

# spectra

129



## National prevention strategies: review and outlook

### 2 On track

Implementation of the two national strategies Prevention of Noncommunicable Diseases (NCD strategy) and Addiction began at the start of 2017. It's now time to take stock and consider the outlook. What is the status of the two strategies? What has been achieved so far? What is yet to be achieved? And what happens next?

### 3 MonAM knows the answer

The MonAM monitoring system contains reliable data on many aspects of addiction and noncommunicable diseases. It presents information in interactive graphics that also identify trends. In this way MonAM provides guidance for anyone wishing to find out about the health of the Swiss population.

### 4 "Now binge drinking and addictive behaviours are the problem"

Five questions for Franziska Eckmann, Head of Infodrog. The coordinating office supports institutions and authorities in developing the increasingly broad range of addiction support services. The focus is not only on illegal substances but also on alcohol and addictive behaviours.



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra

Swiss Confederation

Federal Department of Home Affairs FDHA  
Federal Office of Public Health FOPH

# On track

Implementation of the two national strategies Prevention of Noncommunicable Diseases (NCD strategy) and Addiction began at the start of 2017. It's now time to take stock and consider the outlook. What is the status of the two strategies? What has been achieved so far? What is yet to be achieved? And what happens next?

Cancer, diabetes, cardiovascular and chronic respiratory diseases such as asthma and COPD are the most common causes of death in Switzerland. They are known collectively as noncommunicable diseases (NCD) and are responsible for around 50 percent of deaths in men and around 60 percent in women before the age of 70 (premature death). Addictions also frequently have a fatal outcome. Every year some 1,600 people in Switzerland die as a result of alcohol abuse, and about 120 due to drug abuse. Thus it comes as no surprise that all NCDs including mental health disorders and addictions account for 80 percent of all expenditure on health in Switzerland.

Against this background, the National Strategy for the Prevention of Noncommunicable Diseases (NCD strategy) and the National Addiction Strategy were launched at the start of 2017, both with a timeframe running until 2024. The objective of the strategies is to enable the population to live for as long as possible in the best possible health.

The strategies have now reached the halfway mark, and this milestone provided an opportunity to evaluate them. The interim evaluation focused on the question: What is the implementation status of the two strategies? But it also looked at questions relating to cooperation with the various implementation partners and how the strategies are being steered.

The interim evaluation showed that both strategies are essentially on track. A number of concepts and projects have already been implemented, among them the new MonAM monitoring system that compiles figures about NCDs and addiction and makes them universally available. The FOPH and Health Promotion Switzerland have also established the prevention in healthcare provision (PHP) system to fund projects and have already completed three rounds of funding. As an intermediate year for PHP, 2021 will be used to sharpen the definition of PHP and to revise the principles for funding projects on the basis of the insights from the first three years. A new round of funding will then begin in September 2021.

The expansion of the cantonal action programmes (CAP) was a further milestone. 24 of the 26 cantons now have corresponding programmes that are receiving support



**Since certain forms of dementia are similar to cardiovascular diseases, they are now being incorporated into the NCD strategy. Dementia causes a great deal of suffering in Switzerland, with around 30,000 people developing the disease every year.**

in line with the strategies. "This is a major success," says Eva Bruhin, Head of the Prevention Strategies Section at the FOPH. The cantons are implementing their programmes in line with the national principles: preventing several risk factors for a NCD at the same time or implementing cross-divisional addiction prevention measures.

### Outlook for the second half

There are a number of points that need to be modified for the second half of the strategy implementation. One major new aspect will be the inclusion of dementia prevention in implementation measures, since dementia is a specific form of cardiovascular disease. Dementia causes a great deal of suffering in Switzerland, with around 30,000 people developing it every year. The vast majority of those affected live at home, but care in an inpatient setting is usually unavoidable for those who require a higher level of nursing.

Another aspect that will be important in future is communication. Here the main focus is on the partner platform, a platform that all the stakeholders can use to obtain and exchange information. The website [www.prevention.ch](http://www.prevention.ch) should go online in spring of 2021 and will strengthen dialogue between the professionals and organisations involved. "This is precisely where the FOPH can achieve a great deal, in coordination and communication beyond the cantonal borders and the limits of the organisations," Bruhin comments.

Several topics are the focus of attention with respect to addiction. One of them is the SafeZone addiction counselling service. The aim is to implement new approaches in addiction support under the heading "blended counselling". This is the term experts use to describe a combination of online counselling and face-to-face conversations, i.e. a mix of digital and analogue communication that takes the needs of patients into account. Other topics include addictive behaviours and problematic use of psychoactive medication, and cooperation with the various implementation partners. Because this is another important finding to emerge from the first half: joint implementation of the strategies has brought the partners closer together. This will be an important factor for success over the next four years.

