

Obesity Collective Response to the Centre for Disease Control Consultation Paper

December 2022

We thank the Department of Health and Aged Care for the opportunity to provide input into the planning and scope definition for the future Centre for Disease Control. Based on the consultation paper and with specific regard to the prevalence and health impacts of obesity in the Australian population, we provide the following comments on the overall proposal.

Positive:

- Commitment to establishment of a Centre for Disease Control is a necessary development for Australia
- We strongly support the scope including non-communicable disease (NCD) prevention. There is need for enhanced national coordination and collaboration and strong leadership for the environmental and health system changes that are required to provide effective prevention of NCDs and obesity-related disability
- It will be important to have one authoritative source of evidence-based communication to the public as well as to governments and health authorities that is trusted and avoids confusion and duplication or omissions
- If the centre can collect, manage, and report on national linked datasets (recognising and considering the role of the AIHW), it would be valuable for more effective research, planning and responses

Constructive:

- The mission and purpose statements need to be clearer regarding scope, role, and additional value beyond current services and structures in the health system.
- We need strong leadership and clear action on the most important and prevalent health challenges to Australian's health and wellbeing, one of which is obesity. For the CDC to provide this leadership, the new centre will need to have sufficient funding and authority to be effectively national – a centre that is formally linked to relevant Commonwealth and State and Territory health authorities. If this is not a fundamental role for the CDC, then it risks duplication of efforts and becoming another layer of bureaucracy in the already complex and dis-connected health arrangements that prevail in Australia and will be unhelpful in overcoming the silos that currently limit Australian health policies and services.
- The CDC should be given a mandate to provide strategic information and leadership for how the health system should evolve to meet contemporary health risks and challenges, taking into consideration current needs and how technology, population trends and global risks (like climate change) will impact future health needs.
- We strongly recommend chronic disease/preventive health advice and policies be considered in scope given the prevalence of these conditions in the population and their impacts on quality of life, health services demand and health expenditure. This requires better national collaboration and leadership and is particularly limited by the silos between governments, departments and between levels of health care in the Australian system. It is

now very clear that, to minimise risks from communicable diseases, it is important to reduce chronic disease impacts on the population, as shown by the mortality and morbidity impacts of the COVID-19 pandemic. The CDC in the US includes prevention in scope with the full title of the organisation being the 'Centers for Disease Control and Prevention.' We recommend prevention be included in the title in Australia as well to be clear about the authority and value to the community and system. The \$12 million still allocated to the Australian National Preventive Health Agency revealed in the recent October Budget statement should be reinvested in non-communicable disease prevention by transferring these funds to the new CDC, thereby emphasising that chronic disease is in its remit from inception.

- Obesity needs to be a priority as it is not only a major risk factor for both non-communicable diseases (NCD) and population resilience to communicable diseases, but clinical obesity is also an NCD in its own right, leading to pathological dysregulation of important biological processes, including metabolism, appetite control and endocrine activity. Obesity is a good example of a complex and multifaceted health issue that would benefit from an effective CDC organisation. We propose that the CDC should have a permanent expert advisory group on obesity and related health impacts, that includes a range of perspectives including prevention, treatment, lived experience and systems improvement.
- In relation to workforce, we encourage consideration of peer workers in public health emergency responses as well as preventive health.
- The recognition of the wider determinants of health and the need for cross portfolio action is positive. It would be good to articulate how a new CDC would link into a future Health and Wellbeing index and focus for Australia.

Preventive Health specific questions

How can the CDC foster a holistic approach across public health, including the domains of health protection, and promotion and disease prevention and control?

- The CDC should have an overarching principle to put the health and wellbeing of Australians first, above silos, vested interests, and political perspectives
- The CDC should lead a point of view on the role of multidisciplinary health care and the improvements to health arrangements in Australia that will be required to enable multi-disciplinary care to be established across and within the silos of government funding and acute, primary, and chronic health care models and service providers.

What role could the CDC have in implementing the goals of the National Preventive Health Strategy?

- The CDC could take responsibility for leading the implementation of the National Preventive Health Strategy and the National Obesity Strategy.
- It could identify and support the development and implementation of effective and cost-effective national policies that will improve the environments in which Australians live to help reduce risks of obesity and other chronic conditions
- Help improve investment in prevention and articulate which investments represent good value for money.

- Considering health equity and the potential reduction in other NCDs, improved access to evidence-based obesity treatment and support options are also needed. As noted above, the CDC could support the role of multidisciplinary health care across silos in the system.
- Initiatives require clear national leadership, to prioritise the community's health over potential vested interests and commercial determinants of ill-health.
- The National Preventive Health Strategy (NPHS) sets out an immensely important agenda for the promotion, maintenance, and support of optimal health for all Australians and the health consequences from overweight and obesity throughout are relevant and significant for each of the core aims of the strategy. The National Preventive Health strategy is not achievable without a close alignment and collaborative effort by the Commonwealth Government, state and territory and municipal governments, with strong engagement with business and industry, NGOs and community groups and the broader public.

Should the CDC have a role in assessing the efficacy of preventive health measures?

- The CDC should not only assess the efficacy but also the efficiency (cost-effectiveness) of preventive health policies.

How should the CDC engage across sectors outside its immediate remit (including portfolios with policy responsibility for wider determinants of health, culture, and disability)?

- The social determinants of health are critical for obesity, obesity related health issues, and other chronic conditions.
- Preventative health is relevant to all sectors and effective engagement with other sectors will require leadership, knowledge, trust, and accountability.
- The CDC can take a leadership role to:
 - o articulate and support actions for improvements to equity, poverty, and other wider determinants
 - o develop economic/change cases for action in other portfolios and help demonstrate how progress in these areas will benefit the sectors as well
 - o build longer term relationship for shared leadership, accountability, and credit.