

Episode of care—behaviour-related risk factor requiring intervention, code N

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Episode of care—behaviour-related risk factor requiring intervention, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Behaviour-related risk factor requiring intervention
METEOR identifier:	696245
Registration status:	Health , Standard 17/10/2018
Definition:	The behaviour-related risk factor(s) associated with an intervention in an episode of care, as represented by a code.
Data Element Concept:	Episode of care—behaviour-related risk factor requiring intervention
Value Domain:	Behavior-related risk factor code N

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N
Maximum character length:	1

	Value	Meaning
Permissible values:	1	Smoking
	2	Nutrition
	3	Alcohol misuse
	4	Physical inactivity
	8	Other
Supplementary values:	9	Not stated/inadequately described

Data element attributes

Collection and usage attributes

Guide for use:	More than one code can be recorded.
Comments:	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.

Source and reference attributes

Submitting organisation:	Cardiovascular Data Working Group
Origin:	Commonwealth Department of Health and Ageing 2001. Smoking, Nutrition, Alcohol and Physical Activity (SNAP) Framework, June. AIHW (Australian Institute of Health and Welfare) 2002. Chronic diseases and associated risk factors in Australia, 2001. Canberra: AIHW.

Relational attributes

Related metadata references:

Supersedes [Episode of care—behaviour-related risk factor intervention purpose, code N](#)
[Health](#), Superseded 17/10/2018

Implementation in Data Set Specifications:

[Cardiovascular disease \(clinical\) NBPDS](#)
[Health](#), Standard 17/10/2018

DSS specific information:

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).

Smoking, Nutrition, Alcohol, Physical Activity (SNAP) initiative:

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 (NHPAs) 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.