



Asthma Australia Submission to the Australian Government Department of the Treasury

Pre-Budget Submission 2022–23

December 2021

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: Continued and increased investment in the Asthma Management Program

RECOMMENDATION: Asthma Australia recommends the Australian Government fund Asthma Australia \$10.1m over four years to deliver the Asthma Management Program

Funding priority 2: Funding for a national AirSmart public education campaign to reduce the health impacts of air pollution

RECOMMENDATION: Asthma Australia recommends the Australian Government fund Asthma Australia \$1.84m over two years for a national rollout of AirSmart

Funding priority 3: Funding equity for research in respiratory health to align with the burden it places on Australians

RECOMMENDATION: Asthma Australia recommends the Australian Government invest \$500,000 for the 2022–23 financial year in the Australian Medical Research Advisory Board to fund the development of a Medical Research Future Fund Respiratory Health Mission

Funding priority 4: Commitment to climate change mitigation and adaptation, prioritising vulnerable groups

RECOMMENDATION: Asthma Australia recommends the Australian Government fund renewable and non-emitting sources for energy and transport to accelerate the transition away from fossil fuels and towards renewable and non-emitting sources for energy and transport

RECOMMENDATION: Asthma Australia recommends the Australian Government implement a National Strategy on Climate, Health and Well-being for Australia, such as that developed by the Climate and Health Alliance, and fund the actions contained in the Strategy

RECOMMENDATION: Asthma Australia recommends the Australian Government fund the extension of the 'Essential Medical Equipment Payment' to people with asthma and air purifiers

RECOMMENDATION: Asthma Australia recommends the Australian Government fund a scheme providing financial support to people of low socio-economic status with asthma towards the costs associated with purchasing air purifiers with a HEPA filter and air conditioners



Introduction

Asthma Australia wants people to live in communities where we are supported to live healthy lives and can breathe clean air. Asthma Australia welcomes the opportunity to detail funding priorities for the 2022–23 Budget that will benefit the 1 in 9 Australians who have asthma. In addition to these individuals, asthma affects carers for 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 2022–23 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 because this will help reduce the prevalence and impact of chronic disease, and in turn reduce the burden on the health system and broader community. To further reduce this burden and improve the lives of people living with asthma we therefore seek funding to enhance and expand our Asthma Management Program, implement a national AirSmart Campaign, build the foundation for a Respiratory Health Mission and make funding commitments to address climate impacts on health.

Asthma in Australia

Asthma is one of the most common chronic conditions in Australia, with high prevalence rates by international comparison. Around 2.7 million Australians (11% of the total population) have asthma.¹ Asthma affects people of all ages.

Asthma is the 9th leading contributor to the overall burden of disease in Australia,² having risen from 10th place in 2003 to 9th place in 2018.³ Asthma can both be caused and exacerbated by conditions related to the warming climate, which means asthma outcomes will worsen as climate change impacts increase. Asthma is the leading cause of burden of disease for people aged 5–14 years.⁴ People with asthma experience poorer health outcomes and quality of life.⁵ People with asthma may live for a long period of time with its associated disability, and experience reduced participation in paid employment, education, care responsibilities, sports and social events.

Approximately 400 people die each year in Australia due to asthma⁶ and there were 417 deaths due to asthma in 2020.⁷ Asthma mortality⁸ and hospitalisations⁹ in Australia are high by international standards. Hospitalisations due to asthma are costly: on average, each emergency department presentation for asthma costs \$443, an uncomplicated hospital admission costs \$2,591 (approximately 1.5 hospital days) and a complicated admission costs \$5,393 (approximately three hospital days).¹⁰ A 2015 report on the Hidden Cost of Asthma found that asthma cost the healthcare system \$1.2 billion, there was a cost of \$1.1 billion in lost productivity, and the burden of disease amounted to a cost of \$24.7 billion.¹¹

Asthma and the 2022–23 Budget

The 2022–23 Budget presents a unique opportunity for the Australian Government to invest in respiratory health, the importance of which has been highlighted during the COVID-19 pandemic and the smoke crisis associated with the 2019–20 summer bushfires. These events have been particularly difficult for people with asthma. Many people with asthma and their carers have turned to Asthma Australia for support during these difficult times. We have experienced significant increases in media



reach, 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 our media statements on monitoring air quality reached 40.04 million people, up 186% from 2018–19; calls to our helpline increased by 60% versus the prior year; and some of our most trafficked pages have been those related to COVID-19 with over 250,000 page views from June 2020 to December 2021.

