



Improving Lung Health for Australians

Lung Foundation Australia submission to the Federal Budget 2025-2026

Executive summary

Lung Foundation Australia is Australia's leading lung health peak body and national charity. Founded in 1990, we have become the trusted point-of-call for the 1 in 3 Australians living with a lung disease.

We work to improve lung health and reduce the impact of lung disease and lung cancer. To do this, we deliver information and telehealth support, facilitate access to exercise maintenance and peer support programs, coordinate education for health professionals, provide research grants, and advocate for policy change. In partnership with consumers, health professionals, researchers, and like-minded organisations, we advocate for:

- reducing risk factors and improving early diagnosis,
- equitable access to best-practice treatment and care,
- strengthened government policy, programs, and strategy, and
- improved research investment and data infrastructure.

Lung cancer and chronic obstructive pulmonary disease are two of the leading causes of premature mortality in Australia. In 2020-2021, lung conditions collectively cost the Australian healthcare system approximately \$11 billion, more than double the costs of diabetes and chronic kidney disease combined. Lung Foundation Australia have identified seven priorities requiring government action to improve the lung health of Australians.

Lung Foundation Australia's priorities for the Federal Budget 2025-2026

- Reduce pressure on the healthcare system by investing in our Respiratory Care Program.
- Address lung cancer inequities by increasing access to specialist lung cancer nurses.
- Continue funding for Australia's best-practice lung health education and training program in primary care.
- Invest in prevention to safeguard the future health of Australians.
- Strategic investment to support implementation of the National Lung Cancer Screening Program.
- 6 Improve air quality and climate resilience in Australia.
- Reduce the burden of occupational respiratory diseases by investing in research and projects.

Lung Foundation Australia's recommendations align with several policy documents, including the Department of Health's National Strategic Action Plan for Lung Conditions and related National Strategic Framework for Chronic Conditions, the National Preventive Health Strategy, the Australian Cancer Plan, the National Tobacco Strategy, and more. We seek your commitment and investment to address these priorities and promote lung health in Australia.

Budget at a glance



Continue funding the vital Respiratory Care Program – \$1.6 million per year over 3 years



COPD contributes significantly to avoidable disease burden in Australia.



Our Respiratory Care Program reduces the burden of COPD on the healthcare system.



Expand access to specialist lung cancer nurses – \$5 million to fund 20 additional nurses, or \$1.2 million per year to fund 6 nurses on the Heart of Australia trucks supporting lung cancer screening



Lung cancer is the leading cause of cancer-related death in Australia.



Specialist lung cancer nurses enable timely and coordinated care, improving health outcomes.



Continue funding the world-leading Lung Learning Program – \$1.7 million over 3 years



There is a critical need for education and training in primary care to promote evidence-based care.



The Lung Learning Program provides tailored education and training to improve core lung health capabilities.



Increase investment in preventive health – towards 5% of the health budget



Less than 2% of total health expenditure in Australia is spent on public health.



Increased investment in prevention will help protect the future health of Australians.



Fund ongoing engagement with priority populations plus dedicated information and advice for consumers to support lung cancer screening – \$1.95 million over 3 years



Priority groups and consumers must be engaged and supported through screening implementation.



Lung Foundation Australia can leverage existing work and services to address these needs.



Improve air quality and climate resilience – adopt the World Health Organization guidelines and invest \$0.7 million in resources



Climate change is negatively impacting air quality in Australia. There is no safe level of air pollution.



Adopting the WHO guidelines will improve air quality in Australia and resources will build climate resilience.



Reduce the burden of occupational respiratory diseases – \$25 million per year for a dedicated research fund and \$4.7 million over 3.5 years to continue Lung Foundation Australia's Dust Disease Initiative



Thousands of Australians continue to be at risk of occupational respiratory disease.



Research and our Dust Disease Initiative will promote prevention, early detection, and support.

