From: To:	s22 on behalf of <u>WHO@health.gov.au</u> s22	
Cc:		
Bcc:		
Subject:	RE: NCD Country Capacity Survey 2013 - Australia (your ref: WPDHP/NHP/CCS2013) [SEC=UNCLASSIFIED]	
Date:	Thursday, 30 May 2013 3:49:00 PM	
Attachments:	WHO NCD Country Capacity survey - 2013 - Australia.xlsx	

Dear s22 tor the update and we look forward to receiving the completed NCD tool from Australia. Thank you Regards and best wishes is 2052 From: s22 **On Behalf Of** WHO@health.gov.au Sent: Tuesday, May 07, 2013 7:53 PM To: s22 Cc: Subject: RE: NCD Country Capacity Survey - your ref: WPDHP/NHP/CCS2013 [SEC=UNCLASSIFIED] Dear s22

We appreciate your patience, and thank you for your earlier agreement for Australia to submit the WHO NCD Country Capacity Survey by 30 April 2013.

Australia has completed the survey; however we are conferring with some stakeholders on a small s dom number of items to ensure that the response is accurate for those questions, and refining some elements where the available choices for response would be misleading.

I regret that Australia's response is taking longer than anticipated; however I expect to be able to forward you the completed forms shortly.

Thank you for your kind consideration.

Kind regards s22

s22

s22

From: To. Date:

Subject:

WHO & UN Engagement — International Health Policy Section Australian Government Department of Health and Ageing

Dear s22

We understand the work involved and will be Thank you for the message. We understand the work involved happy to receive the completed forms by end of April 2013.

erthe

RE: NCD Country Capacity Survey - your ref: WPDHP/NHP/CC32013 [SEC=UNCLASSIFIED]

Regards and best wishes

11/04/2013 15:57

s22

s22 From: of WHO@health [WHO@health.gov.au] ain au Sent 5 то: <mark>s22</mark> Subject: Fw: NCD Country Capacity Survey - your ref: WPDHP/NHP/CCS2013 [SEC=UNCLASSIFIED]

Dear SZ2

reter to your letter of 20 March 2013, requesting completion of the NCD Country Capacity Survey. The focal point for NCDs in the Department is currently compiling information for the survey. However, they have Country Capacity Survey. indicated it may be difficult to meet the deadline of 15 April 2013.

I would like to kindly request an extension of one week, until 22 April 2013.

I look forward to hearing from you.

Kind regards

s22

WHO & UN Engagement - International Health Policy Section Australian Government Department of Health and Ageing

s22

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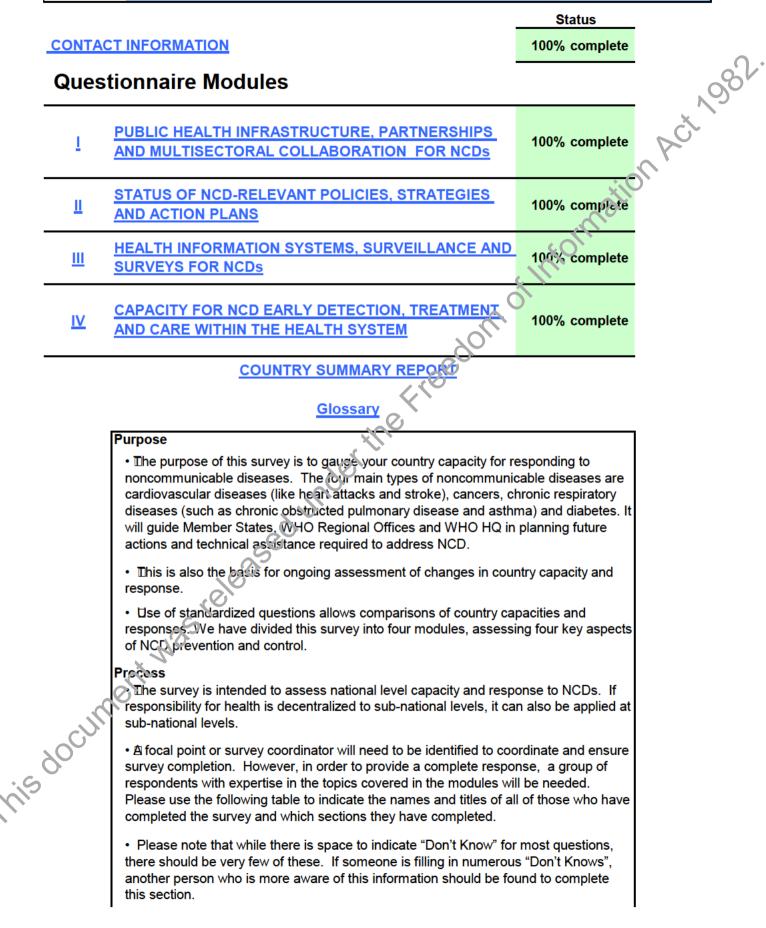
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2013 COUNTRY PROFILE OF CAPACITY AND RESPONSE TO NONCOMMUNICABLE DISEASES (NCDs)



CONTACT INFORMATION

COUNTRY NAME:

(select from drop-down list)

Australia

Completed 1

select from drop-down list)		
Who is the <u>focal point</u> for completion of this survey?		
Name Sally Goodspeed		
Position Assistant Secretary, Health in Social Policy Branch		1 Alexandre
Contact Information: (press alt+enter to create a new line)		- CP-
Ph: +61 2 62897035 email: sally.goodspeed@health.gov.au Address: GPO Box 9848, MDP856 Canberra ACT 2601, Australia	KOM	nation
Sections Completed by Focal Point: (select yes or no)	OT TO	
I PUBLIC HEALTH INFRASTRUCTURE, PARTNERSHES	no	~
II STATUS OF NCD-RELEVANT POLICIES, STRATEGIES AND ACTION PLANS	no	~
III HEALTH INFORMATION SYSTEMS, SURVEILLANCE AND SURVEYS FOR NCDs	no	~
IV CAPACITY FOR NCD EARLY DETECTION, TREATMENT AND CARE WITHIN THE PRIMARY HEALTH CARE SYSTEM	no	~

Name and contact information of others completing survey		tions pleted	Details on Work Done
10	_	Select	
No		Select	
E	III	Select	
CUMEN	IV	Select	
		Select	
		Select	
		Select	
	IV	Select	
0		Select	
		Select	
	- 111	Select	
	IV	Select	
		Select	
	11	Select	
	III	Select	
	IV	Select	
		Select	
	ii –	Select	
		Select	

IV Select

END OF CONTACT INFORMATION, GO TO PART I This document was released under the Freedom of Information Act 1982.

