Lung Foundation Australia

2026 Victorian Election Priorities

Recommended by Lung Foundation Australia

About Lung Foundation Australia

Lung Foundation Australia is the only charity and leading peak body of its kind in Australia that funds life-changing research and delivers support services that give hope to people living with lung disease or lung cancer. Since 1990, we have been 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.

Lung Foundation Australia achievements, 2023-24:

1,039,117 people connected with resources, support services and programs through our website

1,868 telephone-based appointments with a nurse or social worker

4,262 health-related enquiries to Information and Support Centre

3,042 healthcare professional registrations for learning sessions

65+ government submissions for life-saving treatments, new medicines and policy change

3,350 earned media stories about lung health reached 1.01 billion

94,963 people accessed our online Lung Health Checklist – resulting in 229 people seeing their GP and 85 reporting receiving a lung health diagnosis

Photo: Victorians at Lung Foundation Australia's 'Shine a Light for Lung Cancer' Awareness Walk, Melbourne

Lung Foundation Australia's recommendations

There are more than 30 different types of lung conditions, which are a cause of significant health and economic burden in Victoria. Lung Foundation Australia have identified three priorities requiring government action to improve the lung health of Victorians.

A modest investment of $9.76 million over four years can help tackle COPD and lung cancer, two of Victoria's most significant causes of death and disease, delivering better health outcomes and reducing pressure on the health system.

1. Reduce pressure on the Victorian health system

Invest $650,000 per year for four years to expand Lung Foundation Australia's clinician-led Respiratory Care Program, supporting Victorians with COPD who are at high risk of hospital readmission

COPD is a leading cause of preventable hospitalisations in Victoria.

Our Respiratory Care Program reduces hospitalisations and ED presentations.

2. Improve support for Victorians living with lung cancer

a. **Invest $1.7m per year, for four years, to increase access to 8 LFA Specialist Lung Cancer Nurses across Victoria and,**
b. **Invest $180,000 per year, for 2 years, to fund a Lung Cancer Screening Priority Populations Engagement Officer based in Victoria**

Lung cancer is a leading cause of burden of disease in Victoria.

Specialist nurse-led care and targeted screening engagement will improve equitable access to early detection, diagnosis, treatment and support.

3. Protect Victorians from the harms of tobacco and vapes

a. **Reduce the number and concentration of tobacco retail licenses across Victoria and,**
b. **Ban political donations from tobacco and vaping companies and their related entities in Victoria**

Tobacco and vaping continue to harm Victorian health, particularly among disadvantaged communities and young people.

Reducing the availability and protecting policy from industry influence will reduce nicotine-related harm across Victoria.

We are committed to continue working with the Victorian Government to both prevent lung disease and lung cancer, as well as support the many Victorians currently living with a lung disease and their families.

Professor Lucy Morgan
Lung Foundation Australia Board
Chair and Respiratory Physician

Mark Brooke
Chief Executive Officer
Lung Foundation Australia

Priority 1

Reduce pressure on the Victoria health system

The challenge

Chronic obstructive pulmonary disease (COPD) is a major contributor to illness, death and healthcare utilisation in Victoria, affecting more than 137,000 Victorians and costing the health system an estimated $438 million each year. It is also one of the leading causes of potentially preventable hospitalisations in Victoria, putting enormous pressure on an already stretched health system.

The impact of COPD in Victoria[1-4]

- **Deaths:** 1,800+ in 2024
- **Prevalence:** 137,700 Victorians in 2022
- **Health system expenditure:** $438 million in 2022-23 – nearly half of which was spent on preventable hospitalisations
- **Potentially preventable hospitalisations:** fourth leading cause among chronic conditions in 2023-24 in Victoria
- **Inequitable distribution:** prevalence, rate of burden, rate of hospitalisations, and mortality rates are disproportionately higher among Aboriginal and Torres Strait Islander people, people living in areas of socioeconomic disadvantage, and

Although there is no cure for COPD, early diagnosis and evidence-based interventions can slow the progression of the disease, allow people to live well, and can **reduce exacerbations that lead to preventable hospitalisations**. People with COPD often experience repeated exacerbations and hospital admissions, particularly during the transition from hospital to home. Without appropriate support, many patients struggle to manage their condition, leading to avoidable emergency department presentations, readmissions and poorer health outcomes.

