's boss and vice-president for advertising and public relations. Raines was there, too. Solon said he knew I had specialized in science journalism and he wondered if I would be interested in leaving the magazine and joining him and Raines to work on a new problem that had recently arisen in the company. He asked me whether I had ever read anything in the press about recent allegations regarding the safety of asbestos. I said I thought I recalled seeing an article or two but since Manville's name was not mentioned, I didn't pay much attention to them. He assured me it was time to pay attention. I left Solon's office with a new but ambiguous title, coordinator of special projects. My first take on my new assignment was to learn all I could about the asbestos-health issue. I discovered a long and interesting story.

History of the "Magic Mineral"

To begin with, asbestos is not synthetic: it is a mineral mined from the earth, generally from open-pit mines. There are three commercially valuable types of asbestos: chrysotile, which comes primarily from mines in Canada and a few

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now closed, in the United States; and the two so-called amphibole varieties, crocidolite and amosite, which are mostly found in the southern part of Africa.

China and the former Soviet Union also contain sizable deposits of asbestos, but they play little part in our tale. Some chrysotile asbestos will be found wherever there are outcroppings of a form of rock called serpentine, but these are not commercially useable. These outcroppings can be found in almost every state in the U.S. Practically the entire northern half of California rests on a bed of what is referred to as "crud grade" asbestos ore. While totally unusable, it is the main reason why California cities such as San Francisco and Sacramento have the highest levels of asbestos in their drinking water of essentially anyplace in the world. Rain put it there by washing it out of the ground and into the drinking water. Wind and erosion also release small but detectable quantities of asbestos into the air. It has even been found in ice samples dating back thousands of years. It is everywhere.

What made asbestos so valuable was its ability to be separated into long silky fibers that could be woven or wound into a wide variety of products; and it is practically fireproof. The word asbestos, in fact, comes from the ancient Greek and means "unquenchable," not because it wouldn't burn but because when used as wicks for oil lamps, it wouldn't go out or burn down. To this day I keep a chunk of asbestos ore on my desk. To illustrate its attributes I pull a few fibers and hold them over a cigarette lighter. Far thinner than a human hair, the fibers will glow bright red in the flame, but not burn or be consumed. It is the fineness and near indestructibility of the fibers that made asbestos so valuable, and, as it turned out, so lethal.

The first indications that there might be something amiss with the "magic mineral" arose in the years prior to the First World War in Great Britain. In the late 1940s, reports, once again from England, began appearing in the medical literature linking asbestos exposure to an elevated risk of lung cancer among heavily exposed workers, primarily in the British asbestos textile industry, where conditions were recognized to be particularly dusty. While efforts were undertaken to reduce exposures, it was not known how much asbestos was "too much."

In the United States and Canada, the industry was sufficiently alarmed by the reports crossing the Atlantic from England that it commissioned a study of lung cancer among the Quebec asbestos miners. It was assumed — incorrectly, as it later turned out — that asbestos miners would have the highest exposure of any group of asbestos workers, including the textile workers, and that if a problem were to be found, it would be found in the Quebec mines. The study, which was

Health Problems?

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completed in 1955, found only a handful of cases and concluded that whatever was going on in England it wasn't happening here.

Complacency was finally shattered in the early 1960s when reports started surfacing in many countries of an exceedingly rare cancer of the lining of the chest or the abdominal cavity. It was called mesothelioma. Not only was it being found among asbestos workers, but it was also showing up in communities adjacent to asbestos mines and factories, and among the families of asbestos workers — people whose only exposure to asbestos was the dust on the clothes worn home from work. Most of the cases being reported were in Great Britain and South Africa, but, unlike lung cancer, because there were no known causes of mesothelioma other than asbestos exposure, it was difficult to ignore.

Too Little Too Late?

In the United States, additional dust control equipment of varying degrees of sophistication began to be installed in plants from coast to coast. But was it enough, and was it too late? The problem was, no one knew for sure how much dust was too much, nor, in the United States at least, were there standards that were enforceable in all plants and mines nationally even if someone did come up with a safe exposure level that everyone could agree upon. The basic law governing exposure to occupational hazards in the U.S. was at that time the Walsh-Healey Public Contracts Act, which had been passed in the 1930s but applied only to those companies doing business with the U.S. government. Because there were no inspections nor record-keeping procedures enforceable under the law, compliance was for all intents and purposes voluntary. The standards themselves were developed by an independent group called the American Conference of Governmental Industrial Hygienists (ACGIH), which set and revised standards for a whole range of occupational hazards, including asbestos.