Reduce pressure on the healthcare system by investing in our Respiratory Care Program

Invest \$1.6 million per year over 3 years to continue the vital Respiratory Care Program



Chronic obstructive pulmonary disease (COPD) is a term that describes chronic lung diseases characterised by obstructed airflow, including emphysema, chronic bronchitis, and chronic asthma. Breathlessness is the key symptom. COPD results from long-term exposure to irritants, most often cigarette smoke, but also occupational hazards and air pollution. COPD is a progressive, long-term lung condition that leads to increasing breathing difficulty, disability, and premature death.

The impact of COPD in Australia

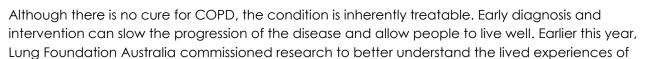
Prevalence: More than 600,000 people were living with COPD in 2022

Hospitalisations: Over 270,000 potentially-preventable hospital bed days in 2021-2022 – the second highest among people aged 65+ years

Deaths: Caused more than 7,000 deaths in 2023 – fourth leading disease-specific cause of death

Burden: Caused more than 200,000 disability-adjusted life years in 2023 – fifth leading cause of total disease burden and impacting productivity

Health system costs: \$832 million in 2020-2021 – more than dementia



people living with or caring for someone with a lung condition. Participants reported major difficulties in accessing primary healthcare services due to limited availability and long wait times. One in four people with COPD stated that finding a GP with a good understanding of lung disease was a barrier to effectively managing their condition, as was lack of information and understanding about how to manage their lung disease. There is a need to expand access to structured information and support services that can complement and enhance care provided in general practice.

1 in 4 people with COPD say lack of information and understanding is a barrier to being able to effectively manage their condition.

^{*}Full budget available on request.

Lung Foundation Australia's Respiratory Care Program

Our Respiratory Care Program aims to improve patient engagement with their healthcare teams and encourage effective self-management. The service identifies gaps in evidence-based care and provides participants with the information and support required to address these. The program comprises three clinician-led telephone appointments conducted over four to six months, plus a follow-up call 12 months after the final session.

Lung Foundation Australia's Respiratory Care Program is:

- ✓ Free to consumers, providing important health support without added cost-of-living pressure
- Evidence based and cost effective, helping to relieve pressure on the health system
- ✓ Accessible across
 Australia, promoting equitable health outcomes

Our Respiratory Care Program is free to consumers, promoting equitable access to support regardless of financial means. We view this as being essential in the context of current cost-of-living pressures, which are making it very difficult for many to afford necessary health care. Earlier this year, Lung Foundation Australia conducted a survey to understand the impact of recent cost-of-living pressures on people living with a lung condition (N=~700). Respondents reported having made numerous changes to their use of health care due to cost-of-living pressures, such as cutting back on allied health services (40%), reducing GP appointments (30%), delaying tests and scans (18%), and using out-of-date medicines (14%)¹. People with a lung condition are especially vulnerable to cost-of-living pressures as they experience higher out-of-pocket costs than other chronic conditions and are more likely to skip health care as a result².

"I have received invaluable information that has allowed me to undertake respiratory testing and medical follow-up including medication review. I have also ceased smoking."

- Participant of Lung Foundation Australia's Respiratory Care Program Lung Foundation Australia's Respiratory Care Program is supported by a rigorous data collection protocol. Among the clients who had completed the program by September 2024, a statistically significant 32% decrease in emergency department presentations was observed. Similar findings have been demonstrated by a separate independent

evaluation of the service³.

Since 2019, **more than 1,000 Australians living with COPD** have been clients of our Respiratory Care Program. Funding for this vital program was previously provided by the Australian Government through grants associated with the Chronic Conditions Framework, which is currently under review. Due to delays in the refresh of this key government strategy, this program needs budget commitment to extend and increase support for Australians who are falling through the cracks.