In 2024, Lung Foundation Australia commissioned research to better understand the lived experiences of people living with or caring for someone with a lung condition. Participants reported difficulties in accessing primary healthcare services due to limited availability and long wait times. Compared to all respondents, people with COPD were significantly more likely to report waiting too long to see a GP and then needing to go to hospital. 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 primary healthcare services. Most importantly, it is essential that support is available to enable people to manage their health and stay well through the current cost-of-living pressures.

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

Priority 1

Recommendation

Invest $650,000 per year for four years to expand Lung Foundation Australia's clinician-led Respiratory Care Program, supporting Victorians with COPD who are at high risk of hospital readmission

Building on the success of Lung Foundation Australia's work with the Safer Care Victoria Nurse Ambassador Program, there is an opportunity to strengthen post-discharge support for people living with complex COPD and reduce avoidable demand on Victoria's health system.

Lung Foundation Australia's cost-effective Respiratory Care Program supports people across Victoria living with a respiratory disease to better manage their condition and avoid unnecessary hospital admissions. 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.

Benefits of Lung Foundation Australia's Respiratory Care Program

Free to consumers
Evidence-based and **cost-effective**

Provides **equitable** access via a telehealth model

Reduces hospitalisations and ED presentations*

Since 2019, 300+ Victorians living with COPD have been **supported** by our Program

Participants more likely to use a range of **evidence-based strategies** to manage their lung condition

99% of participants were **satisfied** with the program

"The level of anxiety and feeling of being alone is so great before you get to a service like the Lung Foundation nurses where all of a sudden, you're validated, you're heard, you feel like a person again. And once you feel those things, you're able to absorb the information of how to help yourself. People like the Lung Foundation nurses, it's almost like they give you back your life. They give you back the ability to take control and move forward."

*The proportion of people who reported zero ED presentations in the last 12 months increased from 61% at session 1 to 77% 12 months after completing the program. The proportion of people who reported zero ED presentations in the last 12 months increased from 67% at session 1 to 80% 12 months after completing the program.

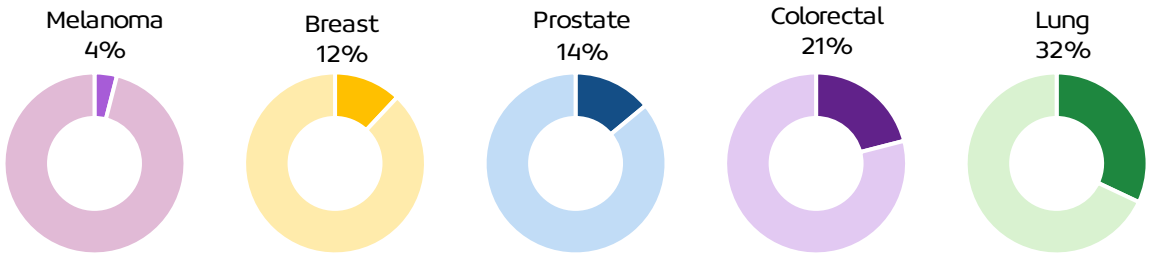
Priority 2

Improve support for Victorians with lung cancer

The challenge

Lung cancer is the leading cause of cancer death in Victoria, claiming more than 2,100 lives each year and costing the Victorian health system $362 million annually[5,6]. More than **3,400 Victorians are diagnosed with lung cancer every year**, and continues to have one of the lowest survival rates of all common cancers[5,7].

