



Australian Government
Asbestos Safety and Eradication Agency

National Strategic Plan for Asbestos Management and Awareness 2014–18

## **National Strategic Plan** for Asbestos Management and Awareness 2014-18

Australian Government working with:







ACT









Tasmanian Government



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The document must be attributed as the National Strategic Plan for Asbestos Management and Awareness 2014–18.

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## Foreword



# It's an unenviable fact that living in Australia means potentially living with asbestos.

The reality is that dealing with the ongoing legacy of asbestos is an enormous challenge with no easy path to resolution. As a nation we are still coming to grips with the full impact and reach of this deadly material. As one of the biggest users of asbestos-containing materials, Australia has one of the highest reported per-capita rates of mesothelioma in the world.

With up to one in three Australian homes containing asbestos, families doing simple renovation jobs around the house run the risk of exposure without even realising it. We have more work to do to raise overall awareness about the dangers of being exposed to asbestos–not just at work, but in our own communities.

The Australian Government strongly believes in the need for a coordinated national approach to tackling asbestos.

Addressing the scourge that is asbestos will require a concerted effort from a diverse group of stakeholders including government, researchers, industry, employer groups, employee representatives, asbestos-related disease societies and advocates, and public health bodies. The Asbestos Safety and Eradication Agency has worked with state and territory governments to revise this *National Strategic Plan for Asbestos Management and Awareness* to ensure that right around Australia, we are working together to reduce the risks posed by asbestos and deliver a plan that represents the expertise and experience of government, industry and the community.

On behalf of the Australian Government, I look forward to working with all levels of government to promote awareness and deliver practical, long-term solutions to this difficult problem.

is also

Senator the Hon Eric Abetz Minister for Employment



## Introduction



The journey towards a National Strategic Plan for Asbestos Management and Awareness accelerated in 2010. The Australian Government established the Asbestos

Management Review to examine ways to improve asbestos management in the Australian community and make recommendations for the development of a national strategic plan.

Following many months of research, consultations, and detailed analysis of all the submissions received, the *Asbestos Management Review Report* was released in June 2012. The report laid the foundations for a national strategic plan and the establishment of an independent national agency to coordinate this work. The agency came into existence with bipartisan and unanimous support for the passage of the *Asbestos Safety and Eradication Agency Act 2013* through both houses of the Parliament of Australia.

The Asbestos Safety and Eradication Council was established to advise the Minister and the Asbestos Safety and Eradication Agency. The Council has worked closely with the agency to review the plan and ensure a national consensus is maintained to deal with our nation's legacy of asbestos. This revised plan presents a comprehensive set of achievable national goals and outcomes for asbestos awareness, handling and eradication — supported by state and territory governments — with a coordinated approach for governments to work together on these fundamental issues. The Council looks forward to working constructively with all levels of government, the agency and stakeholders to further the critically important work of implementing this plan.

**Geoff Fary** Chair of the Asbestos Safety and Eradication Council



In 2013, the newly formed Asbestos Safety and Eradication Agency received a request from the Minister for Employment, Senator the Hon. Eric Abetz, to revise the

National Strategic Plan for Asbestos Management and Awareness to achieve the support of state and territory governments. Working with the Department of Employment and the Asbestos Safety and Eradiation Council, the agency has undertaken consultation with the Australian Government, states and territories to prepare the plan for national endorsement. This process ensured the plan is practical, achievable and will support asbestos management and awareness in Australia.

This revised plan (2014-18) focuses on developing evidence to inform practical approaches to asbestos management and awareness. This will be supported by measures to track progress towards eliminating asbestos related disease and ensure Australia can address the future risks that will be encountered by ageing asbestos-containing material in the built environment.

The agency will support the plan and contribute to a coordination of efforts across all levels of governments where there is a common focus. We will support state and territory asbestos management strategies and plans by sharing information and developing evidence that will inform action.