Address lung cancer inequities by increasing access to specialist lung cancer nurses

Invest \$5 million for 20 additional specialist lung cancer nurses, or, \$1.2 million per year for 6 specialist lung cancer nurses to be placed on the Heart of Australia trucks



Lung cancer is a leading cause of disease burden in Australia. It is the most common cause of cancer-related death⁴ and the third leading cause of premature mortality across all diseases⁵. Less than one in four people with lung cancer survive more than five years after being diagnosed⁴.

Lived experience research commissioned by Lung Foundation Australia earlier this year found that people with lung cancer face several barriers to effectively managing their condition, including stigma (26% of people), lack of information and understanding about their condition (26% of people), and complexity of the healthcare system (24% of people).

Lung cancer is a leading cause of disease burden:



cause of cancerrelated death



cause of premature mortality across all diseases

The National Lung Cancer Screening Program (NLCSP) that is launching in July 2025 will reduce the burden of lung cancer in Australia by enabling lung cancer to be detected earlier when treatment is more likely to be successful. To fully realise the program's potential benefits, it is essential that screening efforts are supported by timely and coordinated diagnosis and treatment. Specialist lung cancer nurses are responsible for guiding patients through the complex investigation and diagnostic pathways and facilitating timely treatment and care, so they are best placed to address this need.

The Optimal Care Pathway for lung cancer care delivery states that specialist lung cancer nurses should be core members of multidisciplinary teams that are caring for people with lung cancer⁶. Despite this, findings from a recent national landscape survey show that less than 50% of multidisciplinary teams treating people with lung cancer have a specialist lung cancer nurse on site⁷. Addressing these workforce shortfalls is now more important than ever given the upcoming launch of the NLCSP.

*Full budget available on request.

Lung Foundation Australia's specialist lung cancer nurses

The role of specialist lung cancer nurses is distinct from that of an oncology nurse, all-cancer nurse, or respiratory nurse given their advanced levels of practice and demonstrated in-depth knowledge, skills and

expertise in lung cancer, its treatment, and patient needs.

When a specialist lung cancer nurse is involved:

- ✓ **44% more likely** to have access to needed treatment.
- **√ 75% less likely** to present to an Emergency Department.

Our specialist lung cancer nurse model of care ensures support is available to patients when they need it most, by specifically identifying and addressing gaps in local health services that lead to unwarranted variations in outcomes. For example, Lung Foundation Australia specialist lung cancer nurses may be placed in respiratory services where they can provide essential preventive and prediagnostic support. They may also take an active role in post-treatment survivorship care when other nursing care typically decreases. Lung Foundation Australia's specialist lung cancer nurses are equipped to navigate the many barriers that lung cancer patients face, including stigma, and they are instrumental in helping to reducing inequities.

We recommend the Australian Government fund an additional 20 specialist lung cancer nurses nationally, or six specialist lung cancer nurses for the Heart of Australia trucks that will support the NLCSP, travelling to regional and remote areas providing access to lung cancer screening. As part of the healthcare team servicing these areas, our specialist lung cancer nurses will provide support and advice at the early stages of the diagnostic pathway.



Continue funding for Australia's best-practice lung health education and training program in primary care

Invest \$1.7 million over 3 years to continue and expand the Lung Learning Program

Despite the growing availability of evidence-based guidelines and clinical practice standards, modern healthcare systems continue to struggle with effective implementation of these in practice.

It is estimated that only 60% of healthcare delivery aligns to evidence-based or consensus-based guidelines. The remaining 40% is either wasteful (30%) or harmful (10%)8. This issue is particularly evident in respiratory health care.

Lung diseases, including lung cancer, contribute substantially to the burden of disease in Australia. Lung cancer and COPD are among the top five leading causes of premature mortality and among the top 10 causes of total disease burden⁵.

Factors contributing to the excessive burden of lung diseases include low awareness and recognition of risk factors and symptoms, persistent issues with delayed diagnosis and misdiagnosis, and subsequent delays in evidence-based treatments?

