# **EDUCATION AND HEALTH STANDING COMMITTEE**

# INQUIRY INTO THE CAUSE AND EXTENT OF LEAD POLLUTION IN THE ESPERANCE AREA

# TRANSCRIPT OF EVIDENCE TAKEN AT ESPERANCE THURSDAY, 3 MAY 2007

## **SESSION FIVE**

## **Members**

Dr K.D. Hames (Acting Chairman)
Mr T.G. Stephens
Mrs D.J. Guise
Mr T.K. Waldron
Mr M.P. Whitely
Dr G.G. Jacobs
Mr P. Papalia

## Hearing commenced at 2.54 pm

ROBERTSON, MR PAUL Private individual, examined:

TEAGUE-ROBERTSON, MS LISA SIMONE

Private individual, examined:

The ACTING CHAIRMAN: Ladies and gentlemen, I apologise for the delay. In a moment I will read a statement regarding a previous suppression order. Before I introduce the couple making the next submission, you will recall, during an earlier submission, that a suppression order was made regarding the name of a young woman whose children were affected by lead. Having made that suppression order, there was contact made between some of the media and the person involved. We were concerned by that and so sought further input from the person concerned through the contact that we had - the person who had made the submission to the committee, Doc Reynolds. The person has contacted us and came in to talk to the committee and has signed the following document. I will not be revealing her name, but she says the following -

I agree to the lifting of the suppression order to the extent that my children's identity is not revealed and/or published; my children's faces are not revealed and/or published; my second or family name is not used and I am identified only as Anouska; my address is not revealed and/or published; my home is not identified through publication of photos or by film and, lastly, my suburb is not revealed and/or published.

That is signed by the person concerned and is dated today, 3 May 2007. If there are any media present, the young lady is in the foyer of this building and happy to do interviews and we will be notifying those within the media who have already contacted her that they are able to show details of those interviews, providing they take note of all of those conditions that are now stipulated. I will move -

That those requirements be accepted and that with those requirements our previous suppression order be lifted.

#### [Motion carried.]

We now need to get back to our submission. I am sorry for the delay in starting. We have Mr and Mrs Robertson before us today. I need to read to you some official material before we get going. It will not take long. This committee hearing is a proceeding of Parliament and warrants the same respect that proceedings in the house itself demand. Even though you are not required to give evidence on oath, any deliberate misleading of the committee may be regarded as contempt of Parliament. I have a series of five questions and I need each of you to answer individually. You need to make sure that you talk directly into the microphone. We have Hansard recording everything said, so could you speak loudly and clearly.

Have you completed the details of witness form?

Ms Teague-Robertson: Yes, I have.

Mr Robertson: Yes, I have.

**The ACTING CHAIRMAN**: Do you understand the notes at the bottom of the form?

**Ms Teague-Robertson**: Yes, I do.

Mr Robertson: Yes, I do.

**The ACTING CHAIRMAN**: Did you receive and read and information for witness briefing sheet regarding giving evidence before parliamentary committees?

**Ms Teague-Robertson**: Yes, we have.

**Mr Robertson**: Yes, we have.

The ACTING CHAIRMAN: Do you have any questions relating to your appearance before the

committee?

Ms Teague-Robertson: No.

Mr Robertson: No.

**The ACTING CHAIRMAN**: Please state, individually, your full name and the capacity in which you appear before the committee.

**Ms Teague-Robertson**: My name is Lisa Simone Teague-Robertson. I am here as a concerned parent.

**Mr Robertson**: My name is Paul Robertson. I am here as a concerned parent as well.

The ACTING CHAIRMAN: Thank you. As you know, we have received your submission and we thank you for providing that. I will ask you first: would you like to make any statement? You are able to make corrections to that submission, if you wish, but otherwise, make a statement. Be aware that we have not made these submissions public but you are quite free to do so, if you want, or you may read out or detail any of the statements in your submission, if you want people to know. You can make that choice as you now make a verbal submission.