In this submission, we seek a commitment to renewed and increased core funding through the Asthma Management Program for Asthma Australia to continue our work that benefits people with asthma and their carers, families and communities. With this funding, we can expand upon our achievements under the current agreement, such as delivering training to over 3,000 schools each year thereby ensuring a safe and secure learning environment for 500,000 students; providing vital and comprehensive telephone support to over 5,000 individuals which has helped improve their knowledge and confidence to self-manage their condition; and engaging with communities where the burden of disease is greatest.

Asthma Australia seeks investment in AirSmart, a public education campaign that aims to provide the information, tools and strategies people need to minimise or avoid exposure to unhealthy air.

We also seek a commitment to a respiratory health research mission funded by the Medical Research Future Fund and commitment of funding from the Australian Government towards substantially reducing Australia’s contribution to climate change and implementing adaptation responses to the health effects of climate change.



Funding priority 1: Continued and increased investment in the Asthma Management Program

Asthma Australia seeks funding to continue to build on the important work funded by the Australian Government in 2018. Under the 2018–22 funding agreement, Asthma Australia received \$7.6 million to develop and implement a national Asthma Management Program (AMP) for the benefit of people with asthma and their carers.

The interim evaluation report of the AMP, due in December, clearly shows the positive impact the AMP program has had on people with asthma, their carers and the health care professionals who work with them through three key programs: the Community Information and Support Program; the Schools and Young People program; and Priority Populations – The Culture Well Project.

PROPOSAL: The Australian Government provide funding of \$10.1m over four years for Asthma Australia to deliver the Asthma Management Program

Asthma Australia has the potential and experience to further grow the scope and scale of our engagement with people with asthma, their carers and the broader community. With a revised funding agreement, we can increase the depth of our engagement and impact with communities where the burden of disease is greatest.

Asthma Australia is seeking \$10.1 million over 4 years to continue our work of improving the lives of people with asthma, through the following projects:

1. Engage and empower: Improving the quality of life for people with asthma
2. Keeping children and young people healthy and well: creating a journey of lifelong learning and self-agency
3. Community Asthma Program: Supporting communities where the burden is greatest
4. Leveraging consumer insights to drive systems change and person-centred approaches

Engage and empower: Improving the quality of life for people with asthma

Insights from our recent customer journey mapping work and evaluations have led to the development of a new service model which will enable us to target information to people with asthma and their carers and provide them with the right information and support, at the right time, through the right channels. This new program is designed to have universal application and at the same time enable a tailored, deeper, person-centred engagement. This new model will continue to focus on people with asthma and their carers, and be more tailored to the individual person with asthma using a variety of mediums with a focus on improving quality of life.

Our multi-channel approach—including telephone, email, newsletters, SMS and webchat—will continue to use qualified asthma educators to provide evidence-based information and support to people with asthma and their carers.



Keeping children and young people healthy and well: creating a journey of lifelong learning and self-agency

Asthma disproportionately impacts young people, children with a disability, and Indigenous children. The existing AMP Schools and Young People Program has had significant reach and impact across Australia through the provision of online asthma first aid training, the development and adoption of school based Guidelines for managing asthma and the development of a self-audit Asthma Schools Health Check. During each year of the existing funding agreement, our program has been run in 3,000 schools and undertaken by 20,000 school staff, thereby ensuring safe and secure learning environments for over 500,000 children, of which over 55,000 will have asthma.

With additional funding, we can further embed the current program and also implement a comprehensive codesign element that will focus on capturing insights from children and young people on how they believe asthma can be better managed. These insights and learnings will be translated into new program activity that we envisage will positively impact children throughout Australia.

Working with children and young people to reduce morbidity in adulthood is vital to reducing the burden of disease of asthma. This next iteration of the Schools and Young People Program will therefore shift the program from a risk management approach to an empowerment approach, which will lead to lifelong learning. Early work with the Agora Group in Queensland has already commenced on uncovering these insights.

Community Asthma Program: Supporting communities where the burden is greatest

The Community Asthma Program builds on our work from Culture Well, a project based on an understanding that health and wellbeing is made up of many different, inter-connecting factors such as literacy, income, housing conditions, and individual lifestyle and that these factors act to strengthen or undermine the health outcomes of individuals and communities. The World Health Organisation has determined that ‘the high burden of illness responsible for appalling premature loss of life arises in large part because of the conditions in which people are born, grow, live, work, and age’.¹²

The Community Asthma Program draws upon Asthma Australia’s expertise in codesigning and collaboratively developing interventions using a social determinants lens. It works with people with asthma and their treating health professionals in communities where the burden of disease is greatest. Asthma Australia will continue to identify, work with and partner with communities to identify the barriers and enablers of effective asthma management specific to that community. Initiatives developed through the codesign process will be shared with the community and their local organisations as we partner to implement.

