



**ACT**  
Government

**ACT Health**

# Healthy Canberra

## ACT Preventive Health Plan 2020–2025



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ACT Health Directorate acknowledges the Traditional Custodians of the land, the Ngunnawal people. The Directorate respects their continuing culture and connections to the land and the unique contributions they make to the life of this area. It also acknowledges and welcomes Aboriginal and Torres Strait Islander peoples who are part of the community we serve.

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# Contents

FOREWORD	3	ENABLING ACTIVE LIVING	12
INTRODUCTION	4	INCREASING HEALTHY EATING	14
ABOUT THE HEALTHY CANBERRA: ACT PREVENTIVE HEALTH PLAN 2020–2025	5	REDUCING RISKY BEHAVIOURS	16
SUPPORTING CHILDREN AND FAMILIES	10	PROMOTING HEALTHY AGEING	20
		GOVERNANCE AND MONITORING	22





## Foreword (Minister for Health)



Canberrans enjoy one of the highest average standards of health and wellbeing in the world. We are fortunate to live in a city with clean air and clean water, and an environment that supports us to lead healthy and active lives.

Good health is the foundation of a good life and at the community level contributes to greater productivity, reduced inequality and a decreased demand for health services. The ACT Government wants all Canberrans to enjoy the highest standards of health at every stage of life and to participate fully in the opportunities our city has to offer.

The *Healthy Canberra: ACT Preventive Health Plan 2020–2025* (the *Healthy Canberra Plan*) sets the foundations for achieving that goal.

An important focus of the *Healthy Canberra Plan* is the prevention of chronic diseases, such as cancer, type 2 diabetes and cardiovascular disease. As a population, Canberrans have one of the highest life expectancies in the world. But while we are living longer, we are also living with a greater burden of chronic illness. Approximately half of all adults in the ACT report living with a long-term health condition.

The good news is that with strong, coordinated action we can reverse this statistic. More than a third of the total burden of disease is potentially avoidable by modifying common risk factors, such as tobacco smoking, alcohol consumption, unhealthy diets and physical inactivity. Intervening early when health issues arise is equally important and can help to slow or prevent the onset of disease.

The ACT Government is committed to supporting all Canberrans to make healthy lifestyle choices and to take the steps needed to prevent disease. We recognise that actions by the health sector alone will not be enough to meet this challenge. The *Healthy Canberra Plan* will be delivered in partnership with a wide range of stakeholders, including non-government organisations, communities, other government agencies, industry and researchers.

It will be important to know that what we deliver under the *Healthy Canberra Plan* is making a difference. An evaluation framework will therefore be developed to measure our success and, where needed, identify opportunities to recalibrate our efforts. I look forward to seeing the *Healthy Canberra Plan* put into action, in partnership with our community.

# Introduction



# About the Healthy Canberra: ACT Preventive Health Plan 2020–2025

**The *Healthy Canberra Plan* sets the foundations for reducing the prevalence of chronic disease and supporting good health across all stages of life. It articulates strategic priorities and areas for government-led action, taking into account the latest available evidence and needs of the ACT population.**

The *Healthy Canberra Plan* builds on the achievements of the Healthy Weight Initiative and aligns with a range of other ACT policies and strategies, illustrating the importance of public health and wellbeing across government. These include:

- » ACT Wellbeing Framework (to be launched in March 2020)

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- » ACT Aboriginal and Torres Strait Islander Agreement 2019–2028

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- » ACT Drug Strategy Action Plan 2018–2021

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- » Office for Mental Health and Wellbeing Work Plan

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- » The Best Start for Canberra’s Kids: The first 1,000 days (in development)

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- » ACT Women’s Plan 2016–2026

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- » ACT Government Response to Family Violence

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- » Hepatitis B, Hepatitis C, HIV and Sexually Transmissible Infections: ACT Statement of Priorities 2016–2020

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- » ACT Climate Change Strategy 2019–2025

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- » The ACT Cancer Screening Framework 2020–2025 (in development)

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The *Healthy Canberra Plan* has been developed with reference to relevant national plans and strategies.

