

# GLOBAL HEALTH at the george

Issue 23 | March 2012

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## CHRONIC DISEASE SHOULDN'T EQUAL ECONOMIC HARDSHIP



Photo courtesy Queensland Health

FOR THE INCREASING NUMBER OF INDIVIDUALS LIVING WITH CHRONIC DISEASES, THE COST OF TREATMENT AND ONGOING MANAGEMENT IS FORCING MANY INTO ECONOMIC HARDSHIP AND POVERTY. IN TURN, FINANCIAL STRESS PROMOTES POOR HEALTH, WHICH EXACERBATES HEALTHCARE COSTS... AND SO THE CYCLE OF POVERTY AND ILLNESS BEGINS.

This is not about government health budgets and health systems, but about the burden of chronic disease and disability on individuals and their households. These are the people falling through the cracks, who urgently need support to break the catastrophic cycle of ill health and disadvantage.

Researchers from The George Institute and Menzies Centre for Health Policy at the University of Sydney are calling for a renewed focus on healthcare reform and targeted support to provide relief for patients.

In their recent review published in the *Medical Journal of Australia*, researchers revealed the expensive nature of chronic disease in Australia, highlighting hefty out-of-pocket expenses compared to many other high-income countries across the world. This is despite nation-wide healthcare and free public hospital system.

"Australians are spending more of their own money to try and maintain their quality of life and public health spending is lower than in comparable high-income countries. The most direct manner in which the economic impact of illness is felt is through

out-of-pocket costs of care such as home modifications, equipment and transport. Among OECD countries, Australians pay the third highest level of such expenses, more than the UK, France and New Zealand", according to lead author, Dr Stephen Jan of The George Institute.

Evidence is increasingly coming to light that suggests people with chronic illness are experiencing catastrophic levels of healthcare spending - defined as out-of-pocket costs exceeding 10 per cent of income. Notably, of the 28,665 Australians who became bankrupt in 2009, 11 per cent cited ill health or absence of health insurance as the primary reason.

While the issue isn't as marked as in the United States, where ill health was responsible for 62% of bankruptcies in 2007, healthcare reform has significant potential to address this hardship in Australia.

Dr Jan believes it is hard to justify maintaining current policies over the next decade, a position advocated by

the National Health and Hospitals Reform Commission in Australia.

"Initially, priority needs to be given to developing a consistent approach to record costs associated with chronic illnesses and disabilities and how those costs impact on a person's likelihood to maintain treatment. That way, we could rapidly implement effective remedies to catastrophic healthcare spending at the household level. Focused income support, intervention and subsidies for specific items such as home care, or bathroom modifications may save people from severe economic hardship, and transform lives".

Meaningful improvement is also possible through small-scale targeted strategies. Such strategies would focus on populations where the financial stress is felt the most: retirees and those in low-socioeconomic groups.

"These measures would identify and help catch the individuals and households that are currently falling through the cracks", added Dr Jan.