For many years, asbestos exposures had been measured in particles per cubic foot of air, which was more a reflection of the crude nature of the measurement equipment then available than it was of the conviction of the scientific community that the volume of asbestos inhaled by a worker was an appropriate gauge of its level of hazard. By the 1960s, in fact, most scientists had come to the conclusion that volume meant little; it was the number and size of the individual asbestos fibers that a worker inhaled that was the true test of its danger. If a fiber was too long or too thick, it was incapable of penetrating into the deep recesses of the lung where it could cause disease. In the same regard, if the fiber was too small, it would be either cleared by normal lung cleansing mechanisms or else would be totally encapsulated by certain types of lung cells to form a non-hazard phenomenon called an "asbestos body."

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Dr. Irving Selitsky's career was at the School of Medicine, University of Michigan. He worked in the laboratory, and workers in the field were not working. They were the scrapers and replaced, ripped

The health exposure was increased, was discussed. There were higher asbestos exposures. The first large asbestos exposure produced results no longer possible. The insulation spring of 196-

The next four years at Mount Vernon, the asbestos worker both here and development.

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General agreement existed as to the size of asbestos fiber that caused the problem; no agreement existed on was the number of fibers per cubic centimeter that should be the limit in factory air in order to prevent disease. Some said 12; some said 5; some said 2. It was this argument that roared through the late 1960s and early 1970s — and which to some extent persists to this day — but I am getting ahead of my story.

While awareness was growing in American government and industry in the early 1960s that something needed to be done about the asbestos threat — and many things were being done in terms of improving factory conditions — it was not an issue known to any except a handful of scientists, government officials and enlightened industry leaders. Those in industry who were either unaware of the hazard or who chose to discount it, could ignore it with impunity because of the weaknesses of the Walsh-Healey Act. Something or someone needed to come along to stir up the country. It was a someone. His name was Irving Selikoff.

Dr. Irving Selikoff was a chest physician who throughout the more public part of his career was head of the Division of Environmental Medicine at the Mount Sinai School of Medicine in New York and director of its Environmental Sciences Laboratory. In 1962 he began a decades-long study of the mortality of union workers in the asbestos insulation industry in the New York City area. These were not workers who manufactured asbestos-containing insulations; instead they were the people who installed asbestos insulation in New York area skyscrapers and schools and, when the insulation deteriorated and needed to be replaced, ripped it out.

The health experience of the asbestos insulation workers, as Dr. Selikoff discovered, was disastrous. Their rates of asbestosis, lung cancer, and mesothelioma were higher than any other asbestos researcher had found among any other asbestos-exposed population anywhere in the world. Equally as important, it was the first large-scale study of an asbestos industry group in the United States that produced results similar to studies done in Great Britain and South Africa. It was no longer possible to say, It can't happen here. Dr. Selikoff published his study of the insulation workers in the *Journal of the American Medical Association* in the spring of 1964. The asbestos problem was starting to enter the limelight.

The next four years witnessed increasing efforts from Dr. Selikoff and his associates at Mount Sinai to focus American public attention on the plight of the insulation workers and by implication on workers throughout the asbestos industry, both here and abroad. While his studies produced no data that could help in the development of an appropriate numerical fiber standard — all he knew was the

The First Large-Scale Study

diseases the union members died from and how long they had been working in the industry — he nonetheless argued passionately to anyone who would listen that the existing standards were woefully inadequate. It was impossible to know whether he was right or not since the existing standards — whether measured in particles or fibers — had never been monitored except in the most rudimentary fashion, and for his own insulation workers had never been measured at all.

It was not that an environmental engineer could not enter an asbestos mine or construction site and take a precise asbestos fiber count — many were doing it — but there was no way to compare these exposures with those that existed decades ago when workers experienced the exposures that had led to the fatal diseases of the 1960s. Over dozens of years, gradual improvements in conditions in mines and plants, plus numerous changes in the composition of finished asbestos products and in work practices for handling those products at the job site, had made it essentially impossible to reconstruct the exposures of the past. In short, the only thing Dr. Selikoff had to offer the American public in the 1960s was the awful health experience of the insulation workers and a plea that something be done about it.

Proactive Health Efforts

By the time I became involved in the asbestos controversy in the late 1960s, Johns-Manville had undergone a major transformation as far the health hazards of asbestos were concerned. As the largest of the world's asbestos companies, with both huge mines and numerous manufacturing facilities in North America, J-M had "gotten religion" big time. While not at all convinced that Dr. Selikoff's insulation worker mortality rates were applicable to all elements of the industry, it had the money and manpower to both clean up all its operations to the limits of technical feasibility and to launch itself, or instigate through its numerous trade associations, any number of health studies to determine the extent of the problems.

Through the Quebec Asbestos Mining Association, a huge research project was initiated and funded at McGill University in Montreal to study the mortality of the Quebec asbestos miners. It would not be a repeat of the mid-1950s study that found "no problem," but would, instead be as thorough and as probing an epidemiological study as any industry had ever funded against itself. More importantly, it would be the first major asbestos study to try to identify not only the extent of disease in a segment of the asbestos industry, but also the levels of exposure that resulted in that disease.

