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**THE LEGISLATIVE ASSEMBLY FOR THE
AUSTRALIAN CAPITAL TERRITORY**

ACT CHIEF HEALTH OFFICER'S REPORT 2020

TABLING STATEMENT

Presented by
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Madam Speaker, today I am pleased to table the ACT Chief Health Officer's Report 2020, as required under Section 10 of the of the *Public Health Act 1997*.

Historically, the data has taken the form of a consolidated document published in hard copy and online, which presents data from the previous two years.

Since the release of the last report in 2018, and the appointment of Dr Kerryn Coleman as Chief Health Officer in late 2019, consideration has been given to improving the format for this data, in order to present indicators that are more meaningful and useful for stakeholders.

In 2016 the *HealthStats ACT* webpage was launched to support the published report. *HealthStats ACT* provides up-to-date population health statistics as indicators and short reports, on a wide range of health topics. This data provides a wealth of information to inform government and our community by identifying health trends and emerging issues.

The demands of managing the COVID-19 pandemic over the past 15 months have brought considerations about the structure of the CHO Report forward. As a result, a decision was taken to not produce a full published report for 2020 as per previous occasions.

Instead, I am tabling four supporting documents developed by the Chief Health Officer for the community, which summarise highlights from *HealthStats ACT* for this reporting period.

The four reports – Healthy City, Healthy Minds, Healthy Lifestyles and Healthy People – acknowledge the importance that our local environments and changing lifestyles have on the health and wellbeing of our community.

The information utilised on *HealthStats ACT* is the most recent, available data for all indicators and measures presented. Data is sourced from a variety of ACT and national databases, including administrative and surveillance data, cross-sectional and longitudinal surveys and data registries.

Madam Speaker, the data tells us that, overall, there is much to be proud of in our collaborative and sustained efforts to create a healthy Canberra.

Canberrans have a Healthy City and this is something worth celebrating and protecting.

The ACT has excellent ambient air quality on most days, however this is something that we cannot take for granted. As we experienced in late 2019 and early 2020, smoke from fires, both from within our borders and beyond, dust storms, as well as atmospheric conditions that could lead to thunderstorm asthma, can all pose a threat to health.

We have a world class system for measuring and reporting air quality, as well as warning the public of hazardous atmospheric conditions that may affect their health. Since the 2019-20 fires, further improvements have been made to how we report on air quality, both in the ACT and nationally.

To ensure we are well placed to address these challenges now and into the future, the ACT Government is currently developing an Air Quality Strategy, which will outline our whole-of-government approach.

With regards to healthy people, the evidence is clear. ACT residents are living longer, and people in the ACT can also expect to live many years in full health.

However, chronic disease remains an ongoing challenge for the ACT and Australia at large, and continues to take a toll on our health systems.

In 2017-18, one in two ACT adults reported having a chronic condition, such as arthritis, asthma, cancer, diabetes, mental illness or heart disease, and one in five had at least two of these conditions.

The leading causes of disease burden in the ACT were coronary heart disease, anxiety disorders and back pain. However, our incidence of cancer is lower than the national rate. Overweight and obesity is still a leading cause of disease burden. We know by now that fixing this issue is not simply a matter of personal responsibility by leaving it purely up to individuals to solve.

For Canberrans to live long, healthy and productive lives, we need to keep working on creating a city where the healthy choice is the easy choice.

Our Healthy Canberra: ACT Preventive Health Plan 2020-2025 details five priority areas to achieve our goal of preventing and reducing chronic disease in our community. Three of the priority areas - healthy weight, healthy eating habits and active lifestyles - are key to further reducing our risk of chronic disease and early death.

This Report shows us, that positively, the percentage of children aged 5 to 15 years consuming sugar-sweetened beverages in the ACT is continuing to trend down.

Madam Speaker, physical activity is higher for ACT adults than the national average and more children are actively travelling to school. However, surveys conducted over the past decade have reported that at least one in five children in the ACT are overweight or obese. While the latest figures suggest a downward trend, the survey estimates tend to fluctuate in the ACT due to our small population. The trend in future years will be closely monitored to see if it continues downward and reaches significance.