Mortality rate for the 5 most common cancers in Victoria[7]



People with lung cancer often face a complex and fragmented diagnostic pathway. Delays in diagnosis and treatment contribute significantly to poor outcomes[8]. Almost half of patients wait longer than the recommended 42 days from GP referral to treatment, while many experience delays of three months or more[9,10].

The National Lung Cancer Screening Program, launched in July 2025, marks a significant milestone for improving lung cancer outcomes. The program is predicted to save more than 12,000 Australian lives over the first decade through earlier diagnosis and treatment[11]. Over 72,900 Victorians were estimated to be eligible for lung cancer screening in the first year of the program.

However, screening alone will not close the gap. The burden of lung cancer disproportionately affects Aboriginal and Torres Strait Islander peoples, people from multicultural communities, people experiencing socioeconomic disadvantage, and those living in regional and rural Victoria[5,7]. Without targeted engagement and specialist care navigation, existing inequities will persist and many Victorians most at risk could miss the benefits of this life-saving program.

Through national consultation with stakeholders and individuals from priority populations, we identified key barriers and enablers to accessing screening. Barriers included, but were not limited to:

- Stigma surrounding lung cancer and smoking cessation support
- Lack of culturally safe services
- Language barriers and a lack of in-language materials
- Limited awareness of screening programs in priority population communities.

At the same time, early detection through screening and advances in treatment are increasing demand for timely diagnostic work-up, treatment coordination, care navigation and specialist nursing support. To realise the full benefits of screening, Victoria must ensure people can move smoothly from eligibility and participation in screening through to diagnosis, treatment and ongoing support. Without additional specialist workforce capacity and local program integration, existing system bottlenecks risk undermining the benefits of early detection.

Priority 2

Recommendations

2.a Invest $1.7m per year, for four years, to increase access to 8 LFA Specialist Lung Cancer Nurses across Victoria

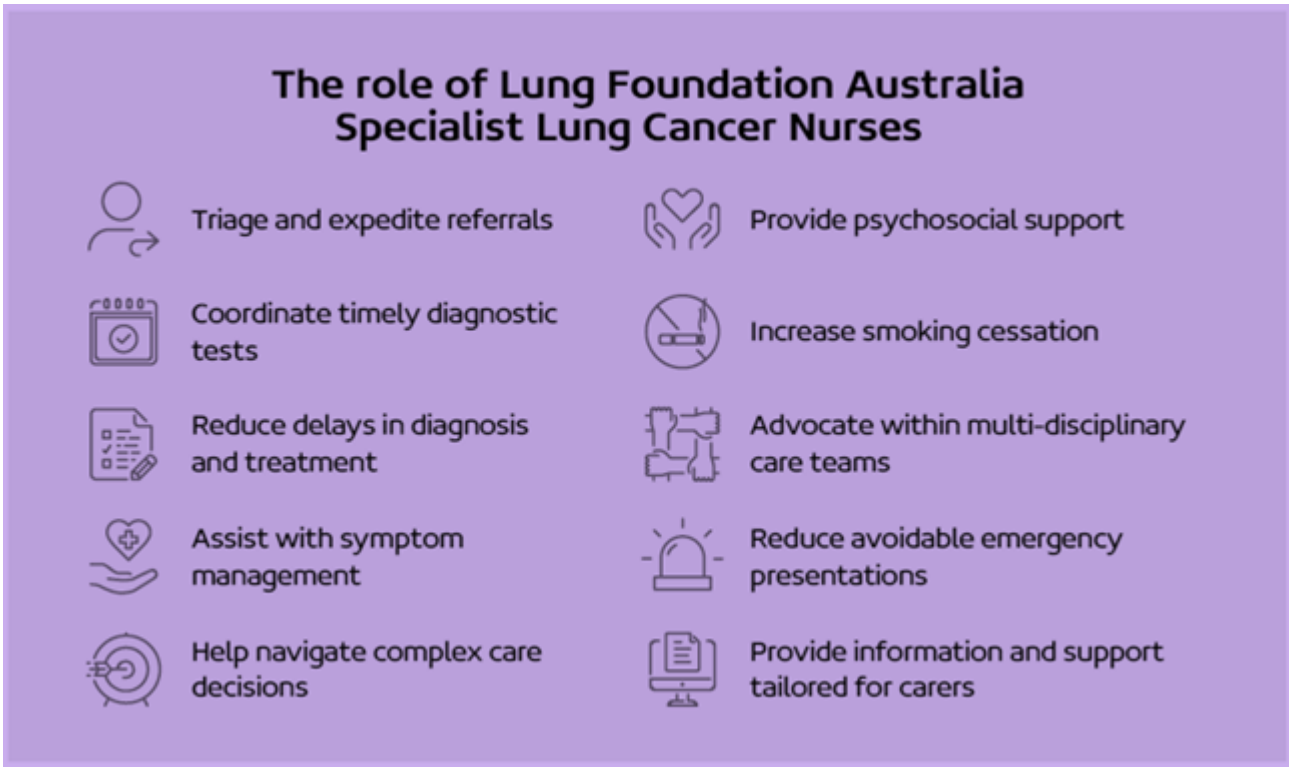
Why Specialist Lung Cancer Nurses?