### This issue



**P2** HEALTHCARE INNOVATION

Australian iPhone app, FoodSwitch ranked number one



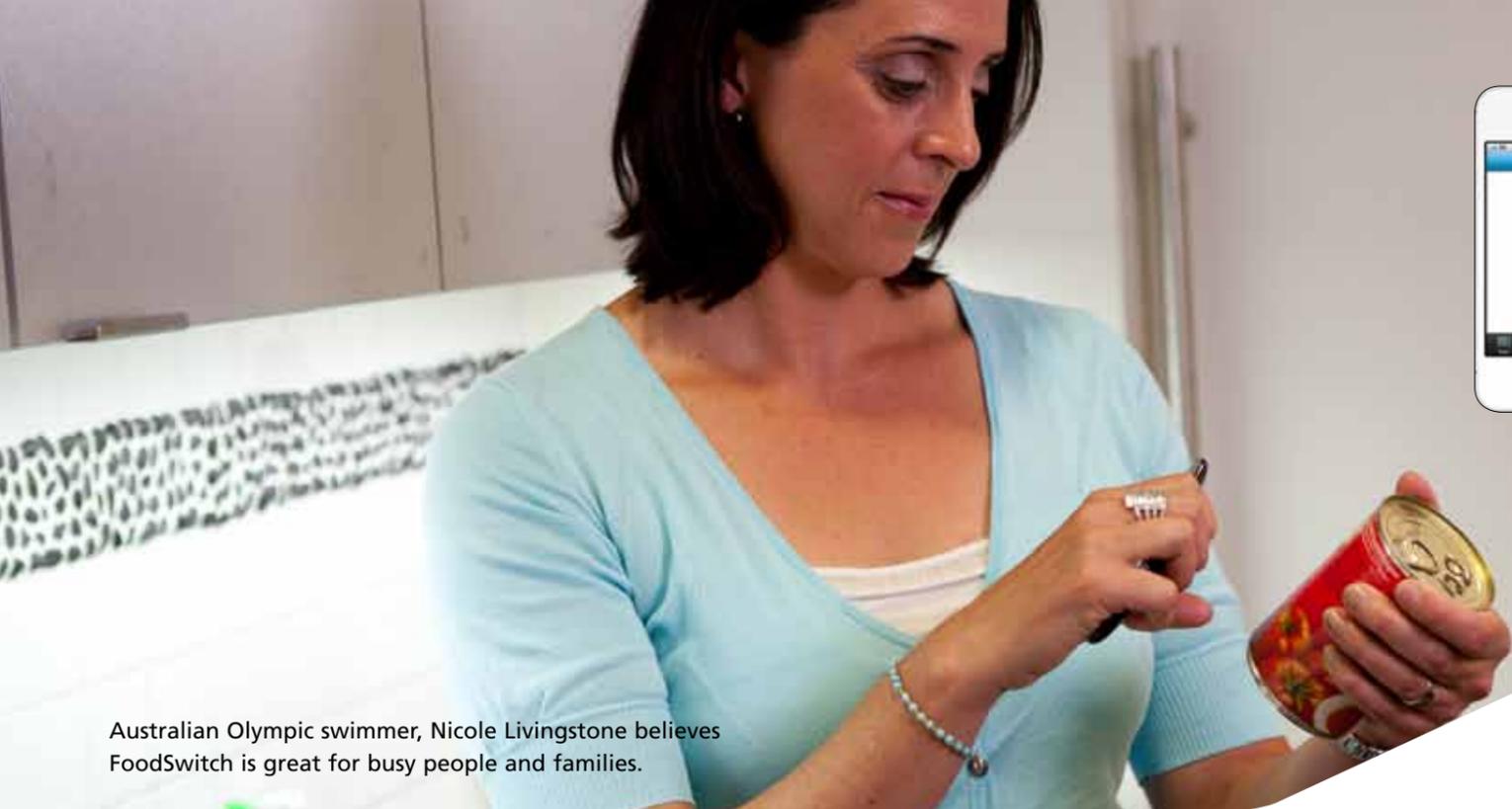
**P3** DISADVANTAGED POPULATIONS

UNICEF calls for attention on adolescents



**P4** INJURY, AGEING AND DISABILITY

Cycle helmet use, low in children



Australian Olympic swimmer, Nicole Livingstone believes FoodSwitch is great for busy people and families.

HEALTHCARE INNOVATION

## PARTNERING FOR HEALTHIER FOOD AND STRONGER BODIES – AUSTRALIAN IPHONE APP, FOODSWITCH, RANKED NUMBER ONE



Developed in partnership with Bupa

**IT IS WIDELY ACCEPTED THAT DIET PLAYS A KEY ROLE IN THE DEVELOPMENT OR PREVENTION OF CHRONIC DISEASE AND THAT POOR FOOD DECISIONS CAN LEAD TO HIGH BLOOD PRESSURE, TYPE 2 DIABETES AND OBESITY, WHICH ALL INCREASE AN INDIVIDUAL'S RISK OF HEART ATTACK AND STROKE. BETTER FOODS HAVE THE POTENTIAL TO REDUCE THIS RISK, AND WHEN APPLIED TO A LARGE POPULATION, SUCH A REDUCTION IN RISK HAS FLOW-ON BENEFITS FOR STRUGGLING HEALTHCARE SYSTEMS.**

For these reasons, The George Institute and Bupa – one of Australia's leading healthcare organisations – have partnered to launch the Healthy Foods Initiative that aims to help Aussies make healthy food choices.

