



Asthma Australia Submission to the Tasmanian Department of Treasury and Finance

Pre-Budget Submission 2023–24

October 2022

ABOUT ASTHMA AUSTRALIA

Asthma Australia is a for-purpose, consumer organisation which has been improving the lives of people with asthma since 1962.

Asthma is an inflammatory condition of the airways, which restricts airflow and can be fatal. There is no cure, but most people with asthma can experience good control of their condition.

Asthma affects 1 in 9 Australians, or 2.7 million people. It has various degrees of severity (mild to severe) and affects people of all ages, from childhood to adulthood. Asthma can appear at all ages and stages of life.

Asthma Australia's purpose is to help people breathe better so they can live freely. We deliver evidence-based prevention and health strategies to more than half a million people each year. To ensure people can access effective treatments and best practice healthcare for their asthma, we work directly with people with asthma, their family and friends, health professionals, researchers, schools and governments. This way, we can ensure people with asthma are supported with education and access to high-quality information and care where they live, work and play in all stages of life.



Executive summary

Our submission focuses on the following funding priority issues and sets out the following recommendations:

Funding priority 1: Renewed and increased investment to support an expansion of Asthma Australia’s work in Tasmania

RECOMMENDATION: The Tasmanian Government provide funding of \$693,000 over three years for Asthma Australia to continue to deliver and expand its statewide program of asthma management activities.

Funding priority 2: Funding to implement the Asthma Smart Community Model in priority communities in Tasmania

RECOMMENDATION: The Tasmanian Government provide funding of \$626,000 over three years for Asthma Australia to develop and deliver the Asthma Smart Community Model initiative.

Funding priority 3: Funding for a national AirSmart public education campaign to reduce the health impacts of air pollution

RECOMMENDATION: Tasmanian Government fund Asthma Australia \$204,800 over two years to contribute to the Tasmanian component of Asthma Australia’s national AirSmart public education campaign to minimise the impacts of poor air quality



Introduction

Asthma Australia wants people to live in communities where they are supported to live healthy lives and can breathe clean air. Asthma Australia welcomes the opportunity to detail funding priorities for the 2023–24 Budget that will benefit the one in eight Tasmanians who have asthma and those at risk of developing asthma. In addition to these individuals, asthma affects carers of people with asthma, the families, communities, schools and workplaces of people with asthma, our healthcare system and the broader economy. It is therefore vitally important that the 2023–24 Budget responds to the needs of people with asthma.

As a peak consumer health organisation representing people with a chronic health condition, Asthma Australia supports increased investment in preventive health and primary health care. This will help reduce the prevalence and impact of chronic disease, and in turn reduce the burden on the health system and broader community.

Asthma Australia recognises that the social determinants of health are central to the health of people with asthma and can have both positive and negative effects on the health of individuals. In Australia, the most disadvantaged and vulnerable suffer the most health-related harm. For example, the burden of disease is greater for certain population groups, including those living in remote locations or experiencing socio-economic disadvantage.¹ A number of groups are also disproportionately affected by asthma, including Aboriginal and Torres Strait Islander people, people living in areas of lower socioeconomic status and people living in rural and remote areas.²

Asthma is therefore a health problem that demands our attention and creativity to find a better way forward. New approaches need to focus on interventions that include targeting the risk factors shared by many population groups including marginalised communities. By supporting people to develop their capability and capacity to become leading partners in their own care, and engaging communities to support the wellbeing of their members, the burden and impact of asthma can be reduced.

To reduce the asthma burden on Tasmania's health system, improve the lives of people living with asthma and reduce the prevalence of asthma in Tasmania, we therefore seek: renewed and increased investment to support an expansion of our work in Tasmania, funding to support the Asthma Smart Community Model in priority communities in Tasmania, and funding to implement a national AirSmart public education campaign.

