



Community conversation – draft national preventive health strategy

HOSTED BY HEALTH CONSUMERS'
COUNCIL WA

29/03/21





Acknowledgement of Country



Source: Snapshots by Narelle Henry

We acknowledge that we are meeting on the traditional country of the Whadjuk people of the Noongar Nation and pay respect to Elders past, present and into the future. We acknowledge that they have occupied and cared for this country over countless generations and we celebrate their continuing contribution to the life of this region.



What we'll discuss

- Introductions – making connections
- Overview of some of the key points in the draft National Preventive Health Strategy
- Discussion of the strategy – and what's important to you, your family, your community

Remember!

- Consultation is open until 19 April
- We encourage consumers and community members to submit their own response to the consultation
- You can read the strategy and make a submission at <https://consultations.health.gov.au/national-preventive-health-taskforce/draft-national-preventive-health-strategy/>
- Download the strategy so you can review it as we go
- https://consultations.health.gov.au/national-preventive-health-taskforce/draft-national-preventive-health-strategy/supporting_documents/Draft%20NPHS%20March%202021.pdf



HEALTH CONSUMERS'
COUNCIL

About Health Consumers' Council

Our Purpose

To increase the capacity of all people to influence the future direction of health care and to make informed choices

Our Vision

Equitable, person-centred healthcare for all West Australians



Individual Advocacy



Engagement



Systemic Advocacy





Introduction (p4)

- health is not just the presence or absence of disease or injury.
- “...health is a state of physical, mental and social wellbeing, and for Aboriginal and Torres Strait Islander peoples and other communities, this also includes cultural wellbeing”
- “majority of Australians have one of the longest life expectancies in the world”
- “More Australians are now living with and suffering from chronic illness than ever. On average, Australians live almost eleven years in poor health, or around thirteen percent of their life.”
- “estimated that 38% of this disease burden could be prevented through a reduction in modifiable risk factors”



Vision

To improve the health of all Australians at all stages of life, through early intervention, better information, targeting risk factors and addressing the broader causes of poor health and wellbeing.

Consultation question:

Do you agree with the vision of the Strategy? Please explain your selection.

The Strategy aims to ensure that <small>(p5)</small> :	Targets
children grow up in communities that nurture their healthy development - providing the best start to life	The proportion of the first 25 years lived in full health will increase by 2% by 2030
individuals are living well for longer, enjoying life as they age – adding health to life	Australians will have an additional two years of life lived in full health by 2030
groups that experience poorer health outcomes compared to the rest of the population have greater improvements in health – addressing inequity in health	<ul style="list-style-type: none"> • Australians in the two lowest SEIFA (socio-economic index for areas) quintiles will have an additional three years of life lived in full health by 2030 • Australians in regional and remote areas will have an additional three years of life lived in full health by 2030 • The rate of Indigenous-specific general practitioner health checks increases 10% year-on-year across each age group
prevention is valued and viewed as a worthwhile and important venture – funding is rebalanced towards prevention	Investment in preventive health will rise to be 5% of total health expenditure by 2030



Aims and targets

Consultation question:

Do you agree with the aims and their associated targets for the Strategy? Please explain your selection.

Principles

- **Multi-sector collaboration** - in recognition of the wider determinants of health, multi-sector collaboration must inform policy to improve health and wellbeing outcomes.
- **Enabling the workforce** - the health workforce is enabled to embed prevention across the health system.
- **Community engagement** - all communities are engaged to drive prevention across the life course. Place-based approaches are led by communities.
- **Empowering and supporting Australians** - all Australians, from all socioeconomic and cultural backgrounds are enabled and supported to make the best possible decisions about their health.
- **Adapting to emerging threats and evidence** - Emerging threats to health, as well as the development of new science, are reviewed continuously.
- **The equity lens** - Preventive health action considers the inequities that exist across Australia including the need for equitable access to healthcare.

Consultation question:

Do you agree with the principles? Please explain your selection.