Peter Tighe Chief Executive Officer of the Asbestos Safety and Eradication Agency

# Why do we need a national approach?

Preventing the risk of asbestos exposure is important to all Australians. While the states and territories have taken steps to minimise exposure, predominantly in the workplace, this is the first time a national approach to asbestos eradication, handling and awareness is being pursued. The National Strategic Plan for Asbestos Management and Awareness (the plan) is a high level forward looking document. This establishes a framework within which the states and territories are able to work cooperatively and independently to achieve set objectives. The Asbestos Safety and Eradication Agency oversees the coordination of the plan and over the life of the plan will provide insights into the dimensions of asbestos management and eradication across Australia's public health, environment, planning, work health and safety, emergency services and research sectors. This will progress Australia toward the ultimate elimination of asbestos-related disease.

### Intersection with state, territory and local government asbestos management plans

The plan supports coordinating common efforts across governments with a strong focus on facilitating information sharing. The plan will not direct or duplicate the content of any state, territory or local government plans.

### Future steps

The issues around asbestos safety, awareness and management are complex and multi-faceted. Many of the issues covered by this plan, in particular identification and removal, will require all levels of government to work together to determine the best approach to this task. The plan provides a framework that supports all levels of government to prevent the risks of asbestos exposure and work towards the elimination of asbestos-related disease.

# Background

### What is asbestos?

Asbestos is a term for a group of six naturally occurring mineral fibres belonging to two groups:

- Serpentine group comprised of only chrysotile (white asbestos), and
- Amphibole group comprised of anthophyllite, amosite (brown asbestos or grey asbestos), crocidolite (blue asbestos), tremolite and actinolite.

### What was asbestos used for?

Asbestos was long considered one of the most versatile minerals because of its flexibility, tensile strength, insulation from heat and electricity, chemical inertness and affordability.

This made it attractive to many industries and it is known to have more than 3000 applications worldwide. Australia was one of the highest users of asbestos per capita in the world up until the mid 1980s, including a significant number of asbestos products in homes. The widespread use of asbestos has left a legacy of asbestos-containing materials (ACMs) in our built environment.

# The risks of exposure to asbestos fibres

Asbestos is a known carcinogen. Inhalation of fibres is associated with increased incidences of a number of respiratory diseases including asbestosis, mesothelioma, pleural and lung cancers. The World Health Organisation<sup>1</sup> and the International Agency for Research on Cancer<sup>11,11</sup> have stated there is no identified safe threshold for exposure to asbestos. Even limited or short-term exposure to asbestos fibres can be dangerous; however exposure does not necessarily make development of mesothelioma inevitable. There is still much unknown about why some people are susceptible to mesothelioma, while others who have been regularly exposed to asbestos do not develop any asbestos-related disease. This is why a precautionary approach to exposure to asbestos fibres is adopted.

Australia has the highest reported per capita incidence of asbestos-related disease in the world, including the highest incidences of mesothelioma<sup>iv</sup>. In 2012, 652 Australians died from mesothelioma<sup>v</sup>. It is estimated that for every death attributed to mesothelioma two more people die from lung cancer caused by asbestos<sup>vi</sup>. Based on existing evidence, it is predicted as many as 25,000 Australians will die from mesothelioma over the next 40 years<sup>vii</sup>. Due to the long latency period for mesothelioma, these figures may not reflect current management practices but still need to be addressed. Recent evidence indicates there is now a third wave of asbestos-related disease caused by non-occupational exposure associated with home renovations<sup>viii</sup>. This highlights the need to refocus efforts to prevent asbestos-related diseases and strengthen the management of asbestos risks.

### When does asbestos pose a risk?

ACMs can be categorised as friable and non-friable. Non-friable asbestos, where it is mixed with other bonding materials like cement and is maintained in good condition, is the type most commonly found in our built environment. Friable asbestos is material that contains asbestos and is in a powder form, or can be crumbled, pulverised, or reduced to a powder by hand pressure when dry. Individual fibres can become airborne and cause a risk to a person's health through the inhalation of asbestos.

Both friable and non-friable asbestos may pose a significant health risk to the community if the materials are not properly maintained or safely removed. Potential health risks are posed by any contact with airborne asbestos fibres. This can be caused by:

- weathering of ACMs
- damage to ACMs
- building and/or maintenance work involving ACMs
- demolition and/or removal of ACMs
- unsafe disposal of ACMs
- asbestos contaminated land.