The Healthy Foods Initiative will empower people with information and innovative tools to make more informed decisions about their food choices. Tools such as the new smart phone app FoodSwitch will help consumers navigate confusing nutritional panels, make sense of food claims and guide users to healthier choices and therefore healthier habits.

By simply scanning the barcode of Australian packaged foods using an iPhone camera, shoppers receive immediate, easy to understand nutritional advice about the product via the app. And good news travels fast, since being launched mid January, FoodSwitch has been downloaded more than 120,000 times. What's more, within a day the app reached number one in the free health-related apps, and by day two was number one across all free Australian apps.

Olympic Swimmer and FoodSwitch Ambassador, Nicole Livingstone believes FoodSwitch is particularly great for busy people and families.

"I'm an ambassador for FoodSwitch because I believe in good, healthy nutritional choices. I'm a mother of three kids as well so I want to make sure that they make good choices and become accustomed to making good choices. This is so simple and easy to use and for me I think that our nutritional labels are often confusing and therefore bad choices are really easy to make".

Senior Director at The George Institute, Professor Bruce Neal believes it's time consumers stopped having to grapple with confusing food labels, but are guided by

what is best for them, "At The George Institute, we've been collecting data about what's in Australian processed foods for a number of years. We've used this data primarily for research purposes. With the FoodSwitch app, what we've decided to do is make this data available to you as a consumer so that you can make better food choices".

Already, the app is doing just that. To date, the FoodSwitch team has received more than 700 comments of thanks, suggestions for improvements and messages about how FoodSwitch has helped people and their families make positive changes for better health, such as Sandra Sesa from Oakleigh "Thank you for such a fantastic app. My kids knocked back some chips after they saw all the 'reds'. I couldn't believe that they made the choice of not buying them. They are ages 8 and 10".

FoodSwitch is currently available to iPhone users; an Android version is scheduled to be launched toward the end of March.

To download the app go to [www.bupa.com.au/foodswitch](http://www.bupa.com.au/foodswitch).

## TAKING ACTION: GLOBAL HEALTH POLITICS AT THE GEORGE

In the current decade more than 120 million people will die before the age of 60 from chronic diseases such as heart disease and cancer. Road traffic injuries will kill another 20 million and disable several times more. Disadvantaged populations face copious barriers to care, and preventative interventions for the world's two biggest killers – chronic disease and injury – are often non-existent.

As we add to the evidence base of how to treat and prevent these conditions, it is essential that we identify the channels to promote and means to breakdown the political and bureaucratic roadblocks that hinder healthcare solutions becoming a reality and reaching rich and poor countries alike. A new program of global health politics at The George Centre for Healthcare Innovation at Oxford University is designed to do just this.

With Devi Sridhar at the helm, the program is set to shake the most established corridors. Trained in biology and pre-medicine, anthropology and political science, Devi conducted her studies at the University of Miami before completing her Masters and Doctorate at Oxford

University. Since this time, Devi has made her mark on the global health scene, widely publishing in global health politics, asking the questions that perhaps many before were hesitant to ask. Her research has questioned financial flows in global health (published in the *Lancet*) offered suggestions for reform of the World Health Organization (published in *JAMA*) and analysed the role of international law in protecting health (published in *Nature*). She has also looked at the role of the World Bank in addressing hunger in her book *Battle Against Hunger*.

"I chose this field because research really does have the power to impact policy and change health outcomes. The George Institute produces high-quality research and has the ability to impact global health policy, and is in a fantastic position to host a global health politics program at Oxford", said the James Martin Lecturer in Global Health Politics, Oxford University.