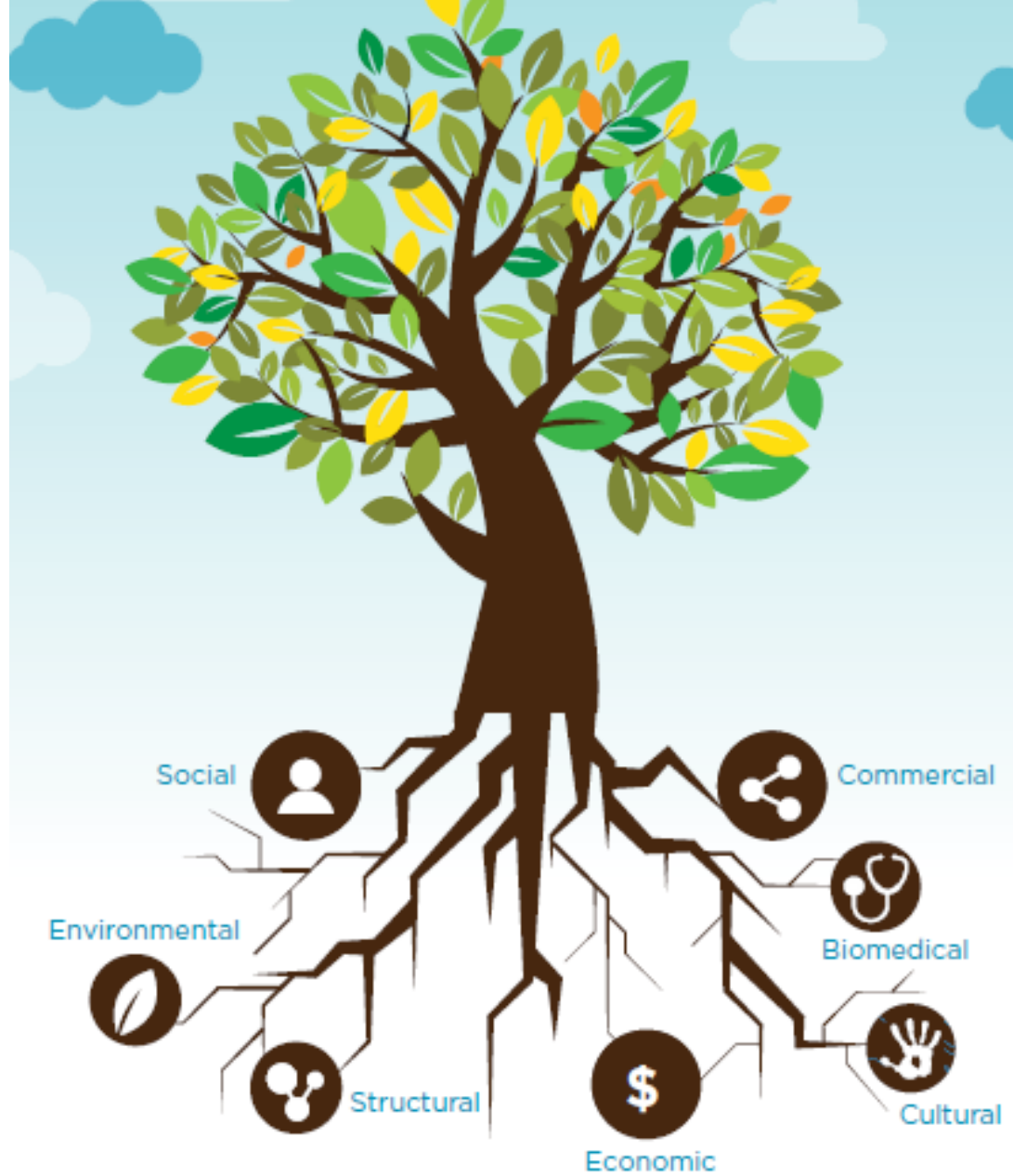
Australia's report card (p9)



No specific official
consultation
question

Are there other
indicators that you
believe are
important relating
to health?

Social determinants of health



**No specific official
consultation
question**

Any comments?