The codesigning and development of local initiatives together with the community has a much greater chance of success than health care approaches that are imposed on a community.

Influencing system change: leveraging consumer insights to drive systems change and person-centred approaches

Asthma Australia was successful in securing the competitive Health Peak and Advisory Body (HPAB) grant for the 2019–2021 period, which has been instrumental in supporting research, evaluation, consumer engagement and policy capacity and capability within Asthma Australia that underpins work across the entire organisation.



These capabilities have been integral to:

- Providing evidence and insights to inform and prioritise new and improved policy and practice initiatives, via leveraging existing data and information sources
- Evaluating initiatives to inform learning and refinement, and scaling what works; and
- Influencing system change through research and policy initiatives including undertaking large and varied community surveys; developing policy position statements; and submitting to consultations and inquiries such as the development of the National Preventive Health Strategy, and to the Therapeutic Goods Administration and Pharmaceutical Benefits Advisory Committee.

Asthma Australia was unsuccessful in the HPAB grant process for the period 2022–2025. However, an extension of one year funding under the 2019–2022 grant has been provided to the end of June 2023 at current funding levels.

In order to maintain this valuable capacity, and the momentum that has been established in increased activity and influence as outlined in progress reports, an allowance has been built into the AMP budget. This is smaller in year one given the extension of the current HPAB grant for another year, and increases in the second, third and fourth year of the AMP Funding Proposal to support these vital capacity and capability functions funded under the HPAB grant, on which the other activities of the AMP rely, and which will ensure the continuation of:

- A rich knowledge and evidence base to draw on
- Capability to design and implement quality evaluations
- Diversity of thought and perspective to drive a systemic approach; and
- Momentum established in the current funding period.

RECOMMENDATION: Asthma Australia recommends the Australian Government fund Asthma Australia \$10.1m over four years to deliver the Asthma Management Program

Table 1: Total AMP costing

Project	2022–23	2023–24	2024–25	2025–26	Total
Engage and empower: Improving the quality of life for people with asthma	\$1,303,230	\$1,429,844	\$1,540,005	\$1,626,281	\$5,899,360
Keeping children and young people healthy and well: creating a journey of lifelong learning and self-agency	\$455,619	\$509,971	\$495,498	\$512,832	\$1,973,919
Community Asthma Program: Supporting communities where the burden is greatest	\$253,500	\$253,500	\$253,500	\$253,500	\$1,014,000
Leveraging consumer insights to drive systems change and person-centred approaches	\$142,000	\$364,000	\$364,000	\$364,000	\$1,234,000
TOTAL	\$2,154,348	\$2,557,314	\$2,653,003	\$2,756,613	\$10,121,279



Funding priority 2: 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

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. 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.¹⁵

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.¹⁶ 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.

PROPOSAL: The Australian Government provide funding of \$1.84m over two years for Asthma Australia to implement a national AirSmart public education campaign to minimise the impacts of poor air quality

Asthma Australia has taken the lead on developing a targeted education campaign called ‘AirSmart’ to improve access to air quality tools for people who are particularly vulnerable to poor air quality. AirSmart aims to educate and empower people with the information, tools and strategies needed to minimise or avoid exposure to unhealthy air and by doing so, reduce the impacts on health, wellbeing and participation. In addition, this campaign aims to improve environmental health literacy, so the community can interpret and act on health advice provided during times of reduced air quality to minimise the impact on their health.

AirSmart aims to do for exposure to unhealthy air what SunSmart has done for exposure to ultraviolet radiation: SunSmart has successfully educated Australians around the dangers of UV and provided strategies to enjoy the outdoors safely. The AirSmart concept originated with the Public Health Association of Australia (PHAA), and PHAA strongly supports Asthma Australia progressing its implementation.



Asthma Australia has taken the lead on developing a creative campaign and mobile phone application that is ready to be piloted. We are currently seeking funding to implement and evaluate the pilot which will enable us to pilot the campaign ahead of the next bushfire season. We will build on learnings from the pilot to refine and improve the campaign for future bushfire seasons, as well as to broaden the focus beyond smoke to other pollutants which adversely impact health. We therefore seek funding from the Australian Government to enable us to rollout AirSmart nationally.

