A FRAMEWORK FOR PERFORMANCE REPORTING AND DRIVING WELLBEING OUTCOMES IN NSW

Organisation: Prevention Research Collaboration, Charles Perkins Centre, The University of Sydney

Date Received: 30 August 2024

Submission on NSW Performance and Wellbeing Indicators

Organisation: Prevention Research Collaboration, Charles Perkins Centre, The University of Sydney

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Date:　　　　　29th August 2024

About the Prevention Research Collaboration (PRC)

The PRC comprises a team of public health research and evaluation specialists who are based within the Charles Perkins Centre at the University of Sydney. For over two decades we have worked with the NSW Ministry of Health, the Office of Sport NSW, the Cancer Institute and a range of other agencies to support monitoring and policy and program evaluation to improve population health outcomes in NSW. The major focus of our work is the burden of chronic diseases, and the related risk factors of physical inactivity, smoking, poor nutrition and social isolation and loneliness. Further details about the history and scope of the work of the PRC are available in our most recent biennial report.[1]

Overview of submission on the NSW Performance and Wellbeing Framework

The PRC endorses the purpose and structure of the proposed NSW Government Performance and Wellbeing Framework. We agree that what we measure matters and believe that the development of this Framework and its component indicators can elevate the priority given to health and wellbeing outcomes across multiple Government portfolios.

The recommendations below pertain to the indicators under the 'Health' and 'Community' themes in the Framework, and to the 'Potential Wellbeing Metrics'. We also propose further indicators related to the quality of the built environment that would be valuable to incorporate within the Framework, under the 'Connected' or 'Housed' themes. We understand the preference for indicators that can be monitored using data that are routinely collected and have proposed suitable measures for the recommended indicators. Given the intention to undertake

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[1] Prevention Research Collaboration. PRC Biennial Report (July 2021 – June 2023). Available at:
https://www.sydney.edu.au/medicine-health/our-research/research-centres/prevention-research-collaboration.html

a data development strategy (referred on page 19 of the Framework document), we make suggestions for further measures that would enable monitoring of these indicators.

Indicators for the Health theme

Several suitable indicators related to physical activity are listed on page 25 in the Framework document. At present however, there is no indicator that explicitly addresses participation in strength, balance and coordination exercises, which are especially important for older people. According to the World Health Organisation Physical Activity Guidelines, older adults (65 years and over) should undertake "varied multicomponent physical activity that emphasizes functional balance and strength training at moderate or greater intensity, on 3 or more days a week".[2]

Regular participation in exercises that contribute to balance, strength and coordination is recognised as necessary for the maintenance of physical function and prevention of frailty and falls in older people.[3-4] Frailty and falls are policy priorities because they are major drivers of hospitalisation, loss of independence, and residential care admission.

The recommendations are:

Additional indicator	Participation by persons aged 65 years and over in strength, balance and coordination exercises at least three times per week.
Current measure	Participation in selected sports and recreation activities, measured by AusPlay survey data.
Recommended measure	Addition of questions about participation in strength and balance exercises in the NSW Population Health Survey.

Indicators for the Community theme

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[2] World Health Organisation, WHO guidelines on physical activity and sedentary behaviour, 2020. Available at: https://www.who.int/publications/i/item/9789240015128

[3] Dent E, Morley JE, Cruz-Jentoft AJ et al. Physical frailty: ICFSR international clinical practice guidelines for identification and management. The Journal of Nutrition, Health and Aging. 2019; 23:771-87.

[4] Sherrington C, Fairhall NJ, Wallbank GK et al. Exercise for preventing falls in older people living in the community. Cochrane Database of Systematic Reviews, 2019; 1: CD012424.

The indicators under the Community theme address the vital importance of social participation, community connection and the quality of social relationships. It is notable, however, that there are no indicators at present that address social isolation and loneliness. There is now a large body of evidence showing that social isolation and loneliness are independent causes of cardiovascular disease, depression, cognitive decline, engagement in risk behaviours, and premature death.[5-6] These experiences are also strongly related to overall quality of life, and appear to also predict workplace absenteeism and reduced productivity.

Within the Framework there is an indicator concerning 'Feeling part of the community' in the Potential Wellbeing Metrics section (page 54), but this is an aspect of broader social capital that is distinct from the strength and quality of immediate interpersonal relationships. Poor quality relationships (in the form of social isolation and/or loneliness) warrant specific indicators.