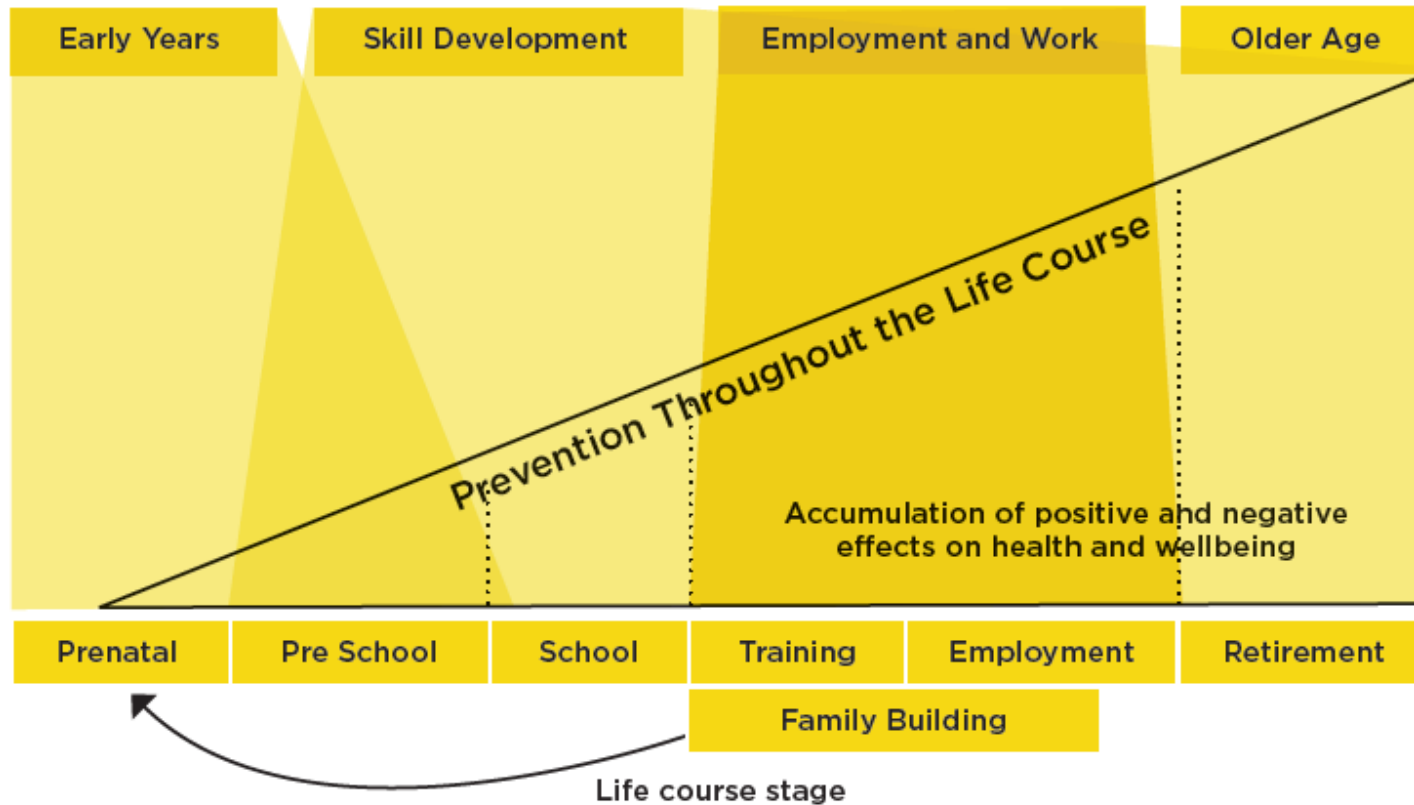
Target populations who may experience health inequity

- Aboriginal and Torres Strait Islander peoples
- Culturally and linguistically diverse
- Lesbian, gay, bisexual, trans/transgender, queer or questioning people and other sexuality gender diverse people and/or intersex people (LGBTQI)
- people with mental illness
- people of low socioeconomic status
- people with disability
- rural, regional and remote

**No specific official
consultation question**

Any comments?

What is prevention?



