

## The Ore is Gone, but the Silicosis Remains: Mining Health and Risk Perception in Portugal in first half of the 20th Century

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EL MINERAL SE HA IDO, PERO LA SILICOSIS PERMANECE: SALUD MINERA Y PERCEPCIÓN DE RIESGO EN PORTUGAL EN LA PRIMERA MITAD DEL SIGLO XX

### Abstract

The pattern of health risk perception among Portuguese mineworkers changed during the twentieth century, as did forms of state intervention and risk management. Up to the mid-20th century, mining accidents, risks and the need for sickness assistance promoted different healthcare models. Mining companies offered medical and pharmaceutical assistance, and, during the First Republic, the state introduced compulsory social insurance and other labour legislation. The health assistance offered by trade unions was integrated into the general health system during *New State* (1934–74). From the 1950s on, the legal struggle for recognition of silicosis as a debilitating occupational disease made mine owners accountable. This paper traces this historical experience, the significant path leading to the institutionalization of occupational medicine, health systems and social support in Portugal.

### Keywords

Health Insurance; Government Policy, Public Health; Non-wage Labor Costs

JEL codes: I13, I14, J32

### Resumen

El patrón de percepción del riesgo para la salud entre los mineros portugueses cambió durante el siglo XX, al igual que las formas de intervención estatal y gestión del riesgo. Hasta mediados del siglo XX, los accidentes mineros, los riesgos y la necesidad de asistencia por enfermedad impulsaron diferentes modelos de salud. Las empresas mineras ofrecieron asistencia médica y farmacéutica y, durante la Primera República, el estado introdujo el Seguro Social Obligatorio y otras leyes laborales. La asistencia sanitaria ofrecida por los sindicatos se integró en el sistema general de salud durante el *Estado Novo* (1934-1974). De la década de 1950, la lucha legal por el reconocimiento de la silicosis como una enfermedad ocupacional debilitante hizo que los propietarios de las minas fueran responsables. Este artículo traza esta experiencia histórica, el camino significativo que conduce a la institucionalización de la medicina del trabajo, los sistemas de salud y el apoyo social en Portugal.

### Palabras clave

Seguro de salud; política gubernamental, salud pública; Costos laborales no salariales

Códigos JEL: I13, I14, J32

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# The Ore is Gone, but the Silicosis Remains: Mining Health and Risk Perception in Portugal in first half of the 20th Century<sup>1</sup>

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## Introduction

In 1944, the development of coal mining near Rio Maior was met with enthusiasm by the local bourgeoisie for the business opportunity it offered; however, there were concerns about the ability of existing health services to support the migrant population. The Misericórdia's hospital was facing closure because of the increasing costs involved in serving the sudden influx of sick people presenting with a variety of illnesses and conditions. The local newspapers noted that the 1,500 newcomers, who were living in miserable and overcrowded huts, stables and rented rooms that lacked even basic hygiene, air or light. The lack of resources led the Misericórdia to begin refusing to treat those workers, despite knowing they had nowhere else to go. However, the rural population, mobilized by local elites, saved the situation that winter (Rocha, 2010: 225). The next year, the director of the mine established a company medical post that would offer assistance to its employees and their families. He also helped the Misericórdia establish a separate building for treating those with highly contagious and life-threatening illnesses. The company also supported the creation of a cooperative for its employees and set up a childcare centre at the Rio Maior *Casa do Povo* (People's House) that would offer pregnant women and new mother's appropriate medicines and food.

Despite the economic context of the time and the authoritarian social and institutional environment of the history of mining in Rio Maior, the early involvement of the company *Empresa Industrial Carbonífera e Electrotécnica, Limitada (EICEL)* in the provision, support and control of health and welfare institutions has been labelled industrial paternalism (Rocha, 2010:70-72; Bertaux, 1977; Reid, 1985; Ackers, 1998). It emphasizes the environmental stress and changes that the development of mining brought to rural

areas that compelled companies to act and highlights the neglect and resistance to recognizing and dealing with the social costs of industrial illness, accidents, and disabilities. Historical narratives of paternalist initiatives and official discourse tend to undermine efforts to control or suppress emerging forms of bottom-up and democratic mutual aid organizations and their relationship with unions and workers' struggles. This paper seeks to fill this gap by presenting two cases of the interplay between bottom-up mutual support initiatives along the lines of social solidarity and state-sponsored welfare institutions between the late 19<sup>th</sup> and early 20<sup>th</sup> centuries.

The first case, in Aljustrel in southern Portugal, we show how mutual aid societies became tools for the mine owners to manage union initiatives and labour and social costs during the early 1930s. The second focuses on a large pyrites mine in the Alentejo (São Domingos) and highlights how during the New State dictatorship the union played a central role in minimizing the effect of famines during the early 1940s. Friendly societies existed alongside the health paternalism of the mine's British owners, while the creation of a mutual aid society in 1930 was linked to anarcho-syndicalism militancy. Following the fascist state's social policy, company-based social security funds (*Caixas de Previdência*) were established that integrated the existing health infrastructure, offered child support, and reduced sickness benefits. Finally, we highlight the central role played by this experience in the late arrival of industrial healthcare in Portugal, which did not appear until the late-1950s, through an analysis of the institutionalization of silicosis as a 'national issue' and occupational disease. The conclusion emphasizes the troubled evolution of healthcare provision in Portugal prior to the 1974 Carnation Revolution and how it affected social perceptions of health risk.

