



Asthma Australia South Australia Pre-Budget Submission 2025-26

October 2024

Budget Proposals

The Asthma Australia submission focuses on the following funding proposals for consideration in the 2025-26 Budget:

| Proposal | Investment |
|---|--|
| 1. Program funding for asthma management in South Australia | The South Australian Government fund Asthma Australia \$1,220,000 over three years to deliver services to and improve the lives of people with asthma in South Australia. |
| 2. Contribute funding to a national AirSmart public education campaign to reduce the health impacts of air pollution | The South Australian Government contribute: Option 1: \$785,880 (television included) and option 2: \$571,400 (television not included) to fund the South Australian component of Asthma Australia's national AirSmart public education campaign to reduce the impacts of poor air quality. |
| 3. Increasing access to local air quality information. | Fund a low-cost air quality sensor pilot program as the first step towards ensuring South Australian communities have access to air quality information. Costs to be determined in consultation with agencies responsible for air quality monitoring. |
| 4. Support holistic approaches to improving the conditions of new and existing housing. Policies and programs should consider the housing features needed to reduce asthma risk and support broader health and wellbeing. | Introduce a financial support program for low-income households to replace inefficient methods of household heating and cooking to address indoor and outdoor air quality. Continued investment in HEPA air purifiers to improve the air quality in the homes of people with asthma on low incomes. |

About Asthma Australia

Asthma is a respiratory condition that affects 2.8 million people in Australia¹, with children being the most impacted. Asthma is responsible for at least one Australian death every day, making it a serious health concern. Despite the prevalence of asthma, it is often misunderstood, causing fear and anxiety for those living with the condition.

Asthma Australia has been the leading charity for people with asthma and their communities for over 60 years.

The challenges of climate change, unhealthy air, and health inequity make it more important than ever for people with asthma to have a voice. We search for new and progressive approaches to challenge the status quo. Our work is grounded in evidence and centred on the experiences of people affected by asthma. We believe by listening to those living with asthma, designing solutions with them, and influencing change, people with asthma can live freely, unrestricted by their asthma.

Asthma in South Australia

Impact on the health system and the community

Asthma is a chronic respiratory condition affecting more than 210,000 people in South Australia, representing 11.8% of the population.²

In South Australia in 2022-23, there were over 46,700 Emergency Department (ED) presentations for diseases of the respiratory system, which include asthma.³ On average, an ED presentation for asthma costs \$443,⁴ and repeated asthma-related presentations to EDs increases the risk of hospitalisation.⁵ In 2021-22, South Australia had 1,784 potentially preventable hospitalisations.⁶ Nationally in 2022-23, there were approximately 97,000 ED presentations at public hospitals for asthma, with 45% (44,000) resulting in admissions.⁷

Asthma prevalence in Australia is increasing. In 2023, asthma was the 8th leading contributor to the overall burden of disease in Australia, having risen from 9th place in 2018 and 10th place in 2011. Asthma is the leading cause of total burden of disease in children aged 1–9 years.⁸ Asthma can be both caused and exacerbated by conditions related to the warming climate, which means asthma outcomes will likely worsen as climate change impacts increase.

A major concern for South Australia is the number of people with asthma who have died, with a significant increase in the number of deaths in 2022. There were 49 deaths related to asthma in South Australia in 2022, which was close to a 15% increase compared to the pre-pandemic average (2016-2019) and a more than 80% increase compared to 2021. For the rate of death, South Australia had the highest number at 1.8 per 100,000 people, again an 80% increase compared to 2021.⁹ This is a significant concern to Asthma Australia as asthma deaths and hospitalisations are largely, if not entirely, preventable.

South Australian Budget Priority Areas

Asthma Australia does not receive any ongoing funding from the South Australian Government and relies on other funding sources to provide services in South Australia which enables us to deliver a basic level of service. Funding through the South Australian Government would enable increased engagement and improvements to the health and wellbeing of people with asthma in South Australia, which should be largely managed in primary and community care. It is clear from the significant increase in the number of asthma deaths in 2022 in South Australia, that an increased focus and investment is required.