The fundamental strategy that J-M adopted to deal with the crisis involved conducting a wide range of both health and technical studies to determine the extent of the problem within its own operations and to develop the technologies neces-

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sary to bring the situation under control. To assist the company in evaluating the truly astounding volume of studies beginning to appear in the medical literature on asbestos, it hired as a practically full-time consultant Dr. George W. Wright of the Medical Research Department at St. Luke's Hospital in Cleveland, who was himself a well-known asbestos researcher. It began a major outreach program of assistance and cooperation to government and private scientists worldwide, including Dr. Selikoff, who were seeking remedies to the emerging problem. It established particularly close links with the asbestos industry in Great Britain, where the problem had reached the acute stage years earlier and where much of the most valuable asbestos-health research was being conducted, a good deal of it being funded or at a minimum being cooperated in by the various English asbestos companies.

It always struck me as unique to the British system that a spirit of cooperation and joint purpose existed between the asbestos industry in the U.K. and Her Majesty's Factory Inspectorate, the regulatory group charged with policing industrial health in policies in that country. It was a far cry from the adversarial situation that would shortly develop in the United States with the establishment, both in 1970, of the EPA and the Occupational Safety and Health Administration (OSHA).

To manage the issue, J-M established an internal asbestos-health management committee, chaired by then-president Clint Burnett. It met at least monthly and included Solon, representing public relations, and Dr. Wright as outside medical consultant. Apart from the upper management committee, a separate public relations committee was formed consisting of Solon, Raines, and myself. Through Solon, and eventually on our own, Raines and I had access to Dr. Wright and to J-M's two top environmental control experts, Ed Fenner and Cliff Sheckler, for their assistance in developing responses to questions raised in the media regarding either the health side of the issue or Manville's own efforts at bringing the problem under control. At the none-too-subtle prodding of our English industry cousins, who believed the communications side of the issue in the U.S. was being mishandled if it was being handled at all, J-M retained the PR firm of Hill and Knowlton as outside consultants. H&K, which had recently passed Carl Byoir and Associates to become the largest PR firm in the world, had been on retainer to the British industry for a number of years. The account was placed in H&K's recently established Environmental Health Unit, the first division in any PR firm dedicated solely to assisting clients in responding to health and safety issues. Together with the H&K staff, it was our job to bring the communications side of the problem under control.

Building a Communications Team

It was a fundamental tenet of our approach that good science should dictate public policy on health issues. It was therefore essential that policy makers, as well as the general public, know what science told us.

Suave Dr. Selikoff

Essentially the only side of the issue being reported in the press at that time was Dr. Selikoff's, who had over the years developed excellent media relationships. He had perfected the two essentials necessary to becoming an effective spokesperson for his cause: he always provided interesting, frequently controversial copy and he was always accessible. There was never any: "Let me think that over and I'll get back to you." He was always ready with an answer or an opinion. He understood deadlines and what constituted a "good" story, and was always patient, never condescending, to reporters who were having difficulty understanding his interpretation of the science. He perfected almost to an art form a technique that I now refer to as the "white coat approach." Whenever he appeared on television or was entertaining reporters at Mount Sinai, he never failed to appear in a white lab coat, as if he had just emerged from examining a patient or performing some experiment. While a standard technique today for conveying scientific credibility, in the late 1960s it was new and fresh and never failed to impress. As his staff at Mount Sinai grew, he taught them his techniques so that in time he had an entire cadre of scientists at his disposal who were also adept in media relations. And he possessed that most critical of all assets: since he had no apparent "cause" other than the health of asbestos industry workers around the world, he was exceedingly credible — a sort of Walter Cronkite of the scientific community. It was a tough act to handle.

Two things he did always drove us crazy. He always referred to the insulation workers as "asbestos workers," which was nearly always reported as meaning people who worked in asbestos mines and mills, which they, of course, did not. In later years, when J-M was involved in a joint program at Mount Sinai to develop new methodologies for reducing the asbestos exposure of the insulation workers, he was continually urged to change the misleading terminology when referring to the insulation workers. He promised many times to do so, but never did. I believe it served his purposes better to continue using a term that implies he represented the interests of a far larger segment of the industry than he actually did and that the problem was universal in the asbestos industry, which it was not.

The other thing he did that gave us fits was his insistence on extrapolating the health experience of the insulation workers, which was admittedly terrible, to any and all asbestos workers everywhere, regardless of their level of exposure. As the

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number of workers grew who were discovered to have had some, often trivial, exposure to asbestos in their working lifetime, the number of deaths he predicted grew by leaps and bounds. To be fair, he would preface each calculation with the words: "If our numbers are correct, we can predict...." but the disclaimer was seldom if ever picked up by the media, nor was its import understood.

