



**Asthma Australia Tasmanian Pre-
Budget Submission 2025-26 to 2028-29
December 2024**

Executive Summary - Budget Proposals

Asthma is the fourth most common chronic diseases in Tasmania, affecting 71,100 Tasmanians², or more than one in eight people - the second highest prevalence of any state or territory in Australia. Asthma represents a significant cost to individuals, government, and the broader Tasmanian community.

Asthma Australia is a for-purpose, consumer organisation which has been improving the lives of people with asthma since 1962. Asthma Australia's focus is on 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 and costs on the health system. This includes a key focus on preventable hospitalisations and working with primary care in optimising asthma diagnosis and management.

We work at both a community and systems level, understanding that improving the lives of people with asthma involves working with those directly impacted, as well as the system itself to increase efficiencies, create more effective processes and to advocate for change where it is needed.

The 2025-26 Budget proposals address ways in which we can improve asthma management and the environment in which people live. This means Tasmanians living with asthma can avoid unnecessary hospital visits, stay healthy and have contributing lives.

With dedicated funding, we can also leverage our national expertise in improving the utilisation of evidence-based guidelines, the promotion of new practices, engaging and supporting healthcare professionals around understanding the patient asthma journey and supporting their investment with patient-centred care frameworks.

The Asthma Australia submission focuses on the following funding proposals for consideration by the Tasmanian Government in the 2025-26 Budget covering 2025-26 to 2028-29:

| Proposal | Investment |
|--|---|
| 1. Increase funding to support effective self-management practices | Increase funding for Asthma Australia to \$740,000 over four years to deliver programs improving the lives of people with asthma in Tasmania. |
| 2. Support the healthcare professional workforce | Invest \$150,000 over four years to design, develop and distribute education content and resources and enhance engagement with the Tasmanian healthcare professional workforce. |
| 3. Support holistic approaches to improving the conditions of new and existing housing | Provide financial support for low-income households to replace inefficient methods of household heating and cooking to address indoor and outdoor air quality. |

About Asthma Australia

Asthma Australia is a for-purpose, consumer organisation which has been improving the lives of people with asthma since 1962. Asthma Australia's focus is on 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 and costs on the health system. This includes a key focus on preventable hospitalisations and working with primary care in optimising asthma diagnosis and management.

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 people in Australia, or 2.8 million people¹. 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 work at both a community and systems level, understanding that improving the lives of people with asthma involves working with those directly impacted, as well as the system itself to increase efficiencies, create more effective processes and to advocate for change where it is needed.

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.

Asthma in Tasmania

Impact on the health system

Asthma is the fourth most common chronic diseases in Tasmania, affecting 71,100 Tasmanians², or more than one in eight people - the second highest prevalence of any state or territory in Australia.

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.³

Asthma caused 13 deaths in Tasmania in 2023.⁴

Asthma places a significant burden on Tasmanian hospitals. In 2016–17, 1,451 Tasmanians presented to emergency departments for asthma.⁵ In this same period, asthma was responsible for 196 hospitalisations per 100,000 people in Tasmania.⁶ In the period in 2020–21, there were 692 potentially preventable hospitalisations for asthma in Tasmania.⁷

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 2019⁸:

- Hospitalisations in public hospitals in Tasmania doubled from 586 in 2015 to 1,149 in 2018, then fell marginally to 1,083 in 2019;
- Hospitalisations were spread evenly between the Royal Hobart Hospital and the Launceston General Hospital with 1,878 and 1,875 hospitalisations respectively. 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%; Launceston had the highest number of preventable hospitalisations in this period; and
- The burden of asthma is greatest for children aged 5-9 and in Tasmania, and the highest number of children presenting to hospital is at the North-West Regional Hospital.

New research shows regional Australia is disproportionately affected by childhood asthma.⁹ The study mapped childhood asthma census data against small geographical areas provided by the Australian Bureau of Statistics. The majority of the hot spots, more than 60 per cent, were in socio economically disadvantaged areas.

- There are three Tasmanian neighbourhoods in the top five and seven in total out of the top 20.

