
Behaviour-related risk factor intervention - purpose

Important note: This is an archived metadata standard from the AIHW Knowledgebase. For current metadata standards and related information please access METeOR, the AIHW's Metadata Online Registry at <http://meteor.aihw.gov.au>

Identifying and Definitional Attributes

Data Dictionary: NHDD
Knowledgebase ID: 000807 Version number: 1
Metadata type: DATA ELEMENT
Registration Authority: NHIMG Admin status: SUPERSEDED
Effective date: 01-MAR-05
Definition: The behaviour-related risk factor(s) associated with an intervention(s).
Context: Public health, health care and clinical settings:
The presence of one or more behaviour-related risk factors can be used to help determine the risk of future adverse health events and the development of chronic diseases.

Relational and Representational Attributes

Datatype: Numeric
Representational form: CODE
Representation layout: N
Minimum Size: 1
Maximum Size: 1
Data Domain: 1 Smoking
2 Nutrition
3 Alcohol misuse
4 Physical inactivity
8 Other
9 Not stated/ inadequately described

Guide For Use: More than one code can be selected.

Related metadata: is used in conjunction with Service contact date version 1
relates to the data element Tobacco smoking status version 1
relates to the data element Waist circumference - measured version 2
relates to the data element Alcohol consumption frequency- self

report version 1
is used in conjunction with Behaviour-related risk factor
intervention version 1
relates to the data element Physical activity sufficiency status
version 1

Administrative Attributes

Source Document: SNAP Framework - Commonwealth Department of Health and Ageing -June 2001.
AIHW 2002. Chronic Diseases and associated risk factors in Australians, 2001; Canberra.

Source Organisation: CV-Data Working Group

Comments: Cardiovascular disease (clinical):
Behaviour-related risk factors include tobacco smoking, nutrition patterns that are high in saturated fats and excessive energy (calories /kilojoules) (National Heart Foundation of Australia - A review of the relationship between dietary fat and cardiovascular disease, AJND, 1999. 56 (Supp) S5-S22), alcohol misuse and physical inactivity.

The importance of behaviour -related risk factors in health has become increasingly relevant in recent times because chronic diseases have emerged as the principal threat to the health of Australians. Most of the chronic diseases have their roots in these risk-taking behaviours (Chronic Diseases and associated risk factors in Australians, 2001; AIHW 2002 Canberra).

SNAP initiative:
Smoking, Nutrition, Alcohol, Physical Activity (SNAP) Framework for General Practice is an initiative of the Joint Advisory Group (JAG) on General Practice and Population Health.

The lifestyle-related behavioural risk factors of smoking, poor nutrition (and associated overweight and obesity) and harmful and hazardous alcohol use and declining levels of physical activity have been identified as significant contributors to the burden of disease in Australia, and particularly towards the National Health Priority Areas (NHPA) of diabetes, cardiovascular disease, some cancers, injury, mental health and asthma. The NHPAs represent about 70% of the burden of illness and injury in Australia. Substantial health gains could occur by public health interventions that address these contributory factors.

Around 86% of the Australian population attends a general

practice at least once a year. There is therefore substantial opportunity for general practitioners to observe and influence the lifestyle risk behaviours of their patients. Many general practitioners already undertake risk factor management with their patients. There are also a number of initiatives within general practices, Divisions of General Practice, State/Territory and Commonwealth Governments and peak non-government organisations aimed at reducing disease related to these four behavioural risk factors. Within the health system, there is potential for greater collaboration and integration of approaches for influencing risk factor behaviour based on system-wide roll-out of evidence-based best practice interventions.

The aim of the SNAP initiative is to reduce the health and socioeconomic impact of smoking, poor nutrition, harmful and hazardous alcohol use and physical inactivity on patients and the community through a systematic approach to behavioural interventions in primary care. This will provide an opportunity to make better use of evidence-based interventions and to ensure adoption of best practice initiatives widely through general practice.

[Data Element Links](#)

Information Model Entities linked to this Data Element

NHIM Request for / entry into service event

Data Agreements which include this Data Element

DSS - Cardiovascular disease (clinical) From 01-Jan-03 to