Work is required in asthma prevention to reduce morbidity and mortality, support improved quality of life and reduce demand on the health care system. This has become even more important with the impacts of

climate change that are increasing the risks for people living with asthma and placing others at even greater risk of developing asthma. This is particularly important for children and young people who experience a high burden of asthma.

Addressing air pollution is a strategic priority for Asthma Australia, as even low levels of air pollution are associated with asthma exacerbations and hospitalisations. People should be empowered and provided with information to make informed choices about their health when it comes to air quality. This is so they engage in their daily activities understanding and knowing what the air quality conditions are, no matter where in Australia they live. Asthma Australia's AirSmart public education campaign and proposal on air quality monitoring focus on empowering the community to access information about air quality to understand how it impacts their health, while also recognising we must improve the availability of air quality information.

As climate change progresses and extreme weather events increasingly drive people to seek refuge in their homes, housing conditions and the absence or removal of internal health triggers become ever more important. With the harms of gas energy becoming increasingly well known, it is important that people are guided away from replacing gas heaters with wood heaters, which risks increasing pollution and damaging health. Homes utilising efficient and cleaner forms of energy can help improve both indoor and outdoor air quality and contribute to climate change mitigation. Electrification provides higher energy efficiency and reduced consumer costs than either gas or wood.¹⁰

Ensuring we are addressing asthma risk factors and giving people the tools to make lasting changes to live healthy lives is vital. It is particularly important to ensure people with asthma on low incomes receive the support they need to live in healthy home environments. Australia supports holistic approaches to improving the conditions of new and existing housing. Policies and programs should consider the housing features needed to reduce asthma risk and support broader health and wellbeing, be climate-resilient, and energy-efficient.

Asthma Australia's priority areas for the 2025-26 South Australian Budget will support people living with asthma, their carers and health professionals. Addressing these priority areas will contribute to the systemic changes needed to ensure people with asthma can live healthy lives. The 2025-26 Budget proposals we have identified work to deliver savings for the health system, by addressing ways in which we can improve asthma management and the environment in which people live. This means people living with asthma in South Australia can avoid unnecessary hospital visits, stay healthy and lead active and productive lives.

Proposal 1: Program funding for asthma management in South Australia

Asthma Australia offers a comprehensive suite of digital and telephone services to support people with asthma and their carers in understanding the condition, and building their knowledge, skills and confidence to self-manage their condition effectively.

Asthma Australia has invested in understanding the impact of our work to demonstrate the value of these services. From a sample size of 1698 consumers using our services:

- 84% reported they had and adhered to their preventer medication, compared to 48% of the general population of adults with asthma.
- 72% reported they had seen their healthcare professional for a planned asthma review in the last 12 months compared to 60% of the general population of adults with asthma.
- 65% reported they had a flare up requiring medical intervention in the last 12 months compared to 53% of the general population of adults with asthma

The Centre of Health Economic Research and Evaluation (CHERE), University of Technology Sydney (UTS) conducted an economic analysis of Asthma Australia's telephone self-management education program. There was a clinically and statistically significant improvement in asthma control; evidence of enhanced asthma management; and a statistically significant reduction in hospital inpatient visits. The overall results showed strengthened asthma management by reducing the risk of hospitalisations and ED presentations through improved asthma control and multidisciplinary care.¹¹

As a condition that can be well managed in most people, the continuing investment in education on self-management is vital to empower people to manage their asthma and reduce the demand on health services.

With increased funding for South Australians, Asthma Australia would be able to provide more personalised services, tailored to the South Australian population. Improved asthma management reduces the cost burden to the health care system, reduces preventable hospital admissions and improves quality of life. The cost for delivering these services is \$388,250 per annum and \$1,220,000 over three years (allowing CPI each year).

South Australia can address costs to the health system by addressing the rates of potentially preventable hospitalisations. This is by providing education to empower and support people with asthma to self-manage, through investing in community-based work, and by providing tools to minimise exposure to common and harmful triggers. The investment Asthma Australia is seeking is considerably less than the potential return on investment in keeping people out of hospital.

