Pre-Budget Submission 2026-27

Cancer Council Australia

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Cancer Council Australia acknowledges the traditional custodians of the lands on which we live and work. We pay respect to Aboriginal and Torres Strait Islander Elders past, present and emerging.

As one of the most trusted organisations in Australia[1], Cancer Council Australia is the peak, non-government cancer control organisation, improving outcomes and providing support to **all** Australians affected by **all** cancers. As the national body in a federation of eight state and territory member organisations, Cancer Council Australia works to make a lasting impact on cancer outcomes by: shaping and influencing policy and practice across the cancer control continuum; developing and disseminating evidence-based cancer information; supporting research; convening and collaborating with cross sectorial stakeholders and consumers to set priorities; and speaking as a trusted voice on cancer control in Australia.

Cancer Council Australia sincerely thanks the Australian Government for previous funding that has been used to prevent cancers and reduce cancer risk, enhance early detection and improve the lives of many Australians through best practice cancer care. In particular, we would like to acknowledge Cancer Council Australia's funding over the last financial year from the Department of Health, Disability and Ageing for behaviour change campaigns - the National Bowel Cancer Screening Campaign, and the National Skin Cancer Prevention Campaign; and most recently funding for the development of an Optimal Care Pathway for people with disability.

2026-27 Pre-Budget Submission in Summary

Cancer is a major cause of illness and death in Australia. In 2025, it is estimated that cancer will be responsible for three in every ten deaths in Australia, and an estimated 170,000 Australians will be diagnosed with cancer.[2] Cancer is the leading cause of disease burden in Australia.[3] Cancer has accounted for the greatest health system expenditure of any disease for seven consecutive years.[3] Almost every Australian is affected by cancer in some way, either directly or indirectly.

Cancer Council Australia has identified 12 leading policy priorities for the upcoming 2026-27 federal budget, with measures recommended to:

- Deliver a future free from skin cancer
- Eliminate nicotine addiction
- Implement economic interventions for preventive health
- Increase participation in the National Bowel Cancer Screening Program
- Improve the provision of optimal cancer care, including a new budgetary ask for funding of an Optimal Care Pathway to reduce the burden of cancer for people living with mental illness; and to
- Reduce the financial burden of cancer.

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Deliver A Future Free From Skin Cancer

Australia has the highest rates of skin cancer in the world,[4] accounting for around 80% of cancer diagnoses in Australia each year.[5] Annually, skin cancer costs the Australian Government more than $1.82 billion in direct health system costs, the second-highest expenditure of all cancers – more than breast, bowel, or prostate cancer.[3, 6]

Invest in an ongoing national skin cancer prevention awareness and behaviour change strategy to save lives

Continue to fund Cancer Council Australia's National Skin Cancer Awareness and Behaviour Change Strategy (delivered in partnership with the Australian Government) for at least $25 million annually for a minimum of a further four years.

Public education and behaviour change campaigns need to be unrelenting to establish and reinforce effective sun protective behaviours, which are key to preventing skin cancer. An analysis of skin cancer prevention campaigns in NSW found that for every $1 invested, a return of $3.85 was achieved.[7]

A national investment of at least $25 million annually over four years would fund a sun protection awareness and behaviour change strategy, delivered through an integrated mix of national television, radio, outdoor and digital platforms (including social media) advertising, and partnership activity. This level of continued investment would provide the scale and reach needed to drive measurable change in attitudes and behaviours, delivering significant returns in reduced social and economic costs associated with skin cancer. This investment would fulfil the commitment within the National Preventive Health Strategy 2021–2030 and aid in significantly reducing the incidence of Australia's "national cancer".

Invest in population health research for $450,000 over 3 financial years, into sun protection behaviours to inform evidence-based policy and programs.

Representative population-level data on sun exposure and protection behaviours is vital to help monitor trends and inform national and state-based prevention initiatives. Without ongoing population monitoring of sun protection behaviours, Australia will not be able to track the nation's progress in reducing sun exposure and improving protection.

In 2023-24, Cancer Council Australia funded an initial Australian Sun Protection Behaviours Survey undertaken by the Australian Bureau of Statistics (ABS) to demonstrate the feasibility and utility of this type of monitoring. Cancer Council Australia strongly recommends that the ABS embeds these eight items permanently in one of its standard surveys, ideally the Multipurpose Household Survey. As the costliest cancer to Australia's health system, there is much to gain from continued monitoring of sun exposure and protection behaviours.

