Asbestos National Strategic Plan Phase Three 2024–30



Taking action to save lives

Foreword

We are proud to present the third phase of the Asbestos National Strategic Plan which coincides with the 20th anniversary of Australia's complete ban on all forms of asbestos introduced on 31 December 2003.

In developing this plan, we reflected on the significant progress made to eliminate asbestos-related diseases in Australia, and consulted with a wide range of stakeholders to identify the areas that require ongoing action and improvement.

This plan has also been informed by extensive research, including an analysis of achievements against the recommendations of the 2012 Asbestos Management Review and an economic evaluation of options to increase the rate of asbestos removal safely. With approximately 6 million tonnes of ageing asbestos material that still remains in our built environment, there is a more urgent need to focus on safe, proactive removal and disposal.

We want to acknowledge the contribution of our stakeholders, including representatives from governments, unions, industry bodies and support groups across Australia, who were all instrumental in shaping the final document. We will continue to support all governments in the implementation of the Asbestos National Strategic Plan as we move towards ending the harmful legacy of asbestos.

Paul Bastian

Chairperson
Asbestos and Silica Safety
and Eradication Council



Australian Government

Asbestos and Silica Safety and Eradication Council

Jodie Deakes

CEC

Asbestos and Silica Safety and Eradication Agency



Australian Government

Asbestos and Silica Safety and Eradication Agency

Acknowledgement of Country

We acknowledge Aboriginal and Torres Strait Islander peoples and pay respects to their Elders, past and present and emerging.

We do so in a spirit of reconciliation, recognising that Aboriginal and Torres Strait Islander people have suffered significantly and disproportionately from the past mining, manufacture and use of asbestos.

We acknowledge that the presence of asbestos in many communities today is an ongoing health risk and that many traditional lands remain contaminated with asbestos. We commit to contributing to the National Agreement on Closing the Gap through the implementation of the Asbestos National Strategic Plan.



















An estimated 4,000 Australians die annually from asbestos-related diseases¹







Approximately 6.4 million tonnes of asbestos materials remain in our built environment²

Asbestos is in one in three homes across Australia³





Increased asbestos removal from buildings can prevent up to 28,000 deaths by 21004

Asbestos materials are degrading, increasing the risk they pose⁵





Time and cost to recover from a disaster increases significantly if asbestos is present⁵

Every dollar spent on increasing the rate of asbestos removal can return a positive net benefit to the Australian economy⁴





128 countries still use asbestos, although worldwide consumption halved in the past decade, decreasing to 1.3 million tonnes in 2022⁶

About the Asbestos National Strategic Plan

The Asbestos National Strategic Plan (ANSP) provides a phased approach to eliminating asbestos-related diseases (ARDs) in Australia through nationally consistent and coordinated actions.

| Phase one | 2014 | Phase one (2014-2018) focused on establishing an evidence base to understand the asbestos legacy. | | | | | |
|-------------|------|---|--|--|--|--|--|
| | 2015 | This work included: | | | | | |
| | 2016 | developing the National Asbestos Profileestimating the economic burden of ARDs | | | | | |
| | 2017 | and the future burden of mesotheliomaconducting national benchmark surveys | | | | | |
| | 2018 | of asbestos awareness and attitudes. | | | | | |
| Phase two | 2019 | Phase two (2019-2023) contained actions aimed at increasing awareness and supporting the more effective | | | | | |
| | 2020 | management and removal of asbestos containing- materials (ACMs). Progress was measured against nine national targets and achievements included completion of the first version of the National Residential Asbestos Heatmap. | | | | | |
| | 2021 | | | | | | |
| | 2022 | | | | | | |
| | 2023 | | | | | | |
| Phase three | 2024 | Phase three builds on this progress and focuses on practice measures to support the safe removal of ageing ACMs, | | | | | |
| | 2025 | so that we can: • prevent future generations from suffering disease | | | | | |
| | 2026 | prevent further contamination of our environment maximise the significant health and environmental bene | | | | | |
| | 2027 | as well as cost savings, from safe prioritised removal. | | | | | |
| | 2028 | This ANSP also aims to: • support workers and others who are affected by | | | | | |
| | 2029 | asbestos-related diseases to improve their quality of life • facilitate Australia's international role in leading the | | | | | |
| | 2030 | campaign for a worldwide asbestos ban. | | | | | |

Our challenges

Asbestos-related disease rates have not declined as expected following improvement of asbestos management and removal approaches over the last 35 years.⁷

Over 4000 Australians die each year from asbestosrelated diseases, making asbestos the single greatest cause of workrelated deaths in Australia.

