



5 June 2014

Standing Committee on Community Affairs  
PO Box 6100  
Parliament House  
CANBERRA ACT 2600

Via email: [community.affairs.sen@aph.gov.au](mailto:community.affairs.sen@aph.gov.au)

Dear Sir/Madam,

**Submission re Australian National Preventive Health Agency (Abolition) Bill 2014**

The Australian Nursing & Midwifery Federation (ANMF) has serious concerns regarding the impact of the abolition of the Australian National Preventive Health Agency (ANPHA) on the health of Australians. The decision to abolish ANPHA, noted by Government to produce savings of \$83 million, will inevitably result not only in detrimental social costs but increased health costs and as such is a seriously retrograde step.

To reduce the already paltry budget for preventive health, which includes the abolition of the ANPHA is misguided at best and deeply irresponsible at worst.

Removing the National Partnership Agreement for public health will mean that current activities which focus on preventable illness, such as diabetes and obesity related conditions, will no longer be able to contribute to reducing costs to the health system and improving the health of the community.

A further, but equally important, concern related to the abolition of the ANPHA, is the lack of independent oversight that could result; Department staff could be expected to respond to Government imperatives and interests rather than the best directions for preventive health care, as was demonstrated by the recent episode with the Department's food star rating website.

While the consequences of the abolition of the ANPHA on health outcomes and potential to increase costs are themselves concerning, they become alarming when viewed in the context of the impacts of other health measures that have been announced in the Government's 2014-15 Budget.

Increased health-care costs for individuals resulting from the series of proposed co-payments for GP and other services will discourage people from seeking help when needed and before conditions escalate. This will result in more expensive health problems, which could and which should, have been prevented.

It is some relief that anti-smoking media campaigns will continue, and the commitment to an expanded bowel cancer-screening program and the National

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**ANMF Journals**

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Diabetes strategy and to direct funding to dementia research are positive. But these programs will not be enough to counter the significant losses that are set to occur.

Impressive reductions in smoking rates in indigenous communities and restraining increases in childhood obesity, achieved under the national partnership agreements, will be lost as those who will be least able to afford access to preventive health programs are effectively priced out of the health market.

This won't just affect individuals. As the effects of co-payments bite, the most disadvantaged will become less and less likely to engage in healthy behaviours which could significantly affect the entire community. If vaccination rates fall as a consequence of these measures the effects won't just be confined to those who could not afford the GP visits.

Health experts have been united in explaining the critical importance of effective preventive health care; both because of the improvements to the overall health of the community and the massive costs savings it can produce. These efforts have been consistently ignored by Government and their advisers.

If a government were genuine about improving the health of the community and the productivity of Australians, it would increase funding for preventive health care and research not reduce it.

The ANMF is therefore opposed to the abolition of the ANHPA and consequent reductions in focus on and resources for preventive health care. We urge the Inquiry to give consideration to the issues raised above and recommend against the abolition of the ANHPA.

Yours faithfully,

Annie Butler  
Assistant Federal Secretary  
Australian Nursing & Midwifery Federation