Even when he tried to clarify for the media what he meant, it was often ignored in favor of the more dramatic. For example, in late 1972, CBS News contacted me for a response to a statement Dr. Selikoff had made at a congressional hearing. This was at a time when controversy raged over the fate of workers in U.S. shipyards during World War II, some of whom had substantial exposure to asbestos insulations used aboard navy ships. The reporter said Dr. Selikoff had predicted that 2 million former shipyard workers would die of asbestos-related diseases before the end of the century. I explained that he had misunderstood what was said. Since Dr. Selikoff had made the same prediction many times, I was able to quote him almost verbatim: "If our numbers are correct, of the 2 million workers employed in U.S. shipyards during the Second World War, 40 percent will die of asbestos-related diseases before the end of the century." I put him in contact with Dr. Selikoff, who confirmed to the reporter that he had gotten the prediction wrong. Relieved, I then proceeded to explain to the reporter why we considered the prediction totally off base. That evening, towards the end of the broadcast, Walter Cronkite solemnly intoned, "Noted asbestos researcher Irving J. Selikoff today predicted that 2 million American shipyard workers would die of asbestos-related disease before the end of the century. A spokesman for the asbestos industry said the number was too high." The next morning I called the reporter at CBS back to complain about the spot. Hadn't they talked to Dr. Selikoff? Hadn't he told them they had it wrong? He answered yes to both questions but said, "We used what we *thought* he said at the hearing because it made a better story."

We continued on track with our efforts. We developed and distributed a series of media background papers on the various aspects of the asbestos issue. Of particular concern was mesothelioma, because it was the only asbestos-related disease known to occur outside of the industrial setting. If so-called "neighborhood" and "household" cases were showing up with increasing frequency in Great Britain and South Africa, how soon would it be before they began occurring here, and with what level of public outcry?

Fortunately the scientific evidence was mounting that nearly all cases of mesothelioma could be traced to exposure to either of the two amphibole vari-

**Science-Based
Communications**

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eties of asbestos — crocidolite and amosite — or to mixtures of either of these and chrysotile, but essentially never to chrysotile alone. At J-M's huge plant complex in Manville, New Jersey, some 50 cases of mesothelioma would be identified by the mid-1970s, with all but one occurring among workers in the asbestos cement pipe plant, where in the 1940s and 1950s crocidolite and chrysotile had been commonly mixed together with pitch forks on the plant floor before being made into pipe. Amosite was also heavily used in the manufacture of the types of insulations used by the workers studied by Dr. Selikoff. In fact, the common type of wrap insulation used for many applications was called an "amosite blanket."

Asbestos concerns continue today, as workers in protective gear wash down buildings in New York City after a pipeline blast contaminated the area with asbestos.



All our efforts to communicate this new scientific evidence on mesothelioma were opposed strenuously in the media by Dr. Selikoff and his associates at Mount Sinai. He discounted the new research and asserted that we were trying to whitewash chrysotile, which was the mainstay of J-M's product line and the only type of asbestos mined by the company. He conveniently forgot or chose to ignore the fact that when faced with the same evidence, the British — whose approaches he normally admired — began moving rapidly toward setting stricter standards on crocidolite and amosite than on chrysotile and would eventually end up banning both varieties. To Dr. Selikoff, asbestos was asbestos, and he would accept no evidence that contradicted that view.

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By late 1968 Manville and Dr. Selikoff were in close, almost daily, contact. While we continued to fight it out in the media over many issues, there was one on which we could both agree: the insulation workers had a horrible health record and something needed to be done to address their working conditions. J-M agreed to fund an effort at Mount Sinai that came to be called the Industrial Insulation Health Research Program (IIHRP). Its primary purpose was to develop environmental control practices for reducing the asbestos exposure of the insulation workers to safe levels. A board of directors was created to oversee the project. It included government health officials, J-M's vice-presidents of manufacturing and R&D, Dr. Wright, Dr. Selikoff, and a number of others. J-M bought Mount Sinai a state of the art electron microscope and assigned a top-notch industrial hygienist to work in residence with the Mount Sinai staff. Communications support was to be provided by Hill and Knowlton with Carl Thompson, an H&K executive vice-president and head of the firm's Environmental Health Unit, which handled the J-M account, becoming the defect head of PR for the IIHRP.

From a communications standpoint the joint effort worked fine. The venture was launched with considerable public fanfare with a press conference at Mount Sinai — Dr. Selikoff turned the media out in droves — and lots of smiles, handshakes, and pledges of eternal cooperation. Thompson wrote and produced the program's periodic newsletter, sent out press releases on various program accomplishments, and even ghostwrote an article for Dr. Selikoff for an occupational hygiene journal. Clearly, Manville's image was enhanced by its involvement in the IIHRP effort, but it continued to be the only asbestos company in the U.S. speaking out in defense of the industry when it came under attack. That was soon to change.