Eliminate Nicotine Addiction

Tobacco use is the leading preventable cause of cancer in Australia, responsible for 22% of all cancers and an estimated 20,500 deaths in 2018.[8] Around two in three deaths among individuals who continue to smoke can be attributed to smoking.[9] In the 2023-24 financial year, $4.6 billion of Australia's health system expenditure was due to the impact of tobacco use.[10] Cancer Council Australia welcomes the commitment in the National Tobacco Strategy (NTS) and National Preventive Health Strategy (NPHS) to reducing smoking and vaping rates below 5% by 2035. However, according to current trends, this target will likely not be achieved unless the strongest evidence-based measures are implemented.[11] To accelerate the decline in smoking, the Australian Government must urgently secure funding to implement the robust measures outlined in these strategies to encourage people who smoke to quit and remain non-smokers and prevent non-smokers from starting.

Implement the National Tobacco Strategy to bring about real change

Sustained investment in evidence-led campaigns to discourage tobacco and vaping uptake, and support quitting, $14 million per quarter, for at least four years (National Tobacco Strategy Priority Area 2)

The last major national tobacco use campaign in Australia prevented approximately 55,000 premature deaths and saved over 400,000 quality-adjusted life years (QALYs).[12] In the past decade, investment in campaigns to discourage smoking has declined substantially,[13] paralleling a slow decline in smoking prevalence.[14]

Recent evidence reaffirms the importance of campaigns to prevent uptake[15] and encourage people who smoke to access government-funded and evidence-backed cessation support programs, such as quit lines.[16] There is evidence that these campaigns directly influence individual smokers, also prompting interpersonal discussions, changing social norms, and promoting the implementation of tobacco control policies that impact the environment.[17] In addition, campaigns can help educate young people about the extraordinary harms of tobacco, including those addicted to nicotine through vaping, and help arrest the gateway effect from vaping to smoking.[18] This also helps boost anti-tobacco sentiment[19] at a time when the increasing illicit tobacco trade in Australia is undermining existing and new policies by making tobacco more affordable and accessible.

The rise of digital and social media channels means campaigns must now deliver messages in more targeted ways across different platforms, as evidence suggests they directly influence quitting-related outcomes.[20] However, achieving population-level reach through this fragmented media market is now substantially more expensive than it was a decade ago.

Cancer Council Australia modelling indicates that an investment of $14 million per quarter for at least four years is required to generate and sustain population-level smoking reductions. Additional funding would be required to prevent vaping uptake and encourage vaping cessation, with a new generation addicted to these products.[21]

Continue to fund critical projects which address tobacco and e-cigarette use in Aboriginal and Torres Strait Islander communities (National Tobacco Strategy priority area 5)

Tobacco products are responsible for 20% of the health gap that exists between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians.[22] Substantial long-term investment in culturally appropriate activities, including the Tackling Indigenous Smoking program, is vital to accelerating declines in nicotine addiction among Aboriginal and Torres Strait Islander communities.

Strengthened regulation to reduce the affordability, supply, availability and accessibility of tobacco products (National Tobacco Strategy Priority Areas 3 and 8)

Increasing tobacco taxes is the most cost-effective way governments can discourage smoking; illicit tobacco can mitigate the effects of price increases. Cancer Council Australia welcomes efforts by Australian agencies, including the Office of the E-cigarette and Illicit Tobacco Commissioner, to increase efforts to prevent illegal sales of tobacco products. In addition, the Commonwealth Government must continue to invest in vigorous enforcement.

The pervasive availability of tobacco is a glaring anomaly considering the devastating health and social burdens it inflicts. Profiting from a product that kills two in three of its long-term users is ethically problematic and probably unlawful. We are at a point in Australia's tobacco control history where these anomalies need to be confronted.

Implement Economic Interventions For Preventive Health

For Australia to build a sustainable prevention system for the future – building on previous success and momentum – the Australian Government needs to fund evidence-based activities that address the increasing burden of disease and reduce health inequity.

Between 2023–24, 21% of health spending was attributable to risk factors associated with being overweight, including obesity, the leading cause of attributable spending.[10] In that period, the top 5 risk factors contributing to health spending were: overweight (including obesity) ($7.0 billion); tobacco use ($4.6 billion); and alcohol use ($3.1 billion).[10] The Australian Government needs to use the fiscal levers, including taxation incentives, grants, pricing and subsidies, to create an environment which prioritises healthy eating and physical activity for all Australians.

Halt the rise in the prevalence of obesity

High body mass increases the risk of 13 types of cancer.[23] Healthy eating and physical activity protect against certain cancers both directly and indirectly, through their impact on body weight and promoting positive health and wellbeing.