Asthma represents a significant cost to individuals, government, and the broader Tasmanian community. A study by the University of Tasmania¹⁰ shows that Indirect health impacts in 2018 included 13 deaths and between 483, 000-2.8 million days of lost productivity valued at \$103.4 - \$413.6 million. Total costs to the economy ranged between \$126.5 million and \$436.7 million. In-person costs ranged between \$1,918 and \$6,617. Direct health costs for asthma in 2018 were around \$23.1 million, and included:

- 1,454 ED presentations;
- 625 hospitalisations;
- 56,347 general practice visits;
- 6,382 specialist visits;
- 280,303 prescriptions; and
- Medication use was the largest contributor at 50% of direct costs.

In Tasmania, 23% of visits to the doctor were for asthma in 2018¹¹, making it one of the top three most common reasons.

Understanding life with asthma in Tasmania – the community experience

In response to the state of asthma in Tasmania and to support a deeper understanding of the experience of asthma in Tasmania, Asthma Australia has co-funded with Primary Health Tasmania the Tasmanian Asthma Discovery Project (Community Consultation the first half of 2023). The Consultation set out to find out what life is like for people with asthma in Tasmania, and to set the stage for future community-led work in identifying the challenges and codesigning innovative solutions in partnership with community and stakeholders.

The second phase of the work is to use the information from the consultation, together with other data intelligence from across the health system, to support a dynamic view of asthma in Tasmania and the community's needs. This will be finalised in mid-2025. This work is being carried out with the University of Tasmania to develop a community readiness rubric with which to determine which communities are best primed for programs thereby achieving the greatest impact.

Together, the consultation and the rubric add a new dimension to our work through which we can leverage our experience and maximise our efforts in targeting programs and people that can dramatically improve the lives of people with asthma.

Asthma, climate change and air quality

Climate change is increasing the frequency, duration and severity of many hazards associated with asthma development and symptoms. People with asthma are one of the largest population groups vulnerable to climate change hazards.

Climate change is inextricably linked with air quality. The emissions which contribute to climate change also reduce air quality, which can cause people to develop asthma and trigger symptoms or exacerbations in people with asthma. These adverse impacts on asthma are also caused by a number of threats which are increasing as a result of climate change, including bushfire smoke, ground level ozone and pollen. Reducing emissions will therefore improve air quality in the short and long term.

Many people with asthma recognise they are particularly impacted by the effects of climate change. Asthma Australia surveyed 12,000 people during the catastrophic 2019–20 bushfires about the impacts they experienced as a result of exposure to bushfire smoke.¹² When asked what the government, Asthma Australia or other organisations could do to reduce the impact of poor air quality on their day-to-day life, more than 1,000 respondents provided open text responses that linked the bushfire smoke crisis with climate change. Common suggestions included taking action to mitigate climate change and supporting individuals and communities to respond to bushfire smoke, for example by providing people with air purifiers and implementing building improvement programs to prevent smoke from entering homes, commercial buildings and schools.

In 2023, Asthma Australia undertook a nationally representative survey involving 2,000 respondents to understand what priorities people in Australia want the Federal Government to address in the National Health and Climate Strategy.¹³ Two-thirds of respondents lived with asthma or another chronic health condition. Some of the key results were:

- 70 percent of people think governments should act to protect people whose health is vulnerable to climate change.
- Of the respondents with asthma:
 - 91 percent were worried about the impacts of climate change;
 - 71 percent were concerned about increased air pollution as a climate change impact; and
 - 69 percent were concerned about more frequent and severe natural disasters.

One quarter of the people surveyed said climate change had already impacted their health. Among those people, breathing issues were the most common impact (49%) followed by poor mental health (39%) and hay fever (39%).

Tasmanian Budget Priorities - Strategic Alignment

The Tasmanian Government has identified chronic conditions as one of the main challenges to the Tasmanian health system in its *Our Healthcare Future: Advancing Tasmania's Health (Exposure Draft)*.

Asthma Australia's vision for Tasmania is in strong alignment with the Tasmanian Government's agenda for healthcare reform. It brings together our responses to the *Our Healthcare Future Immediate Actions and Consultation Paper*, the *Exposure Draft—Our Healthcare Future: Advancing Tasmania's Health*, the *Statewide Discharge Draft Framework Consultation*, the *Long-Term Plan for Healthcare 2040* and to the *Issues Paper—Establishing a Statewide Clinical Senate*.

A priority area of *Our Healthcare Future* is to increasingly deliver care in the community, away from hospitals and to increase the capacity of community to support its own ongoing health needs. In line with this, Healthy Tasmania is also implementing community-based development with its *Healthy Together* projects, designed to work with communities to set health and wellbeing goals and test local solutions in partnership with local stakeholders.

