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INDUSTRIAL FIREFIGHTERS & FEDERAL CANCER BENEFITS

Common Objections — and Why the Evidence Answers Them

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Industrial firefighters are excluded from most U.S. cancer protection programs — despite facing carcinogen exposures the International Agency for Research on Cancer has classified as equivalent to all other firefighting settings. The *Honoring Our Fallen Heroes Act* (signed December 19, 2025) extended federal PSOB cancer benefits to career, volunteer, and federal firefighters, but left privately employed industrial firefighters in an unresolved coverage gap. This document addresses the most common objections to including industrial firefighters in federal and state cancer protections, and explains why the scientific and statutory evidence answers each one.

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- **Dataset:** doi:10.5281/zenodo.18521370
- **Interactive brief:** trainteachlead.com/industrial-firefighter-gap/

OBJECTIONS ABOUT PROGRAM DESIGN & POLICY

Q1 The PSOB was designed for public safety officers in low-paying government jobs. Private employers should provide these benefits themselves.

This is the most principled objection — and it has two answers.

First, empirically: private employers largely don't. The protection gap exists precisely because the market has not corrected it. If industry were adequately covering this, 29 of 57 jurisdictions would not need to explicitly exclude industrial firefighters from presumptive cancer laws — the question would never arise.

Second, the PSOB program has already evolved well beyond its original rationale. It now covers federal employees at agencies like the FBI and DEA, where compensation is competitive. If the "private employers should handle it" argument held, it would logically exclude those federal employees too — but no one makes that case. Congress expanded the program because it recognized that the public safety function matters more than the employer's pay scale. The same logic applies here.

Q2 Expanding PSOB to private-sector workers sets a dangerous precedent. Every hazardous industry worker could claim coverage.

The limiting principle is already built into the proposal: OSHA 29 CFR §1910.156 and NFPA 600/1010/1081.

These standards define a specific, bounded population of trained firefighters — not all hazardous workers. An industrial chemical operator or refinery maintenance worker is not covered by §1910.156, NFPA 1010/1081 as a firefighter. The eligibility hook is training and certification to a recognized firefighting standard, not merely working in a hazardous environment.

That is a clean, legally defensible line. It is the same kind of standard-based eligibility threshold used throughout the PSOB program for other covered categories.

Q3 The federal government cannot afford to take on this new liability.

The population is bounded and the covered cancers are specific. The PSOB program has absorbed expansions to EMS providers, public health officers, and other categories over time without fiscal crisis. A targeted amendment referencing OSHA §1910.156 as the eligibility threshold limits the population precisely.

CBO would score any statutory amendment. The number of industrial firefighters who would realistically file qualifying PSOB cancer claims in a given year is a fraction of the total trained population — and no different in structure from the municipal firefighter claims the program already processes.

OBJECTIONS ABOUT RISK & EXPOSURE

Q4 Industrial firefighters don't face the same cancer risks as municipal firefighters. Their call volume is lower.

Call volume does not determine carcinogenic exposure. Industrial departments operate in low-frequency, high-hazard environments where individual incidents involve complex chemical processes with correspondingly intense exposure profiles. Preparedness is maintained through rigorous training cycles that themselves generate exposure to combustion products.

More directly: the International Agency for Research on Cancer (IARC) already answered this question. IARC Monograph 132 (2023) classified occupational exposure as a firefighter as carcinogenic to humans — Group 1 — and explicitly extended that classification to all firefighting settings and employment arrangements, including industrial. The burden is now on the objector to explain why U.S. statute should contradict IARC's findings.

Kirk et al. (2021), the only published study directly measuring combustion products in industrial fire scenarios, documented benzene concentrations up to 23 mg/m³ and PAH concentrations comparable to or exceeding those in residential structure fires.

Q5 There's no data showing industrial firefighters develop cancer at elevated rates. We need more evidence before extending protections.

The absence of industrial-specific cancer epidemiology is itself a product of the structural exclusion being addressed. Industrial firefighters have been systematically absent from federal datasets and the National Firefighter Registry because the systems collecting data were never designed to include them. This creates a circular dynamic: exclusion from data systems justifies exclusion from protection, which perpetuates exclusion from data systems.

IARC explicitly addressed this. The Working Group did not require employer-specific epidemiology to extend its Group 1 classification to industrial settings. It based its inclusive scope on exposure evidence and mechanistic studies common to all firefighting — the same evidence base used to protect municipal firefighters.

Waiting for industrial-specific cancer incidence data before extending protections means waiting for a gap that the exclusion itself is producing.

OBJECTIONS ABOUT CHOICE & INTENT

Q6 Industrial firefighters chose private employment. That's a tradeoff they accept.

This argument is philosophically coherent but factually hollow in the cancer context.

Cancer risk is not disclosed or negotiable at hiring. No industrial firefighter signs an offer letter specifying elevated mesothelioma risk or the absence of federal benefit protection. Presumptive cancer laws exist precisely because individual occupational causation is nearly impossible to prove after the fact — the burden-shifting mechanism is the protection, not individual disclosure.

The "informed tradeoff" argument assumes a level of transparency and individual recourse that does not exist in occupational cancer claims for any firefighter, public or private.

Q7 States already had the opportunity to include industrial firefighters in presumptive laws and chose not to.

Legislative omission is not the same as legislative intent to exclude.

The peer-reviewed statutory analysis supporting this position found that industrial firefighters were largely never considered when state presumptive cancer laws were drafted in the 1980s. Early legislation was focused on municipal firefighters — industrial responders were not included because lawmakers were not thinking about them, not because they weighed the evidence and decided against inclusion.

The seven jurisdictions that do include industrial firefighters demonstrate it is legally and practically achievable. And Canada's federally mandated National Framework on Cancers Linked to Firefighting — which includes industrial firefighters — shows what deliberate, evidence-based policy looks like when the question is actually asked.

THE CENTRAL ARGUMENT

THE THREAD CONNECTING EVERY REBUTTAL

The exclusion of industrial firefighters from cancer protections is **statutory, not scientific — and not deliberate.**

Every principled objection — risk equivalence, eligibility limits, fiscal responsibility — holds up in favor of inclusion when examined against the evidence. The IARC Group 1 classification applies to all firefighting settings. The exposure data confirms parity. The eligibility threshold exists in OSHA §1910.156. The population is bounded. The only thing that has not been updated is the statute.

Two firefighters respond to the same incident on the same fireground. They breathe the same air, absorb the same dermal contaminants, and wear the same class of protective equipment. One receives federal cancer protection. The other does not — based solely on who signs their paycheck. That is the gap that needs to close.