

Women's Health Policy Alliance Communique

16 September, 2019

Forum 3 | Chronic conditions and preventive health

Wednesday evening last week saw the third Women's Health Policy Alliance forum in our five-part series focusing on how the women's health sector can work together to address the priorities and actions identified in the National Women's Health Strategy 2020-2030 (NWHS).

The third forum focused on Priority 3 – Chronic conditions and preventive health – and was the last in this series of policy forums to be hosted at the Jean Hailes Head Office in East Melbourne. The fourth and fifth forums will be held in Canberra and Sydney respectively.

A common theme emerging from all three forums to date has been the need to coordinate and share data and link data sources to build a clearer picture of health outcomes and risk factors for women. The discussion during this forum emphasised moving beyond a disease focus for data collection to identify and share data on common risk factors for a range of chronic conditions and diseases; to focus on addressing the correlation between common risk factors rather than individual chronic conditions and diseases. This could include accessing data from national cancer screening programs and linking with existing women's health longitudinal data or maximising data collected through jurisdiction-level registries by combining registries and measuring intervention outcomes. This would help identify what works - and equally as important, what doesn't.

Participants discussed a number of successful initiatives that address a range of chronic conditions from a risk factor perspective, which could be built upon. This included the 'My Health for Life' program in Queensland and the 'Life Program' in Victoria. These focus on addressing modifiable risk factors common across heart disease, stroke and diabetes and have seen positive results.

Participants discussed ways in which programs such as these could be adapted and gendered to target other chronic conditions and diseases that affect women and that have similar modifiable risk factors, such as breast and ovarian cancer; and ways to gain better leverage from protective health behaviours for women, such as breastfeeding. The opportunity to better use technology platforms to identify and address risk factors was also raised, with an intervention developed by Osteoporosis Australia identified as a potential platform for expansion.

It was agreed that there is greater need for collaboration in service delivery across the sector to improve equity of health care access and high-quality outcomes for women across Australia. One mechanism for achieving this is through the establishment of specialised Centres of Excellence for women that provide multidisciplinary care with optimal treatment pathways across a range of conditions and diseases specific to women. Further attention needs to be given to what we can do as an Alliance to reduce variation in care for women in rural and remote areas, and to improve the burden of disease for Aboriginal and Torres Strait Islander women by working with Aboriginal Community Controlled Health Organisations.

Several participants said that we need to be mindful of gender equality with issues relating to women's health and wellbeing, and to particularly "be aware of the tensions and gender pressures."

Erin Bowen, Policy Lead for Jean Hailes who has been moderating the forums noted the collaborative aspect of the Alliance. "It's encouraging to see so many likeminded people, from clinicians to researchers and policy officers, coming along to share their views on women's health across the different priority areas we have been discussing," she said. "There has been such great engagement from within the sector and I've really enjoyed the range of discussions we have had to date. We look forward to co-hosting the next two forums with our interstate partners and to progressing these discussions at the Women's Health Symposium on 22-23 October in Canberra."

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