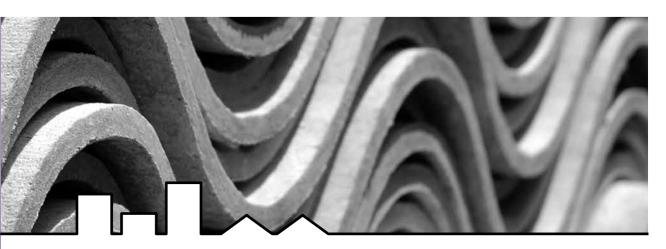
The risk of exposure to asbestos fibres is broad if not effectively managed, and is therefore a significant issue for the entire Australian community.

### When was asbestos banned?

In the 1980s, Australian governments began banning asbestos due to concerns about asbestosrelated deaths and diseases. Most states and territories introduced a ban on the mining of raw asbestos and the manufacture, importation and installation of products containing crocidolite and amosite asbestos from 31 December 1984. By the late 1980s, the use of asbestos in building products was banned in most Australian states and territories. On 31 December 2003, a national ban on all uses of chrysotile asbestos came into effect. The ban also extended to the import and export of all products containing asbestos.

Despite the bans on mining and industrial use, many asbestos products that were used in the past are still present in our built environment today, including in many government, commercial and residential buildings. The presence of in-situ asbestos means it needs to be managed and the risks of exposure may continue for many years to come.

The international management of asbestos is an issue that impacts the Australian community. While Australia has implemented a ban on the importation of ACMs, not all other countries have done so, and its use in products produced in some parts of the world continues to be widespread. There are also inconsistencies with the definition and labelling of what is defined as 'asbestos free', which has led to the inadvertent importation of products that contain asbestos into Australia.



## Overview of the National Strategic Plan

## Key strategies and outcomes

### Overarching aim

To prevent exposure to airborne asbestos fibres in order to eliminate asbestos-related disease in Australia.

### Strategies

Six key strategies are identified as a means of achieving this goal:

- Awareness
- Best practice
- Identification
- Removal
- Research, and
- International leadership.

### Principles

The principles outlined below will guide how the work to deliver the outcomes of the plan will be achieved. The principles are:

**Precaution** – a proactive and cautious approach should be taken to ensure there is no increased risk to the community in any activities to be implemented under the plan.

**Evidence-based decision making** – decision making regarding asbestos management and awareness should be based on sound evidence and analysis from scientifically robust sources.

**Transparency** – activities will be conducted in an open and transparent manner and all stakeholders should have access to the information available.

**Public participation** – the risks of exposure to asbestos is a community issue and consideration needs to be given to the interests and concerns of all Australians.

**Collaboration** – with management of asbestos involving all tiers of government, activities must be planned and delivered through effective coordination between agencies and governments.

## How to tackle the task

The Australian community indicated a national strategic plan should aspire to reduce and eliminate further asbestos-related disease in submissions made to the *Asbestos Management Review* (AMR). To achieve this, the AMR recommended the use of an aspirational aim to eliminate the risks of asbestos from government and commercial structures by 2030. This date was intended to be aspirational and will not be used as a final deadline but as a way to test objectives and timelines to measure progress to reduce and ultimately eliminate asbestos-related diseases in Australia.

The plan takes a phased approach, pursuing shorter term targets that align with the overarching vision of the plan to eliminate asbestos-related disease in Australia.

### Overview of phased planning

This plan is part of a phased strategy for asbestos management and awareness that will encompass three stages. Previous work undertaken by both the AMR and the Office of Asbestos Safety (OAS) shows there is limited information and data available regarding the location and condition of asbestos in Australia. Information gathered in the first phase will inform the goals to be pursued in the second and third phases to achieve the aim of reducing the risk of exposure to asbestos fibres and eliminate asbestos-related disease. Accordingly, information obtained in the first phase may result in a shift in focus in relation to the second and third phase aims and outcomes.

### Phase one of the plan: 2014-18

The plan will continue to support the existing risk management of asbestos and complement this by identifying evidence and information to reduce risks. Phase one will undertake work on areas where there is a widespread consensus. It will incorporate research, projects and testing of approaches to gather the evidence, supporting tools, and systems to identify options that reduce the risks posed by asbestos in the built environment.

