

December 2023

Lung Foundation Australia – Submission to the Federal Government's COVID-19 Response Inquiry

About Lung Foundation Australia

Lung Foundation Australia (LFA) is the only national charity and leading peak-body dedicated to supporting anyone with a lung disease including lung cancer. For over 32 years we have been the trusted point-of-call for lung health for patients, their families, carers, health professionals, and the general community. Our mission is to improve lung health and reduce the impact of lung disease for all Australians. We will continue working to ensure lung health is a priority for all, from promoting lung health and early diagnosis, advocating for policy change and research investment, raising awareness about the symptoms and prevalence of lung disease, and championing equitable access to treatment and care. We have partnered with patients, health professionals, researchers, medical organisations and the broader community to drive reform in the delivery of health services in Australia to benefit the more than 7 million people impacted by lung disease or lung cancer.

Our work in COVID-19

LFA played an essential role in supporting people with a lung disease or lung cancer throughout the pandemic. At the beginning of the pandemic, we delivered important, timely information to the community, and saw a 62% increase in traffic to our website. We continue to provide updates and information on COVID-19 and have also taken a leading role in supporting people with long COVID. In 2022, we partnered with The George Institute for Global Health to examine the relationship between long COVID and lung disease (see **Attachment 1**). We also conducted a national survey, which received over 2000 responses, to understand the impacts of the pandemic on the lung disease community and their experiences of ongoing COVID-19 symptoms (see **Attachment 2**). We gave important feedback to the Federal Government's inquiry into long COVID and repeated COVID infections (see **Attachment 3**), and partnered with patients, health professionals, researchers, and organisations to address critical gaps in long COVID information (see **Attachment 4**).

We commend the actions taken by Government to protect the health of Australians during the COVID-19 pandemic. However, we welcome the opportunity to provide feedback on the Commonwealth's response, in particular key learnings as the peak lung disease organisation. We note the likelihood of future pandemics involving respiratory illness, given the high pandemic potential of numerous respiratory viruses¹, and the unique challenges this presents for people living with a lung condition. Similarly, we recognise that this inquiry is specific to the historic COVID-19 response, but we want to reiterate that COVID-19 is still prevalent and continuing to have an impact, especially for those living with a lung condition. If you would like to discuss our recommendations further, please contact Paige Preston at paigep@lungfoundation.com.au.

Sincerely,



Mark Brooke
Chief Executive Officer
Lung Foundation Australia

Key recommendations

Based on our experiences through the pandemic, and those of our consumers, we recommend:

- 1) Improved consistency in messaging and health advice across governments.**
- 2) Further planning and consideration to better meet the needs of people living with a lung condition, given the likelihood of future pandemics involving respiratory illness.**
- 3) Increased investment in vaccines and preventive health broadly.**
- 4) Apply a health equity lens to preparedness and response efforts, facilitated by meaningful engagement of communities in decision making processes.**

We also endorse the recommendations made by Asthma Australia as a valued partner in lung health.

Response to Terms of Reference

1) Governance

a) Federal approach to ensure clear, consistent messaging and public health measures

The COVID-19 response was actioned, to a large degree, by each state and territory independently. This resulted in inconsistent messaging and differing regulations, which in turn led to mistrust of the government during a period of great confusion and uncertainty. Findings from our survey revealed relatively low levels of trust towards federal and state governments (see **Attachment 2**). We acknowledge the complexities of ever-changing views and evidence and the confusion this can cause when attempting to provide clear and certain advice. In the event of future pandemics, we recommend a more cohesive approach to governance and decision making, with federal consistency as much as possible to increase acceptance of government advice.

2) Key health response measures

a) Public health messaging

In the event of future pandemics, we recommend a more nationally cohesive approach to messaging and campaigns to limit unnecessary confusion and ensure consistency in an evolving landscape. For those at greater risk, ensuring that clear, and potentially targeted, messaging is available to them is vital, and we note that this includes those living with a lung condition (see 2b).

b) Consider the implications of key response measures for people living with a lung condition and plan accordingly