## Guiding principles

Implementation of the *Healthy Canberra Plan* will be guided by the following principles:

- **Evidence-based policy** – learning from the evidence on what we know works, and putting that into practice, is key to good policy development and program design. This includes bringing together the best available research with local expertise to deliver effective outcomes.
- **Health at every stage of life** – the life course approach recognises the benefits of improving health and wellbeing at every stage of life, from preconception and pregnancy, childhood through to adulthood and older age. Adopting this approach means intervening at critical life stages to mitigate the causes, not the consequences, of ill health.
- **Equity** – some population groups, such as those living with disadvantage, are at higher risk of developing chronic disease. The goal of achieving a healthier Canberra will only be met by considering the needs of everyone in the community and ensuring that no one is left behind.
- **Innovation** – learning from experience, and finding innovative ways to build on available evidence, will be critical to delivering good outcomes for the Canberra community. This will include moving beyond ‘business as usual’ and embracing new approaches to preventive health. Robust evaluation will ensure that we continue to learn and adapt over time.

## Our approach

A comprehensive and coordinated approach is required to improve health and wellbeing outcomes for all Canberrans. Over a third of the total burden of disease in Australia is potentially preventable by addressing modifiable risk factors<sup>1</sup>. This cannot be achieved by the health sector alone. A broader approach that recognises and draws on the assets of individuals, organisations and communities will be required.

Evidence tells us that health and wellbeing is driven by a complex interaction of individual, lifestyle and environmental factors. The conditions in which we are born, grow, live, socialise, work and age have a significant impact on our health and wellbeing. These wider determinants must be considered when we design and deliver population health interventions.

While the *Healthy Canberra Plan* is a government-led strategy, its successful implementation will require joined-up action across all stakeholders with an interest in delivering better health outcomes for Canberrans. Ongoing opportunities for coordinated planning, policy alignment and program implementation will be prioritised as the Plan is progressed.



## Where are we now

On average, Canberrans enjoy good health and have one of the highest life expectancies in the world. People in the ACT are leading longer, healthier lives due to a range of factors, including improved control of many infectious diseases, safer living and working conditions, and advances in medicine and healthcare technology. However, there is still room for improvement. Many Canberrans are living with one or more chronic diseases, with health status varying markedly between population groups.

- In 2017–18, almost half of all adults, (48.7 per cent, approximately 196,200 people) in the ACT had at least one of the following chronic diseases: arthritis, asthma, back problems, cancer, chronic obstructive pulmonary disease, cardiovascular disease, diabetes, kidney disease, osteoporosis and mental health conditions. Of all adults, 20 per cent had two or more of these chronic diseases<sup>2</sup>.
- The prevalence of Canberra adults who are overweight or obese has increased from 40 per cent in 1995 to 64 per cent in 2017–18<sup>3</sup>. Carrying excess weight places individuals at increased risk of cardiovascular disease, type 2 diabetes, high blood pressure, musculoskeletal conditions and some cancers.
- Approximately one in four Canberra children are overweight or obese. Childhood obesity is associated with immediate health problems, including asthma, sleep disturbances, psychological ill health, and bone and joint complications, and earlier onset of conditions such as diabetes and heart disease.
- In 2016–17, potentially avoidable chronic diseases accounted for 2.4 per cent of all hospitalisations in the ACT.
- In 2017, 28.1 per cent of deaths in the ACT were due to cancer and 10.6 per cent were due to ischaemic heart disease—chronic diseases that are linked to modifiable lifestyle behaviours<sup>4</sup>.
- Recent Australian research shows that more than one third of cancers may be preventable through lifestyle modification. In particular, reducing exposure to the following risk factors: tobacco smoking; insufficient physical activity; excess body weight; alcohol consumption; dietary factors such as not eating enough vegetables, fruits and whole grains, and eating too much red or processed meat; exposure to ultraviolet (UV) radiation; unsafe sex or drug use; and occupational exposures and hazards<sup>5</sup>.
- A climbing trend in sexually transmitted infections increases the number of people at risk of chronic infections, chronic pain and infertility. Between 2014 and 2016 there were 3,818 cases of chlamydia, increasing from 1,196 in 2014 to 1,360 in 2016. Gonorrhoea rates also increased over the same period, from 119 in 2014 to 201 in 2016<sup>6</sup>.
- In 2017, only 25 per cent of people diagnosed with hepatitis C had received treatment. An estimated 37 per cent of people living with hepatitis B across Australia remain unaware of their infection status. Lack of symptoms in the early years of infection means that many cases are undiagnosed and progress to causing chronic disease including cancer.

