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SUBMISSION

Tasmanian Community Fund draft Strategic Plan and proposed funding approach

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By email: admin@tascomfund.org

Asthma Australia welcomes the opportunity to provide feedback to the Tasmanian Community Fund (TCF) on their draft Strategic Plan and proposed funding approach.

Asthma Australia commends the Tasmanian Community Fund's commitment to empowering local communities through the TCF. The Fund fills an important gap by supporting community-led, place-based initiatives that strengthen local resilience and wellbeing.

Health is notably absent from the current grant priorities, despite being both a key determinant and outcome of community wellbeing. The grants framework also provides limited acknowledgement of priority populations, including First Nations peoples, who experience disproportionately poorer health outcomes and face greater barriers to accessing care and support. Preventing chronic disease and improving health equity should be recognised as essential components of building strong, resilient communities.

The Pilot and Innovation Fund is a particularly strong feature of the program and should be prioritised for implementation. It will enable communities to test new ideas, build an evidence base and identify what works before scaling successful approaches. Asthma Australia has seen the value of this model through partnerships with Tasmanian communities, [detailed in this submission with a case study](#). Asthma Australia has sought to understand Tasmanians' experiences of asthma, identify gaps and opportunities for improvement, work with communities to co-design solutions that reflect local needs, and identify communities best placed to participate in future place-based initiatives, ensuring programs are informed by evidence and community readiness.

Health can and should be a focus of this funding program. By supporting community-led health initiatives alongside broader social and community development activities, the Tasmanian Community Fund can help communities build the foundations for long-term wellbeing, participation and resilience. Investing in health is an investment in stronger communities, enabling people to live, work and contribute at their best while improving quality of life for current and future generations.

HEALTH IS AN ISSUE FOR COMMUNITIES

Health outcomes are shaped by more than health care alone. Social determinants of health, including housing, education, employment and income, strongly influence chronic disease risk and health inequities. The way communities are structured, including access to health services, transport, education and infrastructure, can significantly affect people's ability to prevent and manage illness. Addressing these challenges requires more than clinical interventions. Communities must be equipped and empowered to shape their environment to support good health.

Each community has its own unique challenges, meaning solutions must be community-led to reflect local needs and priorities. Asthma Australia's experience in Tasmania and across Australia demonstrates that place-based approaches can strengthen health literacy, improve access to care and build local capability to address health challenges. Healthy communities enable people to participate fully in education, employment and community life, with benefits extending beyond the health system to social wellbeing, productivity and community resilience.

Importantly, many communities require investment in social connections, local leadership and infrastructure before they are ready to implement and sustain health initiatives. Building these foundations creates the conditions for sustainable, long-term improvements in health and wellbeing.

These principles align strongly with the Tasmanian Community Fund's proposed Funding Framework. The Framework's emphasis on capability building, innovation, partnership and long-term community benefit reflects Asthma Australia's approach to working with communities to achieve sustainable improvements in community health and wellbeing.

Over the past three years, Asthma Australia has undertaken the Tasmanian Asthma Discovery Project to better understand community attitudes towards asthma, barriers to behaviour change and what is needed to create lasting improvements in asthma outcomes. Shaped by early discussions with the TCF, the project has built a strong consumer-led evidence base to inform community-driven solutions and demonstrate the value of early-stage discovery and evidence-building before larger-scale investment. This is detailed in the case study: [the TCF influence](#).

FUNDING COMMUNITY PROGRAMS TO SUPPORT BETTER HEALTH

Asthma Australia supports the TCF's focus on community capability, participation, collaboration, learning and resilience, recognising these as foundations of stronger communities and better health outcomes. We particularly support the proposed Pilot and Innovation Fund and recommend it be prioritised for implementation.

Building effective community programs takes time and requires sustained engagement to understand local needs, build partnerships and generate the evidence base for change. Asthma Australia's work in Tasmania demonstrates the value of early-stage discovery funding in laying the groundwork for larger-scale investment and long-term impact.

Asthma Australia invites greater clarity on what constitutes "short-term" funding within the framework and considers 12-18 months an appropriate funding period for pilot and innovation projects, based on previous experience in establishing relationships and projects in community.

The current framework could also place greater emphasis on priority populations. Where possible, funding should support initiatives that empower First Nations communities, rural and remote populations, people experiencing socioeconomic disadvantage, and children and young people, for

example. Targeted funding for these populations is essential to support programs designed to reduce social and health inequities.

There is also a significant opportunity to align the Fund with Tasmania's new 20-Year Preventive Health Strategy, which recognises that health outcomes are shaped across sectors, not just within the health system. As care and prevention increasingly shift into communities, investment in community capacity and local organisations will be critical to supporting both community wellbeing and long-term health outcomes.

A CASE STUDY: THE TCF INFLUENCE

Asthma Australia over the past three years has driven an intentional discovery strategy in Tasmania to understand life with asthma and the community's preparedness for positive behaviour change. It is important that we understand what is behind an entrenched 'asthma apathy' across the community and what steps people are prepared to take to create lasting change in their lives.

Our approach has directly been shaped by an early discussion with TCF about the potential for a place-based community project, in which a series of probing questions by TCF highlighted the need for thorough investigation and preparation and securing an evidence base on which to frame a response that was sustainable in community and which addressed community's challenges.

The trajectory of this work is significant and not insubstantial – and poses an important way of thinking about community programs and their funding and what it takes to become genuinely 'funder-ready' at the scale of investment required.