[3.10 pm]

**Ms Teague-Robertson**: When we made our submission, in the section on general attitude we wrote -

We write to express our concern for the children of Esperance, including our own. We feel that the general public are not being given adequate information about the short and long-term effects of lead and how to deal with the lead poisoning that has already occurred. We are dismayed by the she'll-be-right-mate attitude expressed by authorities when the results are under the World Health limit. Our children deserve to be treated with the utmost care and respect and are entitled to grow up in a safe and clean environment. When pollution occurs, the perpetrators need to be held accountable for their actions.

I think the main thing that we want to highlight is that although our children's levels, luckily enough, came back below what is now considered to be the health standard, we feel that the problem is that lead is very quickly stored in bones and teeth by the body to prevent damage to the vital organs, such as the liver and kidneys, and that the blood tests are an indication of free lead in the blood but do not give an adequate indication of residual lead in tissue. Basically, there is not enough information for parents generally as to the long-term effects for their children.

**The ACTING CHAIRMAN**: Can you tell us what the levels of lead were in your own children?

**Ms Teague-Robertson**: The level of my son Chai, who is six, was two. My daughter Bindi was three. My own level was three and my husband's was four. We really feel that the levels are not huge. We are the first to admit that and we are very grateful that they are lower than that a lot of other people. When my level is the same as my daughter's and I have had the extra time to accumulate lead, it makes me question why hers is the level it is.

**The ACTING CHAIRMAN**: Can you tell us where you live in relation to the port?

**Ms Teague-Robertson**: We live on the corner of Giles Street and Twilight Beach Road, which is pretty well opposite the observation platform above the port.

**The ACTING CHAIRMAN**: One of those nice houses up the top?

Ms Teague-Robertson: Wireless Hill, yeah.

**Mr Robertson**: We chose the wrong one.

**Ms Teague-Robertson**: We chose the wrong one. We did. If we had a choice we would have stayed in Castletown.

**The ACTING CHAIRMAN**: Have you noticed anything? You have a bird's-eye view of what happens at the port. Can you tell us what you were able to see from that site?

**Ms Teague-Robertson**: We have views over the bay from our front lawn. We are not directly above the port, as such, we are back-a-ways. We generally have more of the noise and the smell than the view.

Mr Robertson: And dust.

Ms Teague-Robertson: And dust.

**Mr Robertson**: Dust as well.

The ACTING CHAIRMAN: Can you tell us what you see and what you smell, for that matter?

**Mr Robertson**: The smell is a real pungent - what I think, is it xanthine?

The ACTING CHAIRMAN: Yes, it is.

**Mr Robertson**: I am not quite sure. Numerous times we have had people staying with us and they have actually felt physically sick from the fumes. I realise that that is not from the lead now but we have never known and have not been told where it is coming from and why.

**The ACTING CHAIRMAN**: Do you understand now?

**Mr Robertson**: Yeah, we are pretty sure it was from the coating that is on the nickel shipments that are coming in.

**The ACTING CHAIRMAN**: That is right. It is called xanthate. That in itself is an inert substance but it changes to a substance that does have a distinctive odour.

**Mr Robertson**: Yeah. Over the last week, there seems to be very little activity at the port. It is probably, of course, because everybody is in town, but there has been no smell, no noise, no nothing. Is there anybody down there?

The ACTING CHAIRMAN: We were down there on Tuesday evening and there was nickel ore in the shed and we could certainly smell the xanthate at the time. Part of the problem is that they are both loaded the same way. The nickel and lead go through the same process, almost identical, other than they are stored in a different shed. If you get elevated levels of nickel, one could reasonably expect there might well be lead at the same time. Have you had any elevated levels of nickel discovered at your house?

**Ms Teague-Robertson**: In our water tanks, yes.

The ACTING CHAIRMAN: Can you tell us about that?

**Ms Teague-Robertson**: When we had our water tanks tested, the results came back that the nickel level was 0.09 and our lead level was 0.012.