The burden of disease is not experienced equally across all population groups in the ACT. Some groups are at greater risk.

- Chronic diseases occur more often and with greater effect among socioeconomically disadvantaged people<sup>7</sup>.
- Aboriginal and Torres Strait Islander people experience poorer health and have worse health outcomes than other Australians, with a burden of disease two to three times greater than the general Australian population. In addition, Aboriginal and Torres Strait Islander people:
  - » are more likely to die at a younger age (death rates are around five times that for non-Indigenous people in the 35 to 44 year age group)
  - » are more likely to experience disability, and
  - » are at least twice as likely to rate their health as fair or poor than non-indigenous Australians<sup>7</sup>.
- People experiencing mental health problems also often have poorer physical health outcomes than other people. National research shows that people with a mental or behavioural condition are more likely to have a range of chronic diseases, including respiratory diseases, diabetes (types 1 and 2 combined), cancer, and cardiovascular diseases<sup>8</sup>.
- In 2015–16 in the ACT, 7,700 women experienced some form of violence<sup>9</sup>. In Australia in 2015 partner violence was also ranked (by Disability Adjusted Life Years) as the third leading risk factor for women aged 25–44 years, behind child abuse and neglect during childhood, and illicit drug use<sup>1</sup>.
- In Australia, if no women had experienced partner violence, then in 2015 the disease burden would have been reduced by 41 per cent less homicide and violence; 18 per cent less early pregnancy loss; 19 per cent less suicide and self-inflicted injuries; 19 per cent less depressive disorders; 12 per cent less anxiety disorder; and 4 per cent less alcohol use<sup>1</sup>.

## Modifiable risk factors

A large proportion of the burden of disease is potentially preventable. Thirty-eight per cent of the total burden of disease experienced by Australians could be prevented by reducing modifiable risk factors<sup>1</sup>. The three leading behavioural risk factors are:

- tobacco use (responsible for 9.3 per cent of the total disease burden)
- dietary risks (7.3 per cent)
- alcohol use (4.5 per cent)<sup>1</sup>.

# A framework for action

## A prevention focus

The aim of the *Healthy Canberra Plan* is to support all Canberrans to be healthy and active at every stage of life. The Plan has a prevention focus, which means:

- empowering Canberrans with the knowledge, skills and attitudes to live well, and
- creating healthier places where we live, work, learn and socialise.

Where harms from unhealthy behaviours have already occurred:

- prioritising early detection and intervention to reset pathways and minimise ongoing harm.



## Better health for all

We know that individual population groups have different health needs and priorities. Through the *Healthy Canberra Plan* we will continue to work in partnership with the ACT community to tailor responses that meet the needs of all population groups at all stages, including:

- Aboriginal and Torres Strait Islander people
- people with a physical or intellectual disability
- people with a mental illness
- people experiencing homelessness
- people living with domestic and family violence
- people who are lesbian, gay, bisexual, trans and gender diverse, intersex and/or questioning (LGBTIQ+)
- people from culturally and linguistically diverse communities.