Lived experience research conducted by Lung Foundation Australia earlier this year found that, for one in four people with a lung condition, difficulty finding a GP with a good understanding of lung disease was a barrier to effectively managing their 28% of people with a lung condition had presented to their GP with symptoms more than 5 times before being diagnosed.

condition. Primary healthcare services are facing increasing pressures in the context of changing population structures and health needs. Within the constraints of the resources available, it can be extremely difficult for these services to consistently deliver high-value care. There is a critical need for education and training programs that can effectively support the primary care workforce to implement evidence-based guidelines in practice.

"My condition became worse as it was constantly misdiagnosed. It wasn't until I was hospitalised that a specialist found I had COPD. I have had many years suffering and being given antibiotics."

- Consumer living with COPD and bronchiectasis

^{*}Full budget available on request.

The Lung Learning Program

On behalf of the Department of Health, Lung Foundation Australia in partnership with Asthma Australia and the Thoracic Society of Australia and New Zealand have been funded to deliver the Lung Learning Program, which consists of the Lung Learning Framework and the Lung Learning Hub. The Lung Learning Hub is a centralised source of quality-assured, evidence-based respiratory health education and training for primary healthcare professionals.



Training and education offered via the Lung Learning Hub is underpinned by the Lung Learning Framework, a competency-based framework developed through co-design with leading peak health bodies. The Lung Learning Program is a world-first in respiratory health. It directly responds to the Department of Health's National Strategic Action Plan for Lung Conditions (and upcoming refresh of the National Strategic Framework for Chronic Conditions) by enabling the translation of science into evidence-based, high-quality respiratory health care.

Healthcare professionals who engage with the Lung Learning Hub are encouraged to complete a self-appraisal tool to assess their current skill level against key areas and capabilities from the Lung Learning Framework. The results from this self-appraisal are then used to tailor education and training opportunities to the individual.

"This competency-based education framework will revolutionise Australian lung health education and go a long way in improving outcomes for patients."

- Dr Kerry Hancock, GP

There were more than 3,400 interactions with our education and training in 2023

and there have been over 3,000 interactions in 2024 so far. Interactions are expected to increase substantially in 2025, with more education and training being launched than ever before.

Significant upgrades to the functionality and usability of the Lung Learning Hub have been designed and deployed to further support implementation and integration in primary care settings. A user experience survey administered after the launch of these changes showed high levels of satisfaction, with 63% of respondents reporting it was extremely easy to locate specific information, 86% of respondents reporting they experienced no technical difficulties, and 91% of respondents stating they trusted the information and learning opportunities presented.

Engaging general practitioners (GPs) in lung health learning has been a focus for Lung Foundation Australia over the past 12 months. As a result of scaled up marketing and communication strategies such as digital advertising, in-person attendance at primary care events, and accreditation with RACGP, GP participation has increased from 5% to 19% in this time. For webinars specifically, there has been substantial growth in GP attendance from an average of 10 GPs per webinar in 2022 to an average of 50 in 2023.

We are committed to ensuring the program continues to achieve meaningful outcomes for healthcare professionals and their patients. With the recent release of the COPD Clinical Care Standards¹⁰, we expect there to be even greater demand for current lung health education and training. Funding for this vital program was previously provided by the Australian Government through grants associated with the Chronic Conditions Framework, which is currently under review. Due to delays in the refresh of this key government strategy, funding for this program is now at risk.

Invest in prevention to safeguard the future health of Australians

Rapidly increase investment in preventive health, towards 5% of the health budget, including increased and sustained investment in the Health Peak and Advisory Bodies Program



It is estimated that less than 2% of total health expenditure in Australia is spent on public health—that is just \$140 per person¹¹. In 2018-2019, more than \$2 billion of health system spending on select lung conditions was attributed to potentially avoidable risk factors such as tobacco use, occupational hazards, and

air pollution¹². Prevention also enhances the economy by increasing productivity, such as through reduced absenteeism and years lost in the workforce¹³. The case for investing in public health and prevention is clear. As Australia's population ages and the burden of chronic disease rises, it is more important than ever for the Australian Government to increase preventive health funding.