- **Primordial prevention:** addressing the wider determinants of health by reducing the environmental factors, hazards and social factors that negatively affect health.
- **Primary prevention:** reducing risk factors to prevent a disease
- **Secondary prevention:** early detection and management of a disease
- **Tertiary prevention:** reducing harm in people with a disease
- **Quaternary prevention:** reducing harm caused by medical interventions for a disease

Value of prevention

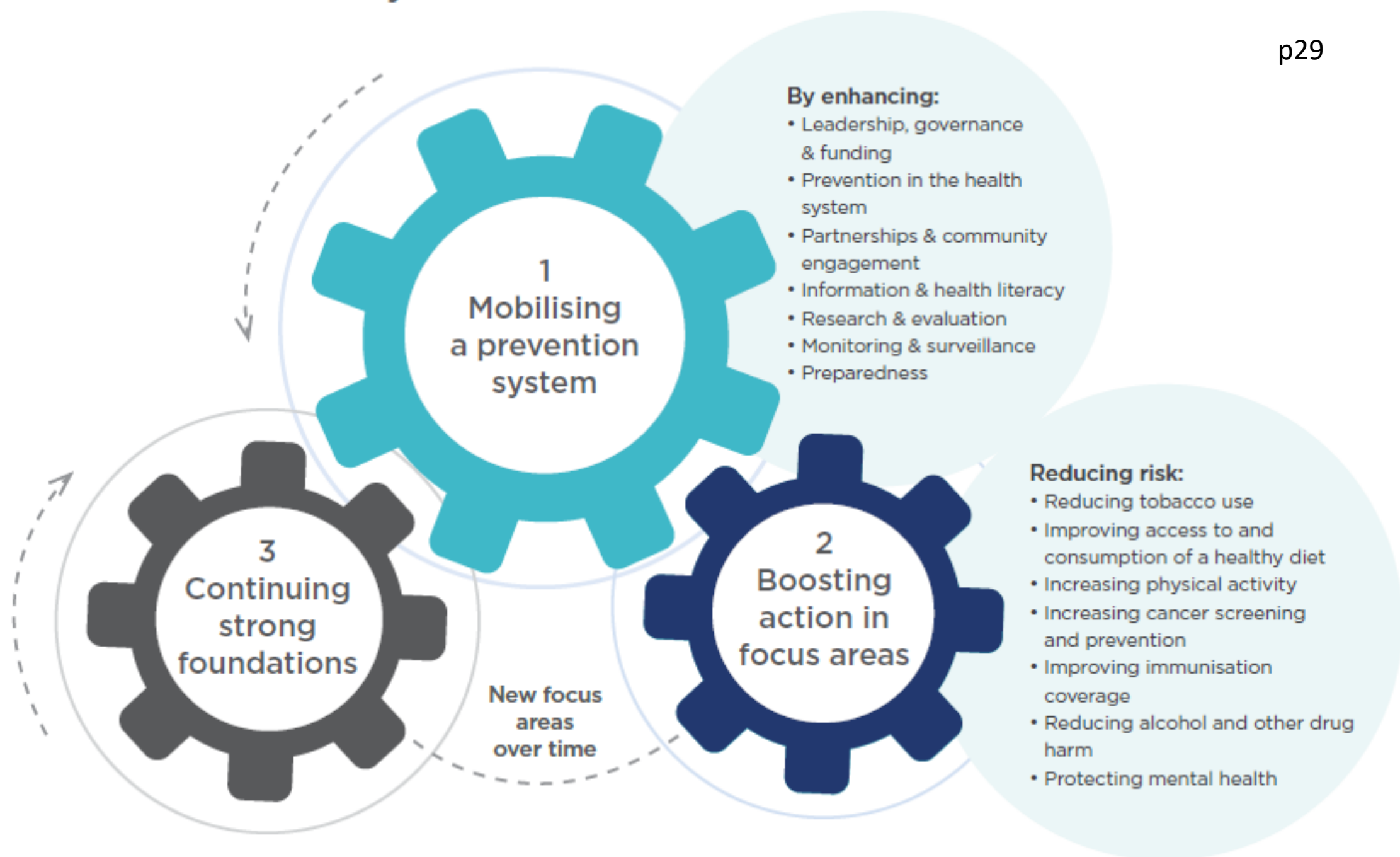
- Positive impact of prevention
 - Potentially lower healthcare costs
 - Potentially increased workforce participation and productivity
 - Potentially improving the health of future generations
- Examples include:
 - immunisation and cancer screening programs
 - tobacco and UV exposure reduction
 - gun laws
 - containing the spread of HIV
 - safe driving measures such as
 - compulsory seatbelt use in cars
 - random breath testing
 - speed monitoring interventions

**No specific official
consultation question**

Any comments?



