



Pre-Budget Submission 2025-26

Cancer Council Australia

January 2025



Cancer Council Australia

Cancer Council 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 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 is proud to be a member of the Australian Chronic Disease Prevention Alliance.

2025–26 Pre-Budget Submission in Summary

Cancer is a major cause of illness and death in Australia. In 2024 it is estimated that 169,500 Australians will be diagnosed with cancer and approximately 52,700 people will tragically die from cancer.¹ Almost every Australian is affected by cancer in some way, either directly or indirectly.

Cancer Council identifies six leading investment priorities for the upcoming 2025–26 federal budget, with measures recommended to:

- Deliver a future free from skin cancer
- Eliminate nicotine addiction for the good of all Australians
- Implement economic interventions for preventive health
- Increase participation in the National Bowel Cancer Screening Program
- Improve the provision of optimal cancer care
- 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,² with skin cancers accounting for around 80% of cancers diagnosed in Australia each year.³ Annually, skin cancer costs the Australian government more than \$1.7 billion in direct health system costs alone, the highest expenditure of all cancers – more than breast, bowel, or prostate cancer.^{4,5}

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

Invest at least \$25 million annually for a minimum of four years to deliver a national skin cancer awareness and behaviour change strategy to encourage sun protection behaviours.

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 for every \$1 invested a return of \$3.85 is achieved.⁶

A national investment of at least \$25 million annually over four years would fund a sun protection awareness and behaviour change strategy across national TV, radio and digital platforms (including social media), with sufficient impact to change behaviour to deliver significant returns in reduced social and economic costs related to skin cancer. This investment would fulfil the commitment within the National Preventive Health Strategy 2021 – 2030 and significantly aid in reducing the incidence of Australia's national cancer.

Invest in population health research into sun protection behaviours to inform evidence-based policy and programs

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

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

Optimise the early detection of skin cancer

Continue to support the development of a roadmap toward optimising early detection of skin cancer

While overall 5-year relative survival for melanoma is high in Australia, approximately 1,700 people die of melanoma each year, with a high proportion of deaths among people diagnosed with late-stage disease.⁷ As earlier detection is associated with reduced mortality and treatment costs, a targeted, systematic approach to early detection of melanoma would likely be of benefit and would ensure more equitable access to quality skin checks.

The Melanoma Institute of Australia has been funded to support the establishment of a national targeted skin cancer screening roadmap. Ongoing support for this work is critical as it will outline opportunities for applying new technologies to support self-examination and triage to improve the accuracy of diagnosis, explore more effective approaches to identifying high-risk populations, and detail appropriate models of care to better support people at high-risk of a first or subsequent melanoma.

Eliminate nicotine addiction for the good of all Australians

Tobacco use is the leading preventable cause of cancer burden in Australia, attributable for an estimated 20,500 deaths and 22% of cancers in Australia in 2018.⁸ Up to two out of every three deaths in individuals who continue to smoke can be attributed to smoking.⁹ Cancer Council welcomes the commitment in the National Tobacco Strategy (NTS) and National Preventive Health Strategy (NPHS) to reducing smoking and vaping rates to below 5% by 2025. However, on current trends this target will not be achieved unless the strongest evidence-based measures are implemented.¹⁰ To accelerate the decline in smoking prevalence the Australian Government must urgently secure funding for the robust measures set out in the Strategy to both encourage people who smoke to quit and stay quit 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 (National Tobacco Strategy priority area 2)

The last major national campaign in Australia prevented approximately 55,000 premature deaths and saved over 400,000 quality adjusted life years.¹¹ Over the past decade, investment in campaigns to discourage smoking has declined substantially,¹² paralleling a slowing of the decline in smoking prevalence.¹³

To be effective, investment in integrated multi-channel campaigns including the use of free-to-air television, needs to be targeted and tailored for priority populations; and must be sustained over an extended period, with the reduction in smoking prevalence closely tied to the number of quarters of campaign activity each year. Adequate investment would enhance the policy effectiveness of new health warnings on tobacco products to be introduced from April 2025.^{14,15}

Cancer Council modelling indicates investment of \$14 million per quarter for at least four years is recommended.

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)

Sales of tobacco products is responsible for 20% of the health gap that currently exists between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians.¹⁶ Substantial long-term investment in activities that are culturally appropriate 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 that governments can discourage smoking, however illicit tobacco can mitigate the effects of price increases. Cancer Council welcomes efforts by Australian agencies including the Office of the E-cigarette and Illicit Tobacco Commissioner to step up Australia's efforts to prevent illegal sales of tobacco products. 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 troublesome and probably unlawful. We are at a point in Australia's tobacco control history where these anomalies need to be confronted.