The National Preventive Health Strategy outlines a clear framework for action on prevention in Australia and has been endorsed by the Commonwealth, state, and territory governments. A key target set by the Strategy is for investment in preventive health to have increased to 5% of total health expenditure by 2030. Considering the proportion of healthcare expenditure attributed to potentially avoidable risk factors, governments should be looking to rapidly increase investment in evidence-based, cost-effective preventive health initiatives, such as those recommended in the NPHS. Nongovernment organisations are core partners in prevention and essential to achieving the targets set in the NPHS. Non-

Lung Foundation Australia is the only charity and leading lung health peak body in Australia.

Lung Foundation Australia are currently enabled by the Health Peak and Advisory Bodies Program to contribute to the national health agenda, including by supporting the priorities of the National Preventive Health Strategy. We do this by gathering evidence, co-designing, informing policy, producing quality resources, and disseminating information via preventive health campaigns.

government organisations, such as Lung Foundation Australia, work closely with a range of stakeholders to identify and act on issues of greatest importance to their community. The Health Peak and Advisory Bodies (HPAB) Program provides non-government organisations with funding to contribute to Australia's health system and support key national health priorities, including prevention. Ongoing investment for non-government organisations through the HPAB Program must be prioritised to ensure sustained and coordinated action on prevention. Such efforts are crucial to achieving the outcomes of the NPHS, as there is still much to be achieved.

Strategic investment to support implementation of the National Lung Cancer Screening Program

Invest \$1.95 million over 3 years for sustained engagement with priority populations and dedicated consumer information and advice

We highly commend the Australian Government for their commitment to the timely implementation of the new National Lung Cancer Screening Program (NLCSP), which will save thousands of lives. A significant amount of preparatory work has been undertaken over the last few years to encourage the program's success. We applaud the Government for their dedication to equity at all stages. Lung Foundation Australia, with funding from the Department of Health, have been leading work to ensure priority populations are supported to access the NLCSP. The work completed to date will have a substantial impact on the effectiveness of the program. However, as we enter the implementation phase, there is a need for additional investment to ensure learnings continue to be applied and any new gaps or needs are proactively addressed.

We are currently supporting priority populations to access lung cancer screening by:

- Establishing and fostering partnerships with priority population stakeholders.
- Identifying barriers and enablers to participation for government consideration.
- Hosting a Consumer Committee that provides advice on the program and related materials, with representation from different priority population groups.

We recommend the Government fund Lung Foundation Australia \$0.95m over 3 years to expand its work with priority populations to sustain uptake and participation in lung cancer screening among these groups. With this investment, Lung Foundation Australia will be able to:

- Continue working with priority population groups and consumers to test materials and support tailored roll-out of the program. Consumer input will also be especially important as part of program evaluation, and Lung Foundation Australia are best placed to facilitate this.
- Explore barriers and enablers for other priority populations, such as veterans, and produce recommendations for the Department of Health.

In recognition of the pressures facing primary care services, we also recommend the Government invest in expanding our telephone helpline (including extended hours) so that we can provide information about lung cancer screening eligibility and address queries related to findings and next steps. This simple and affordable service can be piloted and assessed for impact and is ready to be implemented with funding of \$1m over 3 years. As the Health Peak for lung conditions, Lung Foundation Australia has strong linkages with Healthdirect, but we have higher levels of community trust (51% vs 6% from a recent survey). Service expansion, accompanied by the development of suitable resources, will support the Australian healthcare system to deliver this life-saving new screening program.

*Full budget available on request.