Asthma in Tasmania

Asthma is one of the most common chronic diseases in Tasmania, affecting 66,000 Tasmanians, or more than one in eight people (the second highest prevalence of any state or territory in Australia).³ Across local government areas in Tasmania, the Brighton municipality has the highest rates of asthma, and the Launceston municipality has the highest total number of people with asthma.⁴ Asthma caused 11 deaths in Tasmania in 2020.⁵

Asthma places a significant burden on Tasmanian hospitals. In 2016–17, 1,451 Tasmanians presented to emergency departments for asthma.⁶ In this same period, asthma was responsible for 196 hospitalisations per 100,000 people in Tasmania.⁷ In the period in 2020–21, there were 692 potentially preventable hospitalisations for asthma in Tasmania.⁸

The Epidemiology Unit in the Tasmanian Department of Health provided Asthma Australia with the following data on the prevalence of asthma in Tasmania from 2015 to 2019:



- Hospitalisations in public hospitals in Tasmania doubled from 586 in 2015 to 1,149 in 2018, and then fell marginally to 1,083 in 2019⁹
- Hospitalisations were spread evenly between the Royal Hobart Hospital and the Launceston General Hospital with 1,878 and 1,875 hospitalisations respectively.¹⁰ This was followed by the North West Regional Hospital (435) and the Mersey Community Hospital (209)
- In 2019, readmission rates to the same hospital within one year following treatment were highest in the North West Regional Hospital at 23.5%, followed by the Royal Hobart Hospital at 20.6%;¹¹ and
- Launceston also had the highest number of preventable hospitalisations in this period.¹²

The Asthma Community Consultation: Asthma Australia’s investment in Tasmania

Asthma Australia is already investing in its vision for community-led and co-designed initiatives in Tasmania, funding the Asthma Community Consultation which will take place in the first half of 2023. This approach will shape the future of Asthma Australia’s work in Tasmania under the Asthma Management Program and Asthma Smart Community Model.

The Asthma Community Consultation will be delivered in partnership with an expert consultant. It will comprise three targeted community consultations in areas with a known high incidence of asthma, focusing on the lived experience of people with asthma. Ten health sector stakeholder interviews will also be conducted, and the project will be supported by a statewide public survey.

The Asthma Community Consultation will provide insights into the experience of living with asthma in Tasmania and identify the best opportunities for deeper, more long-term community-based initiatives to tackle asthma. This will allow us to understand local issues and plan collaborative action to reduce the impact of asthma on communities where the unmet needs are highest and where the potential for sustainable impact is greatest. We will apply this knowledge to all work we undertake going forward.

Asthma and the forthcoming budget

The 2023–24 Budget presents an opportunity for the Tasmanian Government to renew and increase its investment in respiratory health, through greater focus on consumer action and empowerment, including by enhancing health literacy, empowering consumers to self-manage their condition and supporting consumers to play an active role in shaping health care systems and services. There is a particular need in Tasmania for increased investment in sustained programs directed at supporting Tasmanians with asthma and delivering preventive health measures that will reduce the burden on the health system.

In this submission, we seek:

- Renewed and increased investment from the Tasmanian Government to support a continued and expanded Asthma Management Program to help people with asthma and their carers manage their asthma according to best practice and with evidence-based information
- Funding for a new initiative, the Asthma Australia Asthma Smart Community Model, which has been trialled in other jurisdictions, and which we believe will benefit those Tasmanians and their carers who have asthma and will reduce demands on the health system; and
- The Government’s support for AirSmart, a public education campaign that aims to provide the information, tools and strategies people need to minimise or avoid exposure to unhealthy air.



Funding priority 1: Renewed and increased investment to support Asthma Australia’s work in Tasmania

On 1 July 2020, a three-year funding agreement was renewed between Asthma Australia and the Tasmanian Government for Asthma Australia to provide information and support services for the period 2020–23. The purpose of the agreement is for Asthma Australia to assist Tasmanians to better manage asthma through providing information, support and resources to health professionals, people with asthma and family, carers and supporters of people with asthma.