The total banning of asbestos in Australia in 2003 did not apply to ACMs already in place (in situ), which means that 20 years on, significant amounts of legacy ACMs still remain in public and commercial buildings, homes and infrastructure.

Asbestos products in Australian buildings are anywhere between 30-100 years old.² This means that ACMs are degrading, increasing the risk of exposure to asbestos fibres. Climate change and the escalating frequency and intensity of extreme weather and other disaster events in Australia is also increasing the risk of exposure to asbestos fibres. ACMs become damaged and disturbed during these events and the subsequent cleanup is dangerous, time-consuming, and costly.

Internationally, 128 countries continue to use asbestos.⁶ Until a worldwide ban is achieved on the production and trade of ACMs, there is a risk of asbestos products entering Australia unlawfully.

Our key challenge under this ANSP is prioritising the removal of this deadly legacy.

This will require a shift away from the acceptance of in situ management of ACMs to a proactive approach of controlling risk and removing ACMs safely, as well as ensuring the necessary supports are in place to encourage and facilitate removal in workplaces and homes.

The current work health and safety regulations for asbestos inhibit removal in workplaces because they focus on the use of lower order controls to minimise the risk, even when it may be practicable to eliminate the risk by removing ACMs. This means that ACM removal often only takes place opportunistically or following emergency events when ACMs have already been damaged.

Furthermore, the lack of effective controls under public health and environment protection laws compromises the safe removal of asbestos in homes.

Principles

Five principles will guide actions under the strategy:

1

Best practice

Adopt evidence-based practices to deliver sustained improvement and ensure our focus is on areas of highest risk, including the most vulnerable populations

2

Efficiency

Eliminate duplication by leveraging our collective efforts

3

Transparency

Roles and responsibilities are acknowledged, and actions and outcomes are shared and publicly reported

4

Partnerships

Governments work together with non-government organisations and Australian communities to extend the reach and impact of our actions

5

Coordination

Actions are coordinated across and within all tiers of government to ensure they are effective, targeted and consistent

7

Working together

Addressing the scourge that is asbestos requires a concerted effort from a diverse group of stakeholders including many government agencies, researchers, industry, employer groups, unions, asbestos-related disease advocates, and public health bodies.

The ANSP is the mechanism which ensures that:

- → The Australian Government and state and territory governments are working to a shared purpose and that priorities and strategic actions are coordinated across the nation.
- → Government agencies with asbestosrelated responsibilities in each jurisdiction work together to provide a whole-ofgovernment response in addressing asbestos issues.
- → Local or other governments and non-government organisations facilitate, support and influence implementation by aligning their actions.
- → Support groups and the broader community have confidence that action is being taken to prevent asbestos-related diseases and the devastating impacts they have.

Managing a problem this big means that everyone needs to work together to make sure actions are consistent, efficient and effective.

Implementation

Effective implementation of the ANSP is dependent on each jurisdiction establishing an interagency coordination group and using the ANSP to guide the development of its own action plan. The interagency coordination group can then set relevant jurisdictional targets and implementation timeframes according to the jurisdiction's baseline and priorities.

Evaluating and reporting progress

All jurisdictions will monitor, evaluate and report progress against their targets to Asbestos and Silica Safety and Eradication Agency (ASSEA).

ASSEA will report on progress consistent with requirements in the Asbestos and Silica Safety and Eradication Agency Act 2013. It will develop an annual progress report, which will be provided to all relevant Ministers and published on its website.