RECOMMENDATION: Asthma Australia recommends the Australian Government fund Asthma Australia \$1.84m over two years for a national rollout of AirSmart

Table 2: Total AirSmart costing

Item	2022–23	2023–24
Media placement	\$700,000	\$900,000
App development and maintenance	\$50,000	\$30,000
Evaluation and consumer research	\$30,000	\$30,000
Project management costs	\$50,000	\$50,000
TOTAL	\$830,000	\$1,010,000



Funding priority 3: Funding equity for research in respiratory health to align with the burden it places on Australians

The Medical Research Future Fund (MRFF) was created in 2015 by the Australian Government to transform health and medical research and innovation to improve lives, build the economy and contribute to health system sustainability. Funding is provided for innovative medical research based on a comprehensive list of principles including funding specific health issue initiatives which are assessed on scientific rigour, where there is both burden and unmet research need.

Lung disease is a significant health issue for Australians: seven million Australians live with a lung disease. While 9% of total disease burden between 2008 and 2017 was attributable to lung diseases and lung cancer,¹⁷ only 2% of total Australian institutional research funds were awarded to research into these same diseases.¹⁸ Lung conditions therefore impose a substantial and preventable burden on individuals, their families, the healthcare system, and the broader economy.

Respiratory health has been a particular challenge in Australia during both the 2019–2020 summer bushfires and the COVID-19 pandemic. Considering the relative burden of respiratory illness in Australia compared to funding mobilised to address it, it is time that a respiratory health mission was formed in the MRFF 10 year plan to dedicate meaningful funding to this increasingly important area of health.

We call upon the Australian Government to invest in discoveries in medical research and innovations, optimising health service delivery, and holistic health support for individuals, their families and their communities. The most impactful approach to achieve these aims will be through a Respiratory Health Mission, which will result in world class collaborations from across sector and industry to develop solutions to the real, critical, and evolving challenges faced by people with respiratory illness.

PROPOSAL: The Australian Government invest \$500,000 in the Australian Medical Research Advisory Board for the 2022–23 financial year to fund the development of a world-leading MRFF Respiratory Health Mission

As a member of the Lung Health Alliance, Asthma Australia, in collaboration with Lung Foundation Australia, Thoracic Society of Australia New Zealand, Cystic Fibrosis Australia and the National Asthma Council Australia, have developed a clear and comprehensive proposal for an MRFF Respiratory Health Mission (the Mission).

The vision of the Lung Health Alliance’s proposed Mission is to discover a cure for all Australians with lung disease. The goal of the Mission would be to reduce the avoidable burden of respiratory disease in Australia: reduce deaths; reduce hospital presentations; increase quality of life and reduce the disease burden; and reduce the onset of respiratory disease.

The objectives of the proposed Mission include:

- The development of meaningful collaborations to establish Australia as a world leader in respiratory health research
- Delivery of timely outcomes for people with respiratory disease
- Reducing the impact and burden caused by respiratory illness



- Building the capability and capacity of the sector to address emerging threats to Australia’s lung health; and
- Increasing local and international investment in meaningful research initiatives.

The proposed program of work includes advancing research across the following core focus areas:

- Immunomodulation discovery
- Genomic and biomarker development
- Clinical and translational networks
 - Novel drugs and therapeutic approaches to prevent, screen, diagnose and treat respiratory disease
- Precision medicine collaborations
 - Treatable traits
 - Value-based care
- Technology incubation and innovation hub
 - Artificial intelligence and state of the art technology platforms such as wearables to improve screening, prescribing, monitoring and adjusting therapies
 - Risk assessment
 - Collaborative management plans between patients and health care providers
 - Enablers for personalised prevention of environmental exposures
- Longitudinal respiratory research program including the first 1,000 days research program
 - Impacts of the changing environment
 - The increasing prevalence of allergy diseases in Australia

We therefore propose that during the 2022–23 financial year, the Australian Government commits \$500,000 to develop the necessary building blocks upon which the 10 year Respiratory Health Mission could be built. This initial investment would cover the:

- Establishment of governance structures
- Appointment of the project implementing team to execute this ‘startup’ phase and establish the base for the remainder of the Mission
- Coordination of the local and international consultation processes to validate and establish the pillars and phases of the Mission; and
- Establishment of the platforms, databases, tools and resources necessary for the effective collaboration of stakeholders’ engagement in the Mission.

The startup of phase of the Respiratory Health Mission will be followed by the development and delivery of the 10 year program of work requiring a \$200m investment by government.