For years H&K had been urging that J-M set up a trade association in the United States to handle the communications aspects of the asbestos issue. The firm's London office had set up such a group, called the Asbestos Information Council, for the British asbestos industry, and H&K argued that a U.S. counterpart would provide the same two major benefits to Manville. First, by establishing an umbrella group to handle communications, it would reduce J-M's own individual media exposure; and second, it would create a voice that would speak for the entire U.S. industry and not just for one company.

The reasoning was persuasive, and in late 1970, a meeting of seven or eight of the major U.S. asbestos companies was convened in J-M's headquarters. Manville was viewed with some suspicion by the industry because of its close association with Dr. Selikoff, whom they totally distrusted in the IIHRP program.

Industry Umbrella Opened



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but when the president of the world's largest asbestos company called a meeting of his peers, they came. Solon asked me to write a slide presentation, which he would give after Burnett welcomed our guests. He asked me to pull no punches in the presentation and to lay out in no uncertain terms the seriousness of the problems facing the industry. I sat in on the meeting and was surprised to discover that many of the participants considered many of Dr. Selikoff's charges so outrageous that they had discounted them entirely. Many seemed unaware of the research coming out of the U.K. and South Africa that indicated the health threat was far wider in scope than they had been lead to believe.

Agreement was reached, after much discussion, to form a trade association that came to be called the Asbestos Information Association/North America (AIA/NA), with J-M providing both staff and funding for the first year of operation. If, at the end of that time, the member companies found the Association was providing a useful service, a mechanism would be developed for sharing the costs on an equitable basis. Raines became executive director with me as chief of staff. Clearly, at least to me, the deciding factor in inducing those in the room to join up was our warning that the two new regulatory agencies created by Congress that year — OSHA and EPA — were both eyeing asbestos as their first problem to tackle.

The responsibilities of the AIA/NA would go far beyond normal public relations, at least as it was commonly practiced in 1971. The operative word in the name of the Association was "information." The Association would not just deal with the media, but would create a technical information arm to advise industry members on the appropriate ways to control asbestos exposures in the workplace; a regulatory information arm to work with government agencies on the development of reasonable workplace and environmental standards; and, in the future, a legal arm to assist the industry as a whole in defending itself against liability claims. The latter would, in time, swallow the entire trade association, but in 1971, the liability issue did not even show up on the screen and would not do so for years to come.

Risk Comes Home

We had all been dreading the inevitable discovery of the first "neighborhood" or "household" case of mesothelioma in the United States. When it did happen, the shock was incredible because it had truly occurred in our own household. The victim was the wife of Cliff Sheckler, who was one of J-M's two top industrial hygiene officers and a member of the Environmental Control Committee of the AIA/NA. Since the Shecklers had never lived close to any Manville plant during his long career with the company, it was a true household case: she had developed the disease from inhaling the asbestos dust he brought home on his clothes from work. More than any other development, the death of Sheckler's wife forced

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the entire industry to face up to the realities of the asbestos threat, something it had seemed reluctant to do previously. Ed Fenner, the other top J-M industrial hygiene officer and, like Sheckler, a member of the Association's environmental committee, would himself die from mesothelioma in 1984. Both men had spent their early years at J-M as plant engineers, at a time when dust controls in industry plants and mills were rudimentary, if they existed at all.

As a matter of principle and good public relations, the Association steadfastly maintained that asbestos should not be used for "inappropriate purposes" and that any use of asbestos in its "free" form should be controlled to reduce employee and general public exposure to the extent technically feasible.

For decades, the steel girders of high-rise buildings in most American cities were fireproofed by a process called "asbestos spraying." Raw asbestos fiber was mixed with water in a tank and shot out of a nozzle at the girders from as far as 20 feet away. Despite the presence of water in the concoction, the process was notoriously dusty. In order to contain the dust within the construction site, tarpaulins were generally hung from the outside of the floor being sprayed. At this time in New York City, a number of high-rise buildings, including the World Trade Center, were under construction. On windy days, the tarpaulins would frequently buckle, particularly on the higher floors, allowing a shower of dried asbestos spray to cascade down on the heads of pedestrians below. Dr. Selkoff's people at Mount Sinai claimed that asbestos spraying was the cause of the "asbestos bodies" being routinely found at autopsy in the lungs of New Yorkers not occupationally exposed to asbestos and predicted an epidemic of asbestos-related disease in the general public.