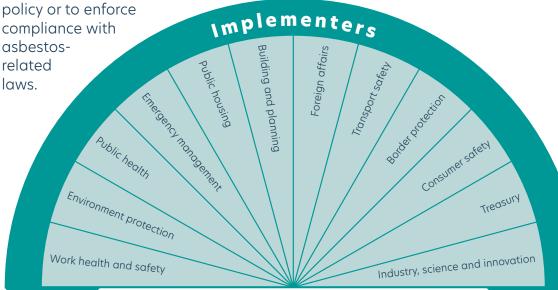
The Asbestos Safety and Eradication Council will provide ongoing guidance, advice and recommendations to assist in the successful delivery of the ANSP's targets.

A midpoint review of the ANSP will provide an opportunity to adjust, if necessary, the national action plans and targets.

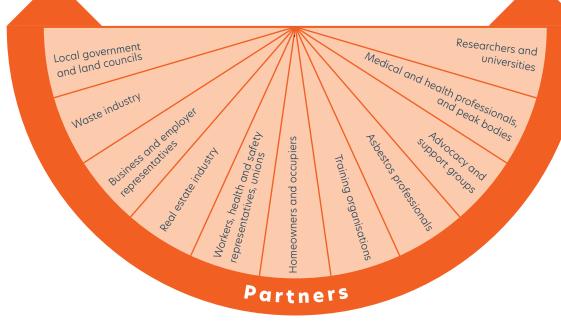
The Asbestos Safety System

Successful implementation of the ANSP involves collaboration between:

- The implementers: Australian, state and territory governments are responsible for implementing the ANSP actions and achieving its targets. A range of agencies have an overarching role to develop
- The partners: Local governments (including regional and land councils) as well as non-government groups play an important role in facilitating, supporting and influencing action.



Collaboration





The Strategy has three aims:

Aim 1

Eliminate asbestosrelated diseases (ARDs) in Australia

Prevent exposure to airborne asbestos fibres at each stage of the asbestos life-cycle



Priority 1

Accurate identification and consistent assessment



Priority 2

Risk control and prioritised removal



Priority 3

Safe and effective transport and disposal

Aim 2

Support workers and others who are affected by asbestosrelated diseases

Improve the quality of life for people with ARDs by improving their diagnosis, treatment and support



Priority 4

Early diagnosis of asbestos-related diseases so that appropriate care and treatments can be provided



Priority 5

People with asbestos-related diseases, their family and carers are able to access and navigate the care and support system with ease and dignity



Priority 6

Continued improvements in diagnostic, therapeutic and other treatment methods

Aim 3

Be an International Leader

Focus on securing a worldwide ban on the production and trade of asbestos.



Priority 7

Capacity building in South-East Asia



Priority 8

Promoting the Australian Government's position on asbestos bans



Priority 9

Preventing and responding effectively to illegal importation of products containing asbestos

For each aim the barriers to achieving change have been identified, along with drivers to overcome these barriers.

Each aim has a dedicated national action plan.

Aim 1

Eliminate asbestos-related disease in Australia

Prevent exposure to airborne asbestos fibres

Priority Areas



Priority 1

Accurate identification and consistent assessment



Priority 2

Risk control and prioritised removal



Priority 3

Safe and effective transport and disposal

Barriers to achieving change

Capability barriers

- Lack of knowledge about asbestos including where it is found and how to safely deal with ACMs
- Technical complexity involved in the identification of ACMs
- Lack of awareness of legal requirements

Opportunity barriers

- Lack of centralised information on ACM location and condition
- Jurisdictional overlap and misalignment of asbestos-related laws and administrative processes
- Disposal capacity

Motivation barriers

- Overconfidence in knowledge and capabilities about ACMs
- Mistaken or incorrect attitudes and beliefs about risk and likelihood of being caught for not doing the right thing
- Removal and disposal costs

Drivers to overcome the barriers



Raise asbestos risk awareness



Improve knowledge, skills and workforce capacity



Strengthen and align relevant legal frameworks



Support and enforce compliance with asbestosrelated laws



Innovate, Conduct incentivise and research and inspire action data collection



Conduct
d research and
data collection
to inform
policy and
practice

National Action Plan for eliminating asbestos-related diseases



Priority 1 Accurate identification and consistent assessment

Why is it a priority?