Under the current funding agreement, Asthma Australia has already delivered dedicated personal support to over 500 consumers, and has achieved approximately 2,000 engagements, such as online and in-person learning modules, with health and other professionals to deliver evidence-based asthma education. We have recorded approximately 20,000 website engagements and information service subscriptions in which we have provided information and resources to support best-practice asthma management for anyone experiencing asthma. We have:

- Driven and sustained year-on-year increases in engagements between Asthma Australia and people with asthma, their carers, the community and health professionals
- Worked with key stakeholders to deliver community-level projects in targeted populations
- Forged new and extensive linkages across the health and community service sectors to drive awareness across new segments and provide opportunities for mutually supportive messaging and collaborations
- Mapped the state's asthma profile and support systems available to unearth potentially new partnerships
- Gathered high-level insights into consumer experiences of asthma in Tasmania to inform our workplan and priorities
- Made representations on the significance of asthma in policy settings; and
- Raised the profile of asthma in the media.

Asthma Australia’s work is pivotal in delivering evidence-based preventive health strategies—the aim of which is to improve the quality of life for people living with asthma and reduce the burden of disease—which will in turn reduce the demands on the health system.

However, the funding that Asthma Australia receives under the current funding agreement does not wholly fund a part-time Health Projects and Partnerships Coordinator position in Tasmania. Asthma Australia therefore subsidises the programs delivered under the agreement and the associated operational budget.

We therefore seek a renewal of and an increase to our funding agreement with the Tasmanian Government. This will allow us to continue to deliver services to the people with asthma in Tasmania in populations we are already reaching, as well as extend our reach further to priority consumer groups such as Aboriginal and Torres Strait Islander populations.



PROPOSAL: The Tasmanian Government provide funding of \$693,000 over three years for Asthma Australia to continue and expand its Asthma Management Program in Tasmania

Asthma Australia has a proven track record in consumer education, training and support to improve health literacy, health knowledge and self-management skills. This is necessary to enable consumers to make the best decisions about their health. In the asthma context, this means giving people the information, education, resources and tools they need to prevent, control and effectively manage asthma.

Under a renewed and expanded Asthma Management Program, Asthma Australia will continue to deliver for Tasmanians with asthma and those who care for them, with an extended scope and reach of our important work to:

- Provide quality asthma management information to consumers, including through 1800 ASTHMA, digital engagements and community level programs
- Provide evidence-based resources, tools and education for all people who encounter asthma, such as family members, carers, GPs and other health professionals and community members
- Design targeted asthma programs collaboratively with priority consumer groups and stakeholders to address specific areas of need
- Collaborate with community sector and health organisations in order to maximise outcomes that advance chronic conditions management in Tasmania; and
- Deliver focused education and promotional campaigns to raise the profile and awareness of asthma and its effective management.

RECOMMENDATION: The Tasmanian Government provide funding of \$693,000 over three years for Asthma Australia to continue to deliver and expand its statewide program of asthma management activities.

Table 1: Request for funding from Tasmanian Government: Tasmanian Asthma Management Program

Item	2023–24	2024–25	2025–26
Health Projects & Partnerships Coordinator 0.8FTE*	\$91,000	\$91,000	\$91,000
Management, supervision and training	\$5,035	\$5,035	\$5,035
Marketing, promotion and resources	\$24,385	24,385	24,385
Customer Support Centre support	\$8,000	\$8,000	\$8,000
Stakeholder events and meetings	\$2,830	\$2,830	\$2,830
Travel and accommodation	\$5,000	\$5,000	\$5,000
Health professional education	\$10,170	\$10,170	\$10,170
Aboriginal Health Workers education program	\$34,000	\$4,000	\$4,000
Consumer project, 1 per year	\$25,000	\$25,000	\$25,000
Evaluation	\$6,780	\$6,780	\$6,780
Administration	\$38,800	\$38,800	\$38,800
TOTAL	\$251,000	\$221,000	\$221,000

* Asthma Australia to apply CPI as directed by Tasmanian Government



Funding priority 2: Funding to support the Asthma Smart Community Model in Tasmania

The Tasmanian Government has identified chronic conditions as one of the main challenges to the Tasmanian health system in its recently released *Our Healthcare Future: Advancing Tasmania's Health (Exposure Draft)*. Asthma is one such chronic condition, affecting 66,000 Tasmanians, as well as their carers, families and the broader community. We believe that new consumer-centric asthma interventions have the potential to dramatically ease the burden of asthma on the state's health system.

