# **Senate Community Affairs Committee**

## ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

#### **HEALTH PORTFOLIO**

# Budget Estimates 2014 - 2015, 2/3 June 2014

**Ref No:** SQ14-000503

**OUTCOME:** 1 - Population Health

**Topic:** Australian National Preventative Health Agency

**Type of Question:** Written Question on Notice

Senator: Xenophon, Nick

### **Question:**

- a)Can the agency provide a brief run-down of projects it is currently involved in?
- i)What will happen to these projects when the agency is abolished?
- b)How much has the agency provided in grants to projects in the last financial year?
- i)What is the expected return on investment for these projects?
- c)When the agency's functions are rolled into the department, will they be dealt with by officers with particular knowledge and experience in preventive health?
- d)How do Australia's actions in the preventive health field compare to those occurring overseas?
- i)How much could we gain over the long term if we followed examples from other jurisdictions?
- e)What is likely to be the overall impact of the abolition of the agency and the cessation of the National Partnership Agreement on Preventive Health?
- i)How many programs will be affected?
- ii) What health impacts are these likely to have in the long term?.

### Answer:

- a) For a list of programmes including description and funding please see the Attachment. It is not possible to allocate departmental funding to these on a unit level.
  - i. All grants that were still current on 1 July 2014 have been transferred to the Department of Health.
- b) In 2013-14, the Australian National Preventive Health Agency (ANPHA) provided \$19.762 million in all forms of grants.

- i. It is not possible to calculate a quantitative return on investment for these projects.
- c) Yes. Population Health Division (PHD) will have policy responsibility for the relevant former ANPHA projects. PHD includes many staff with significant experience and qualifications in preventive health.
- d) Australia has a very strong record in preventive health compared to other developed nations. It has among the lowest rates of tobacco use in the developed world and very high rates of childhood immunisation.

Not all of Australia's preventive health initiatives can be meaningfully compared with those of other nations. For example, Australia has invested significant funding in promoting sun safety and water safety messages that are targeted at promoting a healthy approach to outdoor activities.

- i. It is not possible to quantify expected gains from adopting preventive health initiatives developed in other nations, as cultural and other differences may confound the results.
- e) The impact of abolishing ANPHA is expected to be a \$6.4 million saving over five years from 2013-14, by transferring ANPHA's ongoing activities into the Department.

The cessation of the National Partnership Agreement on Preventive Health (NPAPH) will provide \$367.9 million in efficiencies over four years.

- i. The cessation of the NPAPH will impact on two initiatives being implemented by states and territories.
- ii. States and territories were expected to maintain their investment and to build sustainability into programmes delivered under the NPAPH. They are responsible for determining which programmes under these initiatives are the most effective and should continue.