A robust and standardised process for identifying the presence, location and condition of ACMs enables effective actions to be taken to prevent exposure to airborne asbestos fibres including the development of prioritised asbestos removal programs.

What will success look like?

Accurate asbestos identification and consistent risk assessments improve the quality of asbestos registers and management plans in workplaces to allow risk-based removal to occur.

Homeowners know where ACMs are located so that action can be taken to prevent asbestos exposure.

Action

Deliver National Asbestos Awareness Campaigns targeting:

- DIY and trades
- Indigenous Australians
- Culturally and Linguistically Diverse (CALD)
- Remote and regional communities
- Buyers and sellers of residential property
- Renters and landlords of residential property
- School communities

Lead Partners

ASSEA

All governments Local governments Non-government groups



Improve asbestos-related training for:

- Workers including apprentices, waste and transport workers
- Asbestos surveyors
- Building inspectors and certifiers
- Environmental Health Officers
- Real estate agents and property managers

Unions

- .

Employer representatives
Training organisations
Jobs and Skills Councils

Develop national guidance for conducting asbestos surveys including for naturally occurring asbestos

ASSEA

All

governments

All governments Unions

Employer representatives Asbestos professionals

Support expansion of accreditation systems for asbestos professionals

ASSEA

All governments
Asbestos professionals

| Driver | Action | Lead | Partners |
|------------|--|--------------------|--|
| | Implement asbestos awareness training for certain workers | All governments | Unions Employer representatives Training organisations |
| | Implement identification and disclosure of asbestos in residential properties: • at point of sale and lease • for planning and development approvals Improve incentives for the identification of ACMs in residential properties | All governments | Real estate industry |
| | Continue to respond to and investigate asbestos related complaints and incidences | All regulators | |
| ⟨ \ | Improve real time detection technologies | ASSEA | All governments |
| | Improve and promote the National Residential Asbestos Heatmap | | Local government Non-government bodies |
| | Expand analytical techniques for identifying all types and morphology of asbestos fibres | | |
| | Promote the use of technology to achieve a consistent ACM risk assessment approach | | |
| | Support establishment of a national, publicly accessible platform for asbestos registers | | |
| | Conduct regular awareness surveys and evaluations of awareness campaigns | ASSEA | All governments Non-government bodies |
| | Use artificial intelligence to detect legacy asbestos, including in remote Indigenous communities, to inform better management | | |
| | Develop jurisdictional asbestos profiles which include details of asbestos stocks and flows | ASSEA | All governments |



Priority 2 Risk control and prioritised removal

Why is it a priority?

Asbestos materials have reached end of product life and are degrading, increasing the risk of exposure to asbestos fibres.
Without significant intervention, Australia will still have around one million tonnes of in situ ACMs in the built environment by 2060.

What will success look like?

An increase in the rate of removal of ACMs so that they are removed from the built environment significantly earlier than the current estimate of 2100. Until ACMs are safely removed the risk of exposure needs to be effectively controlled.

Driver

Action

Action

Deliver National Asbestos Awareness Campaigns targeting:

- DIY and trades
- Indigenous Australians
- Remote and regional communities
- Property owners/managers to promote the benefits of proactive removal
- Duty holders regarding duties under work health and safety (WHS) laws

Lead Partners

ASSEA

All governments Local governments Non-government groups



| Provide resources and guidance for health and safety representatives to ensure they can effectively exercise their functions in relation to asbestos risk controls | Safe Work Australia ASSEA | All governments Unions Employer representatives Training organisations |
|--|---------------------------------|---|
| Review the effectiveness of vocational education and training courses for licensing asbestos removalists, including for CALD students | Safe Work Australia ASSEA | All governments Unions Employer representatives Training organisations Jobs and Skills Councils |
| Assess industry capacity to remove ACMs | ASSEA | Asbestos professionals |
| Develop best practice approach for government-funded asbestos removal program | ASSEA | All governments Local government Non-government bodies |

