


DRAFT NATIONAL PREVENTIVE HEALTH STRATEGY

An abstract graphic featuring a network of interconnected nodes and lines. The nodes are represented by spheres of varying sizes, some in shades of blue and others in shades of orange. They are connected by thin, curved lines that create a sense of movement and flow. The background consists of broad, sweeping bands of light orange and light grey, which intersect and overlap, adding to the dynamic feel of the design.

Response to the Consultation

April 2021

ABOUT RESEARCH AUSTRALIA

We are the national peak body representing the whole of the health and medical research pipeline.

Our vision: Research Australia envisions a world where Australia unlocks the full potential of its world-leading health and medical research sector to deliver the best possible healthcare and global leadership in health innovation.

Our mission: To use our unique convening power to position health and medical research as a significant driver of a healthy population and contributor to a healthy economy.

Our goals:

Engage	Connect	Influence
Australia in a conversation about the health benefits and economic value of its investment in health and medical research.	researchers, funders and consumers to increase investment in health and medical research from all sources.	government policies that support effective health and medical research and its routine translation into evidence-based practices and better health outcomes.

Acknowledgements

Research Australia has received input from across our membership in the preparation of this submission. In particular we acknowledge the contributions made by:

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Summary of Recommendations

Principles	<p>While providing information is an important tool to empower and support people, Research Australia believes supporting people to make the best possible decisions also requires practical strategies and programs that can support and incentivise behaviour change and policies that make it easier for people to make healthy choices.</p> <p>Research Australia submits that this should be more explicitly recognised in the Principle ‘Empowering and Supporting Australians’.</p>
Enabler 1 Leadership, Governance and Funding.	<p>The Governance mechanism proposed at Enabler 1 is not provided with a direct responsibility for directing Enabler 5, <i>Research and Evaluation</i>, or for receiving and acting on the outputs from Enabler 6, <i>Monitoring and Surveillance</i>.</p> <p>The role of the Governance mechanism in acting on Enablers 5 and 6 should be more explicitly described in Enabler 1.</p>
Enabler 4 Information and Health Literacy	<p>Greater attention should be given to enhancing digital health literacy as part of the Strategy. The National Preventive Health Strategy and the National Digital Health Strategy should also be better integrated to support the use of digital technologies and health information for health prevention.</p>
Enabler 5 Research and Evaluation	<p>The intervention research proposed under Enabler 5 should be the responsibility of the Governance Mechanism proposed as Enabler 1 and funded as part of the 5% preventive health expenditure target.</p>
Enabler 6 Monitoring and Surveillance	<p>There is a role for surveillance with detailed data beyond the administrative data routinely collected. For example, there is a role for detailed information from large cohort studies, involving linking administrative datasets (health, employment, justice system) with specifically collected personal data related to quality of life, family environment and functioning (important for mental health evaluation), social factors, educational outcomes (especially for children).</p> <p>Consideration should also be given to the establishing of regional health observatories, drawing on models that exist in the UK and Europe. These observatories can identify specific needs, detect trends and direct preventive health measures to specific populations.</p> <p>The Australian Geospatial Health Lab provides an Australian model for the regional health observatory concept.</p>

Policy Achievements for the Enablers	<p>The first policy achievement for Enabler 1 should be modified as provided below.</p> <p>‘The priorities for preventive health action are informed by a national, independent governance mechanism that is based on <u>evidence</u>, effectiveness and relevance.’</p> <p>In respect of Enabler 4 <i>Information and Health Literacy</i>, there should be an additional policy achievement:</p> <p>‘Health and health care information is accompanied by a range of practical strategies and programs that support individuals to use information to implement changes in their health and behaviour.’</p>
Continuing Strong Foundations	<p>A program of evaluation of all existing government funded preventive health programs and interventions should be implemented as part of the Strategy. In the first instance all current national programs should be identified and an initial assessment made of the quality of the existing evidence for their effectiveness. A systematic approach should then be developed and implemented over several years to evaluate programs where the existing evidence is poor or non-existent.</p>

DRAFT NATIONAL PREVENTIVE HEALTH STRATEGY

RESPONSE TO THE CONSULTATION

Introduction

The Australian Government Department of Health and Ageing is developing a new National Preventive Health Strategy. It has established an Expert Committee to guide the Strategy's development, and following the release of a discussion paper, it has undertaken a consultation on a draft National Preventive Health Strategy.

The Consultation was undertaken using an electronic survey, which has restricted the response to each question. Research Australia's response to the questions posed by the survey is provided below. Our responses emphasise:

- the critical role of research in supporting the evaluation of existing programs and measures and the development and implementation of new programs;
- the importance of the proposal to increase funding for preventive health measures to 5% of health expenditure by 2030
- while providing information is an important tool to empower and support people, supporting people to make the best possible decisions also require practical strategies and programs that can support and incentivise behaviour change, and policies that make it easier for people to make healthy choices.

Research Australia has provided a response to consultation questions except those related to the Focus Areas.

Responses to Survey Questions

PRINCIPLES

Six principles are included in the Strategy to underpin the *Framework for Action by 2030*. The principles are designed to guide implementation and strengthen current efforts. They are outlined on page 8.