I: Public Health Infrastructure, Partnerships and Multisectoral Collaboration for NCDs

			Completed
1) Is there a unit/branch/departm with responsibility for NCDs?	ent in the Ministry of Health or equivalent	yes	✓
			C
1a) Does this responsit	bility include:		
	i) Planning	yes	
	ii) Coordination of implementation	yes	
	iii) Monitoring and evaluation	yes	
1b) Which areas are co	vered:		
	? i) Primary prevention & health promotion	yes	✓
	? ii) Early detection / screening	yes	\checkmark
	? iii) Health care and treatment	yes	✓
	iv) Surveillance, monitoring and evaluation	yes	\checkmark
	v) Capacity building	yes	\checkmark
	? vi) Rehabilitation services	no	✓
		Vec	✓
1c) Is there at least one	full-time person / staff member working on NCDs?	yes	v
· ·	tors addressed by any other government istry of Sport, Ministry of Education)?	yes	✓
3) Is there funding for the follow	ing NCD activities Hunctions?		
	? i) Primary prevention & health promotion	yes	\checkmark
	? ii) Farty detection / screening	yes	✓
	? iii) Health care and treatment	yes	✓
	N Surveillance, monitoring and evaluation	yes	✓
	v) Capacity building	yes	✓
	vi) Rehabilitation services	yes	\checkmark
2			
	sources of funding for NCDs?		
More than one can apply			
Largest source=1, Next la		4	✓
No	? General government revenues Health Insurance	1	•
X		3	· ·
	? International Donors	N/A	v
	? Earmarked taxes on alcohol, tobacco, etc.	N/A	v
	Other	N/A	\checkmark
Largest source=1, Next la			
	any of the following fiscal interventions?		
i) Taxation on alcohol		yes	\checkmark
ii) Taxation on tobacco		yes	\checkmark

- iii) Taxation on high sugar content food and non-alcoholic beverages no
- iv) Taxation on high fat foods

no

1

? v) Price subsidies for healthy foods? vi) Taxation incentives to promote physical activity	no no	√ √	
	110		
4a) What is the principal motivation for fiscal interventions? Influencing health beh	aviours	√	
5) Is there a formal multisectoral mechanism established to coordinate NCD policies?	yes	× , C	82.
5a) Indicate its stage: Operational			
6) Does your country have any partnerships / collaborations for implementing key activities related to NCDs?	yes		
6a) What are the main mechanisms for any partnerships / collaborations? More than one can apply	mat		
Cross-departmental/ministerial committee ? Inter-disciplinary committee ? Joint task force	yes no no	\checkmark	
Other	no	1	
6b) Which of the following are key stakeholders?			
Other Government Ministries (non-health, e.g. Ministry of Sport, Ministry of Education,	yes	\checkmark	
United Nations Agencies	no	√	
Other international institutions	no	√	
? Academia (inclucing research centres)	yes	~	
Nongovernmental organizations / community-based	yes	√	
Private Sector	yes	√	
Other	yes	~	
Picase specify other:		✓	
Comprehensive NCDs Content areas	yes	√	
Harmful use of alcohol	yes	\checkmark	
Unhealthy diet	yes	√	
Physical Inactivity	yes	√	
Tobacco	yes	√	
Cancer	yes	√	
Cardiovascular diseases	yes	v	
Chronic respiratory diseases	yes	√	
Diabetes	yes	√	
Hypertension	yes	√	
Overweight / obesity	yes	\checkmark	
Abnormal blood lipids	yes	~	
Schools Worksites	yes	v	
VVOINSILES	yes	v	



II: STATUS OF NCD-RELEVANT POLICIES, STRATEGIES AND ACTION PLANS

		Yes, in national health plan		√
	our country have a nationa egrates several NCDs and t	I NCD policy, strategy or action plan their risk factors?	yes	, o
ported in		pecific policies, strategies and action plans will be dule. Please do not report these policies,	7	C'L
	Is there a policy / strateg Is there an action plan?	y?	ves	√ √
? ?	Is it multisectoral? Is it multi-stakeholder?	& Intor	yes yes	√ √
	If there is more than one p information for the most re	olicy / strategy / action plan, please give the f cent one.	ollowing	
	2a) What is the title?	Several relevant strategies including National Chron Strategy	ic Disease	✓
	2b) Is there a website?	*NOX	no	V
	2c) Does it address one or n	nore of the following major risk factors?		
	Sec	Harmful use of alcohol Unhealthy diet Physical activity Tobacco	yes yes yes yes	\checkmark
	relea	Other Health inequalities	yes	√ √
	2d) Does it combine early de	etection, treatment and care for:		✓
	2e) Indicate it's stage:	? Cancer? Cardiovascular diseases? Chronic respiratory diseases? Diabetes	yes yes yes yes	* * *
20CN	2e) Indicate it's stage:	Overweight / obesity	yes Operational	√
2	20 i) What was the	first year of implementation?	2005	✓

SKIP TO QUESTION 4

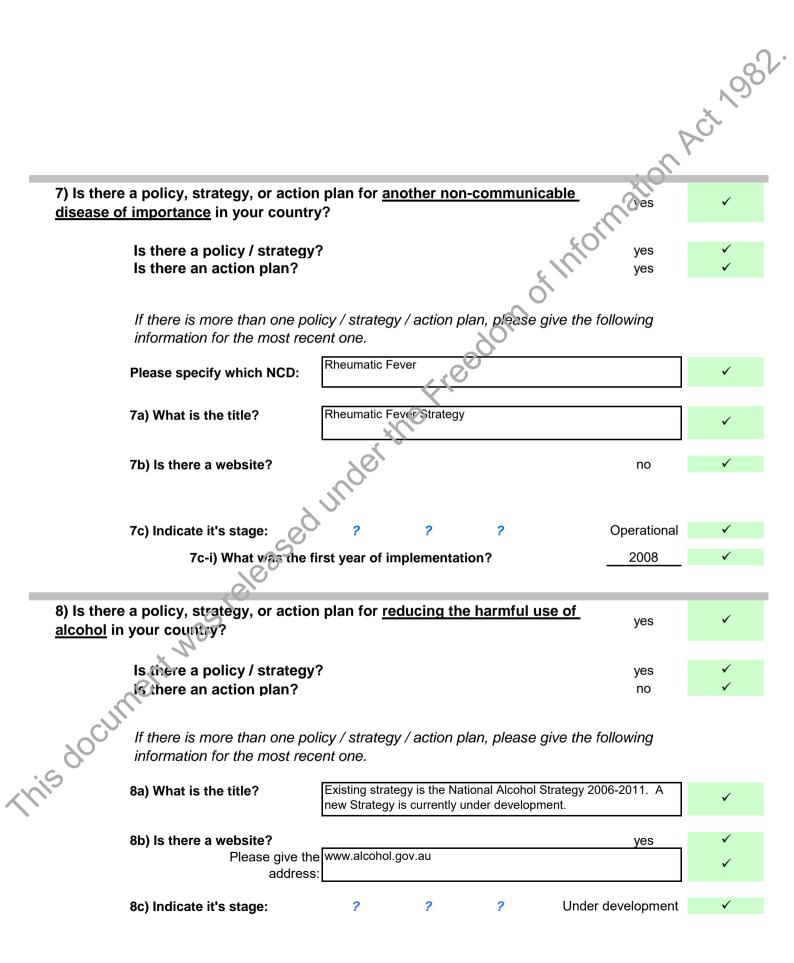
			1982
4) Is there a policy, strategy, or action	n plan for <u>cancer</u> in your country?	yes	
Is there a policy / strategy Is there an action plan?	?	yes Ves	√ √
If there is more than one pol information for the most rece	licy / strategy / action plan, please give the i ent one.	ollowing	
4a) What is the title?	National Cancer Workplan		\checkmark
4b) Is there a website?	1,1000 M	no	√
4c) Indicate it's stage:	? 0? ?	Operational	\checkmark
4c-i) What was the fi	irst year of implementation?	2012	✓
in your country?	n plan for <u>diabetes / raised blood glucose</u> QUESTION 6	no no	✓
his document was release			