Invest in monitoring the effectiveness of the recent e-cigarette and tobacco reforms and related measures aiming to drive down nicotine addiction (National Tobacco Strategy part 5)

In an evolving market with significant commercial actors at play, keeping a close eye on smoking and vaping prevalence is essential to enable Australia to stay ahead of a devious and deceptive industry. The Australian Secondary Students' Alcohol and Drug (ASSAD) is the primary Australian source of in-depth population trend data on secondary school students' smoking, vaping, drinking and drug use behaviours. It is the only survey that can examine the population impact of the recent e-cigarette and tobacco reforms on young Australians, including smoking and vaping susceptibility, and can provide intelligence on illicit access by capturing data on the place of purchase and the source of accessing products. ASSAD is next scheduled to be conducted in the second half of 2025 and Cancer Council recommends an investment of \$600,000 by the Commonwealth Government to support this vital survey.

Implement economic interventions for preventive health

Price and affordability are key factors in influencing lifestyle choices. To encourage physical activity and healthy diets, the Australian Government needs to use the fiscal levers at its disposal including taxation incentives, grants, pricing and subsidies.

Halt the rise in the prevalence of obesity

High body mass increases the risk of 13 types of cancer.¹⁷ Healthy eating and physical activity protect against certain cancers both directly, and indirectly, through their impact on maintaining a healthy body weight and promoting positive health and wellbeing.

Two in three (67%) Australians aged 18 years and over are overweight or obese, and one in four (25%) Australian children are overweight or obese.¹⁸ Unlike tobacco use which is declining, rates of overweight and obesity among Australian adults increase from 57.1% in 1995 to 66.5% in 2017/18, with obesity rates increasing significantly from (18.9% to 30.8%) in this period while rates of overweight (but not obesity) declined from 38.2% to 35.6%.¹⁹

Introduce a 20% health levy on sugar-sweetened beverages

Price is a key lever to reduce consumption of sugary drinks and can also act to 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,^{20,21} and the sugar consumed in soft drinks that were taken home decreased by 30g per household per week.²²

To date, 115 countries have introduced some form of levy on sugar-sweetened beverages including the UK, South Africa and Mexico.²³ Evaluations from these countries indicate that levies have demonstrated success in driving reductions in consumption as well as industry reformulation to reduce sugar content.²⁴

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).²⁵ An estimated 3,496 cancers diagnosed in Australian adults in 2013 were attributed to alcohol use,^{26,27} and cancer was one of the top five causes of alcohol-attributable deaths in Australia in 2015.²⁸

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 alcohol advertising as evidence-based best buys to minimise harm from alcohol use at a population level.^{29,30} Taxation reforms and regulation have been identified in the National Alcohol Strategy, and modelling supports the positive benefits likely delivered by such reforms.^{31,32}

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 harms from alcohol.

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.³³ The National Bowel Cancer Screening Program is designed to detect cancer early, often before symptoms arise, yet currently only 4 in 10 eligible Australians complete their testing kit when it is sent to them in the mail. The National Bowel Cancer Screening Program could prevent 84,000 bowel cancer deaths by 2040 if participation rates were increased to and sustained at 60%.³⁴

Fund a sustainable national bowel cancer screening communications campaign

Continue Cancer Council's national bowel cancer screening behaviour change strategy in partnership with the Australian Government for at least three years at \$15 million per year to ensure cancer screening participation targets are met and sustained.

Cancer Council's 2023 National Bowel Screening Communications Strategy (delivered in partnership with the Australian Government) saw an estimated 151,683 additional bowel cancer screening kits returned during the campaign period.³⁵ The campaign achieved high awareness levels among the target audience, with highest awareness among more disadvantaged communities. This builds on previous behaviour change strategies, where the 2022 campaign was estimated to be cost-effective, with a cost-effectiveness ratio of \$11,000 per quality-adjusted life-year (QALY) saved. The return on investment for every dollar invested in the 2022 campaign would be approximately \$3.45 (using a value of \$30,000 per discounted quality-adjusted life year saved).³⁶

Continuation of Cancer Council's bowel cancer screening behaviour change strategy would support an increase in overall participation in the program and support increased participation among subgroups with lower participation rates such as first-time screeners, men participating in the Program for the first time, targeted geographical regions, Aboriginal and Torres Strait Islander peoples, culturally diverse populations, and other groups where participation is low.

Invite all Australians aged 45 to 74 to participate in the National Bowel Cancer Screening Program

Extend the invitation aspect of the National Bowel Cancer Screening Program so that all Australians aged 45 to 74 receive a kit in the mail every two years.

In 2024, eligibility for the National Bowel Cancer Screening Program was extended for Australians from 45 years old; however those between 45 and 49 years of age need to request to participate rather than automatically receiving a kit in the mail. Including this younger age group in the invitation aspect of the Program would support more people to screen earlier and likely establish screening habits that enhance engagement in the Program over time.

