Response ID ANON-27C4-K5GP-Q

Submitted to **National Strategic Framework for Chronic Conditions: Online Public Consultation on the second draft.**
Submitted on **2016-06-22 17:05:01**

SECTION A - DEMOGRAPHICS

1 Please provide your name.

Name:
Professor Sanchia Aranda

2 Where are you based?

List of Australian States and Other:
NSW

If Other, please specify.:

3 Please provide your email address.

Email:

4 Are you providing your response on behalf of an organisation?

Yes

If YES, please specify.:
Australian Chronic Disease Prevention Alliance

5 Are you providing your response:

Not Answered

If Other, please specify.:

6 If applicable, please specify your or your organisation's area of expertise.

Specify you or your organisations area of expertise:

7 Do you identify yourself as an Aboriginal or Torres Strait Islander person?

Not Answered

8 In which country were you born?

Not Answered

If Other, please specify.:

SECTION B - THE STRUCTURE OF THE FRAMEWORK

9 The structure of the Framework is appropriate and easy to follow. (Relates to the entire Framework)

Structure - Structure:
Agree

10 Please explain your selection. (100 word limit)

Text box to explain your selection:
The structure of the Framework follows a logical sequence and provides appropriate detail on the elements considered in its development. The structure could be strengthened by the introduction of an implementation section within each of the Strategic Priority Areas. Setting measureable and achievable outcomes will ensure that stakeholders are able to evaluate the effectiveness of their work against an agreed national goal.

11 "Part 1: Setting the Scene" provides adequate context and background for the Framework. (Relates to pages 5-12 of the Framework)

Setting the Scene - Setting the scene:
Agree

12 Please explain your selection. (100 word limit)

Text box to explain your selection:
We support the Framework identifying that preventive measures are essential in reducing chronic disease and acknowledging that Australia faces similar challenges to other economically developed countries. We suggest adding overweight and obesity to the risk factors already identified in this section, including unbalanced diets, physical inactivity and sedentary behaviour.

We agree that it is important to highlight priority populations within the Australian population that experience a disproportionate burden of disease and the need for initiatives that target these populations.

13 The Vision reflects the intent of the Framework and its Objectives. (Relates to page 14 of the Framework)

Vision - Vision:
Agree

14 Please explain your selection. (100 word limit)

Text box to explain your selection:
We agree that the vision is clear and reflects the intent of the Framework and its objectives. It is important to acknowledge however that the term 'healthier' can mean different things to different people and in different conditions within the chronic disease spectrum.

The Framework should reflect how the system can enable Australians to live healthier lives in order to achieve optimal health.

15 The Principles are appropriate and comprehensive. (Relates to page 14 of the Framework)

Principles - Principles:
Agree

16 With regard to the Principles, is anything missing or what should change? (200 word limit)

Text box to explain what is missing or what should change:
In the 'Introduction' section of the Framework, mention is made of the ongoing national reforms that will significantly affect the health system, including recent reforms of the Pharmaceutical Benefits Scheme and Pharmacy Agreement, the establishment of Primary Health Networks, the redevelopment of the My Health Record, the Healthier Medicare initiative and implementation of the broad ranging recommendations of the National Mental Health Commission's Review.

The Principles could be strengthened by the recognition that in order for the Framework to be successful, it must align with the existing reforms of the health sector. It is important that the key objectives of the Framework are consistent with the spirit of these reforms.

We support the inclusion of Equity as one of the governing Principles of the Framework and believe it could be strengthened by recognising prevention as well as health care, consistent with the Principles being the 'foundational tenets that enable the successful prevention and management of chronic conditions for all Australians.'

17 The Framework identifies the key Enablers to assist in achieving the Vision of the Framework. (Relates to page 14 of the Framework)

Enablers - Enablers:
Agree

18 With regard to the Enablers, is anything missing or what should change? (200 word limit)

Text box to explain what is missing or what should change:
We recognise that Research is an important Enabler in achieving the vision of this Framework; however, it is critical that any research conducted is priority-driven.