6) Is there a policy, strategy, or action plan for <u>chronic respiratory disease</u> in your country?

no

✓

SKIP TO QUESTION 7



?	8d) Indicate the settings for any intervent policy/strategy/action plan.	tions under the		
	Mark all that apply or select "don't know	" at the bottom of the list if not		
	known.			
	? Health care	facility	yes	V
	Community School		yes	×
	School Workplace		yes	10
	Household		yes yes	101
	Other		yes	
		Licensed premises		-
	other:	·		
			<u></u> /	
0) le thore	a policy, strategy, or action plan for <u>r</u>	aducing overweight / obesity		
in your co		educing overweight / obesity	yes	\checkmark
iii your oo	and y :	4		
		κO		
	Is there a policy / strategy?		yes	V
	Is there an action plan?	K N	yes	\checkmark
		0`		
	If there is more than one policy / strateg	av / action plan, place give the	following	
	information for the most recent one.	jy / action plan, bisase give the l	lollowing	
		00		
	9a) What is the title? National par	tnership Agreement on Preventative He	ealth	
				\checkmark
	L			
	9b) Is there a website?	N ^O	yes	\checkmark
	Please give the http://www.h	waith.gov.au/internet/main/publishing.n	sf/content/phd-	1
	address: prevention-n	ıp		
	~00		• • • • •	
	9c) Indicate it's stage:	??	Operational	\checkmark
	On i) What was the that year of i	implementation?	2009	
	9c-i) What was the first year of i		2009	V
?	9d) Indicate the settings for any interven	tions under the		
<i>.</i>	policy/strategy/act on plan.			
	Mark all that opply or select "don't know	" at the bottom of the list if not		
	? Health care	facility	yes	\checkmark
	Community	5	yes	\checkmark
	School		yes	\checkmark
	Workplace		yes	\checkmark
	Household		yes	\checkmark
	Other		no	\checkmark
	Rnown. Rectified to the second secon			
8				
5				
10) Is the	e a policy, strategy, or action plan for	reducing physical inactivity in	1	
your cour		_	yes	\checkmark
Jour cour				
	Is there a policy / strategy?		yes	1
			VES	v
	Is there an action plan?		yes	\checkmark

Is there a policy / strategy?	
Is there an action plan?	

If there is more than one policy / strategy / action plan, please give the following information for the most recent one.

			ahin Aaroom	ent on Preventa	41	
	10a) What is the title?	National Partner	ship Agreen		ative Health	\checkmark
	10b) Is there a website?				yes	~
			h.gov.au/inte	rnet/main/publis	shing.nsf/content/phd-	1
	addre	ess: prevention-np				
	10c) Indicate it's stage:	?	?	?	Operational	x O
		he first year of im	nlomontatio	n 2	2009	
?	10d) Indicate the settings f policy/strategy/action plan	-	ons under ti	ne		
	Mark all that apply or sel known.	lect "don't know" at				
	known.	? Health care facil	lity		yes	\checkmark
		Community	it y		yes yes	\checkmark
		School			yes	
				omot	yes	↓
		Workplace		X	yes	
		Household		0	yes	√
		Other			no	\checkmark
-	re a policy, strategy, or ac	tion plan to <u>dec</u>	rease toba	acco use in j	your _{yes}	√
country?					VC3	•
, .		<i>.11</i>	Ø		,	
, .	Is there a policy / strate	gy?	Ø		yes	√
, .			Q			√ √
, -	Is there an action plan?	UNDE	۷ ۷		yes no	√ √
,		UNDE	Contraction plan	n, please give	yes no	√ √
	Is there an action plan?	olicy / strategy /	Caction plai	n, please giv	yes no	√ √
, .	Is there an action plan? If there is more than one information for the most	olicy / strategy /	-		yes no	√ √
, .	Is there an action plan?	o'icy / strategy /	-		yes no	√ √
	Is there an action plan? If there is more than one information for the most? 11a) What is the titl?? 11b) Is there 2 website?	policy / strategy / ecent one.	co Strategy 20	012-2018	yes no	✓ ✓ ✓
, , .	Is there an action plan? If there is more than one information for the most? 11a) What is the titl?? 11b) Is there 2 website?	o'icy / strategy /	co Strategy 20	012-2018	yes no	✓ ✓ ✓ ✓
, , .	Is there an action plan? If there is more than one information for the most? 11a) What is the titl?? 11b) Is there 2 website?	policy / strategy / ecent one. National Tobacc	co Strategy 20	012-2018	yes no	✓ ✓ ✓ ✓
	Is there an action plan? If there is more than one information for the most r 11a) What is the title? 11b) Is there ? website? Please give addre	policy / strategy / ecent one. National Tobacc	co Strategy 20	012-2018	yes no	✓ ✓ ✓ ✓ ✓
	Is there an action plan? If there is more than one information for the most r 11a) What is the title? 11b) Is there ? website? Please give addre	National Tobacc	o Strategy 20 ugstrategy.go	012-2018 v.au ?	yes no e the following yes	✓ ✓ ✓ ✓ ✓ ✓
	Is there an action plan? If there is more than one information for the most r 11a) What is the title? 11b) Is there ? website? Please give addre	policy / strategy / ecent one. National Tobacc the www.nationaldru ess: ? he first year of imp	igstrategy 20 igstrategy.go ? plementatio	012-2018 v.au ? on?	yes no e the following yes Operational	✓ ✓ ✓ ✓ ✓ ✓
	Is there an action plan? If there is more than one information for the most r 11a) What is the title? 11b) Is there ? website? Please give addre	National Tobacc National Tobacc the www.nationaldru ess: ? he first year of imp for any interventio	igstrategy 20 igstrategy.go ? plementatio	012-2018 v.au ? on?	yes no e the following yes Operational	✓ ✓ ✓ ✓ ✓ ✓
	Is there an action plan? If there is more than one information for the most of 11a) What is the title? 11b) Is there a website? Please give addre 11c) Indicate it's stage: 11c-i) What was the 11d) Indicate the settings of policy/strategy/action plan Mark all that apply or set	policy / strategy / ecent one. National Tobacc the www.nationaldru ess: ? he first year of imp for any intervention.	igstrategy 20 igstrategy.go ? plementations under the	012-2018 v.au ? on? ne	yes no e the following yes Operational 2012	✓ ✓ ✓ ✓ ✓ ✓
	Is there an action plan? If there is more than one information for the most r 11a) What is the title? 11b) Is there ? website? Please give addre	National Tobacc National Tobacc the www.nationaldru ess: ? he first year of imp for any intervention. lect "don't know" at	io Strategy 20 ugstrategy.go ? plementation ons under the bottom of	012-2018 v.au ? on? ne	yes no e the following yes Operational 2012	✓ ✓ ✓
	Is there an action plan? If there is more than one information for the most of 11a) What is the title? 11b) Is there a website? Please give addre 11c) Indicate it's stage: 11c-i) What was the 11d) Indicate the settings of policy/strategy/action plan Mark all that apply or set	National Tobacc National Tobacc the www.nationaldru ess: ? he first year of imp for any intervention. lect "don't know" at ? Health care facil	io Strategy 20 ugstrategy.go ? plementation ons under the bottom of	012-2018 v.au ? on? ne	yes no e the following yes Operational 2012	
	Is there an action plan? If there is more than one information for the most of 11a) What is the title? 11b) Is there a website? Please give addre 11c) Indicate it's stage: 11c-i) What was the 11d) Indicate the settings of policy/strategy/action plan Mark all that apply or set	National Tobacc National Tobacc the www.nationaldru ess: ? he first year of imp for any intervention. lect "don't know" at ? Health care facil Community	io Strategy 20 ugstrategy.go ? plementation ons under the bottom of	012-2018 v.au ? on? ne	yes no e the following yes Operational 2012	✓ ✓ ✓
	Is there an action plan? If there is more than one information for the most of 11a) What is the title? 11b) Is there a website? Please give addre 11c) Indicate it's stage: 11c-i) What was the 11d) Indicate the settings of policy/strategy/action plan Mark all that apply or set	National Tobacc National Tobacc the www.nationaldru ess: ? he first year of imp for any intervention. lect "don't know" at ? Health care facil	io Strategy 20 ugstrategy.go ? plementation ons under the bottom of	012-2018 v.au ? on? ne	yes no e the following yes Operational 2012	✓ ✓ ✓
	Is there an action plan? If there is more than one information for the most of 11a) What is the title? 11b) Is there a website? Please give addre 11c) Indicate it's stage: 11c-i) What was the 11d) Indicate the settings of policy/strategy/action plan Mark all that apply or set	National Tobacc National Tobacc the www.nationaldru ess: ? he first year of imp for any intervention. lect "don't know" at ? Health care facil Community	io Strategy 20 ugstrategy.go ? plementation ons under the bottom of	012-2018 v.au ? on? ne	yes no e the following yes Operational 2012 t yes yes	✓ ✓ ✓
20°2	Is there an action plan? If there is more than one information for the most of 11a) What is the title? 11b) Is there a website? Please give addre 11c) Indicate it's stage: 11c-i) What was the 11d) Indicate the settings of policy/strategy/action plan Mark all that apply or set	the www.nationaldru ess:	io Strategy 20 ugstrategy.go ? plementation ons under the bottom of	012-2018 v.au ? on? ne	yes no e the following yes yes Operational 2012	✓ ✓ ✓

