

Health in coal mining areas – the long road to recovery

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Mining communities in the UK continue to suffer poor health, long after coal mines close. Despite the last of the mines closing in the early 1990s, it is not until the last few years that residents in coal-mining areas have experienced similar mortality rates to equivalent non-mining areas. This health penalty continued for approximately 30 years after the industry disappeared, normalising just before the COVID-19 pandemic, finds Matthew Shaikh, a researcher at the Vienna University of Economics (WU). This research sheds light on the ongoing health toll of hazardous working environments, following the decline of dirty industries, including coal mining, in addition to unemployment and deprivation suffered by local communities.

Shaikh identifies a distinct "coal mining effect" on mortality rates, separate from other social and economic factors, by tracking mortality rates in coal mining areas and comparing them to those in socioeconomically similar non-mining areas.

Mortality rates in coal mining and non-mining areas gradually converged over the 30 years following pit closures. In 1981, mortality rates in coal mining areas were 122.6 deaths per 100,000 higher for men and 66.5 higher for women. By 2019, this gap had reduced by 91 percent for men and 70 percent for women, with the remaining mortality difference not statistically distinguishable from zero. The most rapid mortality improvement occurred during the 1990s, in the immediate aftermath of the industry's closure, as ex-miners no longer suffered workplace health impacts and new would-be miners were not exposed to such hazardous working environments.

These findings highlight the significant health legacy of the coal mining industry and its role in explaining the long-standing health disadvantages of mining areas. Given that these areas continue to be more deprived, the study also highlights an important mechanism underlying health and inequality in the UK. Shaikh argues that targeted policy measures are needed to support such areas also after industry closure to minimise this lingering health burden.

The study was published in the journal SSM - Population Health.

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