Lung Foundation Australia's Specialist Lung Cancer Nurses (SLCNs) are advanced practice registered nurses with lung cancer specific knowledge and skills. These nurses deliver evidence-based care under Lung Foundation Australia's established Specialist Lung Cancer Nurse Model of Care. They work across the lung cancer care pathway, focusing on the parts of the pathway where support is often least available, including pre-diagnosis, diagnostic work-up, staging, surgical pathways and post-treatment follow-up.

Positioned within Respiratory Services, our SLCNs provide critical coordination, care and support where Cancer Services typically do not, complementing traditional cancer nursing models of care such as McGrath nurses. As screening increases the number of people moving into diagnostic and treatment pathways, SLCNs will be essential to support patient flow, reduce delays, improve communication between services, and ensure people receive coordinated care from first suspicion through to treatment and follow-up.

Implemented in Queensland and South Australia since 2023, the program has already supported more than 3,500 patients through over 13,100 clinical interactions. Independent evaluation found the model delivers significant health system benefits and quality-of-life gains. Investing in SLCNs working to our Model of Care is a high-value investment. It reduces downstream pressure on the health system while directly improving patient outcomes, experience and quality of life.

8 nurses = >$8 million saved every year in net benefits*



*Cost saving and Quality of Life gained - based on an independent analysis of Lung Foundation Australia's Specialist Lung Cancer Nurse Model of Care. Full details available on request.

Priority 2

2.b Invest $180,000 per year, for 2 years, to fund a Lung Cancer Screening Priority Populations Engagement Officer based in Victoria

There is a need for targeted community engagement and education to increase participation in lung cancer screening among priority populations, including people living in rural and regional Victoria, culturally and linguistically diverse communities, people with disability, people experiencing mental illness, and other groups at higher risk of missing out on screening.

This investment would support a dedicated Lung Cancer Screening Priority Populations Engagement Officer to work directly with communities, healthcare providers and local organisations to raise awareness, improve health literacy, address barriers to participation, and build trust in the screening program. The role should be positioned to work closely with LFA's Specialist Lung Cancer Nurses, Victorian health services and program partners to support whole-of-program integration locally, ensuring people who are encouraged into screening can be connected quickly and safely to diagnostic, treatment and support pathways. Together, the SLCN workforce and screening engagement role would leverage and strengthen existing systems while supporting the increased patient flow that will come from lung cancer screening.

Priority 3

Promote a tobacco and vape free Victoria

The challenge

Tobacco remains a leading cause of premature death across Australia, contributing substantially to lung disease, cancer, cardiovascular disease, and a range of other chronic health conditions[12,13].