The head of the local asbestos sprayers trade group came to us for assistance. We studied his data and the precautions being taken to control the dust, and put it on the agenda for the next full meeting of the Association. It was not an economic consideration for mining members of the AIA since the volume of asbestos used for spray applications was infinitesimal. The discussion therefore centered solely on whether it was a controllable use of asbestos, and, if it wasn't, what should we do about it. During a break in the meeting, I strolled over to a nearby window and looked out. The meeting was being held in the Engineers Club, which was on 40th Street in New York City overlooking Bryant Park. Across the park, on 42nd Street, the W.R. Grace building was under construction. From a tarpaulined floor about 10 stories up, a virtual snow shower of sprayed asbestos was slowly drifting down to the street below. It was a visual demonstration of the public relations nightmare that we would be facing if we lent our support to the asbestos

Three Asbestos Curiosities

CRISIS RESPONSE

sprayers. I called everyone to the window. "That," I said, pointing across the street, "is why we have to take a walk on those people." We quietly informed Dr. Selikoff, the city of New York, and the EPA — which was also looking into asbestos spraying — that while we wouldn't attack the practice and health grounds, neither would we defend it. The practice was shortly banned by the city and later by the EPA nationally, with our concurrence.

Sometimes the problems that came floating in over the transom were just plain weird. In late 1971 I received a phone call from Dr. Selikoff. He had a problem that he hoped I could help him with. He said this was one we could both agree needed fixing. The situation he described was so preposterous even I had trouble believing any businessperson anywhere could be so ignorant of the evidence regarding the health risks of asbestos, or so callous he didn't care.

The situation was this. Import duties on finished asbestos products imported into the United States were essentially zero. On the other hand, the duties on clothing manufactured abroad were quite stiff. An Italian businessperson thought he had found a clever way to beat the customs folks at their own game. He produced thousands of ladies winter coats using a small amount of asbestos fiber in their manufacture and then tried to import them into the United States as "asbestos products" rather than as clothing. The coats were not even woven, but were a pressed melton, a type of material similar to that used in navy pea coats. Dr. Selikoff told me you could actually release free asbestos fibers from the coats using a small clothes brush. He wanted me to talk to the importer, who had contacted Dr. Selikoff for his assistance in convincing customs officials that the coats were safe. Dr. Selikoff said that he had tried reasoning with the importer, but that he refused to understand the seriousness of the problem, and was intent on forcing the issue with customs. Perhaps, he said, he would believe it if somebody from the asbestos industry backed up his concerns. I offered to meet with the importer, and Dr. Selikoff promised, in return, not to go to the media with the story until I had a chance to sit down with the importer and explain the hopelessness of his position.

I met with the importer a few days later. He couldn't see what the problem was. Women don't brush their coats every day, he argued, and besides, the amount of asbestos in the coats was very small, only enough to meet the customs service's definition of an asbestos product. As a fellow businessperson, he hoped I would understand that if the coats were declared unsafe, he couldn't sell them anywhere, let alone in the United States, and would lose his entire investment. I patiently explained that while the actual risk might be very small, the AIA considered what he had done a totally inappropriate use of asbestos and that we

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would never support him. He left dejected, saying he would have to think over his options. I reported on the meeting to Dr. Selikoff, who thanked me for my efforts, but said that he would now have to take matters into his own hands. Sure enough, within a couple of days, the New York media was swamped with stories on the hazardous "asbestos coats" from Italy. The demonstration Dr. Selikoff cooked up for the media was a masterful piece of theater. He put one of the coats on a female mannequin in an enclosed laboratory at Mount Sinai, and while he lectured the assembled press corps on the hazards of asbestos, two of his staff, dressed in moon suits, eventually brushed fibers from the coat into plastic baggies, which they then sealed, as if they contained some horribly radioactive substance, and took away for analysis. It was very effective and very photogenic.

The importer, of course, never got his coats into the United States. I thought we had dodged yet another stupid bullet, but rumors about "asbestos coats" and other types of asbestos clothing being on the market kept popping up here and there for years, each of which required a couple of phone calls or a letter to set the record straight.

In the early fall we learned of yet another idiosyncrasy. Small, five-pound sacks of raw asbestos fiber were being purchased by some schools and YWCAs to be used as an inexpensive modeling compound to construct puppets or sculpt heads. We checked a number of hardware stores in various cities and, sure enough, the stuff was available almost everywhere. Besides writing the distributors that we were able to identify, in November we sent a precautionary letter on the subject to nearly 5,000 teachers associations, hobby and craft publications, state boards of education, boy and girl scout councils, YMCAs and YWCAs urging that "the use of asbestos for hobby purposes be eliminated immediately." We received many thank-you letters back. Most indicated they weren't aware that inhaling asbestos fibers could be a serious health hazard. That gap in their education was soon to be filled.