Support effective self-management practices

For our 1800 phone line service, 10 per cent of callers are from South Australia. This phone line is supported by asthma educators who deliver person-centred, evidence-based self-management information and support. We are currently augmenting our support services using a Customer Experience model. This includes developing a more sophisticated multi-channel customised approach utilising telephone, videochat, email, newsletters, SMS and webchat—to provide the right support through the right channels at the right time in order to encourage a deeper ongoing engagement with people with asthma and their carers, to improve their asthma control and quality of life.

Develop the health professional workforce

Asthma Australia has invested significantly in the development of health care professionals through various means including our partnership with Reed Medical Education to develop and launch the 'Advanced Learning Module *Asthma in Australia: Practical Solutions for challenges in primary care*'.

This online accredited training is free of charge for health professionals including General Practitioners, nurses, pharmacists and allied health professionals. The purpose of the Program is to support health care professionals in providing up to date, evidence-based care, which improves the health and welfare of people

with asthma. As of October 2024, there were close to 12,209 enrolments since commencement of the course in 2020, with 6% being health care professionals based in SA. Over 89% of participants have stated their learning needs were entirely met. We seek support to not only continue this service, but to expand on it by developing new modules and to increase its uptake across the sector.

As an organisation we will continue to work with existing organisations, systems and processes to build a more integrated and connected asthma pathway for people with asthma and their treating healthcare professionals. This includes the better utilisation of evidence-based guidelines, promotion of new practices, engaging and supporting health care professionals around changes to scope of practice and identifying and understanding the patient asthma journey and their pain points associated with interactions with health care services. Supporting this approach is the ongoing development and distribution of resources and asthma updates to health professionals in South Australia via digital and hard copy platforms.

INVESTMENT REQUESTED: The South Australian Government fund Asthma Australia \$1,220,000 over three years to deliver services to and improve the lives of people with asthma in South Australia.

Table 1: Request for program funding – Year 1

| Program | Funding request |
|---|------------------------|
| Support Effective Self-Management Practices | \$217,875 |
| Developing the Health Professional workforce | \$93,375 |
| Subtotal | \$311,250 |
| Oncosts and administration | \$77,000 |
| TOTAL per annum | \$388,250 |
| TOTAL over three years (including CPI) | \$1,220,000 |

Proposal 2: Contribute funding to a national AirSmart public education campaign to reduce the health impacts of air pollution

There is a gap in Australian public health messaging around the impacts of air pollution which disproportionately affect the health and wellbeing of people with asthma. 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.¹² 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.

AirSmart was developed with the guidance of a panel of environmental and public health experts, including experts from the University of Sydney and the NSW (New South Wales) Department of Planning and Environment. AirSmart was piloted in communities across southern NSW, ACT (Australian Capital Territory), and regional Victoria over a six-week period in July and August 2022. The evaluation of the pilot demonstrated strong indications that Australians want access to local, responsive air quality information and tools. Strong engagement in the campaign was evident with over 16,000 app downloads and 23,000 website views in just six weeks, suggests that air quality is an important issue for many Australians.

AirSmart includes an air quality public health campaign which raises awareness about air quality and promotes the AirSmart app as a source of air quality information:

- **The public health campaign** aims to raise community awareness about poor air quality, and how to interpret health advice, so people can protect themselves against exposure to air pollution and the associated 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 included consumer research and was guided by environmental, public health and social marketing experts. The campaign includes 15 and 30 second television commercials, a radio commercial, social and digital assets, a website, billboards, and an app.
- **The AirSmart app** is a consumer tool for accessing local, real-time air quality information and related health advice. Asthma Australia 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 provide consumers with specific daily advice about the most effective protection.

Asthma Australia is providing two proposed options for funding to roll-out AirSmart across South Australia. Both options include a 10-week advertising campaign in November and December, peak bushfire season, or at a time deemed appropriate by Government. Option 1 includes television advertising and video channels and platforms (such as YouTube), social media and radio; and option 2 excludes television advertising.