 $\langle \gamma \rangle$

ountry?				
	Is there a policy / strateg	IV?	yes	✓
	Is there an action plan?		no	1
	If there is more than one p information for the most re	, ,	plan, please give the following	PCL
	12a) What is the title?	National Nutrition Policy	ilot.	✓
	12b) Is there a website?		kor no	✓
	12c) Indicato it's stage:	2 2	? Under development	t v
	12c) Indicate it's stage:			•
?	12d) Indicate the settings for	or any interventions unde	arthe	
	policy/strategy/action plan.		5	
		ect "don't know" at the botto	om of the list if not	
	known.	? Health care facility	yes	\checkmark
		Community	yes	\checkmark
		School	yes	\checkmark
		Wor'(p'ace	yes	\checkmark
		Household	yes	\checkmark
		Otner	no	\checkmark
	ease	,		
3) Is vou	r country implementing ar	ny policies to reduce th	e impact on	
hildren c	of marketing of foods and	non-alcoholic beverage	es high in saturated yes	\checkmark
	s-fatty acide, free sugars, o		,	
		0 0	voluntary/colf regulating	1
	13a) Are the policies:	???	voluntary/self-regulating	v
	13b) Are these targeted to:			
-CV	Schools		no	\checkmark
	? Broadcast media ((TV/Radio)	yes	1
<u> </u>		(e.g. billboards, magazin		1
	? Web-based social		no	\checkmark
	Sporting events		no	✓
) Is you	r country implementing ar	ny policies to promote	breastfeeding? yes	✓
-	14a) Are the policies:	???	voluntary/self-regulating	./
		· · · · · · · · · · · · · · · · · · ·	voluntarv/sell-redulating	V

 $\boldsymbol{\mathcal{X}}$

15a) Are the policies:	?	?	voluntary/self-regula	ating	\checkmark
16) Is your country implementing any? fatty acids and virtually eliminate induhydrogenated vegetable oils) in the formation of the second second	ustrially produ			yes	~
16a) Are the policies:	?	?	enforced through legi	slation	✓
17) Is your country implementing any consumption reduction?	policies that	promote	population salt	yes	1982
17a) Are the policies:	?	?	voluntary/self-regula	ating	C'
17b) Are these targeted at: ? Product reformulation ? Consumer awarenes				yes	* *
 18) Is NCD prevention and control inc policy, strategy or action plan that ad adolescents, women, indigenous peo cities)? 	dresses a spe	ecific tar	get population (e.g.	yes	✓
18a) What is the title?	Men's Health F	Policy, Nat	onic Disease Package, Na ional Women's Health Po		✓
is document was released	underth	¢`			

III. HEALTH INFORMATION SYSTEMS, SURVEILLANCE AND SURVEYS FOR NCDs

Completed 1) In your country, who has responsibility for surveillance of NCDs and their risk factors? Coordination is by an external agency, such as an NGO or statistical organization ACt 1982 III A: Data Included in the National Health Information System (National health information system refers to the annual or regular reporting system of the National Statistical Office or Ministry of Health) yestion 2) Does your country have a system for generating mortality by cause of death on a routine basis? ? 2a) Is there a civil / vital registration system? ves ? 2a-i) How is cause of death determined? Certification by a medical practitioner 2a-ii) Do the data include: Deaths occurring outside of medical facilities yes Deaths that occur in medical facilities yes 2a-iii) Can the data be aggregated by: Age yes Gender yes Other sociodemographic factor yes 2011 2a-iv) What is the latest year for which data is available? 2a-v) At the national level, who is responsible for the final data? **Central Statistics Office** 2b) Is there a sample registration system? no this documer

