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| **Victoria’s Health:**Chief Health Officer’s report 2014 |
| April 2016  |

The Chief Health Officer produces a series of biennial reports that provide a comprehensive picture of the health and wellbeing of Victorians. The current edition covers the period to June 2014.

**What is new?**

For the first time, this report contains a chapter with detailed information on the nutrition and food patterns of children and adults.

**What is going well?**

* The health of Victorians is generally good, reflected in high levels of self-reported health and psychological wellbeing.
* Life expectancy is increasing, and good health is promoted by a reduction in risk factors such as smoking and access to key preventive interventions such as immunisation and screening programs.

**Some key challenges**

* The health of Aboriginal Victorians continues to be poorer than that of non-Aboriginal Victorians.
* There have been increases in some health conditions including cancer and some infectious diseases such as syphilis and salmonella.
* Type 2 diabetes prevalence increased about 50 per cent between 2003 and 2011-12.

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Focus on food and nutrition
Some key challenges:

* The greatest dietary challenge facing many Victorians is the excessive availability, promotion and intake of discretionary foods that have little or no nutritional value.
* Poor diet is the largest cause of early death and ill health and is estimated to cause 9.000 deaths a year in Victoria.
* One-third of Victorians’ energy (kilojoule) intake comes from ‘discretionary’ food and drinks – energy-dense items of little nutritional value. This is fuelling our epidemic of obesity and chronic disease such as type 2 diabetes.
* Two-thirds of Victorian adults consume too many kilojoules.
* More than one third of our sodium (salt) intake and nearly half of our sugar intake (42%) comes from discretionary foods.
* Only 1 in 10 adults and children eat enough vegetables and 5 in 10 adults and 8 in 10 children eat enough fruit.
* In everyday settings where the population works, commutes, learns and lives, less healthy choices dominate.

### How can the community respond?

* **Increase fruit and vegetable consumption** - each additional daily serve of fruit or vegetables is associated with a reduced risk of coronary heart disease and stroke, weight gain and some cancers.
* **Reduce sugary drinks** - drink water. Limit intake of sugary drinks associated with increased risk of weight gain such as soft drinks, cordials, fruit drinks, vitamin waters, energy and sports drinks.
* **Reduce intake of discretionary foods** - choose healthier options when buying takeaway food and eating out and reduce portion sizes.
* **Encourage the food industry to provide and promote healthier options** – ensure customers are offered less kilojoules, smaller serves, more fruit and vegetables and less salt when dining out.

### What is the Victorian Government doing?

* The Victorian Government supports a healthier Victoria by promoting a diet of healthy, sustainable and safe food consistent with the Australian Dietary Guidelines.
* The Victorian Government’s ***Healthy Choices*** food and drink guidelines aim to improve provision and promotion of healthier foods and drinks available in the community through retail outlets, vending machines and workplaces.
* The**Achievement Program**provides early childhood services, schools and workplaces with a quality improvement framework, best practice benchmarks, tools and resources to create healthier environments.
* The **Healthy Eating Advisory Service** provides nutrition mentorship, training, information and menu /vending assessments for early childhood services, schools, hospitals, workplaces, sport and recreation facilities and food industry.
* **Life! Helping prevent diabetes, heart disease and stroke program** supports people at high risk of diabetes and cardiovascular disease to adopt a healthy diet and active lifestyle. The program includes a culturally appropriate component for Aboriginal Victorians and people from culturally and linguistically diverse (CALD) backgrounds.
* **The Better Health Channel** is Australia’s leading provider of quality assured consumer health information.

Focus on sexual healthSome key challenges:

* Victorian syphilis notifications have increased in the last few years, with cases reported predominantly in gay and bisexual men.
* Syphilis is highly infectious, and can be transmitted by unprotected vaginal, anal and oral sex and skin to skin contact during sex.
* Syphilis infection increases both susceptibility to acquiring HIV infection and transmissibility of HIV infection.

### How can the community and health professionals respond?

* **Support screening** of groups at risk for syphilis control, along with partner notification and prevention education in all communities.
* **Annual screening** should be offered by health professionals to all gay and bisexual men and to HIV positive gay and bisexual men as part of routine HIV monitoring.
* **Screening up to four times** **a year** should be offered by health professionals to gay and bisexual men who meet the behavioural risk assessment criteria in the STIGMA Guidelines.

### What is the Victorian Government doing?

The Victorian Government is committed to reducing rates of sexually transmissible infections in the community by working with healthcare providers and community and advocacy groups to promote the best standards in testing, treatment and support services.

Key actions undertaken to date include:

* The Department of Health and Human Services convened a Victorian Syphilis Stakeholder Committee in 2013 to develop and implement a coordinated response to the increasing rates of infectious syphilis in Victoria, predominately affecting gay and bisexual men.
* A Chief Health Officer Advisory was issued in March 2014 and updated in July 2015 to reinforce screening (including syphilis opt out testing as part of routine HIV monitoring), partner notification and prevention education as key to the response.
* A reviewed and refocussed prevention campaign for affected groups includes community education campaigns (e.g. Victorian AIDS Council ‘Wayne and Kevin’ syphilis awareness video and Living Positive Victoria’s ‘Everything old is new again’ campaign), peer education and outreach activities.
* An enhanced partner notification approach at the Melbourne Sexual Health Centre involving routine referral to the department’s partner notification officers of all new infectious syphilis diagnoses.
* Expansion of the PRONTO rapid HIV testing service to include rapid syphilis testing.

To access a full copy of Victoria’s Health 2014, go to: <https://www2.health.vic.gov.au/about/key-staff/chief-health-officer/cho-publications>

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