We recognise and appreciate the complexity of deciding on and implementing health response measures throughout the COVID-19 pandemic. As is to be expected in this context, unintended consequences and challenges emerged for certain groups as these measures were rolled out. Notably, people living with a lung disease faced additional barriers to accessing health services and support (see **Attachment 2**). The public were instructed to take specific actions if they were experiencing COVID-like symptoms, many of which are symptoms commonly experienced by people living with a lung condition. This led to confusion, fear, and challenges in accessing necessary support. Further consideration must be given to the implications of response measures for people with a lung disease, especially where pandemics cause respiratory illness.

c) Review and amend the criteria for free vaccinations and the delivery model under the National Immunisation Program to encourage vaccination uptake and enhance vaccine awareness

Vaccination was essential to the pandemic response and protecting health, and we note this was a significant challenge at points. However, our national survey revealed over 80% of people are more likely to keep up to date with vaccinations due to the pandemic (see **Attachment 2**). Although there have been challenges in sustaining COVID vaccination uptake over time, there remains an enhanced awareness of the benefits of disease prevention in the community. Our recommendation is to leverage this awareness and make vaccinations free and accessible (e.g. also through pharmacy

where appropriate) now and into the future through clear communications and significant additions to the National Immunisation Program.

3) Broader health and social supports

a) Address the unique mental health needs of people living with a lung condition

The pandemic and related response measures significantly impacted the mental health of Australians, with some groups impacted more than others. Our survey found that people living with a lung disease were more concerned about managing their condition, were more aware/concerned about lung health and breathing well, and were more anxious about future COVID-19 infections and long COVID (see **Attachment 2**). In the context of a pandemic caused by a respiratory virus, people living with a lung disease face unique mental health challenges. We recommend suitable consideration be given to making mental health support more accessible to those living with a lung condition in such future pandemicsⁱⁱ.

b) Enable safe access to screening and health assessments/appointments

We note that participation in national screening programs was significantly impacted during the pandemic, but following a concerted effort to 'catch up' this issue has been rectified. Unfortunately, this is not the case for lung health with respect to spirometry for diagnostics and monitoring. The pandemic paused spirometry in primary care due to infection control guidelines, however, services remain significantly below pre-pandemic levels (as determined by MBS reporting). The use of telehealth services throughout the pandemic ensured access to healthcare was maintained, and telehealth continues to play an integral role in the Australian healthcare system. However, access to face-to-face services remains a vital model of care in some cases, such as spirometry. We must continue to evaluate and understand the benefits and impacts of telehealth services compared to other models of care, and in a pandemic context plan for health service delivery accordingly. Further consideration should be given to how best to leverage existing services, such as LFA's telehealth support services, to manage increased demand for information and to reduce unnecessary burden on frontline services.

c) Invest in preventive health actions aligned to the National Preventive Health Strategy

People with chronic health conditions, such as those living with a lung disease or lung cancer, are at greater risk of adverse outcomes from COVID-19 infection. This is unlikely to change with future pandemics, highlighting the importance of disease prevention and health promotion to reduce the vulnerability of future populations. The National Preventive Health Strategy offers a clear pathway for strengthening the health of all Australians and must be underpinned by investment in preventive health by federal and state governments. Investing in improving the health and wellbeing of all people is one of the best defences we have to reduce the impact of infectious diseases throughout the community, now and long into the future. The formation of the Australian Centre for Disease Control will also play a vital role in future pandemics and elements of preventive health.

4) Mechanisms to better target future responses to the needs of particular populations

a) Apply a health equity lens to all responses, striving to ensure all Australians can receive the information, support and services they need in an equitable and timely manner

As emphasised in the National Preventive Health Strategy, there is a need to apply a health equity lens to all preventive health efforts, and this is especially relevant to preparing for future pandemics. The COVID-19 pandemic highlighted the importance of partnerships and meaningful engagement of communities in decision making processes. We can learn from the leadership demonstrated by the Aboriginal Community Controlled Health Services sector during the pandemic, which was essential to reducing the impact of COVID-19 amongst Aboriginal and Torres Strait Islander communities.

ⁱ CSIRO. (2022). Strengthening Australia's Pandemic Preparedness. <https://www.csiro.au/pandemic>

ⁱⁱ Lung Foundation Australia, Arthritis Queensland, Cancer Council Queensland. (2022). Submission to Inquiry into the opportunities to improve mental health outcomes for Queenslanders. <https://documents.parliament.qld.gov.au/com/MHSC-1B43/IQ-5DEF/submissions/00000126.pdf>