**The ACTING CHAIRMAN**: Nickel is acceptable at 0.02, is it not?

Ms Teague-Robertson: It was quite elevated. In our submission, we mentioned that we had drunk the water tank dry on several occasions over the summer. We encourage our children to drink water and to eat healthily. That, of course, was of concern to us. I know for myself some information from looking at the nickel information that I pulled off the Net. One of the sites I was visiting was a national pollution index, which I found to be quite a good site to look at the health effects of nickel. Reading through some of the signs and symptoms of nickel, some of it was very familiar to meetye irritation, and what they refer to as nickel itch. I am now at the point where I cannot wear my

watch at all. As soon as I put it on, I came out with contact dermatitis. Those issues are starting to be a little bit more related to some of the problems - headaches and those things - that we have suffered from, and also visitors have complained of when they have stayed at our house.

**The ACTING CHAIRMAN**: Tell us more about the nickel levels. Was there no lead in the water tank?

**Ms Teague-Robertson**: The lead levels in our water tank were 0.012. We were advised not to drink any water from our tank.

**The ACTING CHAIRMAN**: It is just over. The acceptable level is 0.01 for lead and 0.02 for nickel. You are well over the nickel level - 0.09, I think you said you were.

**Ms Teague-Robertson**: Yes, that is right.

**The ACTING CHAIRMAN**: And just over the lead level.

**Mr Robertson**: Talking about the tanks, the port has now finally sent people around to examine and clean out the tanks. Already we have had massive storms and nobody has disconnected the pipes on the tanks - very few - so the tanks have all overflowed anyway. There is still sludge in the bottom but it has to be mixing up and putting more contaminants out into the environment. Today I was told that I could empty it myself. I said, "I am not emptying the tank. Somebody can do it." They said, "That's fine. The port can organise that, but the health department recommends that you empty the tank yourself onto an open piece of ground and let it drain away." This is for tanks with high levels. That is just contaminating the whole area of the land even more.

Ms Teague-Robertson: Where our children are playing.

The ACTING CHAIRMAN: We have heard that and we have made suggestions. We are not experts on what happens when that sludge at the bottom of the tank gets on the ground, but one would reasonably assume, given that we are concerned about airborne dust and people are concerned about children who are on the ground and eating dust and putting their hands in their mouth, that to let that same stuff out into the lawn or the garden does not seem appropriate. There is an alternative, appropriate site to do that. In fact, I think I have already spoken to someone who may be involved in that to say that they take it and put it back into the shed that contains the lead. That is what they do when they clean up the area when they are unloading nickel or lead: they take that sludge and put it in there.

**Ms Teague-Robertson**: It might wet it down and stop it blowing around.

**The ACTING CHAIRMAN**: Yes, exactly. It has been there eight weeks now and it is fairly dry, I can tell you.

[3.20 pm]

Have you noticed anything like clouds of dust during loading? Can you not see the port from where you are?

**Ms Teague-Robertson**: No; we cannot actually see down onto the port, because it dips around a little to where we are. During stormy weather we sometimes get a black film on our kitchen side. At the time I thought it was more dust than anything else, or just dirt being blown around outside, but now I wonder.

**Mr T.K. WALDRON**: This question pertains to something in the submission regarding medical advice that you have sought. Are you happy for me to ask a question about that?

**Ms Teague-Robertson**: Yes; absolutely.

**Mr T.K. WALDRON**: You said that you sought some medical advice, and part of that is a recommended therapy, at some cost - I will not mention the cost, but at some cost. You state here that it is a long, drawn-out process. When you say long, drawn out, are you talking weeks, months, years?