### Later phases of the plan

Following this plan, further phases will be developed that will continue to work towards the goal of eliminating asbestos-related disease in Australia. Phase two will apply the knowledge and information developed in the first phase to inform goals that can be achieved. It is expected that this testing will focus on a number of different types of structures in a variety of locations to identify any unique challenges that may need to be addressed to support the safe management and removal of ageing ACM. This will also examine the effectiveness of relevant frameworks such as public health, planning, work health and safety and the environment to identify potential improvement opportunities for consideration to prevent exposure to asbestos and eliminate asbestos-related disease in Australia.

By phase three, a practical approach will be identified to address the ongoing risks posed by the remaining ACM in the built environment, and to support the removal of all remaining asbestos in poor condition or likely to pose a risk so far as is reasonably practicable.

### Working with governments

It is important that all levels of government work together and take an active role in the awareness, management and ultimate eradication of asbestos to reduce the incidence of asbestos-related disease.

To achieve this, the plan promotes working in partnership with the relevant Australian, state and territory government agencies and local government. Government stakeholders will also provide ongoing input into the implementation of the plan and development of future phases.

### Working with stakeholders

In addition to government, the safe management of asbestos involves a diverse group, including, researchers, industry, employer groups, employee representatives, not-for-profit organisations, and public health bodies. To ensure that the community's concerns are heard and addressed, the Asbestos Safety and Eradication Agency will work in partnership with all stakeholders to ensure the priority areas of the plan reflect the needs of the community.

The plan is not intended to be a static document. In the ongoing development of the plan, the agency will facilitate a whole of community risk-based approach that addresses public concerns about asbestos. As this work evolves, so too will the plan.



## **Strategies**

## Strategy one: Awareness

Many different government and community bodies have a role in increasing the public awareness of the dangers of asbestos exposure. The effectiveness of these efforts can be improved through national coordination and targeted to areas of need.

# Goal: Increase public awareness of the health risks posed by working with or being exposed to asbestos.

### Deliverables

- Review of awareness raising information, programmes and campaigns in Australia and internationally to identify gaps and improve awareness in the Australian community of the risks of asbestos in the built environment.
- Develop a "one-stop-shop" of information on asbestos-related issues, integrating information, and providing referral points for members of the public.
- Develop practical, evidence-based asbestos safety awareness material for people likely to come into contact with ACMs in a residential setting.

- 1.1 Increased community awareness of the risks posed by asbestos and its impact on the health of the community.
- 1.2 Improved access to information for those who work and live with asbestos, including where and when to source information and advice.
- 1.3 Demonstrated cultural and behavioural change within the community as a result of improved understanding of both the health risks and exposure pathways of asbestos in both commercial and residential environments.



## Strategy two: Best practice

Best practice approaches need to be based on evidence. The plan encourages discussion, information sharing, and promoting best practice to build continual improvement in the handling and management of ACMs. The Asbestos Safety and Eradication Agency will facilitate further discussion with state, territory and local government, and relevant stakeholders to prioritise and achieve these outcomes.

# Goal: Identify and share best practice in asbestos management, education, transport, storage and disposal.

### Deliverables

- Identify opportunities to share best practice for initiatives related to the safe management of asbestos such as licensing, education, training and home renovations where ACMs may be present.
- Identify industry needs and gaps in awareness and training for workers who may come into contact with ACMs — such as tradespeople — and develop model training options for industry adoption.
- Review disaster planning practices and information regarding the risks of exposure to asbestos to assist in times of emergencies and natural disasters.
- Identify and promote best practice transport, storage and disposal practices, including support for:
  - initiatives to encourage safe storage and disposal at licensed facilities
  - initiatives for the reporting of illegal disposal sites.

- 2.1 Evidence-based best practice to minimise risks in targeted areas.
- 2.2 Model training for workers likely to come into contact with ACMs to increase competency and decrease risk.
- 2.3 Australian communities are supported to manage asbestos risks during natural disasters or emergencies.
- 2.4 Improved transport, storage and disposal practices for ACMs.