Do you agree with the principles?

Agree

Research Australia broadly supports the Principles.

The actions identified under ‘Empowering and Supporting Australians’ are targeted information, health promotion, and work on the environmental factors. Research Australia undertakes annual opinion polling. One of the findings of our polling is that many people believe that they know what they need to do to be healthy but that they are looking for ‘practical strategies’ and ‘tips or hints’ on what they can do to maintain their health¹.

This can be as simple as providing information in a way which supports taking particular actions (e.g. walking to the shops rather than driving your car) or much more developed and extensive, such as weight loss programs.

Research Australia submits that while providing information is an important tool to empower and support people, we believe supporting people to make the best possible decisions also require practical strategies and programs that can support and incentivise behaviour change and policies that make it easier for people to make healthy choices.

Research Australia submits that this should be more explicitly recognised in this Principle.

‘Adapting to emerging threats and evidence’ is an important principle that seeks to ‘future proof’ the strategy and to embed continuous improvement. Research Australia believes that while important, this Principle should be amended to reflect the importance of action in all areas being evidence based and the need to actively seek evidence to support the actions undertaken under this strategy.

¹ Research Australia, Australia Speaks! 2019 Opinion Poll, at <https://researchaustralia.org/reports/public-opinion-polling-2/>

ENABLERS

Mobilising a prevention system is a key driver in achieving systemic change and better health outcomes for all Australians. 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?

Agree

Enabler 1

The first enabler is *Leadership, Governance and Funding*. Research Australia strongly believes that the Preventive Health Strategy needs to recognise the role of all Australian governments in preventive health and help coordinate their actions.

The role for state and territory governments in Enabler 1 is not clear, although there is a reference to 'governments at all levels'. Research Australia submits the role of state and territory governments should be better articulated in this Enabler, while recognising that the exact form will require negotiation with these governments.

The Governance mechanism proposed at Enabler 1 is not provided with a direct responsibility for directing Enabler 5, *Research and Evaluation*, or for receiving and acting on the outputs from Enabler 6, *Monitoring and Surveillance*.

Research Australia submits that the role of the Governance mechanism in acting on Enablers 5 and 6 should be more explicitly described in Enabler 1.

Enabler 4

Building on our comments above about the Principle 'Empowering and Supporting Australians', Enabler 4 *Information and Health Literacy* needs to go beyond providing information and helping people identify credible information sources to include programs and strategies that support good decision making and behaviour change.

Just as health literacy varies across the population, so does access to and utilisation of digital technologies; older Australians, those on lower incomes, Indigenous Australians and people with a disability score lower than the national average on the Australian Digital Inclusion Index 2018.² These are also some of the population groups with poorer health, high levels of interaction with the health system and the greatest need for healthcare.

Improving digital health literacy (the ability to use digital technologies to get access to reliable health information) will increase the number of Australians able to take advantage of digital health technologies to better manage their own health and their interactions with healthcare providers.

² (Thomas, J, Barraket, J, Wilson, CK, Cook, K, Louie, YM & Holcombe-James, I, Ewing, S, MacDonald, T, 2018, *Measuring Australia's Digital Divide: The Australian Digital Inclusion Index 2018*, RMIT University, Melbourne, for Telstra.)

This includes understanding how digital health technologies can assist individuals and how to identify technologies that are effective and evidence-based; so they can be savvy digital health consumers.

Research Australia submits that greater attention should be given to enhancing digital health literacy as part of the Strategy. The National Preventive Health Strategy and the National Digital Health Strategy should also be better integrated to support the use of digital technologies and health information for health prevention.

Enabler 5

Enabler 5, *Research and Evaluation* is closely linked by the Strategy to the need for specific research and actions to ensure implementation, and this is supported by Research Australia. The emphasis on intervention research is welcomed as is the emphasis on implementation and evaluation of programs.

There is no explicit statement that there will be an increase in funding for intervention research, or any mechanism for how the research would be delivered. For example, the link between the governance mechanism and the funding of research is not as clear as it is in the case of the Productivity Commission's recommendation on Mental Health (which would see the commissioning of research as a function of a reformed National Mental Health Commission) or the Aged Care Royal Commission on Aged Care Quality and Safety (which has proposed the creation of an Aged Care Research and innovation Council and a specific research budget).

Research Australia proposes that the intervention research proposed under Enabler 5 should be the responsibility of the Governance Mechanism proposed as Enabler 1 and funded as part of the 5% preventive health expenditure target.

Research also has a role to play in respect of secondary prevention measures.

'Secondary prevention focuses on the early detection and best practice management of a disease or disorder to reduce deterioration and long-term effects. This includes identifying people at risk of ill-health through screening programs, general health examinations, as well as the identification of complications and co-morbidities.' (Page 19)

There is scope for new technologies and screening to support early detection, coupled with increased awareness to prompt and incentivise action. There is also scope for research to make existing screening programs more effective, for example by helping develop targeted communication programs that increase screening rates among particular at risk or poorly represented groups.