## Our priorities

The *Healthy Canberra Plan* sets a framework for coordinated action across the following priority areas:

- Supporting children and families
- Enabling active living
- Increasing healthy eating
- Reducing risky behaviours
- Promoting healthy ageing

These areas were selected using community and stakeholder feedback to the Wellbeing Framework, population health data included in *Healthy Canberra: Australian Capital Territory Chief Health Officer's Report 2018*, and the evidence for what we know works to improve health and wellbeing outcomes.

The priority areas will be supported by action plans that document detailed interventions, strategies and deliverables aimed at improving the health of all Canberrans. The action plans will be reviewed periodically over the life of the *Healthy Canberra Plan* to ensure our efforts remain responsive to emerging challenges and opportunities.

# Supporting children and families





## The need for action

The developmental periods of early life—starting at preconception—are a critical window of opportunity when the foundations for optimum health across the lifespan are established. We know that the health of infants and children is critically impacted by the safety, health and wellbeing of both mothers and families. A positive start in life helps children develop to their fullest and increases the likelihood that they will become healthy and resilient adults.

Conversely, children who have a poor start in life are more likely to develop learning, behavioural or emotional problems, which may have far-reaching consequences throughout their lives. These problems accrue to the whole society in the form of increased social inequality, reduced productivity and high costs associated with entrenched intergenerational disadvantage.

While most ACT children are doing well, some are falling behind. Data from the 2018 Australian Early Development Census show significant increases in the percentages of children who are developmentally vulnerable in the physical health and wellbeing, social competence and emotional maturity domains in the ACT in 2018 compared to 2015. Reversing this trend is a priority.

Parents and caregivers have the primary responsibility for their child's wellbeing, learning and development. However, all families need some level of support, starting in their child's first 1,000 days and continuing through childhood and adolescence.

### WHAT WE WANT TO ACHIEVE



**Families are supported to optimise the healthy development of their children in the first 1,000 days**



**More children are physically, socially and emotionally ready to start school**

# Enabling active living



## The need for action

Leading an active life improves our health and wellbeing. Moving more and sitting less has been shown to improve our physical and mental health, and can reduce the risk of developing chronic diseases such as type 2 diabetes, cardiovascular disease and some cancers. For children, being physically active is important for healthy growth, learning and development and establishes patterns of healthy behaviours leading into adulthood.

In 2018, 19.4 per cent of primary school students were meeting national physical activity guidelines<sup>10</sup>. In 2017, 17.3 per cent of high school students were meeting national physical activity guidelines<sup>11</sup>. The proportion of children aged 5-15 years exceeding screen time guidelines (two hours per day) was 46 per cent<sup>12</sup>. In 2018, 68 per cent of adults in the ACT were being physically active for 150 minutes or more a week on at least five separate occasions<sup>12</sup>.

Active travel, use of open spaces and participation in sport and recreation offer opportunities for Canberrans to be more physically active and socially connected. It is never too late to start leading an active life, with health benefits continuing well into older age.

### WHAT WE WANT TO ACHIEVE



**More adults and children using active modes of transport**



**More people participating in sport and active recreation across all stages of life**

# Increasing healthy eating





## The need for action

A nutritious diet is critical to good health. Eating well can help to maintain a healthy weight, prevent chronic disease and protect against premature death. During the early years, optimum nutrition is essential for normal growth, and physical and cognitive development, and establishes good eating patterns that can be carried into adulthood.

Much of the chronic disease due to poor nutrition is associated with the excess intake of 'discretionary' foods and drinks that are high in energy, saturated fat, added sugars and/or salt, and insufficient intakes of more nutritious foods.

For Canberrans, the amount spent on discretionary foods and drinks made up over half (between 50 and 60 per cent) of the total food spend in 2015<sup>13</sup>. Thirty-six per cent of children in the ACT consumed sugar-sweetened drinks at least weekly in 2017–18<sup>2</sup>. In contrast, only 6.8 per cent of adults and 3.5 per cent of children consumed enough vegetables in 2017–18<sup>2</sup>.