## Strategy three: Identification

There is currently an absence of reliable data in relation to the precise location and condition of ACMs nation wide. Improving identification and sharing of existing information will enable the development of tools and evidence-based approaches to identify and grade the condition of ACMs in residential, government and commercial buildings, as well as asbestos contaminated land in Australia.

# Goal: Improve the identification and grading of asbestos and sharing of information regarding the location of ACMs.

### Deliverables

- Review current practices with the aim of developing:
  - a model grading system for the condition of ACMs
  - a model framework for the stabilisation and containment of ACMs in poor condition
  - a model process to identify asbestos contaminated land.
- Review building and infrastructure data to estimate likely presence of ACMs.
- Pilot residential ACM identification tools and strategies with local government partners.
- Support the 2003 ban on the importation of ACMs with improved coordinated efforts to identify and respond to the importation of ACMs.

- 3.1 Evidence-based model for grading in-situ asbestos is developed.
- 3.2 Improved stabilisation and containment practices for ACMs in poor condition.
- 3.3 Improved identification and management of information regarding asbestos contaminated land.
- 3.4 Estimated total presence of ACMs in the built environment is available.
- 3.5 Improved practice in the residential sector to identify and minimise the risk of exposure, in particular for DIY home renovators.
- 3.6 Effective coordinated response when ACMs in imported products are identified.

## Strategy four: Removal

Under this plan, the activities undertaken in the removal strategy will inform the potential practicality of removing asbestos from the built environment to eliminate asbestos-related diseases. The first step will be to identify the current levels of risk posed by ACMs, and the different challenges presented in government, commercial and residential sectors to identify priority areas for action. The removal strategy will include targeted pilot removal projects to provide evidence to inform the approach to managing ageing ACM in the built environment. This will also consider the barriers to safe removal and the capacity of infrastructure and the labour market to safely remove asbestos.

Goal: Identify priority areas where ACMs present a risk, identify the barriers to the safe removal of asbestos, and review management and removal infrastructure to estimate the capacity and rate for the safe removal of asbestos.

### Deliverables

- Identify priority areas where ACMs may present a risk due to deterioration for action.
- Develop and conduct projects in various locations and conditions where ACMs are in poor condition or likely to cause risks to ensure removal approaches are effective.
- Conduct a review into asbestos removal infrastructure (transport, storage and disposal facilities) across Australia focusing on capacity and future risks.
- Investigate the barriers to the safe removal of ACMs from government, commercial and residential properties, and develop policy options to support removal of asbestos in poor condition.
- Review the potential risks and benefits of a prioritised removal programme to safely remove ACMs in government occupied and controlled buildings and commercial premises, including the requirement for exceptions, to reduce asbestos-related disease.

### Outcomes

4.1 Priority actions identified support removal of ACMs in poor condition.

- 4.2 Options to remove asbestos in poor condition are practical, evidence-based and targeted towards sources of asbestos-related disease.
- 4.3 Asbestos removal infrastructure can meet the future needs and demands of ageing ACMs without creating increased risk.
- 4.4 The barriers to the safe removal of ACMs are reviewed and options to address the challenges faced by government, commercial and residential sectors are evaluated.

## Strategy five: Research

Any work undertaken to improve asbestos management and awareness needs a strong research base. There has been a significant amount of research and information regarding asbestos and asbestos-related diseases conducted in Australia and internationally. A nationally coordinated research approach will consider innovative ways to prevent exposure to asbestos fibres and minimise the impact of asbestos-related disease.

# Goal: Commission, monitor and promote research into the prevention of asbestos exposure and asbestos-related disease.

#### Deliverables

- Identify key national and international research and reports to enable better sharing of information to inform policy and best practice.
- Commission and promote research that reduces the risks of exposure to asbestos and minimises the impact of asbestos-related disease.

- 5.1 Coordination of key research supports evidence informed policy and practice.
- 5.2 Commissioned research identifies practical and innovative approaches to prevent or minimise risks from exposure to asbestos fibres, and support for people with asbestos-related diseases.

## Strategy six: International leadership

Australia was one of the highest per capita users of asbestos in the world. It is therefore appropriate that Australia plays a leadership role in a global campaign aimed at securing a total worldwide ban in the production and trade of asbestos and asbestos-containing products.