| Driver | Action | Lead | Partners |
|---------------|---|---------------------------------|--|
| | Facilitate a whole-of-government approach to compliance and enforcement by developing guidelines for regulatory agencies and local government to work together | ASSEA | All governments Local government |
| | Progress through Safe Work Australia processes a review and revision of the model WHS regulations to improve asbestos risk control and support prioritised removal, including: • training • the effectiveness of asbestos management plans in ensuring prioritised ACM removal within specified timeframes • transition to lowering the occupational exposure limit in line with changes agreed by the European Commission • the ability of WHS regulators to issue notices in relation to high-risk ACMs installed prior to 31 December 2003 • the definition of friable asbestos • the effectiveness of in situ risk controls including encapsulation • unlicensed removal | Safe Work Australia | All governments Unions Employer representatives Asbestos professionals |
| | Progress through Safe Work Australia processes a review and revision of model WHS codes of practice and guidance to align with any changes to the model WHS regulations | Safe Work Australia ASSEA | All governments Unions Employer representatives Asbestos professionals |
| | Strengthen requirements for safe asbestos removal and disposal in situations where WHS laws do not apply, e.g. homeowners removing asbestos themselves | Public health agencies | ASSEA |
| | Investigate expanding corporate reporting obligations to include asbestos liabilities: • in financial statements • as part of environmental, social and governance reporting | Australian Government | Employer representatives |
| # <u>></u> | Develop an annual campaign to promote compliance with asbestos-related laws Ensure effective oversight of permit and licensing regimes Raise awareness of penalties for non-compliance and publicise successful enforcement outcomes | All Regulators | ASSEA Non-government bodies |

Driver

Action

Lead

Partners



 Develop a risk-based, prioritised ACM removal program for publicly owned and controlled properties

 Develop incentives to encourage the safe removal of ACMs from residential and commercial properties, including All governments

ASSEA

- housing of Indigenous AustraliansSupport local government to administer devolved responsibilities
- ASSEA





Research low level exposures in the workplace and non-workplace environment, including in water and soil



Priority 3 Safe and effective transport and disposal

Why is it a priority?

Environment protection agencies and local authorities across Australia continue to face the challenge of illegal disposal of asbestos which harms both human health and the environment and results in significant cleanup costs to the community. The barriers to the legal disposal of asbestos are cost, convenience and awareness.

What will success look like?

Asbestos waste can be tracked from removal to disposal.

Easier and safer asbestos waste disposal options help remove barriers to legal disposal.

| Driver |
|--------|
| |

Action

Deliver National Asbestos Awareness Campaigns targeting:

- illegal disposal
- responding to a disaster event

ASSEA All governments

Non-government groups



Develop guides on:

- asbestos contamination in construction and demolition waste
- asbestos safety for waste facility operators and workers
- how to classify asbestos waste consistently and accurately under the NEPM waste codes
- emergency response

ASSEA

All governments Unions

Employer representatives Safe Work Australia



Investigate aligning thresholds for asbestos waste transport licences and licensing fees to achieve national consistency.

Investigate the consistency between the requirements for determining asbestos presence in soils under WHS and environment protection laws

Investigate creating an additional waste classification code for asbestos-contaminated soil and rubble so that it is reported separately under NEPM waste codes (N120 and N220)

Australian government

All governments

Driver

Action



Respond to and investigate asbestosrelated complaints and incidences

Develop an annual campaign to promote compliance with asbestosrelated laws

Ensure effective oversight of permit and licensing regimes

Raise awareness of penalties for noncompliance and publicise successful enforcement outcomes

Lead **Partners**

protection agencies

Environment Local government



Develop a nationally consistent asbestos waste tracking system which integrates with asbestos removal notifications

Improve incentives to encourage responsible ACM disposal

Conduct a needs assessment for future waste capacity

All

Local government governments Waste industry



Update asbestos waste data estimates

Identify illegal ACM disposal patterns and hotspots

Monitor alternative asbestos waste disposal technologies

ASSEA

All governments Waste industry

Aim 2

Support workers and others who are affected by asbestos-related disease

Improve the lives of people with asbestos-related diseases

Priority Areas



Priority 4

Early diagnosis of asbestos-related diseases so appropriate care and treatments can be provided