Food choices are influenced by our food environment, which includes our shops, sports venues, workplaces, schools and media channels. Too often these settings are dominated by unhealthy foods and drinks, which makes the healthy choice difficult. If meaningful and sustained changes in the way we eat are to be achieved, it is critical that our food environments are improved to make healthier choices easier for all Canberrans and their families.

### WHAT WE WANT TO ACHIEVE

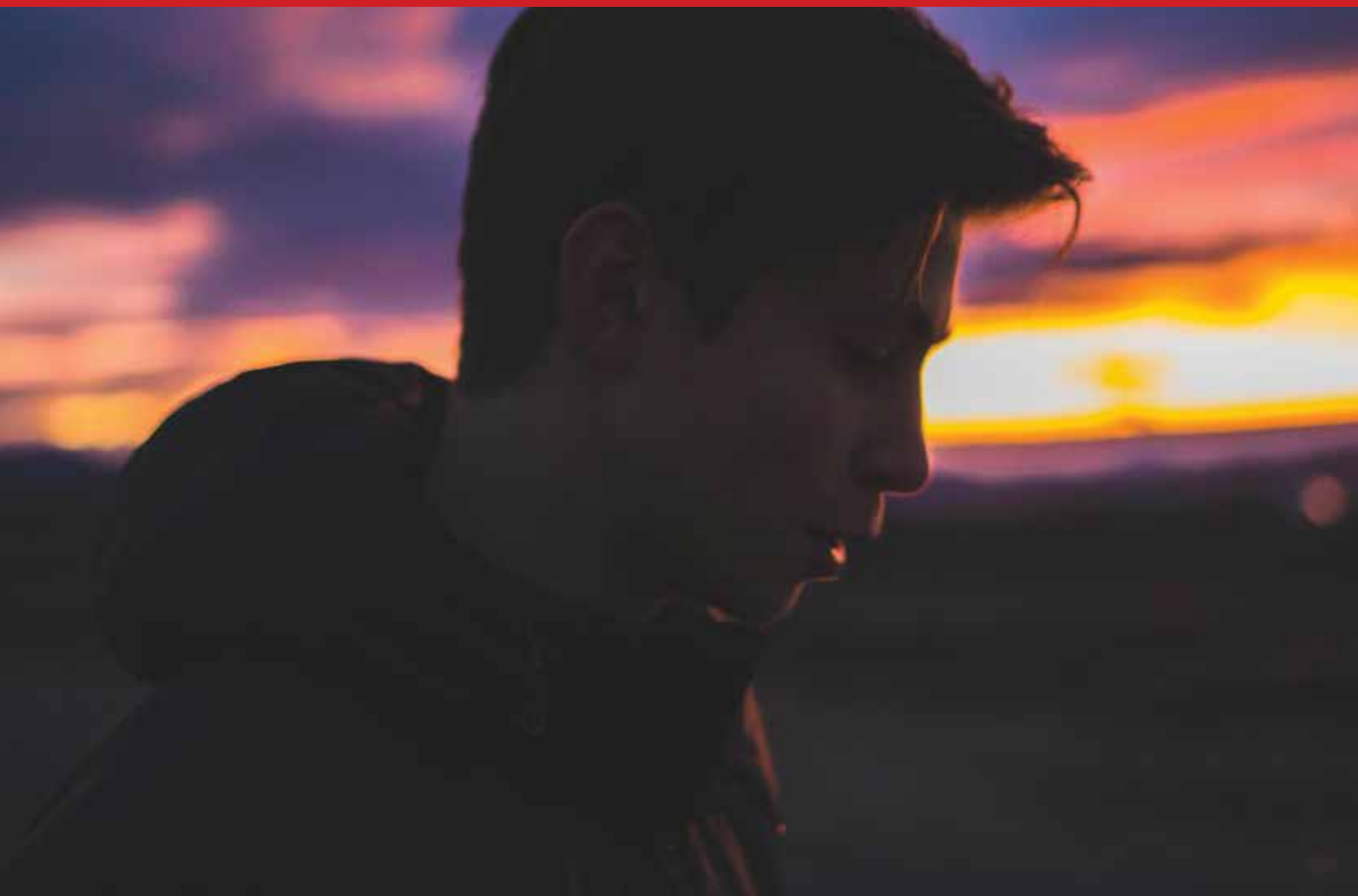


**Lower intakes of energy-dense, nutrient-poor (discretionary) foods and drinks**



**Increased consumption of vegetables**

# Reducing risky behaviours



## The need for action

Various risk-taking behaviours have been correlated with poor health outcomes, including smoking tobacco, abusing alcohol, engaging in violence, dangerous driving and having unsafe sex. These behaviours often emerge in adolescence, a stage of life when people may be vulnerable to the influences of peer pressure and popular culture. Risk-taking behaviours often co-occur and can have adverse implications for immediate and longer-term health and wellbeing. Patterns and levels of some risky behaviours differ between young men and young women, with prevalence often being higher among males. This is particularly the case with use of violence, where those who engage in all forms of violence are overwhelmingly male.

The good news is that the harms resulting from risk-taking behaviours are preventable, and if they have already occurred, early detection and intervention can reset trajectories and reduce ongoing harm.

## What we want to achieve

### WHAT WE WANT TO ACHIEVE



**Fewer young people engaging in risk-taking behaviours**



**Reduced ongoing harm from the consequences of risk-taking behaviours**

The following section outlines some of the key risk-taking behaviours associated with poor health outcomes in the ACT. Addressing these and other common risk-taking behaviours will be prioritised as the *Healthy Canberra Plan* is taken forward.

## Tobacco smoking

Tobacco smoking remains a leading cause of preventable death and disease in Australia. Smoking is responsible for the deaths of up to two-thirds of Australian smokers aged 45 years and over, and is a primary risk factor for various cancers, respiratory and cardiovascular diseases, and other related illnesses. Passive exposure to tobacco smoke can also cause a range of adverse health effects including lung cancer and heart disease.