# Goal: Australia continues to play a leadership role in a global campaign for a worldwide ban on asbestos mining and manufacturing.

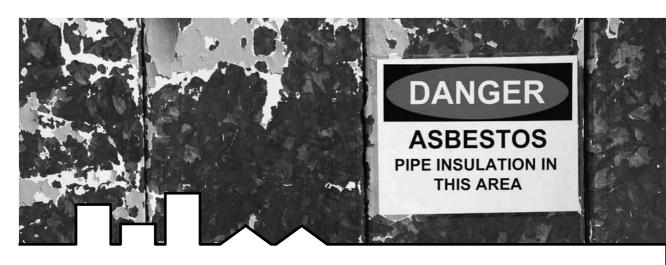
#### Deliverables

- Pursue opportunities for improvements in international arrangements for asbestos awareness, management, and a global ban on asbestos mining and manufacturing.
- Proactively share knowledge, tools and information on best practice with other countries and relevant international organisations.

#### Outcomes

6.1 International issues relating to asbestos and asbestos-related disease are effectively coordinated.

- 6.2 Australia is recognised as an international voice in the global campaign against asbestos hazards.
- 6.3 Best practice for awareness, management and eradication of asbestos is shared internationally.



## Monitoring and evaluation

# The role of the Asbestos Safety and Eradication Agency

The plan will be supported by the Asbestos Safety and Eradication Agency through coordination, consultation, research and reporting. The agency's annual operational plans will be approved by the Minister for Employment and the agency will consult with states, territories and local government to identify annual priorities and targets to progressively achieve the outcomes of the plan.

## Annual report

An annual report on progress against the operational plans will be published by the agency and tabled in the Parliament of Australia. Following tabling, annual reports will be published on the agency's website.

## Strategies and outcomes summary

AIM: to prevent exposure to airborne asbestos fibres in order to eliminate asbestos-related disease in Australia.

Principles

- Precaution
- Evidence-based decision making

- Transparency
- Public participation
- Collaboration

## Strategies and outcomes summary

AIM: to prevent exposure to airborne asbestos fibres in order to eliminate asbestos-related disease in Australia.

### 1. AWARENESS

Increase public awareness of the health risks posed by working with or being exposed to asbestos

### 2. BEST PRACTICE

Identify and share best practice in asbestos management, education, handling, storage and disposal

## 3. IDENTIFICATION

Improve the identification and grading of asbestos and sharing of information regarding the location of ACMs

- 1.1 Increased community awareness of the risks posed by asbestos and its impact on the health of the community.
- 1.2 Improved access to information for those who work and live with asbestos, including where and when to source information and advice.
- 1.3 Demonstrated cultural and behavioural change within the community as a result of improved understanding of both the health risks and exposure pathways of asbestos in both commercial and residential environments.

- 2.1 Evidence-based best practice to minimise risks in targeted areas.
- 2.2 Model training for workers likely to come into contact with ACMs to increase competency and decrease risk.
- 2.3 Australian communities are supported to manage asbestos risks during natural disasters or emergencies.
- 2.4 Improved transport, storage and disposal practices for ACM.

- 3.1 Evidence-based model for grading in-situ asbestos is developed.
- 3.2 Improved stabilisation and containment practices for ACMs in poor condition.
- 3.3 Improved identification and management of information regarding asbestos contaminated land.
- 3.4 Estimated total presence of ACMs in the built environment is available.
- 3.5 Improved practice in the residential sector to identify and minimise the risk of exposure, in particular for DIY home renovators.
- 3.6 Effective coordinated response when ACMs in imported material are identified.

GOALS

## PRINCIPLES

- precaution
- evidence-based decision making
- transparency
- public participation
- collaboration

### 4. REMOVAL

Identify priority areas where ACMs present a risk, identify the barriers to the safe removal of asbestos and review management and removal infrastructure to estimate the capacity and rate for the safe removal of asbestos

- 4.1 Priority actions identified support removal of ACMs in poor condition.
- 4.2 Options to remove asbestos in poor condition are practical, evidencebased and targeted towards sources of asbestos-related disease.
- 4.3 Asbestos removal infrastructure can meet the future needs and demands of ageing ACMs without creating increased risk.
- 4.4 The barriers to the safe removal of ACMs are reviewed and options to address the challenges faced by government, commercial and residential sectors are evaluated.