Community feedback so far





Enablers (p31 – 42)

1. Leadership, governance and funding (policy achievements by 2030 on p33)
2. Prevention in the health system (policy achievements by 2030 on p35)
3. Partnerships and community engagement (policy achievements by 2030 on p36)
4. Information and health literacy (policy achievements by 2030 on p37)
5. Research and evaluation (policy achievements by 2030 on p38)
6. Monitoring and surveillance (policy achievements by 2030 on p39)
7. Preparedness (policy achievements by 2030 on p41)

Consultation question

“Seven system enablers are identified in the Strategy that are critical to creating a more effective and integrated prevention system for Australia over the next 10 years. Each enabler is accompanied by desired policy achievements by 2030.

Do you agree with the enablers?

Do you agree with the policy achievements for the enablers?

This appears to be a very important part of the document – recommend reading this in detail!

1. Leadership, governance and funding (policy achievements by 2030 on p33)



Policy achievements by 2030

- The priorities for preventive health action are informed by a national, independent governance mechanism that is based on effectiveness and relevance.
- Preventive health and health promotion activities in Australia are sustainably funded through an ongoing, long-term prevention fund – rebalancing health action.
- The governance mechanism will provide advice on the direction of the prevention fund.
- A health lens is applied to all policy through ongoing, cross-sectoral partnerships, led by the health sector, at all levels of governments, to address the determinants of health.

2. Prevention in the health system



Policy achievements by 2030

- Increased investment in resilient system infrastructure, particularly service models, workforce roles and capacities and funding levers, enables preventive health to be embedded across the health system.
- The inherent preventive health capabilities of primary health care professionals, including GPs, allied health, pharmacists and nurses, are better supported and integrated within health services.
- The public health workforce is 'future proofed' through the enhancement of availability, distribution and of the capacity and skills of the workforce.
- Improved cultural safety across the Australian health system to improve access to appropriate and responsive health care for Aboriginal and Torres Strait Islander peoples, and the prioritisation of care through ACCHSs.
- Enhanced continuity of care for patients, within the primary health care system, is supported through a voluntary enrolment mechanism – allowing practices to plan and monitor individual health risks.
- Social prescribing is embedded in the health system at a local level with a focus on self-care support.
- Regional prevention frameworks are established to achieve sustained collaborative referral and monitoring arrangements.

3. Partnerships and community engagement



Policy achievements by 2030

- Innovative partnerships are established between and within sectors that influence health, to ensure shared decision-making and to drive evidence-based change.
- Partnerships with the community are strengthened and informed by a national consumer engagement strategy that prioritises co-design approaches.
- Communities are supported to collaboratively deliver place-based, evidence-informed preventive health action that is response to local circumstances.
- Public health policies, strategies, and multi-sectoral action for prevention are **protected from real, perceived or potential conflicts of interest** through a national evidence-based approach and transparent stakeholder engagement processes.

4. Information and health literacy



Policy achievements by 2030

- Consumers are informed by a national platform that provides or identifies credible, evidence-based health information.
- A national health literacy strategy is developed and Implemented, and guides health service improvements.
- Health and health care information is tailored and translated for all Australians (including Aboriginal and

Torres Strait Islander communities, people with disability and CALD communities).

- The health workforce is supported in building the health literacy capacity of themselves, their communities, patients and clients.
- Concise, valid and reliable measures are used to improve and monitor national health literacy levels of Australians.

5. Research and evaluation



Policy achievements by 2030

- A systematic approach to the prioritisation of preventive health research is established.
- The development, testing and evaluation of preventive health interventions in Australia are enhanced.
- Partnerships with those that are affected, drive the development, implementation and evaluation of interventions.
- Partnership research and interventions in specific population groups, including Aboriginal and Torres Strait Islander people, rural and remote Australians, and other diverse groups, are prioritised.
- Bidirectional prevention partnerships are established between policy makers and researchers to enable the development of evidence-informed policy and to ensure research aligns with the strategic direction of governments.
- Collaborative partnership research models are well established between researchers, policy makers, health care professionals and consumers to ensure evidence translation and knowledge exchange.
- National guidelines are developed to ensure high-quality evaluation is a key part of preventive health policy and program development and implementation.
- Increased evaluation of local initiatives across different settings and communities to inform opportunities for scaling up at the national level.
- A widely accessible mechanism to enhance sharing of information on best practice interventions is established.