### Contacts:

Eva Bruhin, Prevention Strategies Section, [eva.bruhin@bag.admin.ch](mailto:eva.bruhin@bag.admin.ch)

Tanja Iff, Prevention Strategies Section, [tanja.iff@bag.admin.ch](mailto:tanja.iff@bag.admin.ch)

### Links:

<https://tinyurl.com/yykyghhw>

<https://tinyurl.com/yyxcm7cz>

# MonAM kno

The MonAM monitoring system presents information in interactive form, allowing you to wish to find out about the he

How many people die in road traffic accidents in which the driver is under the influence of alcohol, drugs or medication? Which canton has the highest proportion of people who get enough physical activity? Anyone looking for answers to these (and many other) questions can find them on the web portal of the Swiss monitoring system MonAM.

### Education matters

The name comes from the French title of the system: "Système de Monitoring suisse des Addictions et des Maladies non transmissibles" [Swiss monitoring system for addictions and noncommunicable diseases]. MonAM is an important component of the national strategies NCD and Addiction. Its numerous indicators and measured data draw a fact-based picture of the health of the Swiss population. Whenever possible, MonAM places these data in the wider societal context. The figures show, for example, that health equity in terms of equality of opportunities may not be guaranteed for all in Switzerland. Thus, people with a tertiary qualification smoke less and are more likely to achieve recommended levels of physical activity than those having completed compulsory schooling at most.

"It's worth visiting the website because MonAM is a great place to quickly find reliable and scientifically robust information about numerous

### Physical activity behaviour

**The graphic shows the physical activity behaviour of the population per canton. With 82.9% of the population that is sufficiently active, Graubünden leads the ranking of the cantons.**



66.3 - 68.2

Share of the population

# ows the answer

contains reliable data on many aspects of addiction and noncommunicable diseases (NCD). Interactive graphics that also identify trends. In this way MonAM provides guidance for anyone of the Swiss population.

aspects of addiction and NCDs,” says Wally Achtermann, who is co-responsible for MonAM at the FOPH. MonAM is freely available to public health experts, the media, politicians, and all other interested individuals. Besides monitoring the health of the population, MonAM allows the efficacy of the two national strategies Addiction and NCD to be evaluated.

## A joint effort

Achtermann emphasises that the monitoring system is a joint effort by a large number of partners. “This partnership is what enables MonAM to provide such comprehensive and high-quality data,” Achtermann says. The FOPH works with 30 or so organisations in the fields of health, environment, social affairs and business to develop and maintain MonAM. The Swiss Health Observatory (Obsan) is responsible for preparing the data and for managing the website.

MonAM does not record data itself. Instead, the monitoring system is based on different forms of existing information and measured data, such as the results of the Swiss Health Survey. The various partners working with the FOPH supply, update, calculate or check the data.

MonAM was launched in October 2018 with data on 27 different indicators. Currently about 100 in-

dicators are available online, with more to follow. The new indicators include, for example, figures on behavioural addictions. MonAM informs users that an estimated 178,000 people in Switzerland have high-risk gambling behaviour and around 15,000 have pathological gambling behaviour. And MonAM shows that the number of gaming bans (difference between new bans and lifted bans) increases by more than 3,000 each year since 2005.

## Problematic Internet use

Problematic use of the Internet is another form of addictive behaviour. One of the features that defines this addiction is that other activities (and sometimes even sleep) are neglected because of Internet use. In 2017, 3% of the population aged 15 and over showed this kind of behaviour. Men (3.5%) are affected more heavily than women (2.5%). Surprisingly, there are almost twice as many individuals with this behaviour in the French-speaking part of Switzerland (4.7%) as in the German-speaking part (2.4%).

Of course, MonAM knows the answers to the questions at the start of this article, too. With 82.9%, Graubünden ranks first among the cantons in which the population gets enough physical activity. Yet even in the lowest-ranking cantons – Vaud, Neuchâtel, Ticino and Jura

– two-thirds of the population take exercise for at least two-and-a-half hours per week. Across Switzerland as a whole, the share of the population that is active increased from 62.2% to 75.7% between 2002 and 2017.

And what about those road traffic accidents? Another piece of good news: compared with 1992, when 198 people died, road traffic accidents caused by driving under the influence led to just 28 deaths in 2019.

## Contacts:

Wally Achtermann and Laure Curt,  
Scientific Foundations Section,  
wally.achtermann@bag.admin.ch  
Laure.curt@bag.admin.ch

## Link:

[www.monam.ch](http://www.monam.ch)

## At first hand



**Salome von Greyerz**, Head of Health Strategies Division

**Roy Salveter**, Head of Prevention Non-communicable Diseases Division

## One step further

Strategies are all well and good, but how can we ensure that our measures also benefit those who are in greatest need? The NCD and Addiction strategies are guided by the goal of equal opportunities. They are intended to ensure that everyone in Switzerland has the same opportunities for good health. Studies show that the distribution of these opportunities remains unequal. People with a low income, a low level of education and a migration background are often disadvantaged in several ways. This also puts them at greater risk of developing an NCD or an addiction problem.

