ASBESTOSWISE

Asbestos Safety and Eradication Bill 2013

Submission to Senate Education Employment and Workplace Relations Committee

15 April, 2013

Asbestoswise

Asbestoswise was formed in 2011 by the merger of two Melbourne based Asbestos Support groups, the Asbestos Diseases Support Group of Victoria (ADSVIC) and Asbestos Information Support Service (AISS). Like its two predecessors Asbestoswise provides support for those living with asbestos related disease (ARD) and advice to the general public and specific groups on preventing future disease. Asbestoswise has a small staff and a committee of management made up of volunteers who have been touched by the disease. The work of Asbestoswise is informed by an advisory committee made up of representatives of the medical profession, legal profession, unions and industry consultants involved with asbestos disease or the safe management of asbestos in the Australian environment.

Asbestoswise congratulates the Government on this initiative. The creation of such an agency was a main recommendation of asbestos support groups, unions and the Cancer Council at a summit held in Sydney in June 2010.

Asbestoswise has to deal with the legacy of asbestos use in Australia through its work with those living with ARD who feel strongly that their experience should not be shared by future generations. The creation of the Asbestos Safety and Eradication Agency is seen as an essential step if the three tiers of government are to work together with other stakeholders to eliminate ARD in the future. Asbestoswise notes that the Agency will be the first of its kind in the world. This is seen as appropriate in a country with the highest per capita levels of ARD in the world and where asbestos products and waste are so prevalent in the built and general environment.

Comments on the Legislation

- At the heart of the work of the Agency is the National Strategic Plan. It is not clear in the legislation that the National Strategic Plan will reflect all of the recommendations of the Asbestos Management Review (AMR). The AMR recommendations were drawn up in consultation with asbestos support groups and many other stakeholders. Asbestoswise would be deeply concerned if any of these recommendations was not part of the National Strategic Plan and would seek clarification on this.
- 2. Asbestoswise notes that the Bill is silent on the costs of implementing the National Strategic Plan. Our experience indicates that costs in relation to such issues for example, a public

awareness campaign, the provision of adequate waste disposal or removing asbestos from low cost housing, lie at the centre of the inertia that exists in dealing with the problems of asbestos risk.

- 3. Asbestoswise welcomes the creation of the Asbestos Safety and Eradication Council. We note however, that under clause 31(c) there are four other members of the Council who are not specified in any way to represent any particular group or expertise. Asbestoswise believes that representatives of unions, asbestos support groups, and the Cancer Council, should all be specifically designated here.
- 4. Section 29 of the Bill defines the Functions of the Council and there are no powers for the Council to appoint sub committees to help carry out its work. The appointment of committees is dealt with under section 24 and is the sole prerogative of the Agency CEO. Asbestoswise considers that the power to appoint committees or sub committees should rest with the Council, in consultation with the CEO.
- Section 29 of the Bill also makes no reference to the National Strategic Plan in defining the functions of the Council. Is it really the intention of Government that the Council should have no input into the creation and implementation of the Plan? Asbestoswise recommends that Section 29 is amended to include a reference to the National Strategic Plan.
- 6. Section 8(f) indicates that one of the functions of the Agency is to commission, monitor and promote research about asbestos safety. This is welcomed. Asbestoswise advocates for more medical research into finding a cure and treatments for ARD. It therefore suggests that, in parallel with the work of the Agency and DEEWR, there should be a broader government approach and initiatives from DOHA to increase funding for research into finding a cure and better treatment options for people living with ARD.