6. Monitoring and surveillance



Policy achievements by 2030

- A preventive health governance mechanism supports the monitoring and surveillance of this Strategy.
- National data sets, including the AIHW's Burden of Disease Study and the National Primary Health Data Asset, are compiled and **published regularly**, and include anthropometric (i.e. height, weight etc.), biomedical and environmental measures.
- A set of nationally agreed prevention monitoring indicators, including definitions and measures of the wider determinants of health, are established and monitored.
- A national prevention monitoring and reporting framework is utilised by all levels of government.

7. Preparedness



Policy achievements by 2030

- A national strategic plan addressing the impacts of environmental health, including horizon scanning to identify and understand future threats, is developed and implemented in alignment with this Strategy and the work of the Environmental Health Standing Committee (enHealth).
- Evidence-based approaches to identify and address current and emerging pressures on the most vulnerable parts of the health system caused by climate change, are developed and implemented.
- Stronger infrastructure to support the rapid drawing together of leaders from different fields and from different jurisdictions – to develop national and local responses.
- Public health workforce is ‘future proofed’ through the enhancement of availability, distribution and the capacity and skills of the workforce.
- The provision of tailored, culturally appropriate and accessible information for all Australians is prioritised during an emergency response to ensure effective messaging and distribution of public health advice.
- A national framework is implemented in all states and territories to distribute close to real-time, nationally consistent air quality information, including consistent categorisation and public health advice³²⁹. In addition, a 24-hr hour average nationally consistent framework is implemented to provide further public health advice for periods of prolonged air pollution.

“It’s time to be bold”

The immediate priorities (p42)

- 1. Governance mechanisms
- 2. Increased investment in prevention
- 3. A national platform providing credible and reliable health information
- 4. Embedding prevention in primary health care and aligning with the Primary Health Care 10 Year Plan
- 5. National consumer engagement strategy
- 6. National health literacy strategy
- 7. Enhanced public health workforce planning
- 8. Ongoing national data sets to support the monitoring and evaluation of this Strategy and a National Prevention Monitoring and Reporting Framework

Focus areas



1 Reducing tobacco use



2 Improving access to and the consumption of a healthy diet



3 Increasing physical activity



4 Increasing cancer screening and prevention



5 Improving immunisation coverage



6 Reducing alcohol and other drug harm



7 Protecting mental health



Targets

- Achieve a national daily smoking prevalence of less than 10% by 2025 and 5% or less for adults (≥18 years) by 2030
- Reduce the smoking rate among Aboriginal and Torres Strait Islander peoples (≥18 years) to 40% by 2023



Policy achievements by 2030

- Ongoing development, implementation and funding of mass media campaigns and other communication tools have been implemented to: motivate people who use tobacco to quit and recent quitters to continue smoking abstinence; discourage uptake of tobacco use; and reshape social norms about the tobacco industry and tobacco use
- Protection of public policy, including tobacco control policies, from tobacco industry interference
- Increased provision and access to evidence-based cessation services and support to help people who use tobacco to quit
- Ongoing reduction of affordability of tobacco products
- Elimination of exceptions to smoke-free workplaces, public places and other settings
- Reduced tobacco use among populations at a higher risk of harm from tobacco use, and populations with a high prevalence of tobacco use
- Elimination of remaining tobacco-related advertising, promotion and sponsorship
- Stronger regulation of the contents and product disclosures pertaining to tobacco products
- The supply, availability and accessibility of tobacco products is reduced through stronger regulation
- Reduced tobacco use among Aboriginal and Torres Strait Islander peoples, including during pregnancy, through expansion of efforts and community partnerships
- Stronger regulation, monitoring and enforcement for novel and emerging products including e-cigarettes is implemented
- Reduced tobacco use among disadvantaged communities and other vulnerable population groups through expansion of efforts and community partnerships
- Reduced tobacco use among regional and remote Australians through targeted support

Reducing tobacco use

(p44)



- Halt the rise and reverse the trend in the prevalence of obesity in adults by 2030
- Reduce overweight and obesity in children aged 5-17 years by 5% by 2030
- Adults and children (≥ 9 years) maintain or increase their fruit consumption to an average 2 serves per day by 2030
- Adults and children (≥ 9 years) increase their vegetable consumption to an average 5 serves per day by 2030
- Reduce the proportion of children and adults' total energy intake from discretionary foods from $>30\%$ to $<20\%$ by 2030
- Reduce the average population sodium intake by 30% by 2030
- Increase the proportion of adults and children who are not exceeding the recommended intake of free sugars by 2030
- 50% of babies are exclusively breastfed until around 4 months of age by 2030