The Global Health Policy Program will focus on identifying and quantifying the drivers of change in public health policy. It will investigate how country decisions are made in emerging economies with a particular focus in China and India. The program will include research, teaching, activities, and outreach to policy-makers.

### 60 SECONDS WITH DEVI SRIDHAR:



**My favourite childhood book was...** Pippi Longstocking

**The best holiday destination is...** some place warm with a beach

**My biggest weakness is...** cake

**My three ultimate dinner party guests would be...** Bill Gates, Steve Jobs and Hillary Clinton

**If I played a professional sport it would be...** tennis  
**I hope to one day...** write a great book on political will in global health

**My biggest achievement so far...** marrying my husband and our baby girl

**I work at The George Institute because...** I want to make a difference.

"My hope is to see The George Institute and Oxford University establish an international hub for global health research. We will respond to global policy and feed into the process with the major global health players and their policy-makers".



## DISADVANTAGED POPULATIONS

### THE GEORGE ADDRESSES UNICEF CALLS FOR ATTENTION ON ADOLESCENTS

AROUND 2.6 MILLION YOUNG PEOPLE DIE EACH YEAR - MAINLY DUE TO PREVENTABLE CAUSES SUCH AS ROAD INJURY. HOWEVER, A MUCH GREATER NUMBER SUFFER FROM A RANGE OF HEALTH ISSUES THAT IMPEDE THEIR CHANCE OF VITAL GROWTH AND DEVELOPMENT. THE IMPACT OF SICK ADOLESCENTS IS IN FACT MASSIVE, AS THE NEXT GENERATION HOLDS THE KEY TO ADDRESSING POVERTY, AND HARNESSING SOCIAL DEVELOPMENT.

In their annual State of the World's Children Report, the United Nations Children's Fund (UNICEF) call for increased attention on the world's youth. The report recognises that generally 10-19 year olds are much healthier than previous generations, but adolescents particularly in developing

countries, continue to face tough health challenges and have a right to good health.

The opportunity for improved health lies in improved data collection and analysis. With better evidence, policy-makers, governments and health agencies can better drive and monitor progress.

"Major gaps in data pose one of the biggest obstacles to promoting adolescent rights. There is simply insufficient data to adequately assess the circumstances of the world's children", State of the World's Children Report, p11.

Developing countries such as India have the most to benefit from increased data about youth, as a significant proportion of their population comprise of adolescents. The George Institute India's Million Indian Adolescents Study will be the

first study of its kind to collect comprehensive data on the health of India's adolescents. The study will be conducted in collaboration with other institutional partners.

"We believe that this study can truly help India's future, and provide answers about the health and wellbeing of her future generation. Such information will allow us to better understand the causes of death, illness and disability among teenagers", said Dr Pallab Maulik, Head of Research and Development at The George Institute India.

The Institute is looking for financial supporters to assist in the foundation of this landmark study. If you would like to support the establishment of the Million Indian Adolescents Study in India, please contact Professor Anushka Patel on [apatel@georgeinstitute.org](mailto:apatel@georgeinstitute.org).

### CELEBRATING GOOD HEALTH WITH THE AUSTRALIAN CHINESE COMMUNITY



Left to right: Professor WU Yangfeng, Sue Murray, Executive Director of The George Foundation, Ambassador Hon. Helen Sham-Ho OAM, Robert Ho OAM

THE YEAR OF THE RABBIT IS KNOWN FOR CELEBRATIONS OF FRIENDSHIP AND FAMILY. IN THE CLOSING MONTHS OF 2011, SENIOR STAFF FROM THE GEORGE INSTITUTE IN CHINA DID JUST THAT, VISITING THE NETWORK OF OLD AND NEW FRIENDS IN SYDNEY, AUSTRALIA.

The Australian Chinese Community has shown great interest and appreciation of the health challenges facing China and the work The George Institute conducts in order to address these issues. In a number of small events held throughout November and December 2011, guests were given an opportunity to learn about the latest research in tackling the epidemic of diabetes, the health issues facing rural China and insight into healthy living tips.