3) Does your country have a cancer registry?	yes	✓
3a) Is it national or subnational?	both	V
3b) Are the data population-based, hospital-based, or based or another specific subpopulation?		√
3c) What is the latest year for which data is available?	2010	1
III B: Risk Factor Surveillance		Č.
4) Have surveys of risk factors (may be a single risk factor or mult conducted in your country for any of the following:	iple) been	PO
4a) HARMFUL ALCOHOL USE	yes	✓
4a-i) Was there a survey on <u>adolescents</u> ? 1) Was the survey national or subnational? 2) Was it part of a multi-risk factor survey (e.g. GSH	yes national S) multi risk	√ √
or a standalone, single-issue survey? 3) What was the primary source of funding?	factor government funds	∨
4) When was the last survey conducted?	2011	✓
5) Are the results published?6) When is the next survey planned?	yes 2014	√ √
4a-ii) Was there a survey on <u>adults</u> ? 1) Was the survey national or subnational? 2) Was it part of a multi-risk tector survey (e.g. STEF	yes national PS) multi risk	√ √
or a standalone, single-issue survey? 3) What was the primary source of funding?	factor government funds	✓
4) When was the last survey conducted?	2010	✓
5) Are the results published?6) When is the next survey planned?	yes 2013	√ √
4b) LOW FRUIT AND VEGETABLE CONSUMPTION	yes	\checkmark
45) Was there a survey on <u>adolescents</u> ? 1) Was the survey national or subnational? 2) Was it part of a multi rick factor survey (a.g. CSH)	yes national S) multi risk	√ √
 4017 Was there a survey on <u>addrescents</u>? 1) Was the survey national or subnational? 2) Was it part of a multi-risk factor survey (e.g. GSHs or a standalone, single-issue survey? 3) What was the primary source of funding? 4) When was the last survey conducted? 	government funds	√ √
4) When was the last survey conducted?	2007	✓
5) Are the results published? 6) When is the next survey planned?	yes 2013	\checkmark
4b-ii) Was there a survey on <u>adults</u> ? 1) Was the survey national or subnational? 2) Was it part of a multi-risk factor survey (e.g. STEF or a standalone, single-issue survey?	yes national PS) multi risk factor	✓ ✓ ✓
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4) When was the last survey conducted?	1995	\checkmark
5) Are the results published?	yes	✓
6) When is the next survey planned?	2013	\checkmark
4c) PHYSICAL INACTIVITY	yes	✓
(a) Was there a survey on adelegeonts?	yes	
4c-i) Was there a survey on <u>adolescents</u> ? 1) Was the survey national or subnational?	national	
2) Was it part of a multi-risk factor survey (e.g. GSHS)	multi risk	a de la companya de
or a standalone, single-issue survey?	factor	AC
	government funds	1
	atio	
4) When was the last survey conducted?	2011	✓
5) Are the results published?	kO yes	✓
6) When is the next survey planned?	2015	\checkmark
4c-ii) Was there a survey on adults?	yes	✓
1) Was the survey national or subnational?	national	\checkmark
2) Was it part of a multi-risk factor survey (e.g. STEPS)	multi risk	
or a standalone, single-issue survey?	factor	·
3) What was the primary source of funding?	government funds	\checkmark
4) When was the last survey conducted?	2011	\checkmark
5) Are the results published?	yes	✓
6) When is the next survey planned?	2015	✓
4d) TOBACCO USE	yes	\checkmark
	-	
4d-i) Was there a survey or <u>adolescents</u> ?	yes	✓
1) Was the survey national or subnational?	national	\checkmark
2) Was it part of a multi-risk factor survey (e.g. GSHS)	multi risk	\checkmark
or a standalone, single-issue survey?	factor	\checkmark
3) What was the primary source of funding?	government funds	v
4) When was the last survey conducted?	2011	✓
5) Are the results published?	yes	✓
6) When is the next survey planned?	2014	\checkmark
		\checkmark
4d-ii) Was there a survey on <u>adults</u> ? 1) Was the survey national or subnational?	yes national	
2) Was it part of a multi-risk factor survey (e.g. STEPS)	multi risk	·
or a standalone, single-issue survey?	factor	\checkmark
	government funds	✓
4) When was the last survey conducted? D	2011	✓
5) Are the results published?	yes	\checkmark
6) When is the next survey planned?	2013	\checkmark
4e) RAISED BLOOD GLUCOSE / DIABETES	yes	\checkmark

1) Were the data measured or self-reported?	measured	\checkmark	
2) Was the survey national or subnational?	national	\checkmark	
3) Was it part of a multi-risk factor survey (e.g. STEPS)	multi risk	\checkmark	
or a standalone, single-issue survey?	factor	/	
4) What was the primary source of funding?	government funds	✓	
5) When were the left survey conducted?	2011		١.
5) When was the last survey conducted?	2011	6	
6) Are the results published?	no 2015	× O	,
7) When is the next survey planned?	2015	X	
4f) RAISED TOTAL CHOLESTEROL	yes	C	
		X	
1) Were the data measured or self-reported?	measured		
2) Was the survey national or subnational?	national	~	
3) Was it part of a multi-risk factor survey (e.g. STEPS)	mu'u risk factor	\checkmark	
or a standalone, single-issue survey? 4) What was the primary source of funding?	government funds	\checkmark	
4) What was the primary source of funding?	government funds		
5) When was the last survey conducted?	2011	\checkmark	
6) Are the results published?	no	\checkmark	
7) When is the next survey planned?	2015	\checkmark	
if when is the next survey plained.			
4g) RAISED BLOOD PRESSURE / HYPERTENSION	yes	✓	
		1	
1) Were the data measured or self-reported?	measured	√	
2) Was the survey national or subrational? 3) Was it part of a multi-risk factor survey (e.g. STEPS)	national multi risk	v	
or a standalone, single-issue survey?	factor	\checkmark	
4) What was the primary source of funding?	government funds	\checkmark	
6			
5) When was the last survey conducted?	2011	\checkmark	
6) Are the results published?	no	\checkmark	
7) When is the next survey planned?	2015	\checkmark	
4h) OVERWEIGHT AND OBESITY	yes	\checkmark	
NO			
4h-i) Was there a survey on <u>adolescents</u> ?	yes	\checkmark	
1) Were the data measured or self-reported?	measured	√	
2) Was the survey national or subnational?	national	\checkmark	
3) Was it part of a multi-risk factor survey (e.g. GSHS)	multi risk	\checkmark	
or a standalone, single-issue survey?	factor	✓	
4) What was the primary source of funding?	government funds	v	
S			
 Were the data measured or self-reported? Was the survey national or subnational? Was it part of a multi-risk factor survey (e.g. GSHS) or a standalone, single-issue survey? What was the primary source of funding? 5) When was the last survey conducted?	2014	\checkmark	
	2011	1	
6) Are the results published?7) When is the next survey planned?	yes 2015	× ✓	
4h-ii) Was there a survey on <u>adults</u> ?	yes	✓ /	
 Were the data measured or self-reported? Was the survey national or subnational? 	measured national	√ √	
3) Was the survey hatonal of subhatonal? 3) Was it part of a multi-risk factor survey (e.g. STEPS)	multi risk		
or a standalone, single-issue survey?	factor	√	
	100101		

	4) What was the primary source of funding?	government runus
4i) SALT /	 5) When was the last survey conducted? □ 6) Are the results published? 7) When is the next survey planned? 7 SODIUM INTAKE 1) Were the data measured or self-reported? 2) Was the survey national or subnational? 3) Was it part of a multi-risk factor survey (e.g. STE 	
	or a standalone, single-issue survey? 4) What was the primary source of funding?	factor government funds
	5) When was the last survey conducted?6) Are the results published?7) When is the next survey planned?	1995 yes 2013 ✓
	END OF PART III, GO TO PART IV	
this document	wasreleased under the Freedom	

government funds

√

4) What was the primary source of funding?

IV: CAPACITY FOR NCD PREVENTION, EARLY DETECTION, TREATMENT CARE WITHIN THE HEALTH SYSTEM

1) Which of the following components related to NCDs are provided in the health care system?

	Provided in the <u>Primary</u> Health Care System	Provided in the <u>Secondary</u> Health Care System	Provided in the <u>Tertiary</u> Health Care System
1a) Primary prevention and health promotion	yes	yes	yes 🍾
1b) Risk factor detection	yes	yes	yes
1c) Risk factor and disease management	yes	yes	yes
1d) Support for self help and self care	yes	yes	yeş
1e) Support for home-based care	yes	yes	Ves
1f) Rehabilitation services	yes	yes	yes

2) The table below concerns recognized / government approved evidence-based national guidelines/protocols/standards for the management of conditions for NCDs. Please fill in each

	Cardiovascular disease	Diabetes	Cancer	Chronic Respiratory	Tobacco dependence
2a) Are they available for the following conditions?	yes	yes	yes	no	yes
2b) Are they being implemented?	N/A	N/A	yes, partially	no	yes, partially

 \mathcal{O}

3) Indicate the availability of the following tests and procedures for early detection, diagnosis / monitoring of NCDs at the primary health care level.