Ms Teague-Robertson: We went to see a naturopath, who told us the treatment would be a minimum of three to six months, and that we would need to then reassess our lead levels. It recommended that, in addition to asking to have additional blood testing done, at probably three and six-monthly intervals, to check whether our levels were going down, it would recommend hair sampling at a later date to get indications of residual lead. A study I have in front of me here, which is about lead poisoning in the brain, cognitive defects and mental illness and was put out by Michelle Naylor, from behavioural health sciences at Sydney University, talks a little about hair samples. It also talks a lot about the effects of low-level lead poisoning on children. By low level, they are talking about under 10. Some of the things they are referring to here are that cognitive functioning in children and infants found that the IQ declines by 7.4 points as average blood-level concentrations are raised from one through to 10.

The ACTING CHAIRMAN: Okay. Thank you. We are not here to provide medical advice, nor are we in a position to do so. We did put those questions to the Department of Health. The advice we had from the toxicologist was that hair sampling was unreliable as a testing mechanism. Also, with regard to chelation therapy, as GPs we would normally use chelation therapy only for high levels because, as you heard from Dr Howarth - I do not know whether you were here during his presentation - there is a problem with the excretion of it over 30 days. I guess one of the issues in the town is that from now on, we would reasonably expect the exposure to stop, although that obviously depends on what is still out there in the community and what has happened to it in terms of other dust levels. It is up to you to make your choices about that sort of treatment.

**Mr T.G. STEPHENS**: I was wondering whether the neuropath indicated that the treatment would have the beneficial effect of removing lead from the system but might simultaneously remove any other important chemicals from the system, basically iron.

Ms Teague-Robertson: Chelation is a delicate balancing act, in a sense, because, from my understanding, the body has a selective up take of nutrients, and lead is blocking the absorption of certain things that your body needs - for instance calcium, which Dr Howarth was talking about and linking with potential problems with bone density and that sort of thing. Basically, the program that the naturopath has put us on is high levels of antioxidants, and a mix of vitamins and minerals and things that we are lacking because of the lead and selective up take. I will refer to what our naturopath has given us, and that will be easier to understand. Food and their nutrients protect against radiated and chemical toxins in a variety of ways. Many of the same nutrients counteract the effect of lead, through several different mechanisms. Some prevent, or at least decrease, the absorption of lead, others remove lead from the tissue, and some block lead from interfering with metabolic functions. Lead competes with and replaces certain minerals, primarily zinc, iron and copper, when there are deficiencies in those vital nutrients. Basically, the body is doing selective up take. If what it wants is not there, it will take something of a similar composition. Through the principle of selective up take, optimum amounts of zinc, iron and copper protect against the absorption of lead and remove it from the body. Two other minerals, calcium and chromium, help protect against lead toxicity. Basically, the treatment that we are on, to chelate, means to bind to metal. The idea is to provide your body with support while you are trying to rid your body of toxins.

**The ACTING CHAIRMAN**: Can we ask some questions about your knowledge, such as when did you first find out that lead was being exported through the port?

**Mr Robertson**: When the last lot of birds died, I think, and they finally came through with the tests - I would say it would be months from the first lot of birds dying - and they were checking everything, but they never seemingly - this is sort of hearsay - checked for heavy metal toxicity in the birds.

**The ACTING CHAIRMAN**: Not in the first instance they did not, no.

**Mr Robertson**: In the second lot of bird deaths, they found that lead was causing the deaths, and that almost immediately caused concern throughout the whole town.

**The ACTING CHAIRMAN**: That is right. When the public forum was on, and there was the occasional story in the newspaper about lead going through the ports, you did not see any of that?

**Ms Teague-Robertson**: No. We did not see anything to do with the introduction of lead into the port. I was unaware that lead was entering the port at all.

The ACTING CHAIRMAN: No conversations with friends or acquaintances led you to think that?

**Ms Teague-Robertson**: No. There was concern in the community about nickel, and about the effects of nickel generally, with smell, dust and that sort of thing.

**Mr Robertson**: Since then, we have checked an annual report of the port, which I picked up because my parents were over on holiday, and it was some information on how wonderful the port is. It does mention in that report that they ship lead. As a general thing, we just would not give it a second thought.