RECOMMENDATION: Asthma Australia recommends the Australian Government invest \$500,000 for the 2022–23 financial year in the Australian Medical Research Advisory Board to fund the development of a Medical Research Future Fund Respiratory Health Mission



Funding priority 4: Commitment to climate change mitigation and adaptation, prioritising vulnerable groups

Asthma Australia supports strong action to mitigate climate change and adapt to the impacts of past and continuing emissions.¹⁹ Failing to take robust action now will result in greater warming and make it harder—if not impossible—to mitigate or adapt to climate change in the future. The health impacts of climate change are particularly significant for vulnerable groups including people with asthma.

Asthma Australia’s survey of over 12,000 people during the 2019–20 summer bushfires informed us about the respondents’ views on climate change.²⁰ 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 climate change with the bushfire smoke crisis. Common responses included taking action to mitigate climate change, providing people with access to air purifiers and implementing programs to remediate homes, commercial facilities and schools to reduce indoor air pollution.

PROPOSAL: The Australian Government fund renewable and non-emitting sources for energy and transport to accelerate the transition away from fossil fuels

Asthma can both be caused and exacerbated by conditions related to the warming climate. The numerous climate related pathways responsible for this include: gases and particulates in smoke from bushfires which are increasing in frequency and severity; increased pollen production as a result of a higher level of atmospheric carbon dioxide; extreme heat and extreme fluctuations in temperature; and increased levels of ground level ozone caused by the hotter and drier climate.²¹

The thunderstorm asthma event in Melbourne in 2016 demonstrated the tragic impact the combination of factors all worsened by climate change (extreme weather, increased pollen, higher prevalence of asthma) can have on our populations. It caused 35 ICU admissions for asthma or bronchospasm on 21 and 22 of November, the deaths of 10 people and the need for over 3,000 emergency department presentations in one 30-hour period.²² Of these presentations, most patients (56%) did not have diagnosed asthma, but asthma was present in all ICU admissions and deaths.²³

These climate-related risk factors for asthma are further mediated by sociodemographic factors such as age, gender, health, nutritional status, ethnicity, housing, public infrastructure, access to healthcare, socioeconomic status, geography and warning systems.

RECOMMENDATION: Asthma Australia recommends the Australian Government fund renewable and non-emitting sources for energy and transport to accelerate the transition away from fossil fuels and towards renewable and non-emitting sources for energy and transport

RECOMMENDATION: Asthma Australia recommends the Australian Government implement a National Strategy on Climate, Health and Well-being for Australia, such as that developed by the Climate and Health Alliance, and fund the actions contained in the Strategy²⁴



PROPOSAL: The Australian Government provide financial support to people with asthma with low socio-economic status to minimise the health impacts of air pollution

Climate change is causing adverse asthma outcomes through declining air quality caused by the burning of fossil fuels, increased ground level ozone and events such as bushfires and thunderstorm asthma. Reducing the adverse health impacts of air pollution should be a priority issue for adaptation strategies. Air pollution is second only to tobacco as a cause of death from non-communicable diseases, and the United Nations recognises air pollution as one of 5 risk factors for non-communicable diseases, alongside unhealthy diet, tobacco use, harmful use of alcohol and physical inactivity.²⁵ Exposure to environmental hazards (such as poor air quality, bushfires and thunderstorms) is both a risk factor for the development of asthma and a trigger for asthma symptoms in people who have asthma.²⁶

Health advice during periods of air pollution includes staying inside with doors and windows closed however, air pollution can enter buildings. Air purifiers with HEPA filters can be highly effective in reducing indoor air pollution.²⁷ Air conditioning can also be necessary during air pollution events that occur in hot weather. However, it is expensive to purchase and run air purifiers and air conditioners. Some members of the community require financial assistance to implement health advice and ensure their homes are safe places to shelter during air pollution events.

The Essential Medical Equipment Program, administered by Services Australia, provides an annual payment of \$160 towards the energy costs for ‘medically required heating or cooling, and each piece of qualifying essential medical equipment’ to people with a Commonwealth Concession Card who have an eligible medical condition.²⁸ However, the current scheme does not include asthma as an eligible medical condition to receive the payment for medically required heating or cooling. Further, the scheme does not include air purifiers in the list of eligible medical equipment and does not assist with the costs of purchasing air purifiers or air conditioners.

RECOMMENDATION: Asthma Australia recommends the Australian Government fund the extension of the ‘Essential Medical Equipment Payment’ to people with asthma and air purifiers

RECOMMENDATION: Asthma Australia recommends the Australian Government fund a scheme providing financial support to people of low socio-economic status with asthma towards the costs associated with purchasing air purifiers with a HEPA filter and air conditioners



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