INVESTMENT REQUESTED: The South Australian Government contribute: Option 1 \$785,880 (television included) and option 2 \$571,400 (television not included) for one year to fund the South Australian component of Asthma Australia's national AirSmart public education campaign to reduce the impacts of poor air quality.

Table 2: Option 1 - South Australian Government requested contribution to AirSmart including television advertising

| Item | Cost |
|-----------------------------------|------------------|
| 10-week media campaign commencing | \$660,000 |
| Project management | \$52,100 |
| App maintenance and updates | \$43,780 |
| Evaluation | \$30,000 |
| TOTAL | \$785,880 |

Cost for year 2 - \$825,000

Table 3: Option 2- South Australian Government requested contribution to AirSmart television not included

| Item | Cost |
|-----------------------------|------------------|
| 10-week media campaign | \$462,000 |
| Project management | \$45,700 |
| App maintenance and updates | \$43,780 |
| Evaluation | \$20,000 |
| TOTAL | \$571,400 |

Cost for year 2 - \$600,000

Proposal 3: Increasing access to local air quality information

People with asthma are among those in the community who most urgently need access to local, real-time air quality information to take steps to protect their health. A key finding from the Federal Government's 2021 State of the Environment report was that better information could reduce the impact of poor air quality.¹³ The report recognised that communities need real-time, local air quality information during periods of poor air quality.

However, many communities around Australia do not have access to local air quality information because there are not enough air quality monitoring stations or sensors. South Australia currently has just 10 monitoring stations for the entire state.¹⁴ In comparison, Tasmania currently has 34 monitoring stations.¹⁵ Regional and rural populations commonly lack local air quality monitoring facilities, which can be particularly problematic during bushfires and dust storms where these communities are often closer to the hazard. However, even in metropolitan areas, air quality monitoring stations typically span many suburbs, meaning localised peaks of air pollution are neither detected nor reported on.

Air quality monitoring stations provide highly accurate information, however, they require suitable locations and can be expensive to establish and run. Low-cost air quality sensors offer a useful alternative to fill gaps in the air quality monitoring network due to their lower cost and flexibility in placement, and already are being used in other states.

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. With the declaration of an El Niño in September 2023 and the identified increase in risk for bushfires and longer bushfire seasons, the likelihood of conditions that will impact people's health, particularly from bush fire smoke is certain. Investing in measures to give people access to reliable information will not only assist people living with asthma but save lives.

Responsibility for air quality is shared by the federal and state and territory governments, with states and territories having prime responsibility for monitoring and managing air quality. All governments are required to help maintain and improve air quality and deliver on actions through the National Clean Air Agreement, which includes as one of four strategic approaches:

Better knowledge, education and awareness are essential requirements to inform policy decisions and to help empower communities and individuals to better deal with air pollution. Knowledge, improved through information sharing and research, is critical to plug existing data gaps, identify future trends and help focus efforts in managing air quality, and explore innovative measures to address air pollution. The Agreement's initial work plan also includes a two-year plan for reforms to improve the National Pollutant Inventory.¹⁶

The National Clean Air Agreement work plan for 2021-23 includes projects on nationally consistent public air quality information and health advice. This project has a framework agreed by jurisdictions and providing guidance on low-cost sensors measuring air pollution to the public led by NSW and SA.¹⁷

The South Australian Government should fund a low-cost air quality sensor pilot program as an important step towards ensuring communities in South Australia have access to air quality information. The proposed pilot program would enable agencies responsible for air quality monitoring and reporting to trial low-cost sensors. It would also increase understanding of how these sensors can be integrated into the existing monitoring networks and how information can be shared with the public. Investing in this type of technology, which is low cost but has a significant impact, is an investment that will deliver a return for the South Australian Budget.

Investing in increasing access to local air quality information would act on the recommendations of the State of the Environment Report, as well as progressing the National Clean Air Agreement work plan. This

information is critical to ensure that people vulnerable to the health impact of air pollution exposure are able to protect themselves and their families.