Policy achievements by 2030

- Nutrition and food action in Australia is guided by a specific national policy document
- Nutrition information and guidance is translated and widely communicated for all health literacy levels
- Decreased structural and environmental barriers to breastfeeding through policy action
- Australian Dietary Guidelines are supported by a communication and social marketing strategy
- Healthy eating is promoted through widespread multi-media education campaigns
- Ongoing access to adequate and affordable healthy food options are available to all Australians, including older Australians
- Consumer choice is guided by the Health Star Rating system which is displayed on all multi-ingredient packaged food products
- Exposure to unhealthy food and drink marketing for children is restricted, including through digital media
- Reduced sugar, saturated fat and sodium content of relevant packaged and processed foods through reformulation & serving size reduction
- Relevant guidelines and policies are regularly updated using the latest scientific evidence
- Consumer choice is guided by energy and ingredient labelling on all packaged alcoholic products
- The nutritional & health needs of priority populations are met through co-designed, community-based programs that are culturally appropriate
- Restricted promotion of unhealthy food and drinks at point of sale and at the end-of-aisle in prominent food retail environments, and increased promotion of healthy food options

Healthy diet (p48)



• Reduce the prevalence of insufficient physical activity amongst children, adolescents and adults by 15% by 2030

- Physical activity action in Australia is guided by a specific national policy document
- Mass media campaigns that link to actionable behaviour change are used to create healthier social norms and influence physical activity behaviour
- Prioritise urban design, land use and infrastructure to support physical activity by providing Australians with access to natural environments, public open spaces and green areas, and active transport networks
- Physical activity measures are standardised and defined consistently across jurisdictions
- Pre-school, primary and secondary schools are supported to ensure that children and students are physically active
- Investment in preventive health action is prioritised for Australians who are currently least active
- Health care professionals are trained and supported to provide advice and support to patients to promote physical activity and to engage in social prescribing (connecting patients with community services to improve health and wellbeing)
- Increased physical activity and reduced sedentary behaviour is promoted and facilitated in Australian workplaces
- Communities are encouraged and supported to deliver locally designed programs that support physical activity, which are inclusive and promote social connection through physical activity
- More Australians are engaged in sport and active recreation throughout every stage of life
- Behavioural and social marketing approaches are used to modify the travel behaviours of Australians to be more active
- All national guidelines and policies are updated using the latest scientific evidence and incorporate sleep and screen time recommendations for all age groups where appropriate

← Policy achievements by 2030

Increasing physical activity

(p51)



Targets


- Increase participation rates for bowel screening to 53% by 2025
- Increase participation rates for breast screening to 65% by 2025
- Increase participation rates for cervical screening to 64% by 2025
- Eliminate cervical cancer as a public health issue in Australia by 2035

Policy achievements by 2030

- An increased focus on Aboriginal and Torres Strait Islander people, low socioeconomic, CALD, and rural and remote populations through targeted, localised and culturally appropriate engagement
- Interventions focussed on increasing participation in cancer screening are developed based on evidence built through research, data, and evaluation
- Health care providers are supported and engaged to further encourage and support people
- Engagement strategies are informed by existing and new data to drive behavioural change and increase participation in screening
- The quality and analysis of national cancer screening data has improved, leading to improved services and higher participation rates
- A coordinated national approach has been established that ensures investments in interventions at the national, state, and local level are achievable, efficient, effective, and more sustainable
- Mass media campaigns are used to influence sun protective behaviour
- The evidence base supporting new screening programs is developed further, enabling safe and cost effective approaches to be considered by the Government
- Education and health promotion initiatives are delivered to raise awareness of the modifiable risk factors that lead to preventable cancers

Increasing cancer screening and prevention (p54)

Improving immunisation coverage (p57)

**Targets**

- Increase immunisation coverage rates to 95% of children aged 1, 2 and 5 years by 2030
- Increase immunisation coverage rates to 96% of Aboriginal and Torres Strait Islander children aged 2 years by 2023, and maintain high rates of immunisation for children aged 1 and 5 years
- HPV immunisation rate increased to 85% for both boys and girls by 2025

