

29 October, 2019

Mr Andrew Barr  
Chief Minister and Treasurer  
GPO Box 1020  
CANBERRA ACT 2601

Via email: [budgetconsultation@act.gov.au](mailto:budgetconsultation@act.gov.au)

Dear Chief Minister

Thank you for the opportunity to contribute to the 2020-21 Budget process, and through it the ACT Preventive Health Plan and the Wellbeing Indicators.

Diabetes NSW & ACT applauds the focus the ACT Government places on preventive health, and is encouraged by the emphasis on linking people and services to create a healthier ACT.

Chronic disease is often the product of multiple risk factors, and it is usually accompanied by other conditions. Tackling the cause and treatment of it then has to similarly cross over a number of agencies and issues.

A point of diagnosis with a chronic condition also does not signal the end to work in prevention. Someone living with a chronic condition still needs access to preventive health services to minimise the risk of comorbidities and complications.

In terms of diabetes, more than 18,000 people are living with a type of diabetes in the ACT. Of these, 14,880 have been diagnosed with type 2 Diabetes. Approximately 60 per cent of type 2 Diabetes is preventable through modifiable lifestyle factors.

Lifestyle change is also a key factor in preventing Gestational Diabetes, the fastest growing Diabetes in Australia. In fact, Gestational Diabetes rates are higher in the ACT, 17%, compared to the national average at 15%. Whilst the diagnosis of Gestational Diabetes is short lived, it increases a woman's chance of developing type 2 Diabetes in the future. The epigenetic effect also predisposes offspring to developing type 2 Diabetes in later stages of life impacting future generations to come.

There are two aspects of services that would enhance the health landscape in the ACT: digitally connecting services to streamline the processes for consumers; and connecting people to increase social and preventative participations.

### **Connectivity Between Services**

Building a centralised ACT health marketplace platform for consumers and providers would enable people to link to services, events and information.

Across the health information and health services sectors, this partnership would connect health services, hospitals, pharmacies, peak bodies, community organisations, Culturally and Linguistically Diverse and Aboriginal and Torres Strait Islander support groups and

consumers. This would allow a consumer to have access to a simple view of what services are relevant and how to utilise them. For providers, it would encourage closer working relationships with like organisations to provide comprehensive services. It would also highlight gaps in the market, and allow them to be catered for.

Similar to the current ACT Government's Gestational Diabetes Prevention Initiative being developed by Diabetes NSW & ACT, the platform would highlight relevant local events and programs, provide links to local services and their information, and be a consistent tool that can be accessed by health care teams as well as consumers.

Self-management modules can lead behavioural changes, focusing on lifestyle change or maintenance and peer support, and highlighting peer influencers and lived experiences.

Chronic condition resources including risk assessments and wellbeing check tools, the platform could be coordinated by an alliance of stakeholders to ensure the information is targeted and relevant. The platform would allow for a very tailored experience that could provide relevant streams and wellbeing checks, such as mental health, quit smoking and other tools in addition to the core condition such as diabetes.

This asset could also form the basis of engagement and awareness campaigns on preventive health in the ACT. It would also allow for a capture of information which would inform engagement levels, resourcing needs and population health policy into the future.

Importantly, it could be aimed at both the general population as a preventive health tool, and at those who are already living with a condition who want to seek information on management and reduce the risk of complications.

As an opt-in tool, and one that can be promoted through health services, it would be able to reach isolated people within the community in a non-obtrusive way.

This initiative would enhance the domains of social connections and physical and mental health.

Much can be taken from the current Gestational Diabetes Prevention Initiative and the research behind it, not least the ability to translate curiosity into action. Upon diagnosis with Gestational Diabetes, there is an immediacy and willingness in connecting with services and information which would be beneficial to duplicate among the population diagnosed with type 2 Diabetes.

## **Connecting People**

One of the aspects of chronic disease that is not often tackled is isolation. Because of mobility, stigma, age, frailty, illness, social isolation or other reasons, it is difficult to involve people who are often in the most need in the programs that will assist.

A program that could provide face-to-face support to link people both to organisations and to peers would help to tackle the isolation which can be detrimental not only to the person's physical health, but have significant ramifications on their mental health.

Diabetes is a very lonely condition for many people, partly because of stigma and judgemental attitudes, but also because it affects every part of a person's life, especially where food is involved. This can make people reluctant to interact in conventional social occasions. Additional factors such as age and comorbidities can also make it physically difficult for others.

In terms of prevention of the onset of chronic conditions, isolation plays a different role. People at younger ages – the ages at which lifestyle habits are entrenched and beginning to set the path for later chronic conditions – don't see those same chronic conditions as relevant to them or their peers. Introducing preventive health programs to these ages is difficult because the preventive health message doesn't hit home. Key to success in this area is peer involvement in programs which establish healthy trends. These programs need to be social rather than individual. Utilising community as a vehicle for activity which embeds health may not be direct messaging on prevention, but the outcome is emphatically beneficial for health prevention.

### **Other Measures**

In addition to this, there are other streams throughout the ACT Wellbeing Initiative which we enthusiastically support. Built environment can help to create usable communities in which time is utilised in undertaking activity rather than getting to it. The ACT Government has made significant progress in this area.

Encouraging and supporting community health-focused events and groups allows people to participate socially in wellbeing. This helps to embed health within a community, reducing isolation for those people who otherwise don't know where or how to start. It also gives a foundation of health and wellbeing knowledge that can stimulate people to seek help if they are aware of risk factors and symptoms.

One of the most difficult areas of chronic disease is its socio-economic connection. Obesity is a risk factor for type 2 Diabetes among other conditions, and there is often a demonstrable connection to socio-economics. Lower incomes reduce the ability to afford varied and healthy food, which in turn has a negative health impact. Over time, the ensuing health problems cause further expense, increasingly eroding the ability to escape the cycle. This becomes a generational problem. Targeted prevention is needed at earlier stages to ensure people, especially children, have the ability to afford healthy foods and sufficient physical activity.

The best outcomes for services in preventive health are those which provide connection and relevance. Inspiring people to take the first step is a combination of making that first step easy to access, relevant to them in a way they can see, and giving them a sense that they are achieving something, whether that be health, social interaction, or a personal goal.

Thank you for this opportunity to provide our submission. I would be happy to discuss any of these areas with you in further detail.

Yours sincerely



Trish Egan  
Chief Operating Officer

Cc: Rebekah Henricksen, Policy and Advisory Manager, Diabetes NSW & ACT