A systems approach to preventing lifestyle-related chronic health problems

Australia, like most of the rest of the world, is facing an epidemic in chronic disease. Factors such as smoking, harmful alcohol use, poor nutrition and physical inactivity are causing an epidemic in chronic health problems including cardiovascular disease, respiratory disease, cancer and diabetes. These diseases are not only the leading cause of death in this country, they restrict how millions of Australians live every day.

While Australia has made progress in promoting good health – especially our work in tobacco control – we have a long way to go to help all Australians, particularly high-risk and vulnerable groups, reduce their risk of chronic disease.

A lot of work in prevention has targeted individual behaviour, trying to persuade people to eat better, to move more, to not smoke and to drink less alcohol to reduce their risk of illness. But many things affect how we live. Where we work, eat, play and live, and our access to work and education, all affect our health. For example, trying to persuade people to eat more fruit and vegetables won’t work as well if they live in remote Australia where fresh food is hard to find and expensive, and how do you stay active if your neighbourhood has few safe places to walk or cycle?

All this means that quick fixes won’t work to prevent chronic disease. We need to take a broader and deeper view of the social, economic and environmental factors that are combining to drive the increase in lifestyle-related chronic health problems. Systems thinking is about finding solutions by tackling multiple parts of a problem at once.

The Australian Prevention Partnership Centre

The Australian Prevention Partnership Centre is a national initiative that is finding out how we can build an effective, efficient and equitable system for the prevention of lifestyle-related chronic disease.

We want to provide health decision makers with the best evidence to inform their policies and programs, and to provide the evidence and tools for a comprehensive approach to preventing chronic health problems that includes working in the health system as well as in sectors outside of it, such as in schools, food production and retailing, and urban planning.

Our objectives

Taking a systems approach, our program of work will:

• Strengthen the evidence base to prevent lifestyle-related chronic disease

• Create and make readily available knowledge, either new or through syntheses of what is already known

• Build capacity to make more informed choices about prevention at policy, strategy and program levels.

Outcomes

• New ways for researchers, policy and program practitioners to work together and form strong national networks

• Internationally significant research about innovative methods in prevention, systems science and communication of prevention

• Methods and approaches for communicating to governments and the community the value of prevention and the best investments in prevention efforts

• The development and use of frameworks, tools and strategies to activate an effective, efficient and equitable prevention system

• Increased capacity of researchers, policy makers and practitioners to use evidence and systems approaches in the design, implementation, evaluation and communication of prevention.
Our partners and people

The Prevention Centre has $22.6 million in resources over five years that has been provided by the National Health and Medical Research Council (NHMRC), the Australian Government Department of Health, the NSW Ministry of Health, ACT Health and the HCF Research Foundation. It is one of two NHMRC Partnership Centres launched in 2013 to improve the availability and quality of research evidence for policy makers.

The Prevention Centre is administered by the Sax Institute. The Director is Professor Andrew Wilson. The team includes many of Australia’s internationally leading researchers in prevention, with 31 investigators from five states and territories and more than 20 universities, and government, non-government and private sector agencies.

How are we working?

A fundamental pillar of our approach is that we will draw evidence equally from research and practice to develop a prevention system. These two sources of innovation – learning from research and learning from doing – will inform and enhance each other to create effective interventions and policies.

We have established four capacity units that will improve the gathering, sharing and use of evidence to build a prevention system in Australia:

Rapid Response Evaluation Capacity: Led by Professor Adrian Bauman at the University of Sydney, this unit will help to embed research and evaluation in the rollout of policies and programs.

Synthesis Capacity: Led by Professor Sally Redman at the Sax Institute, this unit will develop and apply ways to summarise and communicate evidence to address key issues for policy makers and practitioners.

Systems Science and Implementation Capacity: Led by Professor Alan Shiell at La Trobe University, this unit will help policy makers and practitioners strengthen policies and programs by applying a systems perspective at the design stage and during implementation.

Valuing Prevention Capacity: Led by Professor Andrew Wilson, this unit will develop methods to better communicate prevention to policy makers, funders, practitioners and the community, and will help develop more sophisticated public discussion on prevention science and public policy.

The Prevention Centre’s innovative collaborative approach aims to bridge the divide between policy makers and practitioners and researchers. Researchers are working with policy makers and practitioners to develop research questions, conduct research, and analyse, interpret and disseminate the findings. As such, it is the model of interaction that is being tested as much as the specific projects.

The projects

With our funders, we have plans for more than 30 projects over the five years.

Our projects include:

- Investigating how each aspect of the Australian food supply affects availability, affordability and acceptability of different foods. Led by Professor Sharon Friel, Australian National University

- Developing and validating national liveability indicators associated with chronic disease risk factors and health outcomes. Led by Professor Billie Giles-Corti, University of Melbourne

- Developing methods for the economic evaluation of prevention. Led by Professor Stephen Jan, University of Sydney

- Developing a policy framework for a systematic approach to reducing tobacco use among Aboriginal people. Led by Professor Sandra Eades, Baker IDI

- Finding new ways to frame health promotion and disease prevention that value the role of the hidden workforce who create healthy public policy, and to quantify the benefits of public health interventions. Led by Professor Penny Hawe, University of Sydney

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