Importantly, the *20-year Preventive Health Strategy Discussion Paper* provides a generational opportunity to ensure that asthma receives the attention and priority needed to improve the lives of people with asthma and significantly reduce the burden on the health system.

Asthma is 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 those most disadvantaged.

Asthma Australia supports the approach that consumer-centric asthma approaches have the potential to dramatically ease the burden of asthma on Tasmania's health system. By supporting people to develop their capability and capacity to manage their own care, and engaging communities to support the wellbeing of their members, the burden and impact of asthma can be reduced.

Asthma is a disease that can be managed effectively in the primary care system and broader community, and the majority of asthma hospitalisations and deaths are avoidable.

Asthma is the fourth most prevalent disease in Tasmania yet only a small percentage of the state's healthcare budget has been committed to this chronic condition. There is now an opportunity for the Tasmanian Government to invest further in respiratory health, through greater focus on consumer self-management. This includes the enhancing of health literacy, empowering and equipping consumers to self-manage their condition and supporting consumers to play an active role in shaping health care systems and services that affect them.

Asthma Australia recognises the intersecting issue of budget constraints for the Tasmanian Government, along with cost-of-living pressures impacting the community. The 2025-26 Budget proposals address ways in which we can improve asthma management and the environment in which people live. This means Tasmanians living with asthma can avoid unnecessary hospital visits, stay healthy and have contributing lives.

Proposal 1: Increased investment to support Asthma Australia's work in Tasmania

On 1 July 2023, 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 2023–2026. Asthma Australia acknowledges the support of successive governments in Tasmania to support its ongoing work as the only asthma-related consumer organisation in the state.

The purpose of the latest 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 this funding agreement, we are:

- Driving engagement with asthma education and management information by consumers that supports their health and wellbeing (including 1800 ASTHMA service, digital channels and community level programs);
- Providing information that meets the requirements of all people encountering asthma (including health and other professionals, community, family, carers) which supports their health literacy and health promoting behaviours;
- Delivering multi-channel education and promotional campaigns that raise the profile across the community of asthma and awareness of its effective management;
- Developing collaborative actions with priority consumer groups and stakeholders that address specific asthma management issues;
- Partnering with consumers, community sector and health organisations to co-design local actions that contribute to reducing the impact of asthma on communities where the needs are greatest;
- Participating in health system initiatives to advocate for advancing outcomes for people with asthma, by influencing priority policies, systems and service models that will drive enduring change; and
- Providing information about air quality in Tasmania and climate change and health impacts to people experiencing asthma that supports their decision-making to achieve better health outcomes.

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.

We have developed strong and enduring partnerships with Tasmanian health professional, community, social services, mental health, family, children, young people and First Nations sectors, and enjoy the support of local government in priority locations.

The funding that Asthma Australia receives under the current funding agreement though appreciated, does not enable us to have as great an impact as needed. In fact, it should be noted that whilst the current funding has been increased by indexation at 2.25%, salary expenses alone have increased by FairWork at the rate of 3.75% and 4.60% across the prior two-year period of activity.

Currently Asthma Australia is covering the additional costs related to the service demand. We therefore seek an increase from the Tasmanian Government to continue, **and** meet the needs of people with asthma in Tasmania.

Funding at an appropriate level to meet demand would allow us to positively impact the health and wellbeing of people with asthma in Tasmania, and would support us to more deeply target programs in areas of need with system stakeholders.

INVESTMENT REQUESTED: The Tasmania Government increase its funding to Asthma Australia to a total of \$740,000 over four years to support effective self-management practices.

| <i>Table 1: Request for increasing funding for the Tasmanian Asthma Management Program</i> | | | | |
|--|----------------|----------------|----------------|------------------|
| Item | 2025–26 | 2026–27 | 2027–28 | 2028-29 |
| Providing Tasmanians with support in self-managing their asthma | \$185,000 | \$185,000 | \$185,000 | \$185,000 |
| TOTAL over four years | | | | \$740,000 |

Proposal 2: Developing the healthcare professional workforce in Tasmania

Data shows that 45% of people live with poorly controlled asthma,¹⁴ only 32% have a written asthma action plan and only 34% use medication daily.¹⁵

Healthcare professionals (HCPs) play a vital role in asthma management and ongoing care. We recognise the complexity of the role of a healthcare professional within the time- and resource-challenged environment, and that simply pushing more information, guidelines, and demands is not an effective way to drive behaviour change.