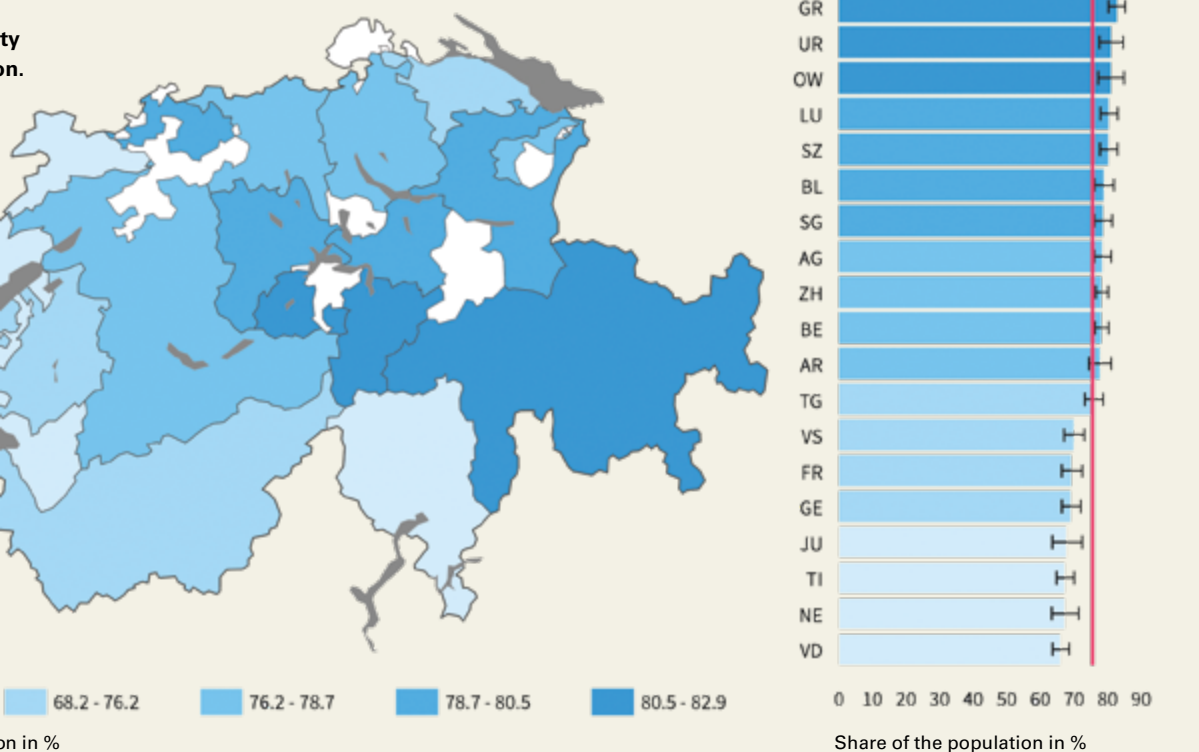
Health equity is indisputably a worthwhile goal of which everyone is in favour. Yet there is still too little being done in this field. We are keen to ensure that both strategies contain measures that focus specifically on socially disadvantaged people, since a strategy that focuses solely on the middle classes cannot fulfil its purpose. Health promotion and prevention offerings must be accessible to all – while realising how difficult it can be to implement this approach.

The FOPH, the Swiss Conference of the Cantonal Ministers of Public Health and Health Promotion Switzerland have now published their first joint report, a document that will show the way forward in this field. The report titled “Equality of opportunity in health promotion and prevention in Switzerland” (in German and French) describes the theoretical basis of this work: what do we mean by health equity, how does it arise and how does it become visible? At the same time, the report bridges the gap between theory and practice: what approaches are effective and how do health equity measures need to be designed? It talks about projects that have proven their value in practice.

The three stakeholders have now, for the first time, created a basis for a common approach to achieving health equity. This takes us one step further. A step closer to equal opportunities for everyone in Switzerland.

Link to report (German):  
<https://tinyurl.com/yxsdp7gn>

## of the Swiss population



# “Now binge drinking and addictive behaviours are the problem”

Five questions for Franziska Eckmann, Head of Infodrog. The coordinating office supports institutions and authorities in developing the increasingly broad range of addiction support services. The focus is not only on illegal substances but also on alcohol and addictive behaviours.

