

A Healthier Future – Consultation Response

A Twenty Year Vision for Health and Wellbeing in Northern Ireland 2005 - 2025

'Investing for Health and Wellbeing' highlights the well-recognised risk behaviours associated with injury and ill health. Of particular note within the issues to be addressed is the omission of skin cancers. Skin cancers account for approximately one quarter of all cancers diagnosed.

In 1997 the DHSSPS recognised the substantial burden that skin cancers place on public health, the costs to the health service and the projected growth in the numbers of skin cancers with the launch of "A strategy for the prevention, diagnosis and treatment of malignant melanoma and other skin cancers in Northern Ireland". Since its launch great deal of work has taken place on implementing this strategy. It is vital that the issues addressed by this important public health strategy are included within the vision for improving the health of the population of Northern Ireland over the next twenty years.

Malignant Melanoma Skin Cancer

Current statistics point to a trebling of malignant melanoma rates over the next thirty years with people being diagnosed at younger and younger ages. Northern Ireland data on melanoma for 1993 – 2001 shows 69 new cases in males and 113 in females each year with the rates of incidence increasing by 4 males and 9 females each year and 13 males and 18 females dying annually. Our survival rates are improving with over 90% at five years, 484 males and 857 females diagnosed in 1993 – 2001 are still alive today.

'Our Vision for the Future' again focuses on tackling the risk factors of smoking, binge drinking and others. Implementation of the skin cancer strategy should form part of this vision. A twenty-year programme of Investing For Health and Wellbeing provides an excellent vehicle to operate the strategy, integrating the strategy goals and objectives into an overall vision for improved health within the caring communities. It is however essential that the momentum for community action and the challenges communities will meet in making changes, which will positively impact on health, are supported by expert professionals. Support is necessary at a local accessible level, provided by trained individuals who are willing and interested in supporting and motivating the community.

Local communities and teams will continue to need support filtered down from specialists working at regional level to develop progress on key risk issues producing high quality programmes and resources, continuing research and training and learning and sharing of good practice.

'Responsive Integrated Service', Policy Direction 5, demands that organisational, sectoral and professional boundaries are broken down. This will require a determined, clear and planned approach to change an established mind-set. The remnants of the competitive market remain with undertones of self-interest and self-promotion between sectors, professions and organisations.

A Healthier Future promotes the involvement of voluntary, private and other sectors in the vision for our health, it is extremely important that direction is given on how cross sector working can contribute to the goals of improving health including

accessing expertise, sphere of influence and potential for added capacity and how partnerships for health should operate to maximise effectiveness incorporating openness, clarity of roles, relationships and responsibilities.

A Healthier Future - the approaches, methodologies, ethos and vision should form a key element of the Integrated Learning and Development Strategy promoted to all those involved in its implementation. It may be though realising and understanding of the greater vision of health that the vision can take shape.

I hope these comments can be taken into consideration and add to what is an already excellent, comprehensive document.

Your sincerely

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