



Australian Centre for Disease Control Bill 2025

Contact for recipient:

Senate Standing Committee on
Community Affairs

Contact for PHAA:

Terry Slevin – Chief Executive Officer

A: 20 Napier Close, Deakin ACT 2600

E: phaa@phaa.net.au **T:** (02) 6285 2373

26 September 2025

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Public Health Association
AUSTRALIA

The **Public Health Association of Australia** (PHAA) is Australia's peak body on public health. We advocate for the health and well-being of all individuals in Australia.

We believe that health is a human right, a vital resource for everyday life, and a key factor in sustainability. The health status of all people is impacted by the social, commercial, cultural, political, environmental and economic determinants of health. Specific focus on these determinants is necessary to reduce the root causes of poor health and disease. These determinants underpin the strategic direction of PHAA. Our focus is not just on Australian residents and citizens, but extends to our regional neighbours. We see our well-being as connected to the global community, including those people fleeing violence and poverty, and seeking refuge and asylum in Australia.

Our mission is to promote better health outcomes through increased knowledge, better access and equity, evidence informed policy and effective population-based practice in public health.

Our vision is for a healthy population, a healthy nation and a healthy world, with all people living in an equitable society, underpinned by a well-functioning ecosystem and a healthy environment.

Traditional custodians - we acknowledge the traditional custodians of the lands on which we live and work. We pay respect to Aboriginal and Torres Strait Islander elders past, present and emerging and extend that respect to all other Aboriginal and Torres Strait Islander people.

Introduction

PHAA welcomes the opportunity to provide input to the inquiry into this important Bill. One of the signature public health policy achievements of the first term of the Albanese Government was the initiative to create the Australian Centre for Disease Control. The Bill brings that commitment to reality.

Every other developed economy has such an institution, coordinating responses to emerging disease threats, including the communicable pathogens that cause pandemics such as COVID-19, as well as addressing non-communicable chronic diseases. Completing the establishment of the CDC was a key recommendation of the 2024 COVID-19 Response Inquiry Report into how we handled the pandemic.

The Government's intention to establish the CDC was first announced in 2020 by Mr Albanese as a keynote Labor Party position for the 2022 election. During 2023 and 2024 an 'Interim CDC' entity was established within the Department of Health, Disability and Ageing, while consultation with stakeholders unfolded. In October 2024, the Prime Minister and the Minister for Health announced that the final legislation for the CDC would go to Parliament during 2025, with an intended start date of 1 January 2026.

As the legislation passes through Parliament, PHAA is focussed on securing the following outcomes:

- The capacity for effective federal coordination of the nation's existing public health agencies and capability, data, research, and our national human resources.
- A model of organisational leadership that is both independent of politics, but also closely connected to senior ministers so that their advice will be heard when needed.
- Very strong connections with, and capacity to take advice from, the nation's highly expert public health community.
- A clear mission to address non-communicable diseases and other health threats, not just a mission related to communicable disease outbreaks.
- Adequate and sustained funding for the CDC.

On resourcing, PHAA believes that the agency needs to have adequate funding from day one, to achieve its mission and achieve credibility and trust with the public. An under-funded start could result in poor outcomes and poor public support.

In this respect, PHAA has repeatedly emphasised the absolute need for the CDC to have a fully resourced mission to address chronic non-communicable disease conditions in the population. We note that the definition of "public health matters" provided for in the Bill embraces – as it should – such forms of disease. Regrettably, the Government has indicated that this will be a delayed result.

The 2024 Pandemic Response Inquiry Report highlighted the key role of public trust in emergency response institutions. The Commissioners warned that this trust, while sustained through 2020-22 COVID-19 crisis, became very stretched, and cannot be guaranteed in future events. It is of vital national interest that the new CDC be allowed to function in a manner which will create trust across the community. The legislation before the Parliament, and the early directions set by the new CDC, will determine that outcome. It is essential that Australia get this right.

We support the target of passing the legislation to establish the CDC in the 2025 sittings of Parliament so that the agency can commence 1 January 2026.

Amendments that will enhance the Bill

We offer the following proposed improvements to the Bill.