## 1 What are the tasks of Infodrog?

Set up by the FOPH, Infodrog is the Swiss Office for the Coordination of Addiction Facilities. With ten employees in total, we implement national pilot projects, organise specialist conferences and manage databases and websites such as Suchtindex.ch, a database of all the institutions providing inpatient and outpatient addiction support services in Switzerland plus self-help groups and parents' associations. Our tasks have changed over the years. In the 1990s our main concern was to control problems relating to open drug scenes. We later also had to focus on other phenomena such as binge drinking and rave culture, which involved the use of new substances. Today still, the scope of our services is expanding all the time; we focus not just on illegal substances but on alcohol and addictive behaviours as well.

## 2 Infodrog was set up by the FOPH but you are not employed by the FOPH, is that correct?

That's right. Infodrog has been sponsored by the Swiss health foundation Radix since 2009. Radix receives payment from the FOPH for Infodrog's services. The services we provide are mainly information and coordination activities that are often performed behind the scenes. When SafeZone.ch was developed, for example, the task was to get 25 different offices in 17 cantons in all the linguistic

regions round one table and to network them in a national platform. The result was a portal for free, anonymous online advice on addiction-related questions for affected people and their friends and families. SafeZone.ch is a joint effort: Infodrog operates the platform and works with experts from local offices and from Germany to provide continuing training for the counsellors. The actual counselling is the responsibility of the cantons and is provided by the employees at each of the counselling centres.

## 3 What sort of harm reduction offerings does Infodrog support in addiction work?

In spite of restrictions and bans, people have been consuming substances with addictive potential for thousands of years. Our aim is to minimise the harm caused to the person affected and to society, and promote use that is as informed and low-risk as possible. This is why, for example, we compile the latest substance-related warnings issued by the drug-checking services in Zurich, Bern, Olten, Basel, Geneva and Lucerne. We also provide information in German, French and Italian on SafeZone.ch about unexpected and dangerous substances. One of the current topics is synthetic cannabinoids that are sprayed onto legally produced cannabis, known as CBD cannabis, after it has been produced. These illegally applied synthetic cannabinoids can result in serious side effects or high-risk overdoses.

## 4 One of the services provided by Infodrog under its performance mandate is “lifelong early intervention”. What does that mean?

For many years, prevention efforts concentrated on adolescents and school-aged children, one of the reasons being that school provides an easy way to reach a large part of the population. But we have come to realise that an addiction can occur at any age. And that many people are at risk of addiction after they retire or at an even later stage, when they move into a nursing home. This is why Infodrog works with associations in the fields of addiction and the elderly in order to develop a basis for better care of elderly people, for example as part of care concepts for retirement homes. What's still missing, though, is specific offerings for middle-aged people, who are often under stress and whose attitudes to performance-enhancing substances and alcohol are sometimes problematic.

## 5 If you were to look into the future, what direction is addiction counselling taking?

Digitalisation is affecting us more and more. It is bringing a lot of new requirements and challenges that we need to cope with, particularly in terms of data privacy. We are noticing a trend in counselling towards digital self-management and something called “blended counselling”; this comprises hybrid forms



**Franziska Eckmann, Head of Infodrog, the Swiss Office for the Coordination of Addiction Facilities**

of counselling, combining online counselling with face-to-face conversations. There is major potential that is still far from being fully exploited.

Contact:  
Franziska Eckmann, Head of Infodrog, the Swiss Office for the Coordination of Addiction Facilities, f.eckmann@infodrog.ch

Link:  
[www.infodrog.ch](http://www.infodrog.ch)



**While in the 1990s the main concern was to contain problems associated with open drug scenes, other phenomena, such as binge drinking, emerged later.**

Impressum: spectra 129, December 2020

spectra is a newsletter of the Federal Office of Public Health published four times a year in German, French and English. Some of the views expressed in it may diverge from the official stance of the Federal Office of Public Health.

**Published by:** Federal Office of Public Health (FOPH), CH-3003 Bern, tel. +41 (0)58 463 87 79, fax +41 (0)58 464 90 33

**Realisation:** Adrian Heuss, advocacy ag  
**Head of Editorial Board:** Adrian Kammer, adrian.kammer@bag.admin.ch

**Editorial Board:** Rahel Brönnimann, Claudia Brunner, Lea von Wartburg, Selina Lusser-Lutz, Daniel Dauwalder  
**Contributors:** advocacy ag, members of staff of the FOPH, as well as external authors, Ori Schipper

**Photos:** authors, Fotolia, iStock by Getty Images, Urs Stalder

**Layout:** Vischer Vettiger Hartmann AG, Basel  
**Printed by:** Bütetiger AG, 4562 Biberist

**Print-run:** German: 5,000, French: 2,500, English: 800.

Individual issues and free subscriptions to spectra can be ordered from:  
Bundesamt für Gesundheit, Sektion Gesundheitsinformation und Kampagnen, 3003 Bern, kampagnen@bag.admin.ch

[www.spectra-online.ch](http://www.spectra-online.ch)