Definitions: <u>Generally Available</u> : in 50% or more health care facilities <u>Generally not available</u> : in 50% of health care facilities

	Overweight and obesity	Availability in the public sector	Availability in the private sector	Are trained staff available?
	3a) Measuring of weight	generally available	generally available	generally available
	ob) Measuring of height	generally available	generally available	generally available
ć	Cancer			
90,	3c) Cervical cytology	generally available	generally available	generally available
this or	3d) Acetic acid visualization	generally not available	generally not available	generally not available
	3e) Faecal occult blood test or faecal immunological test	generally available	generally available	generally available
	3f) Bowel cancer screening by exam or colonoscopy	generally available	generally available	generally available
	3g) Breast cancer screening by palpation	generally available	generally available	generally available
	3h) Mammogram	generally available	generally available	generally available

Diabetes mellitus	Availability in the public sector	Availability in the private sector	Are trained staff available?	
3i) Blood glucose measurement	generally available	generally available	generally available	
3j) Oral glucose tolerance test	generally available	generally available	generally available	
3k) HbA1c test	generally available	generally available	generally available	
3l) Foot vibration perception by tuning fork or foot vascular status by Doppler	generally available	generally available	generally available	~
Cardiovascular disease			G	Þ
3m) Blood pressure measurement	generally available	generally available	generally available	
3n) Total cholesterol measurement	generally available	generally available	gereraily available	
3o) Urine strips for albumin assay	generally available	generally available	generally available	
Asthma and COPD		<u> </u>		
3p) Peak flow measurement spirometry	generally available	generally available	generally available	

4) Describe the availability of the medicines below in the public health sector.

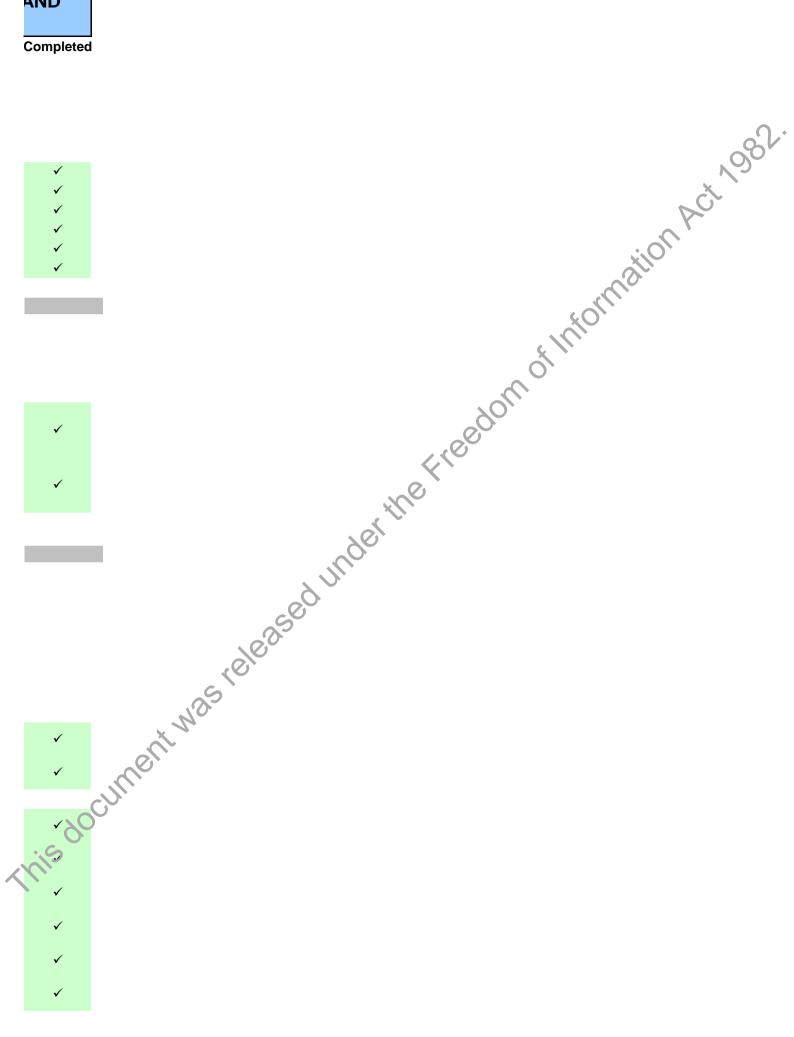
Definitions: <u>Generally Available</u>: in 50% or more pharmacies <u>Generally not available</u>: in less than 50% of pharmacies

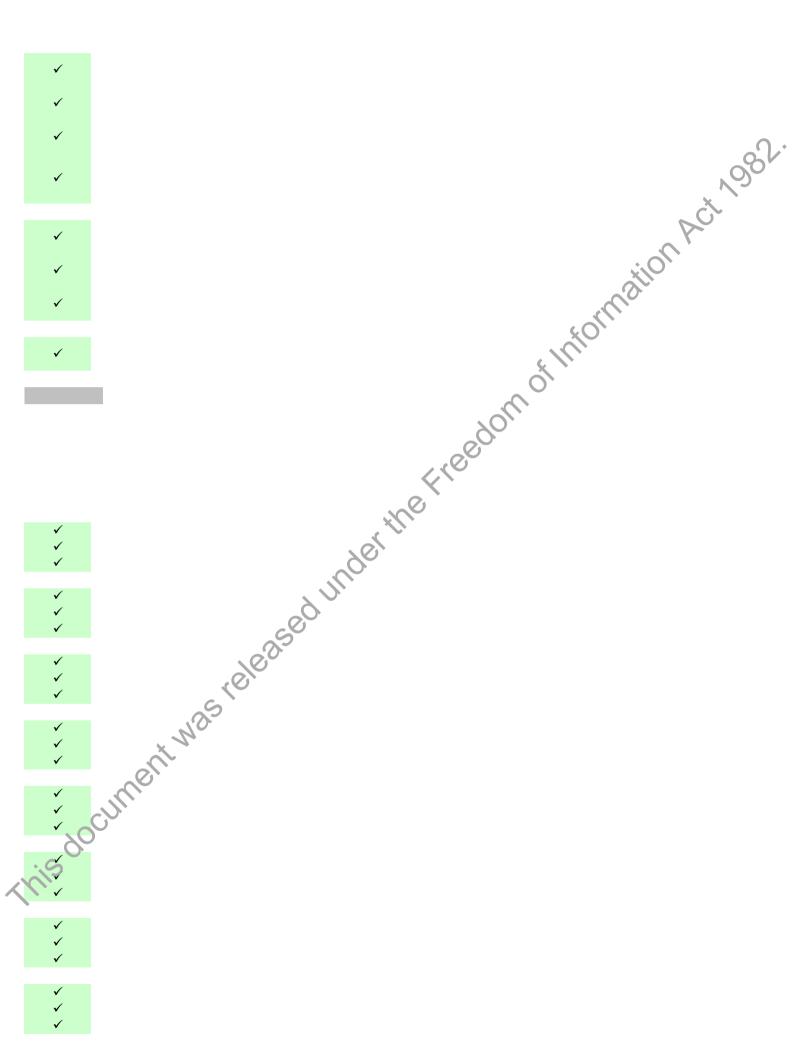
If your country does not have a list of essential medicines, please out "N/A" for the 3rd question for each medicine.