Definition of “public health matters”

In the definitions section (clause 5), we propose adding two additional points to the definition of **public health matters**, as follows:

- (j) occupational exposures;**
- (k) injury prevention.**

Each of these topics relates to forms of public health and harm that are natural responsibilities falling within the scope of a CDC.

Functions of the Director-General

Additional functions for the Director-General

Clause 11 gives the Director-General a wide range of functions. We propose adding further points, as follows:

- (n) promoting public health research through:**
 - (i) maintaining close relationships with key public health research entities;**
 - (ii) providing advice to health research funding entities on research priorities relevant to addressing key public health matters;**
- (o) building and enhancing expertise in relevant public health expertise and workforce capacity;**

These two activities – research, and workforce capacity – are both vital to the provision of a national evidence driven approach to protecting public health.

Adequate national funding and institutional capacity for public health research is essential to the eventual delivery of public health prevention and promotion outcomes. Against the background of Australia’s well-established research capabilities, the CDC will not have responsibility for research outcomes, but it should have an active role in promoting research, and where necessary advising on areas of research that it considers to be priorities.

Issues of workforce development in public health skills have been examined by a range of processes in recent years involving international agencies such as WHO, the Commonwealth, states and territories. It is appropriate that the leading national agency for public health should have a role in ensuring that workforce capability to serve the nation’s needs for the highest possible quality and adequate quantum of public health expertise is appropriately addressed and promoted.

Occupation disease and injury bodies to be included as key stakeholders

Clause 11 (h) gives the Director-General the function of “providing advice to, and consulting with, any of the following on public health matters:” We propose adding to the listed points a further point, as follows:

- (ix) bodies whose objects include the prevention and management of occupational disease and injuries;**

Above we proposed an addition to the definition of “public health matters’ to capture occupational exposures to harm, and injury prevention. This related amendment simply ensures that in the list of stakeholders to be regularly consulted by the CDC, entities relevant to those areas of concern are included.

Chairing the Advisory Council

We propose that the Advisory Council should be chaired by one of its independent members, not by the Director-General. This is simply a more appropriate working model, which will relieve the Director-General of any difficulty should the discussions within the Advisory Council involve complex controversies.

This change can be achieved simply by increasing the number of members for the Council by one person, and stating that one of the proposed members appointed to the Advisory Council will be appointed as the Chair.

Appointment of the Advisory Council

We propose the addition of a sphere of expertise key to the success of the CDC, that being the field of ***social and behavioural sciences***.

A key driver of public health understanding and problem solving relies on high quality research that understands the health-related motivations and actions taken by the community. Insights into these key drivers can come from this field of expertise and should be represented in the Advisory Council. The Bill could be amended as follows.

In clause 30(4) add:

(h) Social and behavioural sciences.

Annual reporting

We believe that the new CDC will have an important role in maintaining public awareness about a range of key issues. We propose that the Bill be amended by adding a new clause (in Part 6 – Miscellaneous) to require that the Annual Report of the agency (required under the *Public Governance, Performance and Accountability Act*) should report as a priority on the following matters:

- Pandemic preparedness in Australia
- The drivers of, and optimal actions to prevent, chronic disease in Australia
- The impacts of climate change on health in Australia, and optimal actions to address those impacts.

First review of the Act to happen after 3 years

Clause 78 of the Bill provides that the Act will be reviewed every 5 years. But we note the Commitment that the Minister for Health and Aged Care gave in his second reading speech in the House of Representatives, that the first review should happen in 2028.

We propose a simple amendment that the first of these reviews reports before May 2028, and subsequently every five years, so as to fulfil the Minister’s commitment.

Conclusion

PHAA recommends that the Committee's report to the Senate make the following points:

- The Bill is a major enhancement to Australia's health institutions, and deserves Parliament's full support
- The Bill should be passed in time for the CDC to commence legal operation on 1 January 2025
- Minor amendments can still be made to further improve the Bill, including those offered in this submission.

The PHAA appreciates the opportunity to make this submission. Please do not hesitate to contact me should you require additional information or have any queries. We would be happy to appear if hearings are held.

Adjunct Professor Terry Slevin
Chief Executive Officer
Public Health Association of Australia

26 September 2025