Quitting smoking, at any age, has immediate benefits for health and wellbeing, and reduces the risk of developing tobacco-related disease<sup>14</sup>.

Fewer than 10 per cent of Canberrans smoke – the lowest proportion of adult daily smokers in Australia<sup>15</sup>. However, there are still sections of our community where smoking rates are substantially higher than one in ten, including among Aboriginal and Torres Strait Islander people, young pregnant women and those living with social and economic disadvantage.

The use of electronic cigarettes (e-cigarettes) is also emerging as a public health challenge, particularly among children and young people. Evidence now suggests that e-cigarettes may increase the risk of developing cardiovascular disease, cancer and respiratory diseases. In 2017, 10.5 per cent of surveyed ACT high school children aged 12 to 17 reported having tried e-cigarettes, including 18.4 per cent of 16 to 17 year olds. Males (12.5 per cent) were more likely than females (7.8 per cent) to report ever using e-cigarettes<sup>6</sup>.

### WHAT WE WANT TO ACHIEVE



**Fewer children and young people using smoking products, including e-cigarettes**



**Lower rates of smoking among population groups at higher risk, including Aboriginal and Torres Strait Islander people**



## Risky drinking

The harmful use of alcohol is a major contributor to death, disease, crime and violence, social problems, health and emergency service utilisation, and use of police resources. Long-term and regular alcohol consumption is associated with an increased risk of illness, including some cancers and cardiovascular disease.

Eighty-four per cent of Canberrans drink alcohol at levels considered low risk according to national guidelines – that is, no more than two standard alcoholic drinks on any day<sup>2</sup>. However, some groups continue to drink at harmful levels. In 2016, almost 40 per cent of those aged 18 to 24 years drank at single occasion risky levels (at least monthly). Approximately 22 per cent of males aged 14 years and older drank at lifetime risky levels.