Improve air quality and climate resilience in Australia

Adopt the World Health Organizations's Air Quality Guidelines and invest \$0.7 million in resources



Air pollution is the contamination of the outdoor environment by a chemical, physical, or biological agent that modifies the natural air quality of the atmosphere. Climate change is one of the main contributors to air pollution. Greenhouse gases from the combustion of fossil fuels contaminate the air, rising temperatures cause an increase in allergens and air pollutants¹⁴, and more frequent and severe weather changes lead to increases in harmful smoke and mould in the air¹⁵.

In Australia, premature deaths due to air pollution cost approximately \$11 billion to \$24 billion per year.

Whilst Australia has relatively clean air, **no level of air pollution is safe**. There is significant evidence demonstrating that even low exposure to air pollution can cause harm, and this is especially true for those who live with a lung condition¹⁶. As such, air quality standards in Australia need to be strengthened and the community must have access to necessary information.

With increasing climatic events, we recommend that Australia adopt the <u>World Health</u> <u>Organization's global air quality guidelines 2021</u>, considered international best practice, and urgently invest in consumer resources that build climate resilience.

In 2023, Lung Foundation Australia carried out a survey with people in Australia living with lung disease¹⁷. We found that the results of climate change and air pollution were having a significant impact on people's lives, including a reduction in quality of life and the need for additional medical treatment. Less than half said they had been able to find helpful guidance or resources on air pollution and living with a lung disease. Correspondingly, over half of the respondents said they wanted further resources and guidance on air pollution and living with a lung disease.

With funding from the Australian Government, Lung Foundation Australia will develop resources that will address critical gaps in information for the general population and for people who live with a lung condition. The resources, which can be disseminated before, during, and after climate emergencies, will help to improve public risk perception and management in the face of climate change and enhance climate resilience in Australia.

^{*}Full budget available on request.

Reduce the burden of occupational respiratory diseases by investing in research and projects

Invest \$25 million per year in a dedicated research fund and \$4.7 million for 3.5 years to expand and enhance our Dust Disease Initiative

There are many hazardous dusts found in the work environment that, when breathed in, can cause lung conditions known as occupational respiratory diseases. Lung Foundation Australia commends the governments' decision to ban engineered stone, but thousands of Australians working in other industries continue to be at risk of occupational respiratory disease. The long latency period of these conditions means workers will continue to be identified for years to come.

Lung Foundation Australia were funded by the Department of Health to establish a network of stakeholders who work collaboratively to identify the priorities for

Examples of Lung Foundation Australia's work in occupational respiratory disease:

- Convene a network of stakeholders to establish key research priorities.
- Conduct National Silicosis Prevention and Awareness Campaign (<u>Another One</u> <u>Fights the Dust</u>) annually.
- Offer comprehensive and confidential <u>support services</u> for Australians with silicosis and their families.

future research in occupational respiratory disease. The first stage of this work focusing on silicosis has been completed and findings have been shared with the Department. We have also recently held a multidisciplinary research forum on occupational lung cancer, with an associated consumer forum imminent. It is clear from our engagement that a breadth of research must be done to advance the prevention, detection, and treatment of occupational respiratory diseases in Australia, yet national research investment from the NHMRC and MRFF over the last 10 years has only amounted to approximately \$6 million. If Australia is committed to being a global leader and addressing this workplace health and safety issues, we must back research. We recommend that a dedicated MRFF grant opportunity be made available annually in alignment with recommendations made in the MRFF 10-year Investment Plan, the National Dust Disease Taskforce Final Report and the National Silicosis Prevention Strategy.

In addition, Lung Foundation Australia were successful in securing the 'Prioritising Improved Care for People with Dust Related Diseases Initiatives' grant from the Department of Health. We have successfully advanced all activities as per the grant, which is due to end in June 2025, and now seek ongoing funding to expand and enhance this program of work. We will continue to work with the Australian Government to prevent silicosis and support families and patients who are living with or yet to be diagnosed with this devastating lung disease.

^{*}Full budget available on request.

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