

Medical and Health Research Network Seminar

Implementing Health Targets in Hong Kong: Issues and Challenges

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Outline

- What are health targets?
- How have health targets been implemented in the U.K., U.S., Germany and Australia?
- What are the likely issues in implementing health targets in Hong Kong?

What Are Health Targets?

- Specific, quantifiable and measurable objectives to improve health as part of a comprehensive health care strategy on a national level.

Source: Van der Water, Harry & Van Herten, Netherlands, 1998

Why Set Health Targets?

- Health authorities are more and more willing to focus on improvement of health.
- Provide a pro-active, positive approach to improving health in a way that ultimately controls cost.
- Shift the attention from a “tunnel vision” focus on cost containment to a broader focus on improving health.

Why Set Health Targets?

[continue]

- Help ensure that health policy and outcomes research transcend politics and do not have to be reinvented with each new administration.
- Help health authorities to focus on long term rather than short term costs.

Why Set Health Targets?

[continue]

- Measure effectiveness of health care spending and provide guidelines and tools for allocation and reimbursement to ensure continued cost-effectiveness.
- Help establish a common language for communication, as well as heightening awareness of health issues & positive outcomes.

How to Choose Health Targets

- The disease area chosen should be a major cause of premature death or avoidable ill health among a specific group of people or nation.
- The area must be quantified or quantifiable through available indicators.

HEALTH TARGETS

Implementation

- in U.K.
- in Germany
- in Australia
- in U.S.A.

“Health Targets in the U.K.”

5 national targets identified:

- Coronary heart disease and stroke
- Cancers
- HIV/AIDS and sexual health
- Mental health
- Accidents

Source: The Health of the Nation, UK

Health of the Nation key areas and targets

What?	Who?	Target?	When?	On Target?
Coronary heart disease and stroke				
Coronary heart disease	<65 yrs	40% cut in 1990 death rate	2000	
Coronary heart disease	65-74 yrs	30% cut in 1990 death rate	2000	
Stroke	<65 yrs	40% cut in 1990 death rate	2000	/
Stroke	65-74 yrs	40% cut in 1990 death rate	2000	/
Cigarette smoking*	>15 yrs	Prevalence down to 20%	2000	
Blood Pressure	>15 yrs	Reduce to 5mmHg	2005	/
Obesity: men	16-64 yrs	Reduce numbers by 25%	2005	
Obesity: women	16-64 yrs	Reduce numbers by 33%	2005	
Energy from saturated fat	All	Reduce by 35%	2005	/
Energy from total fat	All	Reduce by 12%	2005	/
Drinking	M>17 yrs, 21> units pw	Reduce by 18%	2005	
Drinking	W>17 yrs, 21> units pw	Reduce by 7%	2005	
Cancers				
Breast cancer	50-69 yrs	25% cut in 1990 death rate	2000	
Cervical cancer	>24 yrs	Cut incidence by 20%	2000	
Skin cancer	>14 yrs	Halt increase	2005	
Lung cancer	M<75 yrs	30% cut in 1990 death rate	2010	
Lung cancer	M>75 yrs	15% cut in 1990 death rate	2010	/
Cigarette smoking*	>15 yrs	Cut prevalence to 20%	2000	
Smoking in pregnancy	W smokers	One third to stop	2000	
Cigarette consumption	All	40% cut in 1990 total	2000	/
Smoking	11-15 yrs	33% cut in 1988 rate	1994	
Mental illness				
Health & social functioning**	Mentally ill	Improve significantly	No date	-
Suicides	All	15% cut in 1990 rate	2000	
Suicides**	Mentally ill	33% cut in 1990 rate	2000	-
HIV/AIDS and sexual health				
Gonorrhoea	15-64 yrs	20% cut in 1990 rate	1995	
Injecting drug misusers**	Drug misusers	50% cut in 1990 sharing	1997	-
Conceptions	<16 yrs	50% cut in 1990 rate	2000	
Accidents				
Accidents	<15 yrs	33% cut in 1990 death rate	2005	
Accidents	15-24 yrs	25% cut in 1990 death rate	2005	
Accidents	>64 yrs	33% cut in 1990 death rate	2005	/

same target: ** No monitoring system; M-men, W = women

- on track to meet target

/ trend down, but not enough to meet target

- target already met

- not on track to meet target

“Better Health Outcomes for Australians”

4 targets identified:

- Cardiovascular
- Cancers (priorities: breast, cervix, lung, colon, rectum, melanoma, prostate)
- Injury
- Mental health

“U.S. Healthy People 2000”

Purpose

- To commit the nation to the attainment of 3 broad goals that will bring the population to its full potential
 - Increase the span of healthy life for Americans
 - Reduce health disparities
 - Achieve access to preventive services for all Americans

“U.S. Healthy People 2000”

[continue]

300 targets to be accomplished by 2000
in 22 areas and in 3 major categories

- health promotion
 - behavioral changes, family planning, mental health, violent and abusive behavior, educational and community based programs
- health protection
 - unintentional injury, environmental health, oral health

“U.S. Healthy People 2000”

continue

- 300 targets to be accomplished by 2000 in 22 areas in 3 major categories - continue
 - Preventive Services
 - Maternal and infant health, heart disease and stroke, cancer, diabetes, sexually transmitted diseases, immunization and infectious diseases, clinical preventive services

“U.S. Healthy People 2000”

[continue]

Within the clinical preventive services category, 5 targets:

- Heart disease and stroke
- Cancer
- Diabetes and chronic disability conditions
- HIV/AIDS and other sexually transmitted diseases
- Immunization and infectious diseases

“U.S. Healthy People 2000”

[continue]

National health targets for coronary heart disease and stroke:

- Reduce coronary heart disease deaths to no more than 100 per 100.000 people (26% decrease)
- Reduce stroke deaths to no more than 20 per 100.000 (34% decrease)
- Increase control of high blood pressure to at least 50% of people with HBP (108% increase)

“U.S. Healthy People 2000”

[continue]

National health targets for coronary heart disease and stroke:

- Reduce blood cholesterol to an average of no more than 200mg/dl (6% decrease)

How to move forward with **HEALTH TARGETS?**

How to move forward with Health Targets?

Considerations for setting HT

- Availability of accurate health data
- Time dimension
- Requires concerted effort to look for joint interests across sectors

CONCLUSIONS

HEALTH TARGETS are:

- Concept
- Source of inspiration & motivation
- Technical tools
 - to balance between health gain & allocation of resources
- Management tools
 - to guide complicated team work which characterizes present - day health policy & health care

Evolution of Health Economics

- 1950 - 1960's
 - **STRUCTURE** - “If you build enough hospitals they will have health”
- 1970 - 1985
 - **PROCESS** - “If you have the right policies and procedures and committees, they will have health”
- 1985 - 2000
 - **OUTCOMES** - “If you assess and influence results of medical care, they will have health”
- New Millennium
 - **Health Policy Targets** ???

Source: Avedis Donabedian

**THANK
YOU**