### WHAT WE WANT TO ACHIEVE



**A delay in the average age when young people take their first drink**



**Fewer people drinking at risky levels**

## Sexually transmissible infections and blood borne viruses

In Australia, the median age of first sexual encounter is 17 years. The most recent National Survey of Australian Secondary Students and Sexual Health found that, of 2,000 students aged 15 to 18 years, 41 per cent did not use a condom the last time they had sex, placing them at risk of sexually transmissible infections (STIs)<sup>16</sup>.

STIs have increased dramatically in Australia, with more than 50 per cent of chlamydia cases and 30 per cent of gonorrhoea cases occurring in people aged under 25 years<sup>17</sup>. STIs have serious health consequences, with 10 per cent of chlamydia infections in women progressing to pelvic inflammatory disease and risk of tubal damage. Forty-five per cent of tubal factor infertility is due to chlamydia<sup>18</sup>.

### WHAT WE WANT TO ACHIEVE



**Fewer young people engaging in unsafe sex**



**Fewer people with chronic disease secondary to chronic blood-borne virus infection**

# Promoting healthy ageing



## The need for action

People in the ACT enjoy a relatively high life expectancy and can expect to live many of those years in good health. However, not all Canberrans are as healthy as they could be. Chronic diseases now cause most of the poor health and premature death in the ACT. Once established, these conditions often remain throughout a person's life, requiring long-term management by health professionals.

Many chronic diseases share common risk factors that are generally preventable. Evidence tells us that more than one third of cancers may be preventable through lifestyle modification. Recognising these risk factors and proactively reducing or eliminating them is an important strategy for maintaining good health into older age and reducing demand on the health care system. The poor physical and mental health frequently experienced in older age, is not an inevitable part of ageing.

The main risk factors for most chronic diseases, including dementia, are inadequate levels of physical activity, being overweight or obese, an unhealthy diet, excessive alcohol consumption, smoking and, to some extent, low levels of social activity and engagement. It is important to find ways to change the way Canberrans think about growing older and to keep people healthy, physically and mentally active, and engaged in the community.

Early intervention and prevention strategies that promote healthy lifestyle behaviours in midlife (45 to 65 years old) have great potential to delay and in some cases prevent age related chronic diseases. Promoting healthy lifestyles in older people (generally, over 65 years old) and encouraging early intervention and disease management also have an important role to play in keeping us healthier for longer. This can improve health and wellbeing in later life and reduce the projected social and health costs of our ageing population.

### WHAT WE WANT TO ACHIEVE



**To support positive ageing, more adults engaging in healthy and protective lifestyle behaviours related to their physical and mental health**

# Governance and monitoring

## Ongoing governance

A cross-government working group has been established to develop the action plans under the *Healthy Canberra Plan* and oversee their delivery. Directorate representation reflects relevant areas required to progress implementation.

Two, three-year action plans will be delivered under the Plan. The first action plan will cover the period from 2020 to 2022. The second action plan will cover 2023 to 2025.

Broader consultation and engagement will be critical, including in some instances the establishment of project-specific working groups, community consultation and co-design activities. Governance arrangements will extend to include stakeholder input and engagement as required.

## Monitoring

A performance and evaluation framework will be developed to measure success under the *Healthy Canberra Plan*. The framework will provide clear direction for all stakeholders on what needs to be achieved in the short and longer-terms, how we will measure and report on progress, and where we may need to recalibrate our efforts. The cross directorate working group will oversee development of the framework, including population-level indicators. Where relevant, the indicators will reflect those to which the ACT Government has committed under the *Wellbeing Framework*.

The performance and evaluation framework will be finalised by mid-2020. Progress reports on implementation activities will be released annually from 2021. Population-level indicators will be reported in 2022 and 2025, coinciding with the timeframe for delivery of each three-year action plan.

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