Priority 5

People with asbestos-related diseases, their family and carers are able to access and navigate the care and support system with ease and dignity



Priority 6

Continued improvements in diagnostic, therapeutic and other treatment methods

Barriers to achieving outcomes

- Lack of specialists and allied health professionals skilled in diagnosing, treating, and supporting people with asbestosrelated diseases
- Lack of funding for support services for people affected by asbestos-related diseases
- Lack of funding for preclinical research and clinical trials

Drivers to overcome the barriers



Raise asbestos risk awareness



Improve knowledge, skills and workforce capacity



Innovate, incentivise and inspire action



Conduct research and data collection to inform policy and practice

National Action Plan for supporting workers and others who are affected by asbestos-related diseases



Priority 4 Early diagnosis of asbestos-related diseases

Why is it a priority?

Early detection of asbestos-related diseases is essential to help prevent disease progression and increase survival rates.

What will success look like?

An increase in the number of medical and health professionals who are trained in early diagnosis of asbestos-related diseases and able to respond and refer appropriately.

Driver

Action

Build awareness among medical and health professionals about diagnosing and caring for people with asbestosrelated diseases (ARDs)

Lead

Partners

ASSEA Researchers

> Medical and health professionals

Peak professional bodies and societies

Advocacy and support

groups



Support the development and dissemination of a guide for medical and health professionals (including instructions for taking occupational and non-occupational history relating to asbestos exposure) to support early diagnosis of ARDs

ASSEA

Researchers

Medical and health professionals

Peak professional bodies

and societies

Advocacy and support

groups



Priority 5 Easy navigation of care and support system

Why is it a priority?

The diagnosis of an ARD can be overwhelming for those affected, not only physically but also emotionally and financially. The not-for-profit ARD support groups around Australia play a vital role in advising and assisting ARD sufferers, their families, friends and carers to make living with the disease easier.

What will success look like?

People affected by ARDs:

- are able to navigate the care and support system with ease and dignity
- have timely and equitable access to the support, care and treatment they need

Driver

Action



Support the work of advocacy and support groups around Australia

Support the development and dissemination of guides on optimal care for people with ARDs

Lead

All governments

ASSEA

Researchers

Partners

Medical and health professionals

Peak professional bodies

and societies

Advocacy and support

groups



Priority 6 Improved diagnostic, therapeutic and other treatment methods

Why is it a priority?

Improving diagnostic, therapeutic and other treatment methods will help people with an ARD live longer, healthier lives.

What will success look like?

An increase in funding for ARD research and better health outcomes for people with an ARD.

Driver

Action

Support development of evidencebased clinical practice guidelines for the diagnosis and treatment of mesothelioma and other ARDs

Lead

Partners

ASSEA Researchers

Medical and health professionals

Peak professional bodies

and societies

Advocacy and support

groups



Support ongoing ARD research, including conducting preclinical research and clinical trials

All

Researchers

governments Medical and health professionals

Peak professional bodies

and societies

Aim 3

Be an International Leader

Working to secure a worldwide ban on the production and trade of asbestos

Priority Areas



Priority 7 Capacity building in South-East Asia



Priority 8 Promoting the Australian Government's position on asbestos bans



Priority 9 Preventing and responding effectively to illegal importation of products containing asbestos

Barriers to achieving results

The single biggest challenge to progressing asbestos bans continues to be the significant efforts by the asbestos industry and major asbestos exporting countries to block any regulation of their product.

Drivers to overcome the barriers



Raise asbestos risk awareness



Improve knowledge, skills and workforce capacity



and align relevant legal frameworks

Strengthen



Support and enforce compliance with asbestosrelated laws



Innovate,



Conduct incentivise and research and inspire action data collection to inform policy and practice

National Action Plan for International Leadership



Why is it a priority?

Neighbouring countries in South-East Asia continue to have large levels of chrysotile asbestos consumption, often coupled with very poor work health and safety standards. Assisting these countries develop capability to detect ARDs and improve practices to prevent asbestos exposure builds the foundation for progressing asbestos bans and aligns with Australia's International Development Program for the Indo-Pacific.

