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Dear Professor Rob Moodie,

The Flinders Human Behaviour and Health Research Unit has contributed to the specific questions from the taskforce via the consultation held in Adelaide on January 29, 2009. We would like to submit this further information in support of the work of the taskforce. This would primarily relate to the potential for direction for the National Prevention Taskforce overall as well as to potential strategies for interventions in the SNAPS (smoking, nutrition, alcohol, physical activity, stress) lifestyle risk factors for chronic disease.

Below is a summary of a lifestyle intervention program currently being evaluated by the Flinders Human Behaviour and Health Research Unit (FHBHRU), run by SA Health.

**“Do It For Life”: a lifestyle intervention program in South Australia**

The National Chronic Disease Strategy (NCDS) provides a national framework for improving chronic disease prevention and care across Australia. The Council of Australian Governments (COAG) have endorsed this with a priority on developing chronic disease self-management programs, including addressing prevention and early intervention for type 2 diabetes. State, territory and federal governments have jointly invested \$500 million in the Australian Better Health Initiative (ABHI) to implement the NCDS. At a State level, reform of the Health System is currently being implemented through South Australia’s Health Care Plan 2007-2016 and the Action Plan for Type 2 Diabetes. The Do It For Life Program is a key component within the Action Plan for Type 2 diabetes. This program targets Aboriginal and Torres Strait Islander, Culturally and Linguistically Diverse populations and those who are also at social disadvantage. It is also designed to address the national priorities for chronic disease overall, rather than just being restricted to diabetes.

The Do It For Life Program aims to reduce the number and / or severity of lifestyle risk factors a person has in order to prevent or delay the onset of preventable chronic disease in high risk population groups. Individuals and communities are supported to problem solve and address barriers to making lifestyle changes and are referred on to allied health and medical professionals for specialist interventions where necessary. A collaborative partnership between the Do it For Life worker, the participant and the multidisciplinary team will provide coordination, support for chronic disease prevention, early detection and monitoring.

The Flinders Human Behaviour and Health Research Unit (FHBHRU) received funding from the South Australian Department of Health (through South Australian Health Reform Out of Hospital funding) to develop an *Integrated Training Program for Prevention and Self-Management of Chronic Conditions for the South Australian Workforce*, specifically for the Do It For Life Program.

### **Methodology**

Project methodologies included:

- a comprehensive literature review (investigating prevention and self-management intervention options, knowledge and skills required by Do It For Life workers to provide effective prevention and self-management support and a consideration of population diversity and health equity issues with respect to the Do It For Life’s target groups)
- development and adaptation of a multiple behavioural risk assessment tool
- adaptation of the Flinders Model of Chronic Condition Self-management, including adaptation of the tools as well as the training program, to have a prevention focus
- piloting of the multiple behavioural risk assessment and Flinders model tools

### **Outcomes**

#### Multiple Behavioural Risk Assessment Tool (MBRAT)

The final version incorporated 4 evidenced-based validated questionnaires for assessment of smoking, physical activity, alcohol and stress and a nutrition questionnaire based on the Australian Guide to Healthy Eating. These were:

<b>Risk Factor</b>	<b>Final RFAT Tool included</b>
Smoking	The Fagerstrom Test of Nicotine Dependence (FTND)
Nutrition	Eat Well Quick Quiz
Physical Activity	Active Australia Survey (AAS)
Alcohol	Alcohol Use Disorders Identification Test (AUDIT)
Stress	DASS 21 Stress Questions

Evaluation of training with 36 lifestyle advisors and support officers showed an increased understanding of assessing lifestyle risk factors, along with an increase in confidence in using and interpreting the MBRAT.

#### Adapted Flinders Model (FM) of Chronic Condition Self-management

Adaptation of the adapted FM tools was completed with subsequent content adaptation completed for the manuals and training program. The adapted version of the Flinders Model of CCSM was renamed the *Flinders Living Well Program*, with the associated tools called the *Living Well Scale*, the *Living Well Cue and Response Interview*, the *Problem and Goals Assessment* and the *Flinders Living Well Action Plan*.

#### Piloting of tools and Flinders Living Well Program

Focus groups with health workers, consumers and carers provided a valuable source of information about the changes needed to the MBRAT and *Flinders Living Well Program* tools. As a result, there were significant changes to whole sections of some of the tools, particularly the RFAT and the *Living Well Scale* and *Living Well Cue and Response Interview*.

A pilot training program of the *Flinders Living Well Program* combined with use of the *Lifestyle Risk Factor Assessment Tool* was successfully undertaken with 36 lifestyle advisors and support

officers. Evaluation showed that the majority of participants found the material relevant and that they had an increased confidence in their ability to use a variety of self-management support strategies. All of the lifestyle workers have achieved their Certificate of Competency to use the self-management process.

It is clear from previous research that acquiring and delivering new skills to a workforce requires ongoing supervision and support from managers and training providers as well as system change to reinforce their new roles and skills. This will be crucial to the overall success of the Do It For Life as a whole.

The first stage of the evaluation of this program and its use of the MBRAT and Flinders Living Well self-management process will be completed by September 2009. An application for NHMRC funding has also been submitted to undertake and analysis of biomarkers of lifestyle intervention to support this evaluation process.

We believe this program offers great potential for addressing risk behaviours associated with the development of chronic disease, particularly in those high risk and vulnerable groups.

Kind regards,

Cassandra Hood  
Research Officer

On behalf of Professor Malcolm Battersby  
Director Flinders Human Behaviour and Health Research Unit