Asthma Australia's vision is that all people with asthma receive high-quality, personalised care that is tailored to their asthma profile, individual attributes, personal circumstances and community setting. Delivery of best-practice healthcare requires multiple components, and fundamental to this are the knowledge, skills and behaviours of the healthcare professionals.

Strategically, Asthma Australia has asked itself, "how might we support the delivery of best-practice, person-centred care for people with asthma?" Our response has informed the development of a national strategy to transform asthma care through a multi-year, collaborative human-centred design approach. It will leverage our understanding of the needs of people with asthma and engage with healthcare professionals to co-design meaningful solutions to enable best practice and inspire the behaviour change needed.

Our current emphasis is informed by our Quality Use of Medicines in Chronic Airways Disease Program (CAD)¹⁶ which centres on:

- Improved HCPs identification of symptoms of CAD and activation of clinically appropriate diagnostic and referral pathways;
- Increased awareness and initiation of evidence-based, clinically appropriate pharmacological and non-pharmacological treatments in CAD;
- Increased HCPs use of guideline-recommended approaches to selecting and demonstrating inhaler devices for patients;
- Increased HCPs awareness and initiation of person-centred care that empowers patients and family to be partners in the management of CAD; and
- Increased HCPs awareness and initiation of shared multi-disciplinary care that supports best-practice coordination particularly as it relates to preventing exacerbations and hospital presentations/admissions.

In Tasmania, supporting this approach is the ongoing development and distribution of resources and asthma updates to healthcare professionals via digital and hard copy platforms. We will continue to work with existing practices, organisations, systems and processes to build a more integrated and connected asthma pathway for people with asthma and their treating healthcare professionals.

Our work with the Tasmanian community has clearly identified that people with asthma value and prioritise their healthcare professional in their asthma care journey. However, there is a need to improve the delivery of care that more directly meets the health needs of the consumer.

Importantly, with new Australian Asthma Handbook guidelines scheduled for release in early 2025, supporting connections with Tasmania's healthcare professionals will be paramount to raise awareness

of the new paradigm and to ensure that the latest evidence-based standards are applied consistently in practice.

With dedicated funding, we can leverage our national expertise in improving the utilisation of evidence-based guidelines, the promotion of new practices, engaging and supporting healthcare professionals around understanding the patient asthma journey and supporting their investment with patient-centred care frameworks.

INVESTMENT REQUESTED: The Tasmanian Government invest \$150,000 over four years to develop and distribute best practice education content and resources and enhance engagement with the Tasmanian healthcare professional workforce.

| <i>Table 2: Request for increasing funding for the Tasmanian Healthcare Professionals Program</i> | | | | |
|---|----------------|----------------|----------------|------------------|
| Item | 2025–26 | 2026–27 | 2027–28 | 2028-29 |
| Developing the healthcare professional workforce in Tasmania | \$42,000 | \$36,000 | \$36,000 | \$36,000 |
| TOTAL over four years | | | | \$150,000 |

Proposal 3: 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.¹⁷ 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.

Asthma Australia supports holistic approaches to improving the conditions of new and existing housing.¹⁸ Policies and programs should consider the housing features needed to reduce asthma risk and support broader health and wellbeing, including the following features:

- 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;
- Sealing gaps to minimise infiltration of outdoor air pollution, support thermal comfort, and reduce energy costs, without compromising indoor air quality;
- Appropriate insulation to support thermal comfort without compromising air quality and reduce energy costs;
- Appropriate internal and external window shading to support thermal comfort and reduce energy costs;
- Adequate and appropriate cooling and heating, such as fans and reverse cycle air conditioning, to support thermal comfort;
- High efficiency particulate absorbing (HEPA) air filters to improve indoor air quality;
- Electrification to reduce indoor air pollution and greenhouse gas emissions; and
- 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.

INVESTMENT REQUESTED:

- **Provide financial support for low-income households to replace inefficient methods of household heating and cooking to address indoor and outdoor air quality.**
- **Investing in HEPA air purifiers for people on low incomes with asthma or other conditions. The average cost of an air purifier with a HEPA filter is \$500. As an estimate, annual funding of \$50,000 would provide approximately 100 air purifiers per year.**

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