As predicted, by late 1971 the newly created regulatory agencies of EPA and OSHA were in hot pursuit of the asbestos industry. Fueled by incessant pounding from Mount Sinai and organized labor, OSHA on December 7 issued an Emergency Temporary Standard reducing permissible asbestos exposure levels in the workplace from 12 to 5 fibers per cubic centimeter of air, with a proposed further reduction to 2 fibers if the medical evidence supported it. Under the statute that created OSHA, the agency would have to come up with a permanent standard within six months. At around the same time, the EPA announced its intention to hold a series of public hearings across the United States for the purpose of developing an ambient air standard on asbestos to protect the general public from the threat of asbestos-related disease. Our plate was filling up fast.

**EPA Hearings:
Cakewalk**

CRISIS RESPONSE

To complicate matters, Johns-Manville was in the midst of moving its corporate headquarters from New York City to Denver. I had already announced my decision not to go West with the company and would therefore be without a job in early 1972. Raines had already left to join Union Pacific as public relations director, so I was left alone to handle the affairs of the trade association as it was entering its most trying period. In late December I was asked to fly to Buffalo, New York, to meet with Al Fay of National Gypsum, who was then president of the AIA/NA, to discuss my taking over the reins as executive director, which I agreed to do, effective January 1.

The EPA hearings were physically grueling, but from a PR standpoint they were a piece of cake. The media was obsessed with the occupational health aspects of the asbestos issue, but had not yet latched onto the environmental implications. Media coverage of the first hearings, held in New York, was zero. The Manville folks held center stage but since the industry had already turned its back on the sprayed asbestos people there was little controversy to attract attention.

The next hearings were held in Los Angeles a week later. The Association was the primary testifier and the only opposition came from a local chapter of the Sierra Club, which tried desperately to build a case that the asbestos industry was damaging the California environment. It didn't make a lot of sense since the entire northern half of the state was a bed of low-grade asbestos ore. Clearly, the environmental community was waking up to the asbestos issue, but it would be a long time before they understood it sufficiently to present a coherent case for increased environmental controls.

Following the Los Angeles hearings, I flew to London to consult with our English colleagues "over breakfast" on the EPA proposals. I left that same evening reassured that our position on the environmental asbestos standards was scientifically sound. The final hearings held that same week in East St. Louis were a total no-show. Not a single individual or organization appeared to testify. The whole thing was over in 20 minutes and I flew home for a much-needed rest. The real fight, the OSHA hearings, was coming up shortly.

OSHA Hearings: Through the Wringer

Nothing in the PR textbooks helped us prepare for the OSHA public hearings that began in February 1972 in the Labor Department auditorium on Constitution Avenue in Washington, D.C. We were, as they say, making it up as we went along. The strategy was simple: J-M would address the health issue and the Association would discuss economic impact and the specific changes we wanted in the proposed standards. Tactically, we set up an AIA/NA Information Center in a suite in the Madison Hotel, a few blocks from where the hearings were being held. From

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there we stood ready to issue press releases; develop industry testimony; prepare summaries for the media of the day's proceedings; arrange for media interviews with industry witnesses; and, in general, establish ourselves as a scientific resource center for disseminating material from the medical and technical literature supporting the industry's position. It all worked reasonably well and the tactics we developed as a matter of logical necessity have since become standard for handling hearings of a controversial health-related nature.

The real fireworks, however, occurred in the hearing room itself, where representatives of J-M and the asbestos industry shot it out toe-to-toe with the Mount Sinai crowd and their top guns in organized labor. What those hearings taught me was that, from a media relations standpoint, nothing the PR professional can do to position such a proceeding as a logical discussion of the issues will ever compete against the sheer drama of two proponents of opposing positions ripping each other's guts out in a public forum.

Unfortunately, J. Corbett McDonald, M.D., the doctor from McGill University who had been chief investigator in the huge industry-sponsored study of the Quebec asbestos mining industry, was ill-prepared for the personal abuse he was to take from Dr. Selikoff's associates. They questioned not only his data, but his veracity, and indeed implied that he was nothing less than a paid lackey of the asbestos industry. His only problem was that he had produced evidence that the asbestos miners in Quebec were not dying at the same rate as Dr. Selikoff's insulation workers, and that their exposure had to be exceedingly heavy for any disease to show up at all. Without directly saying so, he was casting doubt on Dr. Selikoff's fundamental proposition that the mortality experience of the insulation workers was reflective of conditions throughout the asbestos industry. If the asbestos miners were an exception to the Selikoff rule, then perhaps other segments of the industry were exempt as well.

Dr. Wright, who had the audacity to call for stricter standards on crocidolite and amosite — the types of asbestos most closely linked with mesothelioma — than on chrysotile, received the same type of abuse. Dr. Wright, however, conducted himself with greater composure and gave as well as he took.

A fundamental principle of crisis public relations rooted itself in my brain: I would never again, if I had anything to say about it, allow a client or a representative of a client to enter into such a situation without extensive confrontational communications training. It would be unfair to the client and would, indeed, be destructive of his or her position. I have never wavered in that conviction and have, in fact, refused to work with clients who declined such training.