A cocktail evening was kindly hosted by leading law firm, Mallesons Stephen Jaques. The Institute acknowledged support of new ambassador the Hon. Helen Sham-Ho OAM, who shares many values with The George Institute including a passion for education and healthcare equality. The George Institute would like to thank Logan Wines for sponsorship of this successful event.

### TRANSFORMING AGEING - WORLD HEALTH DAY 2012

In April each year, the World Health Organization's World Health Day celebrates and promotes the issues at the forefront for global health. World Health Day 2012 will call for a renewed focus on ageing – a health challenge that facing all countries alike. In Australia, The George Institute for Global Health will celebrate World Health Day with a new campaign to promote the research and action required to transform ageing and improve health.

#### George Institute Ambassador



Celebrity chef Michael Moore, owner of the iconic Summit Restaurant in Sydney is a proud Ambassador of The George Institute and World Health Day. Having survived a stroke at the age of 45, and living with type 2 diabetes Michael is well aware of two of the most common conditions affecting our ageing population. "I'm thrilled to be working with The George to launch the inaugural World Health Day program in 2012".

#### Inaugural World Health Day dinner

The Institute will also host the inaugural World Health Day dinner in Australia on 3 April 2012 with 150 health industry leaders. The inaugural World Health Day

address will be given by The Hon. Tanya Plibersek, Minister for Health. Tables for the event, which will be held in Sydney are available to purchase via [www.georgeinstitute.org.au](http://www.georgeinstitute.org.au).

The evening is set to be thought provoking and entertaining, and an opportunity to join experts and leaders who are influential in promoting health and well being at every stage of life.



INJURY, AGEING AND DISABILITY

## CYCLE HELMET USE, LOW IN CHILDREN

A COUNTRY OF SPORT LOVERS, AUSTRALIA HAS ENJOYED AN INCREASE IN THE POPULARITY OF CYCLING IN RECENT YEARS. SPROUTED AS A HEALTHY AND ENVIRONMENTALLY SUSTAINABLE ACTIVITY, CYCLING IS FAST BECOMING THE TRANSPORT OF CHOICE FOR COMMUTERS, WHILE REMAINING A STAPLE PART OF CHILDHOOD FUN.

However, an investigation of the causes and outcomes of cycling crashes has revealed a low use of helmets among children aged up to nine years of age in Victoria, Australia, and researchers are calling for enhanced cycle education to address the issue.

Funded by VicRoads (Victoria's road authority), the research showed that only 57% of children in a cycling crash were wearing a helmet, compared to 60% in adolescents and 78% in adults.

"The most serious injury among cyclists is head injury, and to find that such a large percentage of children are not wearing a helmet was very concerning", said author Dr Soufiane Boufous from The George Institute injury team.

"The impact of a head injury can be devastating for victims and families. We know that cycle helmets decrease the risk of head and brain injury by up to 88%, and can protect a rider in a range of crash scenarios. Programs to improve safety knowledge of children cyclists are very important. Parents can play a positive role by accompanying their children when learning how to ride and provide supervision as they learn to negotiate hazards on the footpath, such as crossing a driveway. We know that children have the most accidents when they emerge from footpaths".

Other research suggests delaying a child's age to ride in public places to seven or eight years of age. But researchers at The George say that as many of the crashes among children occur on residential roads with a 40-50k/h speed limit, serious consideration should be given to a 30k/h speed limit in neighbourhoods with a strong cycling community.

Researchers at The George assessed police and hospital crash records to gain details of crashes, such as the location, road user movements and vehicle involvements. It is hoped that this evidence will assist future cycle and road legislation and environmental planning for cyclist facilities.

## PAULINE AND GEORGE CEPAK: OUR STORY

LIKE MANY AUSTRALIANS, A QUADRUPLE BY-PASS HADN'T STOPPED GEORGE FROM RETURNING TO THE WORKFORCE AND KEEPING UP WITH THE GRANDKIDS – ALL NINE OF THEM. A RECENT CHECK UP WITH THE CARDIOLOGIST GAVE HIM A CLEAN BILL OF HEALTH AND REASSURANCE THAT THINGS WERE GOING TO BE OKAY.