INVESTMENT REQUESTED: Fund a low-cost air quality sensor pilot program as the first step towards ensuring South Australian communities have access to air quality information. Costs to be determined in consultation with agencies responsible for air quality monitoring.

Proposal 4: Support holistic approaches to improving the conditions of new and existing housing. Policies and programs should consider the housing features needed to reduce asthma risk and support broader health and well-being

Housing is a key social determinant of health. More than 90% of our time is spent indoors, mostly inside homes.¹⁸ Homes should provide residents with safe and secure spaces that support their health and wellbeing by providing shelter, sufficient space, healthy indoor air quality, thermal comfort and affordable, efficient and healthy energy sources.

Certain housing conditions can increase the risk of developing asthma and, in people with the condition, trigger symptoms and exacerbations. For example, hot and cold temperatures can trigger asthma, while indoor airborne hazards such as gas cooktop emissions and mould can contribute to the development of asthma and trigger symptoms. Housing conditions associated with asthma can also cause other health problems. For example, cold homes contribute to increased sickness and death from cardiovascular illnesses in winter. This means a healthy home environment is not only important for asthma prevention and management, but also supports broader health and wellbeing.

The quality of housing is also increasing in importance as climate change causes hazards that require people to shelter in their homes. Currently, conditions within homes across the nation can too often become unhealthy from bushfire smoke entering leaky homes, extreme heat or mould caused by heavy rainfall and flooding. Policies to improve housing conditions should consider the needs of those people who are highly vulnerable to climate change impacts, including people with asthma.

A holistic approach to a healthy home Asthma Australia supports holistic approaches to improving the conditions of new and existing housing.¹⁹ Policies and programs should consider the housing features needed to reduce asthma risk and support broader health and wellbeing, including the following features:

1. Adequate and appropriate ventilation to disperse indoor and outdoor air pollution, prevent indoor airborne hazards such as mould, support thermal comfort, and reduce energy costs.
2. Sealing gaps to minimise infiltration of outdoor air pollution, support thermal comfort, and reduce energy costs, without compromising indoor air quality.
3. Appropriate insulation to support thermal comfort without compromising air quality and reduce energy costs.
4. Appropriate internal and external window shading to support thermal comfort and reduce energy costs.
5. Adequate and appropriate cooling and heating, such as fans and reverse cycle air conditioning, to support thermal comfort.
6. High efficiency particulate absorbing (HEPA) air filters to improve indoor air quality.
7. Electrification to reduce indoor air pollution and greenhouse gas emissions.
8. Access to renewable energy sources to reduce energy costs and greenhouse gas emissions.

These considerations should be integrated with established healthy housing principles and inform both standards for new homes and programs to retrofit existing homes. Undertaking improvements across the housing supply is likely to support a range of health outcomes associated with housing conditions, in addition to asthma. These considerations are particularly important in climate change housing adaptation, which must ensure homes provide a healthy living environment and avoid adverse consequences. Housing

adaptation must also be locally responsive, responding to relevant climate change risks and prioritising the needs of local communities.

Two defined actions towards addressing healthy homes are:

- Introducing financial support for low-income households to replace inefficient and polluting methods of household heating and cooking with efficient, electric alternatives would address health impacts associated with poor indoor and outdoor air quality, assist low-income households to address cost of living pressures and reduce greenhouse gas emissions. This is particularly important for people who are unable to make these changes due to cost or not owning their home. Action should also be taken to encourage owners of rental properties to make these replacements.
- Investing in HEPA air purifiers for people on low incomes with asthma, or other conditions that make them vulnerable to air pollution exposure, would increase access to an effective measure to improve indoor air quality and ensure homes provide a safe environment when outdoor air quality is reduced, for example, during bushfires. We acknowledge funding of \$50,000 that was allocated to purchase HEPA air purifiers through Asthma Australia's 2024-25 Pre-Budget Submission, which is being rolled-out through the Northern Adelaide Local Health Network. An ongoing investment in this measure is a practical step to improve indoor air quality.

