

Strategies to combat chronic respiratory diseases

Conference at the Directorate for Health and Social Affairs, 15.11.2007

My Ladies and Gentlemen,

My name is Wegard Harsvik, I am State Secretary in the Norwegian Ministry of Health and Care Services. It is an honour for me to speak for you today. On behalf of the Minister of Health and Care Services it is indeed a great pleasure for me to wish you all welcome to Oslo and to this Nordic seminar about "Strategies to combat chronic respiratory diseases". I hope you have had a pleasant stay so far, and that this day will give new knowledge and inspiration. The minister asked me to convey to you her regards and wishes for a fruitful meeting.

Although the Norwegian population is among the healthiest populations in the world, we do have challenges. We do see a major increase in non-communicable diseases, overweight and obesity – even among children and young people. Chronic respiratory diseases are major causes of morbidity in our country as in many other states, affecting children and adults, men and women alike, from all social settings.

Our ministry is responsible for all health-related legislation, as well as the running of hospitals, public health issues – and for primary health care. I strongly believe in the need for the Nordic and European countries to learn from each other in the health field, if we are to improve our own services at national level.

A strategy to combat asthma and allergies is a part of the broad Norwegian strategy on public health. The main focus is on factors that we know have effect on health. This is because:

• Each determinant of health often contributes to several different health problems.

• Focusing on factors that affects health helps to bring to light the responsibility of other sectors and policy areas for the health of the population.

• When action is aimed at known determinants, we can measure the results in form of reduced health risk before they develop into real disease and death in the population.

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Air quality is an example of health determinants. Improving air quality, outdoors and indoors, is then an important part of the Norwegian public health policy. Other sectors like transport, environment and industry must take responsibility in order to succeed. The health sector plays an important role, but is dependent on other sectors. •

Examples of strategies to ensure broader public responsibility for health are to integrate health issues in the overall public planning and decision making, and better documentation of the health effects from other sectors activities, by health impact assessments. • Partnerships with other sectors, non-governmental organizations and local and regional municipalities is an essential part of the public health strategy. The partnership model shall strengthen public

health work by securing a stronger foundation in democratic organs. Inter-sectorial and coordinated efforts at all levels – not at least at the local level – are of crucial importance. In addition to develop general strategies we have strategies on some prioritised areas, who in general involve several ministries:

National strategy to reduce social inequalities in health

Reducing social inequalities in health is one cornerstone in our public health policy. Public health efforts must be based on society assuming an increased responsibility for the population's health. This is not to disregard each individual's responsibility for their own health. It is important to respect the right of the individual to make his or her own choices. However, the individual's sphere of action is being constantly narrowed under the influence by factors beyond personal control. Even lifestyle choices such as smoking, physical activity and diet are influenced by socioeconomic background factors not necessarily deliberately chosen.

Action plan on physical activity 2005 - 2009

The National Action Plan on physical activity 2005-2009; Working together for physical activity; includes a range of different actions to be taken to increase physical activity, from leisure time, in schools and by active transports. Å Å

National strategy for tobacco control 2006-2010.

The Tobacco Law of 2004 banned smoking from 1 June 2004 wherever food and/or drinks are served and where these items are consumed. The main purpose of the Act was to protect employees and other guests against passive smoking. Other initiatives include school-based programs and campaigns against smoking in the mass media.

Environmental and health strategy for children and youth (2007-2016)

The objective is to promote the best possible environmental and health conditions for people aged 0-20, and meet these challenges through cross-sectorial effort.

A part of this strategy is to develop a system for monitor key indicators and every second or third year to present a coordinated statistical view of the environment and health of young people: Å A national Children's Barometer Å

Other strategies are Diet action plan (2007-2011) and National Diabetes Strategy. The Government is concerned about the development within this field. In a recent study from Norway were 1000 children in Oslo from birth until ten years were followed show that 20 percent of the children had problems with asthma. In Norway acute asthma is the most common cause of hospitalization of children Å

Strategic challenges regarding asthma and allergy

Higher recognition of asthma and allergy

In order to achieve the necessary priority in the health care system and to increase the society's effort to reduce the causes, it is first important to improve the recognition of chronic diseases like asthma and allergy. It is also important to distinguish between asthma as a potentially deadly disease, and other allergies which in some cases are less threatening. It is important that relevant public and private organizations understand the scope of these diseases as a health problem for over 1 million Norwegians and the socio-economic impact on society.

Reduce risk factors

The norwegian government wants to strengthen and coordinate the focus on a more equal and fair distribution of good health. This does not just make demands of the health service, it also makes demands of all sectors of society that affect public health. The most common and well-known causes that triggers asthma and allergy are tobacco, air pollution, pollen and factors related to indoor climate. Reduction of negative health effects demands that we recognize these factors as important triggers for asthma and allergy. Simultaneously, it is necessary that other sectors outside the health field also contribute with measures to reduce the negative health effects.

Improving systems for early and correct diagnoses

We have set ambitious goals for the health service in Norway. We want the services to be of a high quality, to be available within acceptable waiting times and distances, and the provision to reach out to everyone regardless of their financial situation, social status, age, gender and ethnic background. These high ambitions have to a great extent been realised and we have a health service that is among the best in the world.

At the same time we acknowledge that there are deficiencies and challenges in a number of areas, which show there is still much that can be improved.

It is an important challenge for the doctors to make the right diagnose as early as possible. The reason for delay is partly because of lack of knowledge in the health care system, and partly because the tools are not updated and known amongst the personnel. Medical developments assume access to advanced diagnostics and treatments that often requires specialist competence. High quality local health services shall be organised and developed in cooperation with municipal health services and pre-hospital services.

Better treatment and learning systems

After a correct diagnose has been made it is an important challenge that the treatment system does not always include training of patients and next of kin in coping with their illness. We want users to know about the services and that they are meant to participate and influence. Users and their relatives are experts concerning their own situation and what they can master. This resource can be utilised better in the treatment and rehabilitation of patients. A majority of today's patients are active users who want to receive good information so that they can make good decisions themselves to improve their own health.

In recent years the development has been improving, thus the medical treatment as of today is relatively satisfying, but these are chronic diseases and patients will have to learn have to live with their illnesses. Knowledge and coping mechanisms must be integrated as a natural part of the treatment scheme. Good coping requires high quality guiding and good learning material.

Increased research

There is a need to increase basic knowledge about and research in asthma and allergy. Well established knowledge is decisive in order to reach the challenges in front of us. We need knowledge of the causes related to why asthma and allergy are increasing. Better knowledge leads to better and more effective measures to combat asthma and allergy. Therefore it is important to increase research in this field.

Main goal

Against this background, the Government wishes to revitalize the challenges regarding asthma and allergy. The aims are to:

• Stop the increase, and gradually reduce the occurrence of asthma and allergy, particularly amongst children under 12 years

• Secure that all people with these illnesses have best possible living conditions

Thank you for the attention.