

National Eating Disorders Collaboration: Submission to the Productivity Commission's 'Delivering quality care more efficiently' inquiry

This submission has been prepared by the National Eating Disorders Collaboration (NEDC) in response to the Productivity Commission's interim report for the 'Delivering quality care more efficiently' inquiry. NEDC provided a [submission](#) to the initial consultation round. NEDC thanks the Productivity Commission for the opportunity to provide further comment following the release of the interim report. This submission focuses on the interim report's draft recommendation 3 ('A national framework to support government investment in prevention').

NEDC supports the emphasis within the interim report on the importance of investing in prevention. The establishment of a National Prevention Investment Framework is a welcome and overdue step. However, the Framework will only achieve its aims if it explicitly addresses and works to avoid three critical risks:

1. Focusing on prevention programs to the exclusion of acting to address social, commercial and environmental determinants of health.
2. Investing in prevention efforts that cause unintended harm.
3. Ignoring existing national prevention priorities and commitments.

Without mitigating these risks, the Framework is likely to replicate many of the existing problems within the Australian preventive health landscape.

Key considerations

Ensuring that the wider social, commercial and environmental factors which impact on health and wellbeing are not left out.

While programmatic approaches to prevention are an important mechanism to reduce some modifiable risk factors and/or bolster protective factors, prevention actions and initiatives which address the wider determinants of health should also be factored into the government's investment in prevention. Failure to do so will limit the overall impact of the Framework, while also placing disproportionate burden on individuals to manage the effects of systemic, commercial and environmental challenges (Austin, 2015).

NEDC agrees with the Productivity Commission's recommendation for a broad Prevention Framework Advisory Board, rather than this role being linked to the Australian Centre for Disease Control, given that effective prevention initiatives span many sectors beyond health. The Prevention Investment Advisory Board should comprise people with diverse lived experience expertise and professional skills across a broad range of sectors and backgrounds, including but not limited to physical health, mental health, education, sport, and community services.

In relation to eating disorders, disordered eating and body image distress, prevention actions and initiatives to address the wider determinates of health include actions to regulate the media and social media landscape, restricting youth access to diet products and supplements (Long et al., 2022), food policy that minimises eating disorder risk (Rodgers & Sonnevile, 2018) and alleviates food insecurity (Hazzard et al., 2020), and many other similar upstream actions.

Particular attention should also be paid to ensuring First Nations peoples' perspectives are centred. This has been largely absent from eating disorder research and policy until recently (Gall et al., 2025), despite numerous structural inequities that drive eating disorder risk within First Nations communities (Gall et al., 2024) and point prevalence of eating disorders estimated at 27-29% of the First Nations population (Burt et al., 2020a, 2020b).

Ensuring that prevention programs, actions and initiatives do not have unintended consequences or contribute to structural harm.

In relation to eating disorders, disordered eating and body image distress, it is well established that public health approaches that perpetuate and/or leverage weight stigma lead to harm and contribute to health burden, while also failing to deliver long-term population health benefits (Wu & Berry, 2018; Tomiyama et al., 2018; Bristow et al., 2021; Bristow et al., 2022). This is significant in the context of a proposed National Prevention Investment Framework when eating disorders are increasing in prevalence and costing the economy AUD\$66.9 billion per year, or \$60,654 per person with an eating disorder (Deloitte Access Economics, 2024).

Although a few dissenting voices remain, there is national and global expert consensus, including from the World Obesity Federation, that public health campaigns should take a weight neutral approach (Hart et al., 2020; Nutter et al., 2024). Evidence shows that such approaches can be effective (Hunger et al., 2020; Rathbone et al., 2022; Tylka et al., 2014; Dugmore et al., 2019). The [Eating Disorder Safe principles](#) are a key policy translation framework to support a 'do no harm' approach, and should be embedded across all aspects of the National Prevention Investment Framework and funded activities.

Ensuring that the National Prevention Investment Framework and its activities are aligned with existing prevention priorities and commitments.

Grounded in wide consultation and lived experience, the [National Eating Disorders Strategy 2023-2033](#) identifies clear focus areas for eating disorder prevention, such as action on wider determinants of health, the implementation of Eating Disorder Safe principles (described above), and investment in the development of eating disorder prevention programs for underserved and higher risk populations. The National Prevention Investment Framework's activities should align with the prevention standards and actions outlined within National Eating Disorders Strategy 2023-2033.

Recommendations

The establishment of a National Prevention Investment Framework represents a pivotal opportunity to reshape and strengthen the architecture of preventive health in Australia. To drive greater population health improvements and uphold health equity, NEDC recommends that draft recommendation 3 be strengthened by:

- Explicitly recognising the importance of wider determinants of health in shaping prevention.
- Embedding a "do no harm" safeguard within the National Prevention Investment Framework, with the Eating Disorder Safe principles as the guiding framework.

- Ensuring alignment between the National Prevention Investment Framework and the priority actions of the National Eating Disorders Strategy 2023–2033.

Further information

For further information, please contact Louise Dougherty, NEDC Strategy and Policy Lead, louise.dougherty@nedc.com.au.

About NEDC

NEDC is a national sector collaboration dedicated to developing and implementing a nationally consistent, evidence-based system of care for the prevention and treatment of eating disorders. NEDC is funded by the Australian Government Department of Health, Disability and Ageing. Over the past fifteen years NEDC has created a large body of comprehensive, evidence-based information and resources which establish standards for prevention and treatment of eating disorders. NEDC implements these standards in system-building projects, workforce development and consultation.

To inform its work, NEDC engages a broad range of stakeholders, including people with lived experience of eating disorders and their families and supports, clinicians, researchers, and other experts. NEDC has more than 14 000 members. NEDC also provides expert consultation and guidance on evidence-based provision of eating disorder services to policymakers and to national, state/territory and regional health, mental health and community organisations. NEDC's work is led by National Director Dr Sarah Trobe and Steering Committee Chair Professor Phillipa Hay with the NEDC team and a Steering Committee of experts in lived experience, clinical services, and research.

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