Enabler 6

Research Australia supports the recognition in this section on Enabler 6, *Monitoring and Surveillance*, of the need to collect better data and that this data needs to be more available. There is a close link between Enablers 5 and 6 which is not explicitly recognised in the Strategy. The data collected under Enabler 6 can be a vital input in the research conducted under Enabler 5, particularly in identifying areas where greater intervention is needed. Conversely, data generated from the evaluation of programs under Enabler 5 can also be incorporated into the data sets used as part of the broader monitoring and surveillance of the success of the Strategy.

Research Australia submits there is a role for surveillance with detailed data beyond the administrative data routinely collected. For example, there is a role for detailed information from large cohort studies, involving linking administrative datasets (health, employment, justice system) with specifically collected personal data related to quality of life, family environment and functioning (important for mental health evaluation), social factors, educational outcomes (especially for children).

Consideration should also be given to the establishing of regional health observatories, drawing on models that exist in the UK and Europe. These observatories can identify specific needs, detect trends and direct preventive health measures to specific populations.³

The Australian Geospatial Health Lab provides an Australian model for the regional health observatory concept.⁴

Do you agree with the policy achievements for the enablers?

Agree

The Policy Achievements outlined for each enabler are generally suitable.

In respect of Enabler 1, *Leadership, Governance and Funding*, Research Australia agrees with the focus of the first policy achievement on the priorities being based on effectiveness and relevance. However, we suggest that it is also essential that the priorities are based on evidence.

To this end, Research Australia submits the first policy achievement for Enabler 1 should be modified as provided below.

‘The priorities for preventive health action are informed by a national, independent governance mechanism that is based on evidence, effectiveness and relevance.’

In respect of Enabler 4 *Information and Health Literacy*, Research Australia submits there should be an additional policy achievement:

‘Health and health care information is accompanied by a range of practical strategies and programs that support individuals to use information to implement changes in their health and behaviour.’

³ See, for example, Establishing and sustaining health observatories serving urbanized populations around the world: scoping study and survey, Peter J. Aspinall, Bobbie Jacobson, Carlos Castillo-Salgado *European Journal of Public Health*, Volume 26, Issue 4, August 2016, Pages 681-686, <https://doi.org/10.1093/eurpub/ckw007>

⁴ (<https://www.canberra.edu.au/research/institutes/health-research-institute/australian-geospatial-health-lab>)

CONTINUING STRONG FOUNDATIONS

There are many effective and well-designed prevention-based programs and strategies developed by government, non-government organisations and communities that are currently in progress. This element of the Framework for Action acknowledges the immense activity that is already under way to better prevent illness and disease in Australia. It is outlined further on page 66.

Do you agree with this section of the Strategy?

Agree

This section of the draft Strategy opens with the following statement:

‘There are many effective and well-designed prevention-based programs and strategies developed by government, non-government organisations and communities.’

While not necessarily disputing this statement, Research Australia questions what evidence there is to support it.

Just as it is important that all new programs are evidence-based and proven to be cost effective, it is important that existing programs are also evaluated for their cost effectiveness. **Research Australia submits that a program of evaluation of all existing government funded preventive health programs and interventions should be implemented as part of the Strategy. In the first instance all current national programs should be identified and an initial assessment made of the quality of the existing evidence for their effectiveness. A systematic approach should then be developed and implemented over several years to evaluate programs where the existing evidence is poor or non-existent.**

This program of evaluation should use a set of common and agreed measures of effectiveness which align with this Strategy, such as the increase in years lived in full health (HALE), and enable the cost effectiveness of existing programs to be compared (\$ per additional quality-adjusted life year) with an additional weighting for equity related outcomes, particularly for Indigenous Australians. This approach will support decision making about programs that should be defunded, scaled up and/or modified to improve the allocation of resources and the efficiency of programs.

FEEDBACK

Please provide any additional comments you have on the draft Strategy.

Research Australia welcomes the development of this draft National Preventive Health Strategy. Its Vision and Aims provide a strong base for improving Australians’ health and for addressing existing health inequality. We make the observation that the structure of the strategy is complex, with a Vision, Aims, Principles, Enablers, Focus areas, policy achievements, priority areas and targets. While comprehensive, this can make the document difficult to read and understand and would encourage simplification of the final strategy document.

The proposal to substantially increase funding for preventive health measures over the period to 2030 is especially welcome, and essential if the Strategy’s targets are to be achieved.

Research Australia is pleased that the role of research and evaluation as an enabler of the strategy has been recognised and that implementation research has been identified as a critical component.

While there are several references to injury in the Strategy, including, for example, recognising that falls are the main cause of hospitalised injuries, there is little that indicates that injury prevention is a focus of the Strategy or within its scope. Research Australia submits that injury should be addressed more explicitly in the Strategy, including its varying contribution to poor health at different stages of the life course.

As it does elsewhere, research has a critical role to play in preventive health. It is research that provides the initial insights and understanding into cause and effect- both what contributes to ill health and what can protect against it. It is also research that helps design the interventions and programs which enable us to act on this knowledge, and to evaluate which programs are effective and which are not. Ensuring research is included as an integral part of this Strategy and funded commensurately is key to its success.

Research Australia would be pleased to provide further information and input on any of the matters raised in our submission.

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