The relationship between industrialization, the growth of mutual aid societies and trade unions in providing health services, unemployment insurance schemes and better wages in the earlier period has been described in other European contexts (Harris & Bridgen, 2007; Van Leeuwen, 1997). Despite compulsory insurance becoming an important and profitable private business, it was acknowledged that the construction of state welfare in the United Kingdom and the Netherlands weakened the

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position of trade unions in the provision of such services (Van Leeuwen, 1997: 789). However, the creation of the 'welfare state' in the UK after the Second World War was an essential part of a vast Labour Party social programme based on 'state economic intervention', which explains the centrality of politics in determining its scope (Whiteside, 1996: 102-103). From this perspective, the longevity of the authoritarian regime and its social policies in Portugal during a period of mining and industrial growth contrasts with other European contexts after the 1920s.

Although focusing on the conflictual process that was the construction of health and social security institutions controlled by the state during the first half of the 20th century in Portugal, this article aims to contribute to the new perspectives on labour environmental history that considers industrialization as a social process of the creation of new work environments and their relationship with health and risk and the creation of new concepts, scientific knowledge and social discourses (Sellers, 1997; Nash, 2014; Raihnhorn & Bluma, 2015; Pérez-Cebada, 2020). The focus on the mining sickness and medical aid will show that the dangers of the mining work environment was recognised by the workers long before they were considered as such by doctors and managers in Portugal. The 'silicosis pandemic' emerges as a managerial issue in the context of mining modernization and emigration.

#### State of the art: Sources and methodology

Since the first historical studies on mining and labour organization in southern Portugal were published during the late-1980s, a number of monographs have appeared in the fields of anthropology, history, and heritage studies (see for instance Guimarães, 1989, 2001; Alves, 1997; Rocha, 1997, 2010; Vieira, 2011; Nunes, 2005; Fonseca, 2005; Rodrigues, 2005, 2013; Custódio, 2013). While we have shown how health assistance was embedded within modern industrial organizations and in emerging forms of class solidarity, until recently health and accidents have been almost entirely ignored (Rocha, 1997; Guimarães, 2001:189-197, 278-295; Bento, 2017; Fidalgo, 2018). The struggle of workers at the uranium mine to receive compensation for the damage to their health followed the recent proliferation of studies on the impact of the legacy of abandoned mines (see for instance Gonçalves, 2012; Ferreira, 2012; Veiga, 2014). At the same time, Portuguese historiography has belatedly 'discovered' and critically evaluated the labour and social policies promoted by governments during the First Republic (1910–26) and the Estado Novo (1933–74) (Patriarca, 1995; Pereira, 2010; Pimentel, 2016; Almeida, 2017; Garrido *et al.*, 2017). Most adopt a privileged and institutional approach by examining the legislation, government reports and official journals. On the other hand, the plentiful historical literature on Portuguese mutual aid societies since the 19<sup>th</sup> century is commemo-

rative, based on quantitative data and legal documents or is described as part of labour organizations (Goodolphim, 1876; Enciclopédia, 1957; Rosendo, 1996). While since the 1930s, the defenders of mutualism attempted to demonstrate their social value by confronting the neglect by the fascists, those who constructed company social security schemes them as a major result of the nationalist state. The construction of an incomplete welfare state following the 1974 Carnation Revolution was almost synchronous with the neoliberal attempts since the 1980s to demolish them in 'civilized Europe'. Portugal's historiography is separate from the efforts by historians to set state 'welfarism' within civil society and based on solidarity practices that were embedded in labour struggles and institutions.

Our analysis has focused mainly on two mining contexts and has sought to capture the environmental changes caused by large mining interests and health provision by using historical documents stored in municipal archives, and in the local and labour movement press. Extensive analysis of the records of *Montepio Mineiro* in Aljustrel (medical records, pharmaceutical inventories, management reports) has highlighted the social dimensions of free medical and pharmaceutical support and of the sickness benefits paid by mutual associations that were obscured by subsequent fascist policies and claimed by the defenders of free social organizations. Nevertheless, because they were often unable to pay the monthly dues, many workers were often frustrated and unable to access the support precisely when they needed it most. Mutual societies were not immune to economic crises, the vagaries of the mining industry or unemployment, and the support they could offer was often lower than advertised.

Unfortunately, the medical appointment series is incomplete, and we were unable to uncover similar records for São Domingos. That said, however, they were sufficient to suggest a close relationship with a harsh and unhealthy environment. The archives of the Aljustrel miners' union (*Sindicato dos Trabalhadores da Indústria Mineira*) revealed important details on the relationship between unions, mutual aid societies and, later, company welfare funds. They confirm the process of conflict involved in cross-referencing competing models of health and social assistance and how fascist social policies were applied.

Here it was not our intention to analyse mining diseases, accident indices and their relationship with technology, scale, and labour safety, and nor was it our intent to examine social responsibility and social costs. We sought to present, in detail, the evolution of health and social assistance as viewed from within trade unions and local schemes, emphasizing the importance of the legal framework and the level of state control across three political regimes (constitutional monarchy, republic and Estado Novo). It was also important to consider income levels and the unbalanced structure of the mining sector compared to other contexts. Analysis by the ministry of labour in the late 1920s states that 70–80% of a worker's income was spent on food and that the number of calories consumed was far below that of their French and British peers (Grilo, 1924). Alcohol consumption provided Portuguese workers with 'fake calories' and gave miners the courage to do their job. Alcoholism was a safety issue even at the beginning