**The ACTING CHAIRMAN**: Do not feel bad about it, because it is the consistent theme of everyone who has spoken to us.

**Ms Teague-Robertson**: It was interesting that in the 2006 report it mentions that it was in carbonated form.

The ACTING CHAIRMAN: Yes.

**Ms Teague-Robertson**: Obviously if we had read that sooner, maybe it would have been a bit different.

**The ACTING CHAIRMAN**: How did you come to get your lead levels done? Did you go to a doctor?

**Mr Robertson**: No, to the lead clinic.

**The ACTING CHAIRMAN**: What advice were you given about the effects of lead? Were they saying your levels were low, so do not worry about it?

**Ms Teague-Robertson**: When our blood test results came back, we got the standard letter that everyone got, that basically said, avoid all known sources of lead contamination, do not drink the water unless it has been tested, avoid contact with old and painted surfaces, avoid dusty surfaces inside and out, avoid lead products like hobby materials, and get rid of any old car batteries.

**The ACTING CHAIRMAN**: The zinc and lead levels of your tank were elevated, if not enormously so. Were you and your family big drinkers of water from the tank?

**Ms Teague-Robertson**: Absolutely. Basically, the water tank is used predominantly for everything from cooking through to drinking in the house.

**Mr Robertson**: Even though we all have vegetable gardens, everything is sitting there rotting in the garden, because it is all leafy-green vegetables, and they absorb lead. Now we have to go and buy the chemical ones from Woolies!

**The ACTING CHAIRMAN**: In some ways it is perhaps surprising that your levels are not higher. I guess the contamination of other tanks has been far greater than your own tank, even though the level is elevated.

[3.30 pm]

**Ms Teague-Robertson**: One of the things we needed to speak to our naturopath about was change of diet and certain dietary ways of reducing lead in the system. We thought that would be a beneficial thing for other parents to have access to in regard to citrus products, eggs, garlic and pulses.

**The ACTING CHAIRMAN**: Are you saying they are good or bad?

Ms Teague-Robertson: Good.

The ACTING CHAIRMAN: Good?

**Ms Teague-Robertson**: Yes, such as seaweed, and various other forms of -

The ACTING CHAIRMAN: I could not do without my garlic!

Ms Teague-Robertson: Yes. Even some of those things for parents for self help would be of

benefit.

**The ACTING CHAIRMAN**: I do not want it to reflect on your submission, but I think after today we are just about questioned out on issues like that. Is there anything further you wanted to say?

Ms Teague-Robertson: Yes. I just want to refer to one other article I have in front of me, which is on the dangers of toxic metals. It refers to the hair sampling techniques that we were talking briefly about before. It states that tissue tests such as hair mineral analysis are often more useful than blood sampling, and that the United States environmental protection agency reviewed over 400 reviews of the use of hair for toxic metal detection and concluded that it was a meaningful and representative tissue for measuring lead. I just wanted to put that forward. It was particularly useful, basically, for the measurement of low-level exposure in children.

**Mr Robertson**: We cannot emphasise enough that there should be some ongoing clean-up in this town. There is nothing happening whatsoever. At the moment there is a lot of work going on along the railway tracks, where there are big piles of obviously contaminated sand, because it is right at the crossing. It is piled up. The wind was blowing yesterday. It was fairly dry. There was dust everywhere. I think that sort of thing should be looked into as well.

The ACTING CHAIRMAN: Yes, thank you. The Department of Environment and Conservation have been doing mapping and testing of the town, but we are yet to see those results. We have resolved to ask for them straight away.

**Mr Robertson**: Thank you.

**Mr M.P. WHITELY**: In your submission, you mentioned the cost of seeing a naturopath. It is quite substantial. Have you asked anyone about getting those costs reimbursed by the government; and, if so what has been the response?