We suggest that the Enabler Resources could be reworded to recognise the Principle Equity as follows: 'Adequate allocation, equitable distribution and efficient use of resources, including funding, to address identified health needs over the long-term.'

Data and information, Technology and Research are all rightly identified as Enablers. We support building these Enablers into the Objectives and Outcomes in a measurable way. The ongoing evolution of the electronic health system is a key factor with respect to these Enablers and there is potential for greater acknowledgement of this in the Framework.

19 Overall, the three Objectives of the Framework appropriately identify the key areas for action to address chronic conditions in Australia. (Relates to page 16 of the Framework - specific questions relating to each Objective will be addressed in Section C of the survey)

Objectives - Objectives:
Agree

20 With regard to the three Objectives overall, is anything missing or what should change? (200 word limit)

Text box to explain what is missing or what should change:
We support the three Objectives, including the focus on prevention as a core priority area, and targeting priority populations to improve health outcomes and reduce disparities.

SECTION C - OBJECTIVES, STRATEGIC PRIORITY AREAS AND OUTCOMES

21 The information provided in Objective 1 and its Strategic Priority Areas adequately addresses the key issues relating to the prevention of chronic conditions. (Relates to pages 18-24 of the Framework)

Objective 1 SPA's - Objective 1 and its related Strategic Priority Areas:
Agree

22 Please explain your selection. (400 word limit)

Text box to explain your selection:
We support the Strategic Priority Areas, and agree that a comprehensive approach is needed to improve health at the individual, community and population levels.

Individuals with poor health literacy may lack the skills and knowledge to make choices which support their long-term health and reduce their risk of chronic disease. The Framework could benefit from a greater emphasis on the importance of health literacy in prevention of disease. As indicated later in the Framework, 'health literacy is critical to empowerment and affects people's capacity to make good decisions about their health and health care and take appropriate action' (page 27).

Other determinants of health, including the social and physical environment, can provide further barriers and promote unhealthy choices. The Framework acknowledges the need for collaboration across sectors; however it could be strengthened by greater consideration of the effect of the environment on individual behaviour.

23 With regard to the four (4) Strategic Priority Areas in Objective 1, is anything missing or what should change? (400 word limit)

Text box to explain your what is missing or what should change:
The Strategic Priority Areas appropriately reflect Objective 1.

24 The Phased and Aspirational Outcomes identified in each of the four (4) Strategic Priority Areas will contribute to achieving Objective 1.

Objective 1 Outcomes - Objective 1 Outcomes:
Agree

25 With regard to the Outcomes in Objective 1, is anything missing or what should change? (400 word limit)

Text box to explain what is missing and what should change:
While the Phased and Aspirational Outcomes, and example measures of progress, support the Objective, the Framework would benefit through the inclusion of specific and measurable targets to engage stakeholders and facilitate meaningful evaluation.

26 The information provided in Objective 2 and its Strategic Priority Areas adequately addresses the key issues relating to the provision of effective and appropriate care to support people with chronic conditions and optimise quality of life. (Relates to pages 25-34 of the Framework)

Objective 2 SPAs - Objective 2 and its related Strategic Priority Areas:
Agree

27 Please explain your selection. (400 word limit)

Text box to explain your selection:
We support the inclusion of secondary prevention under this Objective to optimise quality of life and reduce risk of further chronic conditions, complications and disabilities for people living with chronic disease. As identified, health literacy is crucial to individual health decision-making.

28 With regard to the five (5) Strategic Priority Areas in Objective 2, is anything missing or what should change? (400 word limit)

Text box to explain what is missing or what should change:
The Strategic Priority Areas appropriately reflect Objective 2.

Strategic Priority Area 2.4 (Information sharing) is also relevant to building the evidence base to inform preventive health measures and timely and appropriate detection in Objective 1.

29 The Phased and Aspirational Outcomes identified in each of the five (5) Strategic Priority Areas will contribute to achieving Objective 2.

Objective 2 Outcomes - Objective 2 Outcomes:
Agree

30 With regard to the Outcomes in Objective 2, is anything missing or what should change? (400 word limit)

Text box to explain what is missing or what should change:
While the Phased and Aspirational Outcomes, and example measures of progress, support the Objective, the Framework would benefit through the inclusion of specific and measurable targets to engage stakeholders and facilitate meaningful evaluation.