 The recommendations are:

Additional indicators	Social isolation and loneliness.
Current measure	Social isolation and loneliness measures derived from the Household Income and Labour Dynamics in Australia surveys.[7]
Recommended measure	Addition of the short forms of the Lubben Social Network Scale and UCLA Loneliness scale into the NSW Population Health Survey.

Indicators for Potential Wellbeing Metrics

The Potential Wellbeing Metrics pertaining to health include high level indicators about life expectancy and self-rated health, which are quite appropriate. An important population health metric that is not directly captured here concerns whether individuals are experiencing

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[5] United States Surgeon General. Our Epidemic of Loneliness and Social Isolation: The U.S. Surgeon General's Advisory on the Healing Effects of Social Connection and Community, 2023. Available at: https://www.hhs.gov/sites/default/files/surgeon-general-social-connection-advisory.pdf

[6] Holt-Lunstad J. Social connection as a public health issue: the evidence and a systemic framework for prioritizing the "social" in social determinants of health. Annual Review of Public Health. 2022; 43(1):193-213.

[7] Manera KE, Smith BJ, Owen KB, Phongsavan P, Lim MH. Psychometric assessment of scales for measuring loneliness and social isolation: an analysis of the household, income and labour dynamics in Australia (HILDA) survey. Health and Quality of Life Outcomes. 2022; 20(1):40.

disability-free years of life. This is a valuable summative indicator of the impacts of public health policy, programs and services.

The ability to mobilise and maintain functional independence has consequences for social role performance, community and workplace participation, and overall quality of life. Across the life course, and especially among older aged persons, this affects demands for health care and community support services.

The recommendations are:

Additional indicator	Living with physical impairments.
Current measure	Reported limitations to mobility and daily activities in the Household Income and Labour Dynamics in Australia survey.

Additional indicators relating to the built environment and wellbeing

The built environment plays a critical role in community wellbeing and sustainability.[8] There is strong evidence that residents who have access to public parks, recreational facilities, and who live in walkable communities are more likely to engage in regular physical activity.[9-10] Active lifestyles reduce people's risk of developing chronic health conditions including cardiovascular disease, type 2 diabetes and some cancer.[11] People living in walkable neighbourhoods are also more likely to feel socially connected with their community.[12] We therefore recommend that the following indicators are added under the 'Connected' or 'Housed' themes:

- Walkability indicator (e.g., 'Places are well-designed and sustainable')

- Access to parks/ public open space ('Places are well-designed and sustainable')

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[8] Crane M, Lloyd S, Haines A et al. Transforming cities for sustainability: a health perspective. Environment International. 2021; Vol 147; 106366.
[9] Ding D, Adams MA, Sallis et al. Perceived neighborhood environment and physical activity in 11 countries: do associations differ by country? Int J Beha Nutr Phys Act. 2013; 10: 57.
[10] Chong S, Byun R, Mazumdar S, Bauman A, Jalaludin B. Effects of distant green space on physical activity in Sydney, Australia. Journal of Physical Activity and Health. 2016; 14(1):29-35.
[11] Nyberg ST, Singh-Manoux A, Pentti J et al. Association of healthy lifestyle with years lived without major chronic diseases. JAMA Internal Medicine. 2020;180(5):760-768.
[12] Zhu X, Lu Z, Yu C et al. Walkable communities: impacts on residents' physical activity and social health. World Health Design. 2013;6(3):68-75.

- Access to walking paths and cycleway infrastructure ('Places are well-designed and sustainable')

These indicators[13] are already used by Local Health Districts to measure residents' health and wellbeing[14-15], although data are only available for major Australian cities and not for the whole state. We recognise that these indicators are not routinely collected through an existing monitoring system. However, given the intention to undertake a data development strategy, we recommend that these indicators be considered in the strategy to improve data availability and measure of these indicators.

Further information
The PRC is grateful for the opportunity to contribute to the public consultation about the proposed NSW Performance and Wellbeing Framework. If the NSW Treasury wishes to further discuss the recommendations we have put forward here, please contact:

Prof Ben Smith, Deputy Director –

Prof Philayrath Phongsavan, Director –

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[13] Murray K, Davern M (2023). AUO Cities and Indicators September 2024. RMIT University. Figure. https://doi.org/10.25439/rmt.24502525.v1

[14] Illawarra Shoalhaven Local Health District. Community Needs Assessment 2021. Measuring health and wellbeing for the ISLHD. Accesses: 29 August 2024.

[15] NSW Healthy Planning Expert Working Group. NSW Healthy Planning Action Resource No. 2. www.activelivingnsw.com.au/resources. Accessed: 29 August 2024.