Smoking prevalence remains highest among people experiencing socioeconomic disadvantage, those living in regional and rural communities, and some multicultural communities. These groups often face greater barriers to accessing cessation support and healthcare services.

At the same time, vaping has emerged as a significant public health threat, particularly among young people. Evidence links e-cigarette use to nicotine dependence, lung injury, respiratory symptoms, poorer mental health outcomes, and an increased likelihood of taking up smoking: young people who vape are five times more likely to subsequently smoke cigarettes[14,15].

Between 2021 and 2023, an estimated **77,200 Victorian adults who had never smoked took up vaping**, with more than half aged under 25 years[16]. This represents a new generation at risk of nicotine addiction and long-term health harms.

Recommendations

3.a Reduce the number and concentration of tobacco retail licenses across Victoria

Victoria should progressively reduce the number of tobacco retailers through density-based licensing controls and location restrictions. This could include setting maximum licence numbers for suburbs and regions, establishing minimum distances between tobacco retailers, and prohibiting tobacco retail licences within prescribed distances of schools, youth services and health facilities.

Victoria has experienced a significant increase in the number of tobacco retailers in recent years[17-19]. Greater retailer density increases the availability and visibility of tobacco products, creates additional enforcement and compliance challenges, and provides more opportunities for illicit tobacco trade.

Evidence from international jurisdictions demonstrates that reducing the number of tobacco retail outlets can contribute to lower smoking prevalence and improve compliance with tobacco control laws[20]. Fewer retailers also enables more targeted and effective enforcement, helping regulators identify unlawful activity and reducing opportunities for the sale of illicit tobacco products.

Victoria has only recently introduced a tobacco licensing scheme, creating an opportunity to strengthen the framework by better regulating where tobacco products can be sold. Reducing retailer density and establishing buffer zones around schools, youth services and health facilities would reduce community exposure to tobacco products, support smoking prevention efforts, and align product availability with the substantial health risks associated with tobacco use.

Priority 3

The National Tobacco Strategy 2023-2030 identifies restricting the number and location of tobacco retailers as a key action to reduce tobacco-related harms[21]. By being the first Australian

jurisdiction to implement retailer density controls and proximity restrictions, Victoria has an opportunity to establish a national benchmark for best practice in tobacco control and create a healthier environment for future generations.

5.b Ban political donations from tobacco and vaping companies and their related entities in Victoria

The Victorian government should amend the *Electoral Act 2002 (Vic)* to prohibit political donations from tobacco and vaping companies, their related entities, and third parties acting on their behalf.

Public health policy should be developed in the public interest and protected from commercial influence. Tobacco and vaping companies have a well-documented interest in shaping policy outcomes that affect the sale, promotion and regulation of their products. Banning political donations from these industries would strengthen public confidence in decision-making, reduce the risk of conflicts of interest, and support evidence-based health policy.

Australia is a Party to the World Health Organization Framework Convention on Tobacco Control (WHO FCTC)[22] which requires governments to protect public health policies from the commercial and vested interests of the tobacco industry. These obligations increasingly extend to emerging nicotine products, including e-cigarettes and heated tobacco products, reflecting the close links between many vaping manufacturers and the tobacco industry[23].

New South Wales has already legislated to prohibit political donations from the tobacco industry and its close associates under the *Electoral Funding Act 2018 (NSW)*. Victoria should adopt a similar approach to ensure that political decision-making is free from undue industry influence and consistent with Australia's national and international commitments.

A legislative ban would provide a transparent and enforceable framework that applies across all political parties and candidates, ensuring that public health interests are prioritised over industry profits. It would strengthen the integrity of health policymaking and reinforce Victoria's leadership in tobacco control.

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Lung Foundation Australia

Level 4, 12 Cribb St,
Milton QLD 4064

PO Box 1949, Milton QLD 4064

E: enquiries@lungfoundation.com.au

www.lungfoundation.com.au

Free call 1800 654 301

Lung Foundation Australia