Improve the provision of optimal cancer care

Cancer outcomes in Australia are among the best in the world, but they are not experienced equally by all Australians.^{37,38,39} Many people with cancer in Australia encounter significant barriers, confusion and distress when moving through the health system to receive cancer treatment and support. Improved supports are required to better equip people affected by cancer and their healthcare professionals to ensure we can achieve optimal outcomes for all Australians.

Facilitate the development and implementation of Optimal Care Pathways

In line with the Framework for Optimal Care Pathways, support the development, revision, implementation, and evaluation of the Optimal Care Pathways across Australia, with a focus on communities and cancers with poorer outcomes.

The Optimal Care Pathways provide evidence-based recommendations for best practice cancer care and can be applied at the level of the health system and by health services to identify improvement opportunities, address unwarranted clinical variation and ensure all people have the opportunity to achieve world leading cancer outcomes. The Optimal Care Pathways outline a model of cancer care that puts the person with cancer at the centre of care decisions and describe a national standard of high-quality cancer care that all Australians should expect. They aim to reduce variation in the care received and address early detection and diagnosis to treatment, and beyond, including supportive care.

The Australian Cancer Plan identifies ten populations whose needs must be prioritised; however not all these populations have an Optimal Care Pathway in place. Investment is required to ensure all priority populations of the Australian Cancer Plan are served by an Optimal Care Pathway, and that the Pathways are digitised to support use, and their impact evaluated.

Support the development, update and dissemination of clinical practice guidelines

Allocate at least \$9.2 million over five years to support the development, update and dissemination of cancer clinical practice guidelines that comply with NHMRC guidelines.

Supported by the Australian Department of Health and Aged Care, Cancer Australia and various other cancer organisations, Cancer Council Australia's Clinical Practice Guidelines are high quality, evidence-based cancer clinical practice guidelines. Developed with the Clinical Oncology Society of Australia and cancer clinicians from across the country, clinical practice guidelines bring together the best available evidence to underpin scientifically-valid recommendations for the prevention and diagnosis of cancer and treatment of care of patients and aid clinician and patient decisions regarding appropriate health care for specific clinical circumstances. Of Cancer Council Australia's suite of guidelines, there are currently eight appropriate for inclusion in this proposed staged revision process over a five-year period.

Reduce the financial burden of cancer

In Australia, out-of-pocket costs for healthcare are growing an estimated 6.8% per year.⁴⁰ In 2018-19, individuals undergoing cancer treatment collectively paid \$31.8 billion in out-of-pocket costs.⁴¹ People who are recently diagnosed with cancer or have private health insurance report higher out-of-pocket costs.^{42,43} Even with universal health coverage and government-funded social welfare programs, Australians diagnosed with cancer frequently experience financial burdens.⁴⁴ The financial impact of a cancer diagnosis, including direct costs, indirect costs, and changes to financial circumstances, are felt by people with cancer and their family prior to and at diagnosis, through treatment and beyond, and can adversely impact cancer treatment and lead to sub-optimal cancer outcomes.⁴⁵

Following a cancer diagnosis, an individual's capacity to work often changes with an immediate impact to their household income. Without appropriate financial support, people with cancer can have difficulty in accessing and adhering to cancer treatment and are at risk of financial hardship. All Australians should be afforded appropriate income support, so they do not fall below the poverty line if they are unable to work or to find work.

Improve the experience of people affected by cancer who require income support payments

Ensure people affected by cancer who require income support payments can access the most appropriate program, without onerous reporting or exemption processes.

Following a cancer diagnosis, an individual's capacity to work is often reduced, adversely impacting their household income. This is compounded when other family members have reduced capacity to work while caring for the person with cancer, especially if it is a child. Without appropriate financial support, people with cancer have difficulty accessing and continuing the optimal cancer treatment and may risk financial hardship.

Income support is available for people affected by cancer; however, their awareness and the rates of financial support are limited. All Australians should receive adequate income support to meet their basic needs and avoid falling below the poverty line, particularly while undergoing cancer treatment. Providing appropriate income support assistance to people living with cancer would help reduce their financial and emotional stress and allow them to focus on treatment and recovery.

Increase access to financial counsellors for people affected by cancer

Increase financial counselling services for Australians affected by cancer through an industry-funded model and increased investment from the Federal government.

Supporting Australians affected by cancer with early access to financial information and services will reduce the risk of financial toxicity and making treatment decisions based solely on cost. By advocating directly with creditors and service providers, financial counsellors help relieve the stress, burden and cognitive overload experienced by people with cancer. There is currently a significant unmet demand for financial counselling services and a need for investment to ensure people can access these services when needed.

Mandatory industry contributions, based on the recommendations of the Countervailing Power Report⁴⁶ should be legislated and supplemented by additional government contributions to the National Debt Hotline and financial counselling grant programs to ensure investment reaches the required level to meet demand and is sustainable in the long term.

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