Two in three Australians aged 18 years and one in four children are overweight or obese.[24] Unlike tobacco use, which is declining, rates of overweight and obesity among Australian adults are increasing from 57.1% in 1995 to 66.5% in 2017/18, with obesity rates increasing significantly (18.9% to 30.8%), while rates of overweight (but not obesity) declined (38.2% to 35.6%).[25]

Introduce a 20% health tax on sugar-sweetened beverages

Price is a key lever to reduce the consumption of sugary drinks and encourage reformulation by manufacturers. Overseas, the introduction of a volumetric tax on sugar-sweetened beverages has resulted in decreased purchases, particularly in households of lower socioeconomic status, and the sugar consumed in soft drinks has decreased by 8g per household per week.[26]

To date, 115 countries have introduced a levy on sugar-sweetened beverages, including the UK, South Africa and Mexico.[27] Evaluations indicate that these levies have been successful in driving reductions in consumption and industry reformulation to reduce sugar content.[28]

Fund a national public health nutrition mass media campaign of $60 million over four years

Australia is due to release its revised Australian Dietary Guidelines before the end of 2026, and without the development of a nationally coordinated, evidence-based mass media campaign to support their rollout, the opportunity to shift population-level dietary behaviour, reduce preventable disease including cancer and curb escalating health costs will be lost.

The proposed campaign would be:

- Directly aligned with the evidence underpinning the revised Dietary Guidelines, as determined by the National Health and Medical Research Council's expert advisory process
- Delivered through the Department of Health, Disability and Aged Care, ensuring scientific oversight, credibility and consistency
- Subject to rigorous review, safeguarding public trust and protecting against misinformation or commercial influence.

This approach ensures the campaign reflects the best available science and reinforces confidence in government dietary advice.

We support Dietitions Australia submission to Treasury calling for funding for this ask.

Reform alcohol pricing to minimise harm

The International Agency for Cancer Research (IARC) classifies alcohol as a Group 1 carcinogen (a known cause of cancer in humans).[29] An estimated 3,496 cancers diagnosed in Australian adults in 2013 were attributed to alcohol use,[30, 31] with cancer being in the top five causes of alcohol-attributable deaths in 2015.[32]

Introduce a volumetric tax with incremental increases for products with higher alcohol content by volume.

The World Health Organization (WHO) identifies increasing alcohol taxation, restricting availability and implementing bans on advertising as evidence-based strategies to minimise the harms of alcohol at a population level.[33, 34] Taxation reforms and regulation were identified in the National Alcohol Strategy, and modelling supports the positive benefits of such reforms.[35, 36]

Increasing the price of alcohol through taxation is one of the most effective ways to reduce alcohol use and associated harms. Replacing existing tax structures for alcoholic products with volumetric taxation will reduce the harms.

Increase Participation in the National Bowel Cancer Screening Program

Bowel cancer is Australia's second biggest cancer killer, yet if detected early, over 90% of cases can be successfully treated.[37] In the 2023-24 financial year, health system expenditure on bowel cancer totalled $1.85 billion, which equates to an estimated $78,000 per person.[3] The National Bowel Cancer Screening Program (NBCSP) is designed to detect cancer early, before symptoms arise. However, currently, only four in ten eligible Australians complete the test kit sent to them in the mail. The NBCSP could prevent 84,000 deaths by 2040 if participation rates were increased and sustained at 60%.[38]

Invite all Australians aged 45 to 74 years to participate in the NBCSP

Extend invitations of the NBCSP to all Australians aged 45 to 74 years to receive a kit in the mail every two years.

In 2024, eligibility for the NBCSP was extended to people aged 45 years old; however, those aged 45 to 49 years need to request participation, rather than automatically receiving a kit. The inclusion of this younger age group in program invitations would support earlier access to screening and establish habits that enhance cancer screening engagement over time.

Improve The Provision of Optimal Cancer Care

Cancer outcomes in Australia are among the best in the world, but are not experienced equally by all Australians.[2, 41, 42] Many people affected by cancer encounter significant barriers, confusion and distress when moving through the health system to access treatment and support. There is a need for improved support to better equip people affected by cancer, their carers, and the healthcare team, to ensure optimal outcomes for all Australians.

Facilitate the development and implementation of Optimal Care Pathways

Fund Cancer Council Australia, at a cost of $700, 000, to develop an Optimal Care Pathway (OCP) to reduce the burden of cancer for people living with mental illness.

Due to their poorer cancer outcomes, people with mental illness are a priority population of the Australian Cancer Plan. People who have accessed mental health services have a higher mortality from cancer than the general population. A significant number, 24 per day, of these deaths are potentially preventable if people had equitable access to the same quality of healthcare as other Australians.[43] Addressing systemic barriers to cancer care, including participation in the National Screening Programs, communication and coordination of care between mental health and cancer care teams, and person-centred care for people with mental illness, will improve accessibility to high-quality cancer care. OCPs outline a model of cancer care that is person-centred and describes a national standard for high-quality care that all Australians should expect. They aim to reduce variations in care and ensure early detection and diagnosis, improved access to treatment and supportive care.