	4a) Insulin		ine	
		Availability		generally available
		Covered by health insurance or		yes
		Appears in the national list o es	sential medicines	N/A
	4b) Aspirin			
		Availability		generally available
		Covered by health insurance or p		yes
		Appears in the national list of ess	sential medicines	N/A
	4c) Metfori			
		Availability 🖉		generally available
		Covered by nealth insurance or p		yes
		Appears in the national list of ess	sential medicines	N/A
	4d) Thiazic	le Diuretics		
		Availability		generally available
	×	Covered by health insurance or p		yes
		Appears in the national list of ess	sential medicines	N/A
	4e) ACE In			
	<i>.(</i>) <i>.</i>	Availability		generally available
ć	N.	Covered by health insurance or p		yes
.0)	Appears in the national list of ess	sential medicines	N/A
wis doc	4f) CC Blo			
.5		Availability		generally available
		Covered by health insurance or p		yes
\sim		Appears in the national list of ess	sential medicines	N/A
·	4g) Statins			
		Availability		generally available
		Covered by health insurance or p		yes
		Appears in the national list of ess	sential medicines	N/A
	4h) Oral m	-		
		Availability		generally available
		Covered by health insurance or p	-	yes
		Appears in the national list of ess	sential medicines	N/A

4i) Steroid inhale	r	
Availa	bility	generally available
	ed by health insurance or publically funded	yes
	ars in the national list of essential medicines	N/A
4j) Bronchodilato Availa		generally available
	ed by health insurance or publically funded	generally available yes
	ars in the national list of essential medicines	N/A
4k) Nicotine repla	acement therapies	
Availa	•	generally available
	ed by health insurance or publically funded	yes
Арреа	ars in the national list of essential medicines	N/A
5) Indiante the evolution	we of the following managed upon for the otion NO	
b) indicate the availabilit public health system.	y of the following procedures for treating NCI	Ds in the
public health system.	Eq) Potingl photogoogulation	generally a vailable
	5a) Retinal photocoagulation	generally a valiable
	5b) transplantation	generally available
	5c) Radiotherapy	generally available
	5d) Chemotherapy	generally available
	5e) Coronary bypass or stenting	generally available
		0
6) Indicate the availabilit	ty of community/home care for people with	
-	NCDs (e.g. advanced cancer pain management	nt and
	quelae, and disability care).	
p		generally available
ENL	O OF QUESTIONNAIRE, CO TO SUMMARY	
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2013 COUNTRY PROFILE OF CAPACITY AND RESPONSE TO NONCOMMUNICABLE DISEASES (NCDs)

Profile for:	Australia
ublic Health Infrastructure, Partnerships a	nd Multisectoral Collaboration for NCDs
There is a unit / branch / department in the NCDs. Its responsibilities include: • planning • coordination of implementation	nd Multisectoral Collaboration for NCDs e ministry of health or equivalent with responsibility for • monitoring and evaluation g NCD activities / functions: n • surveillance, monitoring and evaluation • capacity building • rehabilitation services
There is funding available for the following • primary prevention & health promotio • early detection / screening • health care and treatment	g NCD activities / functions: n • surveillance, monitoring and evaluation • capacity building • rehabilitation services
Status of NCD-Relevant Policies, Strategies	s and Action Plans
There is an integrated NCD policy / strate	gy / action plan that is operational.
	ion plan addresses the following major risk factors:
the following major NCDs or conditions:	ion plan combines early detection, treatment and care for
 cancer cardiovascular diseases chronic respiratory diseases 	 diabetes overweight / obesity
There is a non-integrated policy, strategy,	or action platthat addresses:
 cancer harmful use of alcohol overweight / obesity 	physical inactivity troacco use u nealthy diet
Health Information Systems, Surveillance	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
There is a system for generating nortality	
There is a national cancer registry that is	population-based.
Risk factor surveys have been conducted	for the following:
harmful arcohol use     low fruit and vegetable consumption     physical inactivity     tobacco use     raised blood glucose / diabetes	<ul> <li>raised total cholesterol</li> <li>raised blood pressure / hypertension</li> <li>overweight and obesity</li> <li>salt / sodium intake</li> </ul>
Cocacity for NCD Prevention, Early Detect	ion, Treatment and Care Within the Health System
The following components related to NCD	is are integrated into the health care system:
<ul> <li>primary prevention and health promotent</li> <li>risk factor detection</li> <li>risk factor and disease management</li> </ul>	tion • support for self help and self care • support for home-based care • rehabilitation services

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## GLOSSARY

Academia	Refers to educational institutions, especially those for higher education.
Broadcast media	Media which is broadcast to the public through radio and television.
Cancer	A generic term for a large group of diseases that can affect any part of the body. Other terms used are malignant tumours and neoplasms. One defining feature of cancer is the rapid creation of abnormal cells that grow beyond their usual boundaries, and which can then invade adjoining parts of the body and spread to other organs.
Cancer registry	A systematic collection of data about cancer and tumour diseases.
Capacity	The ability to perform appropriate tasks effectively, efficiently and sustainably
Capacity building	The development of knowledge, skills, commitment, structures, systems and leadership to enable effective action.
Chronic respiratory diseases	Diseases of the airways and other structures of the lung. Some of the most common are: asthma, chronic obstructive pulmonary disease, occupational lung diseases and pulmonary hypertension.
Civil registration	The system by which a government records the vital events of its citizens and residents, such as births, deaths and marital status, and cause of death.
Collaboration	A recognized relationship between different or oups.
Community	A specific group of people, often living in a defined geographical area, who share a common culture, values and norms, are arranged in a social structure according to relationships which the community has developed over a period of time. Members of a community exhibit some awareness of their identity as a group, and share common needs and a commitment to meeting them.
Consumer awareness campaigns	An organized effort to give consumers more information about the need to reduce their salt consumption.
Determinants of health	The range of personal, social, economic and environmental factors which determine the health status of individuals or populations.
Diabetes	A disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces.
Early detection / screening	Measures preformed across an apparently healthy population in order to identify individuals who have risk factor or early stages of disease, but do not yet have symptoms.
Earmarked taxes	Taxes which are collected and used for a specific purpose.
Fiscal interventions	Measures taken by the government such as taxes and subsidies.
Free sugars	Monosaccharides and disaccharides added to foods by the manufacturer, cook or consumer, plus sugars naturally present in honey, syrups and fruit juices.
General government revenue	The money received from taxation, and other sources, such as privatisation of government assets, to help finance expenditures.