### 5. RESEARCH

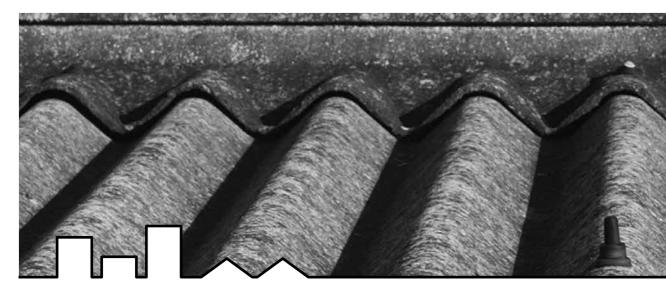
Commission, monitor and promote research into the prevention of asbestos exposure and asbestos-related disease.

#### 5.1 Coordination of key research supports evidence informed policy and practice.

5.2 Commissioned research identifies practical and innovative approaches to prevent or minimise risks from exposure to asbestos fibres, and support for people with asbestosrelated diseases. 6. INTERNATIONAL LEADERSHIP

Australia continues to play a leadership role in a global campaign for a worldwide ban on asbestos mining and manufacturing.

- 6.1 International issues relating to asbestos and asbestosrelated disease are effectively coordinated.
- 6.2 Australia recognised as an international voice in the global campaign against asbestos hazards.
- 6.3 Best practice for awareness, management and eradication of asbestos is shared internationally.



## Endnotes

- <sup>i</sup> World Health Organisation (2006), *Elimination of Asbestos-Related Disease*, Geneva, http://whqlibdoc.who.int/hq/2006/WHO\_SDE\_OEH\_06.03\_eng.pdf.
- <sup>ii</sup> International Agency for Research on Cancer (1977), 'Asbestos' Monographs on the Evaluation of Carcinogen Risks of Chemicals to Man, vol 14.
- International Agency for Research on Cancer (1987), Asbestos. In Overall Evaluation of Carcinogenicity. IARC Monographs on the Evaluation of Carcinogenic Risk of Chemicals to Humans, suppl 7. Lyon, France: International Agency for Research on Cancer. pp 106-116.
- <sup>iv</sup> Australian Institute of Health and Welfare Australian Cancer Incidence and Mortality: Mesothelioma for Australia (ICD10 C45). Retrieved from www.aihw.gov.au/acim-books/.
- Australian Mesothelioma Registry. (2014). 3rd Annual Report Mesothelioma in Australia 2013. Retrieved from http://www.mesothelioma-australia.com/publications-and-data/publications.
- <sup>vi</sup> Leigh, J, Davidson, P, Hendrie, L, Berry, D (2002), 'Malignant mesothelioma in Australia, 1945-2000'. *American Journal of Industrial Medicine* Volume 41, Issue 3: pp. 188-201.
- <sup>vii</sup> Peto, Julian. (2008). The Killer Within. *The University of Melbourne Voice*, vol. 3, no. 2.
- Viii Olsen, Nola J Franklin, P, Reid, A, de Klerk, N, Threlfal, T, Shilkin, K, Musk, B (2012), 'Increasing incidence of malignant mesothelioma after exposure to asbestos during home maintenance and renovation', *The Medical Journal of Australia*, vol. 195, no. 5.



### Access and further information

The Australian Government aims to provide services that are fair, easy to access and simple to use and respond to the cultural and linguistic needs of Australia's diverse society. For assistance with accessing the *National Strategic Plan for Asbestos Management and Awareness* or to make an enquiry or comment, please contact the agency at:

Asbestos Safety and Eradication Agency GPO Box 9880 Sydney NSW 2001

Email: enquiries@asbestossafety.gov.au

Phone: 1300 363 079

Web: www.asbestossafety.gov.au

#### Connect with the Asbestos Safety and Eradication Agency via social media:

Twitter: www.twitter.com/AsbestosSafety

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LinkedIn: www.linkedin.com/AsbestosSafety

## Notes