Ms Teague-Robertson: No, we have not at this point, because we do not know who to approach with it. Our naturopath said that if we go through our GP and get a referral, we will get the GST off it at least. Basically, the cost is ongoing. I am quite happy to let people know that it is amounting to approximately \$600 a month to treat the four of us. We feel that it is something we would like to do for our children to avoid any long-term consequences of lead sitting in their bones and in their teeth. Obviously we would prefer our children to have no lead in their system.

**Mr M.P. WHITELY**: You have not had any advice from the Department of Health, or anyone else, not about reimbursement of the cost, but just as to the use of the naturopath?

Ms Teague-Robertson: No.

The ACTING CHAIRMAN: The problem would be, I imagine, that the medical profession in general does not regard chelation therapy as the appropriate management. That is not to say you are doing the wrong thing by trying it, because there are many people who do not agree with what the medical profession thinks on issues such as this, but I think that would make it more difficult to get treatment.

**Mr Robertson**: Has any advice been put out on any alternatives to getting the lead out of the system? Are there any Department of Health guidelines?

**The ACTING CHAIRMAN**: No, there are not. They are saying that the half life, as you know, is around 30 days for adults and 90 days, as we have heard today, for children, and that about 20 per

cent of it is stored in the bone. The rest is excreted over that time. The issue is whether long-term exposure is what causes damage, or short-term exposure. I do not blame you for one second for taking the action that you are. Are there any further questions?

**Ms Teague-Robertson**: At the end of the day, whatever it takes, basically, for the health of our children is the most important thing for us.

**Mr Robertson**: We also have to consider whether we are going to get future contamination from where we are living, and is the best thing to move our children away, because we know it is not good to get consistent exposure to lead.

**The ACTING CHAIRMAN**: That is a critical issue. Our report will come down in mid-August, which is a little way away. However, I am hopeful that in that report we will have been able to do sufficient research to provide reasonable direction to help people make decisions of that nature.

Ms Teague-Robertson: Can I just refer to the recommendations that we made at the end of our submission. One of the recommendations that I made was No 6, which was we believe that schools will need additional funding and staff to cope with potential learning difficulties that children in our community may face. We have, I think, 58 children who are over 10. I do not know how many of those children will potentially be facing learning difficulties. Some studies are showing that even children who are below 10 can have difficulties at school, including hyperactivity, distractability, impulsivity, disorganisation, non-persistence, inability to follow simple instructions, and overall poor functioning. I would like the committee to take into account the ongoing problems of children within the school system and the difficulties that the staff may face in that regard.

**The ACTING CHAIRMAN**: We have five minutes until our next submission. You have made seven recommendations here. If you want those on the public record, can you read them out?

Ms Teague-Robertson: Absolutely. Our family has been affected by lead, and we feel a greater emphasis on how to rid the body of lead will be beneficial to all. We have been poisoned, and we should be given the full facts about the short and long-term consequences of exposure, with the option of paid treatment to remove the heavy metals from our bodies prior to it doing more damage. After all, it is cumulative. In this regard, we believe any application for further movement of lead through the port in any form should be rejected outright. The shipment of lead carbonate showed a blatant disregard for public health and put profits first. This is not acceptable. We believe the CEO and the board of directors of the Esperance port should stand down due to a lack of public confidence. Magellan Mines should be aware of the dangers associated with the handling and transportation of lead and should be held jointly accountable for the poisoning of our community. A massive clean-up operation is required to ensure further exposure is limited. I believe our schools will need additional funding of staff to cope with the potential learning difficulties that children in our community may face. In addition, a further inquiry into the long-term effect of nickel is paramount. Stricter monitoring of dust levels is required immediately.

The ACTING CHAIRMAN: Thank you very much for that, Lisa, and thank you for taking the time to come. I need to read something to you before you depart. A transcript of this hearing will be forwarded to you for correction of any minor errors. Please make these corrections and return the transcript within 10 days of receipt. If the transcript is not returned within this period - you do not need to return it if you think it is okay - it will be deemed to be correct. Thank you again. We are due to start our next hearing at 3.45 pm.

Hearing concluded at 3.38 pm

.\_\_\_\_\_