## Australian National Preventive Health Agency (Abolition) Bill 2014 Submission 3



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## Re: Inquiry into the Australian National Preventive Health Agency (Abolition) Bill 2014

The Australian Dental Association Inc. (ADA) welcomes the opportunity to provide comments on the Inquiry into the Australian National Preventive Health Agency (Abolition) Bill 2014.

The ADA understands that functions of Australian National Preventive Health Agency (ANPHA) are to be absorbed into the Department of Health.

The ADA has previously expressed the view that the scope of work undertaken by ANHPA was too narrow. The ANPHA has focused solely on three key areas of disease burden: obesity, tobacco and alcohol abuse. There was attention drawn to prevention of oral disease. Research shows that prevention programmes have maximum effect when they are tailored to meet the needs of the community, are widespread and scientifically based. Such an approach has also been shown to be cost effective.

The ANPHA's focus on poor diet, smoking and alcohol consumption should have been linked to oral disease as they are causative factors in caries, periodontal disease and oral cancers. Oral health messages (such as those promoted by the ADA) could have easily been incorporated into the Agency's initiatives but despite repeatedly calls by the ADA this did not occur.

Furthermore ANPHA failed to include anyone with oral health expertise on any of the expert reference groups established by the Agency. The continual separation of oral health from general health in government policy needs to be addressed and it is hoped that the transfer of ANPHA's responsibilities into the Department of Health will be seen as an opportunity to take a more holistic view to health promotion activities funded by the Australian Government so that they include specific reference to oral health.

Notwithstanding the aforementioned issues, the ADA is concerned about the apparent dismantling of National and State preventive health initiatives as a result of the 2014-15 Federal Budget decisions.

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The moves to abolish the Australian National Preventive Health Agency; terminate the National Partnership Agreement on Preventive Health; reduce funding for the National Tobacco Campaign and restructure Medicare Locals brings into question the Federal Government's commitment to protecting the Health of Australians. From the little information publicly available, it appears that proposed new initiatives to 'fill the void' left by the loss of the NPA, such as the Sporting Schools Initiative and the Medical Research Future Fund will fail to address all of the current preventive health needs of Australians.

The additional decision to charge a \$7 co-payment for GP visits seems to also penalise disadvantaged people who are potentially the ones at greatest risk of preventable chronic disease. They will have increased difficulty accessing preventive health interventions, will not have access to free health prevention initiatives facilitated by the ANPHA and, if they want preventive health advice from a GP, they will now have to pay a surcharge.

While these Budgetary decisions may be viewed as cost saving measures in the short term, the effect of discouraging Australians from undertaking protective health prevention activities will have severe and far reaching consequences. Even without the additional loss of access to preventive health initiatives, the cost of chronic disease to individuals and the community is predicted to sky rocket and reach unmanageable levels. The loss of productivity associated with the chronically ill being unable to work or care for family members will compound this crisis.

With the wind-up of the ANPHA, valuable knowledge and expertise will be lost, and the preventive health initiatives that were already in motion will be halted, without allowing time for an evaluation of their impact. This represents both a wasted investment and a lost opportunity. While the Department of Health has an important role to play, it cannot be expected to have the same capacity to promote preventive health as a dedicated agency such as the ANPHA can.

If you seek any further information or wish to discuss in more detail any of the issues raised in this submission, please contact Mr Robert Boyd-Boland

Yours sincerely,

Dr Karin Alexander President