Four weeks later George suffered a stroke.

George's wife Pauline can remember the day clearly, "I was out walking, when I received the phone call. I was in absolute shock. By the time I got to emergency George was virtually unconscious. I immediately okay-ed the treatment to dissolve the causing clot, which is likely to have saved him from total paralysis and possibly saved his life".

George has no recollection of the stroke that left him speechless and unable to walk. Four years later, after endless therapy, his speech has returned and he slowly recalls, "I didn't know anything until three to four days afterwards,



I couldn't talk or move my right side. I knew something was wrong but didn't think that it was a stroke".

Pauline's background in health ensured she knew the latest research

in stroke rehabilitation. "It is thanks to research that we knew what to do right from the start. I knew that research said to get stuck into rehabilitation as soon as possible. I was determined to keep him moving, and as he progressed he was determined to recover. Now he can walk and talk. That's what research has done for us. I'm sure that there is a lot more they can discover."

George, who is now 66, is thankful for research, and has worked with three researchers investigating speech and aphasia at two Sydney universities. "I believe research is extraordinarily important and want to highlight the need for ongoing support for stroke research", said George.

## INTERNATIONAL PHYSIOS ASK US OVER 1.5 MILLION QUESTIONS A YEAR, AND WE ANSWER THEM!



WHAT IS FAST BECOMING THE GOOGLE OF THE PHYSIOTHERAPY WORLD, PEDRO IS ONE OF THE MOST USED ONLINE RESOURCES BY PHYSIOTHERAPISTS. HOUSING OVER 21,000 REVIEWS, TRIALS AND GUIDELINES, PEDRO (THE PHYSIOTHERAPY EVIDENCE DATABASE) AVERAGES ONE SEARCH EVERY THIRTEEN SECONDS, AND QUICKLY PROVIDES THE BEST RESEARCH EVIDENCE TO PHYSIOTHERAPISTS ACROSS THE WORLD.

"PEDro offers the most complete catalogue of high-quality research to guide clinical practice. We have a massive number of trials in the database, which makes it easy for users to access the latest and greatest research thanks to a unique ranking system and search features", says manager of PEDro, Dr Anne Moseley.

Closing the gap between research findings and practice is a vital step in global health. "There is an abundance of research in physiotherapy that is doubling every three and a half years. PEDro makes it easy for clinicians to stay on top of the latest research, and ensure their therapy is guided by the best available evidence in their chosen field whether it be back pain, falls, stroke rehabilitation or any other area", said Dr Moseley.

Over 30 physiotherapy associations worldwide lend their support to PEDro. However, financial partnerships are needed to ensure the long-term sustainability of such a vital, but complex resource.

Principal partner, the Motor Accidents Authority of New South Wales, Australia has provided support to maintain PEDro as part of their commitment to evidence-based programs that promote optimal recovery from motor accidents. Major partner, the American Physical Therapy Association recognises PEDro's role in providing a robust web tool for physiotherapy clinicians.

PEDro exists only through the support provided by corporate sponsors and industry partnerships. Our sponsors are critically important to the future of PEDro. It is through these partnerships that we are able to keep PEDro as a free, robust internet tool for physiotherapists worldwide. If you would like to learn more about partnership opportunities with PEDro, please contact Chris Ostendorf on [costendorf@georgeinstitute.org.au](mailto:costendorf@georgeinstitute.org.au).

### ABOUT PEDro:

- > Last year PEDro answered 1,773,294 clinical questions by physiotherapists in 165 countries
- > Search the best and most current physiotherapy evidence
- > Link to full-text research articles
- > Biggest users in 2011 came from: United States, Australia, Brazil, The Netherlands and Italy
- > Available in English, Portuguese, Spanish, Italian, German, French and Chinese
- > Free access 24 hours, 7 days a week

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ISSN 1833-3656