Health	A state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity. A resource for everyday life which permits people to lead an individually, socially and economically productive life. A positive concept emphasizing social and personal resources as well as physical capabilities.
Health behaviour	Any activity undertaken by an individual, regardless of actual or perceived health status, for the purpose of promoting, protecting or maintaining health, whether or not such behaviour is objectively effective towards that end.
Health care and treatment	the purpose of promoting, protecting or maintaining health, whether or not such behaviour is objectively effective towards that end. The diagnosis and treatment of diseases.
Health care facility	Facilities which provide health services. They may include mobile clinics, pharmacies, laboratories, specialty clinics, and private and faith-based establishments.
Health promotion	The process of enabling people to increase control over, and to improve their health.
Indigenous people	Ethnic groups that have historical ties to groups that existed in a territory prior to colonization or formation of a nation state, and which normally preserve a degree of cultural and political separation from the mainstream culture and political system of the nation state within the border of which the indigenous group is located.
Inter-disciplinary	Involving two or more professions, disciplines or departments.
International Code of Marketing of Breast-Milk Substitutes	An international health policy framework for creastfeeding promotion adopted by the World Health Assembly in 1981. The Code recommends restrictions on the marketing of breast- milk substitutes, such as infant formula to ensure that mothers are not discouraged from breastfeeding and that substitutes are used safely if needed.
International donors	Organizations which extero across national boundaries and which give funds for projects of a development nature.
Intervention	Any measure whose purpose is to improve health or alter the course of disease.
Legislation	A law or lave which have been enacted by the governing bodies in a country.
Marketing	Any form of commercial communication or message that is designed to, or has the effect of, increasing the recognition, appeal and/or consumption of particular products and services. It comprises anything that acts to advertise or otherwise promote a product or service.
Multisectoral	Involving agencies and organizations from the different sectors of society including government, NGOs, private-for profit, and civil society.
Multisectoral collaboration	A recognized relationship between part of parts of different sectors of society (such as ministries (e.g. health, education), agencies, non-government agencies, private for-profit sector and community representation) which has been formed to take action to achieve health outcomes in a way which is more effective, efficient or sustainable than might be achieved by the health sector acting alone.
Multi-stakeholder	Involving stakeholders from different agencies or organizations who may or may not be all within the same sector (e.g. health).

	National focal point, unit/department	<ul> <li><i>i. National focal point:</i> the person responsible for prevention and control of chronic diseases in a ministry of health or national institute.</li> <li><i>ii. Unit or department:</i> a unit or department with responsibility for NCD disease prevention and control in a ministry of health or national institute.</li> </ul>
	National health reporting system, survey and surveillance	<i>i National health reporting system:</i> The process by which a ministry of health produces annual health reports that summarize data on e.g. national health human resources, population demographics, health expenditures, health indicators such as mortality and morbidity. Includes the process of collecting data from various health information sources, e.g. disease registries, hospital admission or discharge data.
		<i>ii National survey:</i> A fixed or unfixed time interval survey on the main chronic diseases, or major risk factors common to chronic diseases.
		<i>iii Surveillance:</i> The systematic collection of data (through survey or registration) on risk factors, chronic diseases and their determinants for continuous analysis, interpretation and feedback.
	National integrated action plan	A concerted approach to addressing a multiplicity of issues within a chronic disease prevention and health promotion framework, targeting the major risk factors common to the main chronic diseases, including the integration of primary, secondary and tertiary prevention, health promotion and diseases prevention programmes across sectors and disciplines.
	National policy, strategy, or action plan	<ul> <li><i>i. Policy:</i> A specific official decision or set of decisions designed to carry out a course of action endorsed by a political body, including a set of goals, priorities and main directions for attaining these goals. The policy document may include a strategy to give effect to the policy.</li> <li><i>ii. Strategy:</i> a long term plan designed to achieve a particular goal.</li> <li><i>iii. Action plan:</i> A scheme of course of action, which may correspond to a policy or strategy, with defined activities indicating who does what (type of activities and people responsible for implementation), when (time frame), how and with what resources to accomplish an objective</li> </ul>
	National protocols / guidelines / standards for chronic diseases and conditions	A recommended evidence-based course of action to prevent a chronic disease or condition or to treat or manage a chronic disease or condition aiming to prevent complications, improve outcomes and quality of life of patients.
	NGO	Nongovernmental organization.
	Noncommunicable diseases (NCDs)	The four main types of noncommunicable diseases are cardiovascular diseases (like heart attacks and stroke), cancers, chronic respiratory diseases (such as chronic obstructed pulmonary disease and asthma) and diabetes.
	Noncommunicable diseases prevention and control	All activities related to surveillance, prevention and management of the chronic noncommunicable diseases.
~	Not in effect	Any policy, strategy or action plan which has been previously developed but for various reasons is not being implemented or which has only been partially developed and is no longer under development.
	Operational	A policy, strategy or plan of action which is being used and implemented in the country, and has resources and funding available to implement it.

Partnership for health	A voluntary agreement between two or more partners to work cooperatively towards a set of shared health outcomes (WHO, 1998).
Price subsidies	Economic benefit provided by the government (such as a tax allowance or duty rebate) to keep the price of healthy foods low.
Primary prevention	Measures directed towards preventing the initial occurrence of a disease or disorder.
Print media	Communicating with the public through printed materials such as magazines, newspapers and billboards.
Product reformulation by industry	Refers to the process of changing the composition of processed foods to be healthier and reduce the salt content.
Rehabilitation	A set of measures that assist individuals who experience, or are likely to experience, disability to achieve and maintain optimal functioning in interaction with their environments.
Rehabilitation services	Include rehabilitation medicine, therapy and assistive technology.
Risk factors associated with chronic non- communicable diseases	The most common risk factors are tobacco use, alcohol misuse, poor diet and low levels of physical activity.
Sample registration system	A method and procedure for estimating vital statistics in national and regional populations by intensively registering and verifying vital events in population samples. For instance, in India more than 4,000 rural and 2,000 u.ban sample units, with a total of more than 6 million persons, i.e., less than 1% of the total national population, are included in a sample registration system that provides a reasonably reliable picture of the national pattern of vital events at a cost that is feasible and reasonable.
Saturated fats	Fats found in animal products, including meat and whole milk dairy products, as well as certain plant oils like raim, palm kernel and coconut oils.
Self-regulation	In this context refers to when group or private sector entity governs or polices itself without outside assistance or influence.
Target	A specific aim to be achieved, should be time bound, and define a 'desired', 'promised', 'minimum' or 'aspirational' level of achievement.
Taskforce	A temporary group formed for the purpose of accomplishing a specific objective or activity.
Taxation incentiv	Involve removing the tax (or a portion of the tax) in order to promote increased use of goods or services to encourage physical activity.
Trans faith acids (trans fats)	A form of fatty acids. While trans fats do occur in tiny amounts in some foods, almost all the trans fats come from an industrial process that partially hydrogenates (adds hydrogen to) unsaturated fatty acids. Trans fats, then, are a form of processed vegetable oils.
Under development	Something which is still being developed or finalized and is not yet being implemented in the country.

Verbal autopsy	A method used to obtain cause of death by interviewing lay respondents on the signs and symptoms experienced by the deceased before death. It is used where vital registration systems are weak or the proportion of a population under medical care is low and there was no medical certification of the death.
Web-based social media	Web-based technologies to communicate between organizations, communities, and individuals. Common examples include Facebook and Twitter.
this document we	Web-based technologies to communicate between organizations, communities, and individuals. Common examples include Facebook and Twitter.