To achieve our strategy to deliver person-centred approaches and influence systems change, we must partner with people who have lived experience of asthma. This will equalise power dynamics and elevate important issues for these individuals that may not be recognised as priorities by health care providers or in the health care system. These co-designed partnerships favour an approach of learning by doing—working in cycles of trying, learning and refining.

Asthma Australia has considerable and significant experience in implementing and initiating community-led projects, and a co-design process with people with lived experience has become the preferred approach for Asthma Australia. We have been developing projects with industry leaders through a co-design approach in other states. The co-design process has allowed us to actively engage with local communities to more deeply understand how asthma impacts the lives of people with asthma, their carers and communities, and to learn about the barriers to achieving better health and wellbeing.

Based on our work in other states, Asthma Australia has developed the Asthma Smart Community Model to be trialled in Tasmania, for which we seek a three-year funding agreement with the Tasmanian Government.

PROPOSAL: The Tasmanian Government provide funding of \$626,000 over three years for Asthma Australia to develop and to deliver the Asthma Smart Community Model

The Asthma Smart Community Model seeks to determine appropriate health system responses in collaboration with consumers, and will be delivered in collaboration with two people from the community—an Asthma Community Connector and a Local Project Support officer.

An Asthma Community Connector is a person from the community with a lived experience of asthma. The Community Connector facilitates greater access for people with asthma to better relationships with healthcare providers, provides information and resources to assist with asthma management, and gives the community a louder voice to communicate their asthma experience.

A Local Project Support officer will represent Asthma Australia in the local community, encouraging and supporting people with asthma through projects designed to improve their asthma management. Drawn from the community, the Local Project Support officer will work alongside their peers to support people living with asthma achieve holistic and sustained improvements in asthma outcomes.



We are seeking funding to implement the Asthma Smart Community Model in priority communities in Tasmania, which we will identify through our Asthma Community Consultation, discussed above. As part of this initiative, we will:

- Hold focus groups and undertake systems mapping with community members to understand their definition of ‘wellness’, and the underlying complex social drivers in health and wellbeing in their community
- Hold focus groups with the service provider community to explore and discuss mapping data, share insights into the underlying drivers of poor health outcomes and seek their perspectives
- Facilitate a co-design workshop with representatives from the community and service providers to explore potential intervention points to address the drivers of poor health
- Facilitate the development of a collective impact project and implement it with the community; and
- Mentor the community for 6–12 months to develop leadership and ownership of the program.

We will then repeat this initiative in a new community.

RECOMMENDATION: The Tasmanian Government provide funding of \$626,000 over three years for Asthma Australia to develop and deliver the Asthma Smart Community Model initiative.

Table 2: Request for funding from Tasmanian Government: Asthma Smart Community Model in Tasmania

Item	2023–24	2024–25	2025–26
Project Coordinator 0.6FTE	\$68,207	\$68,207	\$68,207
Asthma Community Connector and Local Project Support 0.6FTE combined (2 roles)**	\$47,538	\$47,538	\$47,538
Management, training and supervision	\$17,556	\$17,556	\$17,556
Marketing, promotion, resources	\$14,190	\$9,190	\$9,190
Travel	\$8,400	\$8,400	\$8,400
Payments to stakeholders	\$7,000	\$7,000	\$7,000
Venues, catering	\$3,500	\$3,500	\$3,500
Evaluation	\$6,780	\$6,780	\$6,780
Administration	\$35,495	\$35,496	\$35,496
TOTAL	\$208,666	\$208,667	\$208,667

** Asthma Australia to apply CPI as directed by Tasmanian Government



Funding priority 3: Funding for a national AirSmart public education campaign to reduce the health impacts of air pollution

The bushfires of 2019–20 were a turning point for air quality in Australia with 80% of the population exposed to the impacts of bushfire smoke,¹³ often for prolonged periods. People with asthma are among those particularly vulnerable to unhealthy air. Asthma Australia’s consumer research has shown the public health messaging disseminated during the 2019–20 bushfires did not appear to help people avoid the impacts of the bushfire smoke.¹⁴

Many people with asthma and their carers have turned to Asthma Australia for support during these difficult times. We experienced significant increases in media reach, helpline calls and website traffic from people with a range of concerns including minimising the impacts of bushfire smoke exposure, fears of increased susceptibility to COVID-19 and challenges accessing medical care during the pandemic. For example, during the 2019–20 summer bushfires there were 2,429 link clicks on and 152 shares of our bushfire content across all platforms.