INVESTMENT REQUESTED:

- **Introduce a financial support program for low-income households to replace inefficient methods of household heating and cooking to address indoor and outdoor air quality.**
- **Continued investment in HEPA air purifiers to improve the air quality in the homes of people with asthma on low incomes.**

¹ Australian Bureau of Statistics (2023) National Health Survey: Information on health behaviours, conditions prevalence, and risk factors in Australia, Reference period 2022, [National Health Survey, 2022 | Australian Bureau of Statistics \(abs.gov.au\)](#) (Accessed 4 January 2024)

² Ibid

³ Australian Government, Australian Institute of Health and Welfare, Emergency department care 2022-23: Australian hospital statistics, [Emergency department care - Australian Institute of Health and Welfare \(aihw.gov.au\)](#) - Table 4.5: Emergency department presentations by principal diagnosis in ICD-10-AM chapters, states and territories, 2022-23 (Accessed 16 January 2023)

⁴ Independent Hospital Pricing Authority, 2016. *National Hospital Cost Data Collection, Australian Public Hospitals Cost Report, Round 18 (Financial year 2013-14)*.

⁵ Giangio, S. et al., 2020. 'Emergency department visit count: a practical tool to predict asthma hospitalisation in children', *Journal of Asthma*, vol 57(10).

⁶ Australian Institute of Health and Welfare (AIHW) (2023) Admitted patients 2021/22: Australian hospital statistics. Canberra: AIHW, [Admitted patients - Australian Institute of Health and Welfare \(aihw.gov.au\)](#) (Accessed 16 January 2024)

⁷ Australian Government, Australian Institute of Health and Welfare, Emergency department care 2022-23: Australian hospital statistics, [Emergency department care - Australian Institute of Health and Welfare \(aihw.gov.au\)](#) (Accessed 9 January 2023)

⁸ AIHW (2023) *Australian Burden of Disease Study 2023*. Canberra: AIHW. [Australian Burden of Disease Study 2023, Summary - Australian Institute of Health and Welfare \(aihw.gov.au\)](#) (Accessed 9 January 2024)

⁹ Australian Bureau of Statistics (2023) Causes of Death, Australia, Statistics on the number of deaths, by sex, selected age groups, and cause of death classified to the International Classification of Diseases (ICD), Reference period 2022, [Causes of Death, Australia, 2022 | Australian Bureau of Statistics \(abs.gov.au\)](#) (accessed 16 January 2024)

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- ¹¹ Center of Health Economic Evaluation and Research (CHERE) (2020) Economic Evaluation of The COACH Program for Asthma Management.
- ¹² Commonwealth of Australia (2020) Royal Commission into Natural Disaster Arrangements Report, 28 October 2020.
- ¹³ Australia State of the Environment 2021,
https://soe.dcceew.gov.au/?_gl=1*1s98wwwo*_ga*NjY1NjU1NDYyLjE2Njc4NjgxMjQ.*_ga_1M2TBC9WWS*MTY2Nzg2ODEyMy4xLjEuMTY2Nzg2ODk1OC4wLjAuMA..&_ga=2.122277762.820626621.1667868124-665655462.1667868124 (Accessed 8 November 2022)
- ¹⁴ EPA South Australia, Environmental Info, Air quality monitoring [Air quality monitoring | EPA](#) (Accessed 31 January 2024)
- ¹⁵ EPA Tasmania Environment Protection Authority, All Air Monitoring Stations - Current Data Table [All Air Monitoring Stations - Current Data Table | EPA Tasmania](#) (accessed 31 January 2024)
- ¹⁶ Australian Government (2015). *National Clean Air Agreement: Towards a clean air future for all Australians*. Commonwealth of Australia.
- ¹⁷ Ibid
- ¹⁸ Institute of Medicine. 2011. Climate Change, the Indoor Environment, and Health.
<https://nap.nationalacademies.org/catalog/13115/climate-change-the-indoor-environment-and-health>
- ¹⁹ Asthma Australia, Housing and Asthma Policy Position Statement, June 2024. [Asthma-Australia-Housing-and-Asthma-Policy-Position-Statement-June-2024.pdf](#)