What will success look like?

A decline in asbestos consumption in South-East Asia.

| Driver | Action | Lead | Partners |
|--------|--|-------|-----------------------|
| | Support the development of awareness materials and awareness raising activities in South-East Asia and the Pacific (target countries) | ASSEA | Non-government bodies |
| | Share best practice approaches for asbestos risk control and removal Develop training and capacity building programs on: • disease detection • preventing and monitoring asbestos exposure | ASSEA | Non-government bodies |
| | Share technological solutions to:improve ACM identification, management, removal and disposal | ASSEA | Non-government bodies |
| | Share research to help:detect diseaseimprove ACM identification, management, removal and disposal | ASSEA | Non-government bodies |
| | Commission research to ascertain the burden of asbestos-related disease in target countries | ASSEA | Non-government bodies |



Priority 8 Promoting the Australian Government's position on asbestos bans

Why is it a priority?

What will success look like?

Australia's past use of asbestos has left a devastating legacy. It is important that we use our experience in a positive way to support campaigns to ban the production and trade of asbestos and ACMs to prevent further death and disease.

Australia's influence leads to more countries implementing asbestos bans.

| Driver | Action | Lead | Partners |
|--------|---|--------------------------|-----------------------|
| | Develop models for regulatory reforms in target countries including import/export and workplace use bans | ASSEA | Non-government bodies |
| | Promote reforms to multi-lateral trade, health, economic and environmental agreements (such as the Rotterdam Convention, Global Framework on Chemicals, World Health Organisation | Australian government | Non-government bodies |



Priority 9 Preventing and responding effectively to illegal importation of products containing asbestos

Why is it a priority?

What will success look like?

Until a worldwide ban is achieved on the production and trade of asbestos and ACMs, there is a risk of asbestos products entering Australia unlawfully. The Australian Border Force is responsible for enforcing the import prohibition at the border and works together with WHS regulators and the Australian Competition and Consumer Commission to trace imports that have entered Australia and commence remediation.

and International Labour Organisation)

All importation incidents detected are subject to regulatory action and repeat importations prevented.

Driver Action Lead **Partners** Non-government bodies Develop resources for the import supply Australian chain to keep preventing ACMs from Government entering Australia

- Ensure effective oversight of import/ export permits
- Promote compliance with asbestosrelated laws
- Raise awareness of penalties for noncompliance and publicise successful enforcement outcomes

Australian Government

Measuring Performance

National targets are set against the aims of the ANSP and measure the collective efforts of implementers and partners in the asbestos safety system.

The targets set out below identify a measurable goal, specify a timeframe where relevant and identify baseline data against which achievement can be measured.

| Aim | Performance measures | National Targets | |
|--|---|---|--|
| Eliminating asbestos- related diseases in Australia | Awareness: • Level of awareness amongst target groups • Performance against national awareness campaign benchmarks | Awareness levels increase each year compared to the baseline year of 2024 Campaign exceeds government performance benchmarks | |
| | Workforce capability: • Workers completing asbestos- related training • Asbestos professionals licensed and/or accredited | Number of workers completing asbestos-related training increases each year Number of people licensed and/or accredited to carry out asbestos activities increases each year | |
| | Rate of asbestos removal | Asbestos stocks decline more than the 2021 estimate of 10% per decade ² in line with the additional rates (extra 0.6-1.0% per annum) included in the socio-economic evaluation ⁴ | |
| Supporting workers and others who | Funding for mesothelioma and lung cancer research and programs | Increase in funding from \$30.9 million reported by Cancer Australia in 2020 | |
| are affected by ARDs | Funding for advocacy and support groups | Increase in funding from amounts reported in the groups' 2022-2023 financial statements | |
| International leadership | Asbestos consumption in SE Asia | 50% decline in consumption by 2030 from baseline of 175,000 tonnes in 2022 | |
| | Detections of imported products which contain asbestos | All importation incidents detected are subject to regulatory action, with the aim of preventing repeat importations. | |

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Asbestos National Strategic Plan

Phase Three 2024-30