Longer and more intense fires are an impact of climate change already being experienced in Australia, resulting in more people being exposed to smoke and for longer periods of time. Modelling research estimates smoke from the 2019–2020 bushfires caused 1,305 emergency department attendances for asthma, 2,027 hospital admissions for respiratory problems, and 1,124 hospital admissions for cardiovascular problems.¹⁵ The same study estimated 417 excess deaths due to the smoke.

A survey of over 12,000 people by Asthma Australia over December 2019 and January 2020 revealed exposure to bushfire smoke resulted in financial strain, reduced social participation and poor mental health for many respondents, outcomes which were more pronounced among respondents with asthma. People with asthma were also more likely to report experiencing respiratory symptoms, needing to seek medical assistance and being sick for longer than a week.

To minimise the health impacts of exposure to unhealthy air, people need real time, local air quality information and guidance on the appropriate strategies to take at different air quality levels. Targeted information is also needed for people who are particularly vulnerable to poor air quality, including people with respiratory conditions, cardiovascular disease and type 2 diabetes, pregnant people, infants, children and older people.¹⁶

PROPOSAL: The Tasmanian Government provide funding of \$204,800 over two years to contribute to the Tasmanian component of Asthma Australia’s national AirSmart public education campaign to minimise the impacts of poor air quality

There is a gap in Australian public health messaging around the health impacts of air pollution which disproportionately affects the health and wellbeing of people with asthma (2.7 million Australians). Asthma Australia has taken the lead on developing and piloting a public education campaign and air quality app called ‘AirSmart’.

AirSmart fills the need for community education and guidance around air quality which was revealed by the 2019–2020 bushfire smoke crisis. This need was recognised by the Royal Commission into National Natural Disaster Arrangements, among other inquiries, following the 2019–20 bushfires. The need for access to air quality information and guidance will only increase as climate change continues to increase the frequency and severity of events causing poor air quality.

Asthma Australia has recently completed a 6-week pilot across the regions of southern New South Wales, the Australian Capital Territory and regional Victoria. This pilot was funded by the New South



Wales Government, philanthropic donations and Asthma Australia. As part of this pilot, the AirSmart app was downloaded over 16,000 times during the pilot period. Anecdotal feedback from consumers is very positive.

Our next step is the post-evaluation survey of 500 participants in the pilot regions, followed by analysis, reporting, and refinement of the campaign, ahead of national rollout, ideally this summer as we lead into the bushfire season.

AirSmart includes an air quality public health campaign which promotes the download of the AirSmart app:

- **The public health campaign** aimed to raise community awareness about poor air quality, and how to interpret health advice so Australians can be protected from exposure and health impacts. This evidence-based educational initiative is an Australian-first, using a mix of traditional and digital media channels to reach the full community. The creative process behind the AirSmart campaign is founded in a consumer research approach and has been guided by environmental and public health experts. The campaign includes a 15 and 30 second television commercial, a radio commercial, other social and digital assets, a microsite, billboards, as well as the AirSmart app.
- **The AirSmart app** is a consumer tool for accessing local real-time air quality information and related health advice. Asthma Australia has used human-centred design principles to design the AirSmart app. The AirSmart app provides consumers with localised ‘real-time’ air quality, and strategies to avoid or minimise poor air quality exposure. The app also provides personalised notifications and health advice at specific air quality levels to arm consumers with specific daily advice about the most effective protection.

Asthma Australia is now seeking funding from the Tasmanian Government, and governments across all jurisdictions, to enable us to rollout AirSmart nationally.

RECOMMENDATION: Asthma Australia recommends the Tasmanian Government fund Asthma Australia \$204,800 over two years to contribute to the Tasmanian component of Asthma Australia’s national AirSmart public education campaign to minimise the impacts of poor air quality.