Policy achievements by 2030

- | | |
|---|---|
| <ul style="list-style-type: none">• Individuals and communities' understanding of the value of vaccines is increased• Community confidence in the National Immunisation Program has been maintained and boosted through effective communication strategies• HPV immunisation coverage rates continue to increase through higher participation in the Gardasil vaccination program• Enhanced immunisation data are available through increased reporting of vaccinations to the Australian Immunisation Register for all Australians• Improved monitoring and uptake of influenza, pneumococcal and herpes zoster vaccination• Access to immunisation services is available for all Australians, regardless | <ul style="list-style-type: none">of financial or geographical barriers, including increasing/utilising eligible providers who can administer NIP vaccines, thereby increasing access and uptake.• Immunisation coverage of vulnerable populations and difficult to reach groups has improved through strategic targeting and engagement• Increased community and health professional awareness of vaccine safety systems, which has led to improved confidence in the program and reporting of adverse events• Immunisation continues to evolve from a focus on infants and children to vaccinating along the life course• A safe and effective vaccine for COVID-19 is available to and provided to all Australians |
|---|---|

Reducing alcohol and other drug harm (p60)



Targets

- 10% reduction in harmful alcohol consumption by Australians (≥ 14 years) by 2025
- 15% decrease in the prevalence of recent illicit drug use (≥ 14 years) by 2030

Policy achievements by 2030

- Health and wellbeing is at the forefront of Australia's approach to alcohol and other drug policy and prevention investment
- Leaders across Australia challenge the normalisation of hazardous and harmful alcohol and other drug use
- AOD prevention strategies avoid and combat stigma and discrimination
- Effective strategies include engagement with and involvement of the broader community
- The availability and promotion of alcohol is restricted to minimise alcohol-related harm, particularly young people, including promotion of the NHMRC alcohol guidelines
- Restrict exposure to alcohol marketing for children, including through digital media
- Evidence-based and credible mass

media campaigns are a part of broader strategies to prevent harm

- The age of onset of alcohol and other drug use is delayed to reduce harm among young people and across their later years
- The particular needs of vulnerable populations and rural and remote populations are prioritised in AOD prevention action
- Prevention is informed by strategies to reduce risk factors and enhance protective factors associated with hazardous and harmful alcohol and other drug use
- The health workforce is better educated on alcohol, tobacco and other drug issues and are confident in identifying, supporting and referring clients to evidence-based support pathways for those experiencing alcohol and drug related harms

Protecting mental health (p63)



Target

- Towards zero suicides for all Australians

- Australians are kept well through the management of their health and wellbeing in the community
- Community cohesion and social connectivity is boosted and promoted, particularly among those at risk of loneliness and isolation
- The use of mental health services is promoted and normalised to reduce stigma and encourage early intervention
- Investment in prevention and early intervention is prioritised, both early in life and early in the development of an illness, supporting Australians, especially rural and remote communities, to prioritise and manage their own mental health and that of their loved ones
- A national stigma reduction strategy is developed and implemented
- Programs are delivered within schools, workplaces and communities to improve mental health literacy and enhance resilience
- Targeted prevention and early intervention programs are implemented for children and their families through partnerships between mental health, maternal and child health services, schools and other related organisations
- Suicide prevention activities are co-ordinated through a nationally agreed suicide prevention implementation strategy to improve efforts to identify people at risk of suicide and improve the effectiveness of services and support available to them
- Aboriginal and Torres Strait Islander communities are empowered to develop their own solutions to prevent suicide

Continuing strong foundations (p66)

“It is important to continue and build on current prevention activity by incorporating the lessons learnt over time, to ensure sustained action across the prevention system.”

Prevention partners

Academia
ACCHSs
Across government
Built environment
Business sector
Childcare
Communities

Community and cultural
settings
Families
Healthcare systems
Individuals
Industry

Non-government
organisations
Private health insurers
Professional associations
Schools
Unions
Workplaces

Consultation question

Do you agree with this
section?



Monitoring success

- See p68 – 73 – for detail
- What do you think is important when measuring the success of this plan?
- HCC comment: it appears that many of the measures relate to individual behaviour change and not to the environment we live in.