The resulting series of works, called the Tasmanian Asthma Discovery Project, is a clear trajectory of investigations inspired by the TCF aimed at going further than the obvious prevalence and associated data about asthma in Tasmania and build a more detailed and consumer-based picture of local community responses to asthma management.

The four aims of the project have been to:

- Understand the community experience of asthma in Tasmania
- Determine the current gaps and identify problems, challenges and potential solutions
- Gather insights into the wants and needs of Tasmanians and the problems we need to solve in partnership with the community
- Define which population(s) may be ready for a specific project to be delivered in their community

Our approach has taken three parts:

- The Tasmanian Asthma Community Consultation: what is life like with asthma in Tasmania?
- The Asthma Community Readiness Rubric – when is a community ready to engage?
- Pilot Program, Breathe Better in Burnie: what would make life better for kids with asthma in Burnie?

Neediness vs Readiness

Asthma Australia has a strong record of developing and leading community and place-based projects that bring together service users and stakeholders to co-design and trial solutions for asthma management and care.

These initiatives have often focused on building collective impact and applying systems-thinking approaches to identify effective preventive interventions. Yet, the concept of assessing community readiness *before* investing in interventions has not been rigorously explored.

To date, communities have generally been selected for interventions based on statistical indicators based on 'need' and funder priorities, without due consideration of whether individuals within those communities are ready to engage in or sustain preventive health behaviours essential to long-term asthma management.

Asking “which community, when, and why?” introduces a more strategic and evidence-based foundation for guiding collaborations and targeting interventions with priority populations.

Readiness: the Asthma Community Readiness Rubric

This project addressed two central questions in the Tasmanian context:

1. How can community readiness for asthma-related preventive interventions be defined and assessed?
2. What factors influence communities’ readiness, or resistance, to engage with interventions?

To answer these questions, the project worked with the University of Tasmania's Behavioural Lab to develop an innovative set of rubrics to evaluate how ready communities are to engage in and sustain preventive health behaviours that reduce the burden of asthma.

Three Tasmanian communities were selected to prototype the draft rubrics:

- Burnie – which has some of the highest asthma hospitalisation rates in Tasmania, particularly among children under 10 years of age. This makes it a priority site for piloting child-focused preventive initiatives.
- Launceston – which has a large population with asthma across all age groups, and frequent hospitalisations. This significant burden makes it an ideal setting for testing readiness models and engaging a diverse group of stakeholders.
- Brighton – which combines high asthma prevalence with marked socioeconomic disadvantage, highlighting the need for community-focused, accessible interventions to reduce disparities in outcomes.

The selection of these three communities provides strong opportunities for impact. Their high asthma burden makes them priority sites where targeted initiatives can deliver meaningful health improvements. Their diversity - urban and regional settings, varying disadvantage, and differing healthcare access - ensures findings will be broadly applicable. The scale of asthma prevalence also creates strong incentives for local governments, health services, and communities to engage in readiness assessments and behaviour change initiatives.

By identifying the characteristics that shape a community’s capacity to engage in asthma-related initiatives, and the targeted support required to build that capacity, the rubrics will give funders, policymakers, and service providers a practical tool for deciding where and when to invest. This will enable more strategic allocation of resources, strengthen community partnerships, and increase the likelihood of long-term, sustained improvements in asthma prevention and care.

The Pilot Deployment: Breathe Better in Burnie

Burnie has some of the highest asthma hospitalisation rates in Australia, particularly among children under 10 years of age. This makes it a priority site for piloting child-focused preventive initiatives that will improve health outcomes and quality of life for children with asthma.

Asthma Australia is seeking to do this by leveraging community strengths, fostering collaboration, and promoting sustainable, locally-driven solutions in an Assets Based Community Development framework.

In a collaboration between Asthma Australia and the Jeder Institute, we wanted to understand community's readiness to act on asthma using the Asthma Community Readiness Rubric as the key tool. The project sought to understand: What would make life better for kids with asthma in Burnie?

The insights gained now ready us to develop with community, a community-based program to better support Burnie's children experiencing asthma and empower communities to achieve healthier and more sustainable outcomes.

It is here where Asthma Australia has landed with a 'funder ready' program of works.

The Funding Implications

The Tasmanian Discovery Project has taken nearly three years, drawn out by the need to wait for funding cycles and securing small pockets of funding for each packet of work. Ideally, such work would happen on much shorter cycles to capitalise on community engagement and sentiment, which ultimately builds trust and genuine solutions.

For many of the phases of work, funding was provided by Asthma Australia through funding opportunities in larger grants. This was the main hold up in financial flow. External grants to fund discovery and prototyping work in the Tasmanian setting suited to this work were difficult to find.

With speedier and shorter funding cycles, the work timeline could have been compressed into a faster moving project which could be tested, piloted and scaled.

Organisations like the TCF are ideally placed to fund such discovery work in rapid cycles of iteration and improvement towards scalable models that can suit immediate and wider community needs.

ABOUT ASTHMA AUSTRALIA

Asthma Australia is the nation's peak body representing nearly 2.8 million Australians living with asthma. Our work is grounded in evidence and informed by the lived experience of people with asthma. Our programs reflect a commitment to outcomes-focused, equity-driven reform, integrating community insight and clinical expertise to strengthen person centred asthma care.

CONTACT

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