31 The information provided in Objective 3 and its related Strategic Priority Areas adequately addresses the key issues relating to priority populations. (Relates to pages 35-39 of the Framework)

Objective 3 and SPAs - Objective 3 and its related Strategic Priority Areas:
Agree

32 Please explain your selection. (400 word limit)

Text box to explain your selection:
Given the disproportionate disease burden experienced by the priority populations identified in the Framework, we support the inclusion of Objective 3 and its Strategic Priority Areas.

We agree that targeted action is needed to address health inequities and we support the Framework's recognition that the physical environment, social determinants and other factors interact to influence poorer health outcomes of priority populations. Addressing these factors is key to improving health outcomes for priority populations.

33 With regard to the two (2) Strategic Priority Areas in Objective 3, is anything missing or what should change? (400 word limit)

Text box to explain what is missing or what should change:
The Strategic Priority Areas appropriately reflect Objective 3.

34 The Phased and Aspirational Outcomes identified in each of the Strategic Priority Areas will contribute to achieving Objective 3.

Objective 3 Outcomes - Objective 3 Outcomes:
Agree

35 With regard to the Outcomes in Objective 3, is anything missing or what should change? (400 word limit)

Text box to explain what is missing or what should change:
While the Phased and Aspirational Outcomes, and example measures of progress, support the Objective, the Framework would benefit through the inclusion of specific and measurable targets to engage stakeholders and facilitate meaningful evaluation.

FINAL COMMENTS

36 Please provide any other comments you may have on the Framework. (500 word limit)

Text box to explain your reasons for providing comment :
We would like to reiterate and support the comments that have been provided previously by the Chair of the Australian Chronic Disease Prevention Alliance.

In general, our view is that the strength of the draft Framework is its recognition that improved prevention and management of chronic disease, and coordinated approaches to improved health outcomes, are the biggest challenge facing Australia's health system. We also support the core goal of equity, provided this is based on continuous overall improvements on a population level and a significant reduction in disparities.

Where the Framework could be strengthened is in setting measurable outcomes to help ensure governments and other identified Players are able to monitor its progress and evaluate its effectiveness. We appreciate the difficulties of integrating metrics into a high-level, multi-sectoral Strategy of this nature. However, in order to engage the Players and to facilitate meaningful evaluation, achievable and measurable targets could be built into the Objectives and Outcomes.

We support the proposal to take a phased approach to implementation and to measuring outcomes. We also support the logic of identifying broad opportunities as per Phase 1. However, there is potential to set measurable targets in later Phases. Success in relation to a number of the Strategic Priority Areas could be readily tracked in straightforward statistical terms. For example, Aspirational Outcome 1.1, "Australians have reduced risk of developing a chronic condition", could be measured by a number of published indicators such as diet, levels of physical activity and smoking prevalence across the population.

Outcomes relating to healthcare and engagement with the health system could also be measured; while this is complex, committing to collect improved national data on diagnosis and treatment times and continuity of care, and building them into a national strategy, would help drive enhancements in this area.

The Framework recognises the 'WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013-2020', which urges governments to set targets, develop multisectoral national noncommunicable disease plans in order to reach these targets, and measure results. Consistent with this, we believe that measurable targets, actions and indicators would enhance this Framework and reflect Australia's international commitment to address noncommunicable diseases.

Multisectoral commitment needs to be clearly identified under 'Partners' on page 15, by rewording bullet point 4 to be: 'All levels and sectors of government'.

This is consistent with the Health in All Policies (HiAP) strategy, which is focused on supporting equity in health, by targeting the key social determinants of health through an integrated policy response across relevant policy areas. This approach is similar to areas such as 'inter-sectoral action for health', 'healthy public policy' and 'whole-of-government approach'.

Specifically, in order to improve population health, it is critical to understand the social, environmental and economic factors which impact on the lives of individuals, and act as determinants of health. It is important that health considerations are able to be integrated into a range of other related policy areas, including employment, education and social policy.