CRISIS RESPONSE

Compared to what the Manville folks endured, our testimony was like a walk in the park. Fay discussed the potential economic impact of lowering the standards too far and too fast, and I ran through the litany of changes we wanted made in the proposed regulations: no lowering of the standard from five to two fibers in less than four years in order to give the industry time to install the necessary added controls; no warning labels on products where the asbestos was "locked in" with cement, plastics, or other binders; and greater flexibility in the use of respirators to control dust exposure. There were few questions since we had submitted our detailed recommendations earlier, and were only summarizing them now.

We were followed to the witness table by organized labor representatives who supported an immediate lowering of the permissible exposure level to two fibers; some even suggested that it be reduced to zero six months after that.

Curiously, Dr. Selikoff personally never testified. I have always suspected that he did not want to subject himself to the hard questioning from industry doctors and scientists that might have occurred. He preferred avoiding situations where he was not totally in control. Dr. William Nicholson, who would, when Dr. Selikoff retired, replace him as head of the Environmental Sciences Laboratory, was left to carry the Mount Sinai banner alone.

One additional aspect of the hearings needs to be addressed. We had learned a day or so before they began that one of the first people to testify would be a J-M employee who was dying of mesothelioma. It was, to my way of thinking, a blatant attempt to sensationalize what ought to be a sober presentation of facts and recommendations (the AFL/CIO, indeed, proved my point by holding a press conference the first day of the hearings to showcase this individual to the media). I instructed our legal council to see what he could do to prevent the man's appearance, which he did by publicly raising objections at a prehearing conference held to settle the ground rules for the hearings. It was a terrible mistake. I had with one intemperate move created a groundswell of sympathy for the man and his condition, and had handed our opponents on a silver platter an example of the insensitivity of the asbestos industry toward those it was killing, or so they positioned it. I would never countenance anything like that again, and have counseled clients ever since that expressions of sympathy and concern for injured parties are a necessary component of any positioning of a health and safety issue.

**Established
Regulations
Favorable**

Compared to the turmoil of the public hearing, the rest of the year was anticlimactic. We continued to pepper OSHA and the media with more facts and figures supporting our position, as did our opponents. When the permanent regulations were published in the *Federal Register* in early June, OSHA had accepted our

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Death of the Asbestos Industry

recommendations practically to the letter, the most important being that the two-fiber standard would not go into effect for another four years. It was a big win. We issued a simple press release commending OSHA for its actions and assuring the public that the standards were sufficiently strict to protect the health of asbestos workers everywhere. We declined any broadcast interviews on the grounds that only OSHA could answer questions as to how and why the standards came out the way they did.

Dr. Selikoff, on the other hand, was everywhere, screaming that the agency had condemned another 50,000 asbestos workers to a premature death by delaying the imposition of the two-fiber standard. The AFL/CIO took OSHA to court in an effort to overturn the standards. It was, I believe, the only time that organized labor sued OSHA over a health standard; in all other instances, it was the affected industry that claimed it had been wronged.

By the spring of 1973, I was coming to the conclusion that the tasks I had set out to accomplish when I signed on with the AIA/NA were nearing completion. We had recently finished five new booklets and a couple of pamphlets on various aspects of the health issue; a five-booklet OSHA technical compliance manual was scheduled for publication in midsummer; and an AIA/NA manual for employees to help them understand the new OSHA regulations had been made available to the member companies for distribution to their own workforce.

The industry itself seemed to be in fine shape. The organized labor challenge to the OSHA standards had been rejected by the court of appeals and it appeared unlikely that there would be any more challenges to the status quo for years to come. The EPA regulations had likewise come out favorable to the industry so we no longer had to worry about the continued use of asbestos in public buildings. Even the media seemed to be getting bored with the asbestos-health issue.

I felt it was time to move on. I had done nothing except asbestos and health for the last five years and I craved new challenges and experiences. I resigned from the AIA in August 1973 and accepted a position with Hill and Knowlton. Because of my background with OSHA, one of my first assignments was to work with the plastics industry, which had recently discovered that a basic chemical, vinyl chloride, used in the manufacture of PVC plastic resin caused a rare cancer of the liver called angiosarcoma. I had heard rumors that the Mount Sinai team had been called in to help prepare organized labor's case for the OSHA hearings scheduled to begin in June 1974, so it did not totally surprise me when I ran into Dr. Nicholson in the corridor at a hastily convened vinyl chloride medical symposium in Washington.

Aftermath

CRISIS RESPONSE

D.C. "What are you doing here?" he asked. I smiled and replied. "The same thing you are." He walked into the crowded auditorium and took a seat next to Dr. Selikoff, who turned to me and waved. It was starting all over again.



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