Madam Speaker, while we have seen some improvements in these areas, we know that lifestyle risk behaviours – including smoking, drinking alcohol, and illicit drug use – are responsible for a large proportion of disease burden in the ACT. We all make choices that impact our health. However, it is important to recognise that these health behaviours do not occur in a vacuum but are influenced by a complex interplay of factors. Reducing risky behaviours requires collaboration across multiple government and community sectors.

We have made excellent gains on smoking overall with the daily smoking rate continuing to decline and the ACT has the lowest smoking prevalence in Australia.

However, smoking remains the leading contributor to the burden of disease in the ACT and there are parts of the ACT community where smoking rates remain stubbornly high. These include some of our most vulnerable people and communities - people with a mental illness, those with drug or alcohol dependencies, those in custody, the homeless and those who identify as Aboriginal and Torres Strait Islander.

Canberrans want to reduce tobacco related problems, and the ACT Government has been working over a number of years to prevent the uptake of smoking and reduce the harms to the community from tobacco. In recent years, the ACT Government has taken action to limit the harmful effects of passive smoking and to reduce the exposure of children and young people to role-model smoking.

We know there is more to do, particularly regarding e-cigarettes. Locally the Government will continue to focus on reducing the uptake by young people, who we know tobacco companies are targeting.

Nationally, the ACT Government is working with all Australian governments to address the risk from e-cigarettes and I will continue to raise it with my Health Minister colleagues.

Madam Speaker, risky alcohol consumption remains a continuing issue for the ACT and Australia as a whole. However, fewer younger people are using alcohol in the last year compared with previous reports. While most secondary students have tried alcohol, this number has been steadily decreasing over time.

To guide our response to these challenges, the ACT Government developed the Drug Strategy Action Plan. The Plan is aligned to the *National Drug Strategy 2017-2026* and aims to build safe, healthy and resilient communities. It will do this through preventing and minimising alcohol, tobacco and other drug-related health, social, cultural and economic harms among individuals, families and communities. In line with the National Strategy, the ACT Government has focused on 'harm minimisation' taking a three pillared approach, which includes demand reduction, supply reduction and harm reduction.

This approach aims to prevent uptake and delay in first use; reduce harmful use and support people to recover; restrict availability and access to alcohol, tobacco and other drugs to prevent and reduce problems; and encourage safer behaviours and reduce preventable risk factors.

Recent data available on sexually transmissible infections and blood borne viruses in the ACT shows that, while the incidence of newly acquired cases of hepatitis C, hepatitis B, and HIV remained stable in the ACT, consistent with trends across Australia, there has been a steady increase in chlamydia and gonorrhoea rates, with the highest number of notifications being detected in younger age groups.

Careful monitoring needs to continue in order to be able to respond to new public health trends and threats in this area.

Madam Speaker, mental illness is a leading cause of chronic disease in the ACT with anxiety disorders and depressive disorders contributing to 5.1 per cent and 2.7 per cent of the burden of disease respectively. Of particular concern are the higher rates of anxiety in the ACT in comparison to the rest of Australia.

Early intervention – or, ideally, prevention - can have significant and life-changing, positive consequences for a person's mental health. It is important to measure health and wellbeing at key development points across the lifespan.

In recognition of the importance of developing healthy minds and addressing mental health concerns early in life. The ACT Health Directorate has undertaken a range of initiatives to improve the outcomes for the one in five Canberrans who have a mental or behavioural condition, and the one in seven who had an anxiety-related condition and one in ten reported depression or feelings of depression.

Madam Speaker, I have outlined here just some of the key findings in the current *HealthStats ACT* data, many of which are highlighted in the four summary reports tabled today.

The path to a healthier Canberra requires collaboration and connecting our efforts across the health sector, across government – particularly in relation to the social determinants of health - and in partnership with academics, industry, community organisations and individuals.

By working together and pooling knowledge, skills and resources, we have the best chance of delivering a sustained and comprehensive approach to improve health outcomes for all Canberrans.

I would like to thank Dr Kerryn Coleman and her team for preparing this data and I commend *HealthStats ACT* and the supporting summaries to the Assembly.