Table 3: Total AirSmart costing (national campaign)

Item	2023–24	2024–25
Media placement	\$5,000,000	\$5,000,000
App development and maintenance	\$50,000	\$30,000
Evaluation and consumer research	\$30,000	\$30,000
Project management costs	\$50,000	\$50,000
TOTAL	\$5,130,000	\$5,110,000

Table 4: Request for funding from Tasmanian Government: AirSmart costings in Tasmania

Item	2023–24	2024–25
Media placement	\$100,000	\$100,000
App development and maintenance	\$1,000	\$600
Evaluation and consumer research	\$600	\$600
Project management costs	\$1,000	\$1,000
TOTAL	\$102,600	\$102,200



References

- ¹ Australian Institute of Health and Welfare (AIHW) 2016. *Australian Burden of Disease Study: Impact and causes of illness and death in Australia 2011*. Australian Burden of Disease Study series no. 3. Cat. no. BOD 4. Canberra: AIHW.
- ² AIHW. 2019b. *Asthma*. Cat. no. ACM 33 [Online]. Australian Institute of Health and Welfare. Available: <https://www.aihw.gov.au/reports/chronic-respiratory-conditions/asthma> [Accessed July 2020].
- ³ Australian Bureau of Statistics (ABS) 2018. *National Health Survey: First Results 2017-18*. ABS Cat no. 4364.0.55.001. Canberra: ABS. Accessed online: <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/4364.0.55.0012017-1=8?OpenDocument> (accessed 9 December 2020).
- ⁴ Public Health Information Development Unit (PHIDU) 2020. *Social Health Atlas of Australia*. Adelaide: PHIDU. Accessed online: <http://phidu.torrens.edu.au/social-health-atlases/data#social-health-atlas-of-australia-primary-health-networks> (accessed 9 December 2020).
- ⁵ ABS 2021. *Causes of Death, Australia*. Canberra: ABS. Accessed online: <https://www.abs.gov.au/statistics/health/causes-death/causes-death-australia/2020> (accessed 24 June 2022).
- ⁶ Australian Institute of Health and Welfare (AIHW) 2017. *Emergency department care 2016–17: Australian hospital statistics*. Canberra: AIHW. Accessed online: <https://www.aihw.gov.au/reports/hospitals/ahs-2016-17-emergency-department-care/data> (accessed 9 December 2020).
- ⁷ PHIDU 2019. *Asthma Atlas of Australia*. Adelaide: PHIDU. Accessed online: http://www.atlasesaustralia.com.au/asthma_aust/atlas.html (accessed 8 April 2022).
- ⁸ PHIDU 2019. *Asthma Atlas of Australia*. Adelaide: PHIDU. Accessed online: http://www.atlasesaustralia.com.au/asthma_aust/atlas.html (accessed 8 April 2022).
- ⁹ Epidemiology Unit, Department of Health, Tasmania (unpublished data).
- ¹⁰ Epidemiology Unit, Department of Health, Tasmania (unpublished data).
- ¹¹ Epidemiology Unit, Department of Health, Tasmania (unpublished data).
- ¹² Epidemiology Unit, Department of Health, Tasmania (unpublished data).
- ¹³ Commonwealth of Australia, 2020. *Royal Commission into National Natural Disaster Arrangements Report*.
- ¹⁴ Asthma Australia 2020. *Bushfire Smoke Impact Survey 2019-2020*. Available online: https://asthma.org.au/wp-content/uploads/Resources/AA6_Smoke-Impact-Survey-1920_Revised.pdf
- ¹⁵ Arriagada N., Palmer A., Bowman D., Morgan G., Jalaludin B., and Johnston F., 'Unprecedented smoke-related health burden associated with the 2019-2020 bushfires in eastern Australia' (*Medical Journal of Australia*) 12 March 2020.
- ¹⁶ Centre for Air pollution, energy and health Research-CAR, 2019. *Bushfire smoke: what are the health impacts and what can we do to minimise exposure?* Available online: <https://www.car-cre.org.au/factsheets>.