Aligned with the National Optimal Care Pathways Framework, Cancer Council Australia, with the mental health and cancer sectors, would develop an OCP for people living with mental illness to establish best cancer care, aiming to improve access to preventative health, early detection and screening programs, and to cancer treatment and survivorship care. This will directly deliver on the Australian Cancer Plan (3.2.1) and support the Equally Well Consensus Statement on *Improving the physical health and wellbeing of people living with mental illness in Australia.*[44]

To enable access to the best cancer care, support activities that embed OCPs into routine cancer care and evaluate impact.

Embedding OCPs into routine cancer care requires uptake and utilisation at all levels of the health system. This requires action by the Australian Government, with shared responsibility from state and territory governments, non-government organisations, health service providers, clinicians, Aboriginal and Torres Strait Islander Community Controlled Health services and organisations, and the education and training sector.

Investment in activities enabling health system-wide adoption and implementation of OCPs, including improvements in their digital accessibility, is needed to maximise their value and use. Strengthening OCPs to ensure the information is contemporary, reflects the real-world needs of people according to their cancer type and identities, is a priority. To ensure OCPs remain relevant and reflective of the needs of the population, there is a need for community engagement in their development, and regular review and update.

Support the implementation of the National Cancer Data Framework

The National Cancer Data Framework coordinates the sector and aligns actions to improve quality data collection and reporting. By ensuring cancer data is collected and reported in a nationally consistent manner, key questions about cancer control, including prevention strategies, screening impacts, adherence to optimal care and outcomes for priority populations, can be answered in a timely manner. A

robust cancer data system will enable disparities to be identified, inform targeted interventions to address these, and monitor progress towards improving outcomes.

To achieve the goals of the National Cancer Data Framework, invest in actions to build a comprehensive and integrated cancer data system that aligns with the OCPs.

The Australian Cancer Plan emphasises the importance of access to, use of, and sharing of reliable and comprehensive health and cancer data across all cancer care settings. The current challenge is the availability and accessibility of cancer data that impedes timely and data-informed recommendations for policy reform to improve cancer outcomes, especially for people with poorer cancer outcomes. Collaborative funding opportunities are needed to address implementation priorities and actions within the National Cancer Data Framework, to address data gaps in the system.

Establishing core indicators for assessing adherence to optimal care will enable measurement of adherence to OCPs, enable benchmarking, inform quality improvement and the allocation of resources to health-system actions to achieve equitable cancer care outcomes across Australia. This requires whole-of-sector engagement. Funding to enable these activities would directly deliver on the strategic objectives and implementation priorities 2.5 and 2.6 of the National Cancer Data Framework. Building public trust, investing in Australians data literacy and a commitment to Indigenous Data Sovereignty (Priorities 1.1 and 1.2) will support community determination of what reporting is important to them.

Reduce The Financial Burden of Cancer

In Australia, out-of-pocket healthcare costs are growing at an estimated 6.8% per year.[45] Individuals spent an estimated $44.0 billion out-of-pocket on health goods and services in 2023–24.[46] People recently diagnosed with cancer, or with private health insurance, report higher out-of-pocket costs.[47, 48] Even with universal health coverage and government-funded social welfare programs, Australians affected by cancer frequently experience financial toxicity.[49] The financial impact of direct and indirect healthcare costs and changes in financial circumstances can have an adverse effect on people affected by cancer and lead to sub-optimal outcomes.[49]

Increase access to financial counsellors for people affected by cancer

Increase financial counselling services for Australians affected by cancer by mandating the Financial Counselling Industry Fund, with expansion to of financial counselling services prior to a financial crisis.

By advocating directly with creditors and service providers, financial counsellors help relieve the stress, burden and cognitive overload experienced by people affected by cancer. There is a significant unmet demand for financial counselling services, with two out of every five people who seek financial counselling being turned away[53]. Further investment, both from industry and Federal and state and territory governments, is required to ensure access for people affected by cancer when needed.[50]

Industry contributions, as per the recommendations of the Countervailing Power Report[51] should be legislated and supplemented by government contributions to the National Debt Hotline and financial counselling grant programs, to ensure investment reaches the required level to meet demand and long-term sustainability. The current voluntary Financial Counselling Industry Fund is an important step towards meeting unmet demand, however, moving to a mandatory industry model could sustain industry funding commitment beyond the current three-year cycle. Current financial counselling programs are primarily accessed by people already in financial crisis. To reduce the financial burden experienced by people affected by cancer, and prevent this burden where possible, eligibility for free financial

counselling should be expanded beyond existing eligibility for those in crisis, to enabling people at risk of financial crisis to benefit.

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