



**Australian Government**

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**Australian National Preventive Health Agency**

# **STRATEGIC PLAN**

## **2011 – 2015**

ISBN 978-0-9871821-0-4

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## Message from the Minister



We know that preventative health measures work, that's why we are supporting Australians who are ready to get active, eat well and adopt healthier lifestyles.

Keeping healthy and out of hospital is a key focus for the Gillard Government and this is supported by our \$872 million investment in preventative health – the largest single investment ever of its kind.

Potentially avoidable diseases account for around 20% of Australia's total health care expenditure and with more than 60% of Australians aged over 18 either overweight or obese, there has never been a more important time to tackle preventable diseases.

That is why the Gillard Government established the Australian National Preventive Health Agency (ANPHA) as Australia's first national preventive health agency with the capacity to lead, support and coordinate the "ramping up" of prevention and health promotion effort.

ANPHA will deliver a truly national preventive health effort. It will provide national leadership for effective and sustained investment in prevention and health promotion.

ANPHA will focus on the challenges associated with chronic disease. The Agency will address risk factors and behaviours, particularly related to physical activity and nutrition, smoking and harmful alcohol consumption. Importantly, it will support efforts to address the broader social, economic and environmental factors that we know contribute to poor health outcomes.

Working across the lifespan from the early years to old age, ANPHA will tackle inequalities in health, with particular emphasis on reducing the life expectancy gap between Aboriginal and Torres Strait Islander peoples and other Australians; and consider a range of settings including workplaces, schools, recreational facilities and communities, and will be key in assisting Medicare Locals to support prevention at a local level.

To support ANPHA in its work I have established an Advisory Council comprising individuals with a breadth of experience and expertise. ANPHA will provide advice to, and support for, the work of COAG and the Australian Health Ministers' Conference in promoting a healthier Australia.

ANPHA's inaugural *Strategic Plan 2011–2015* will guide the new Agency through its establishment and initial years. In the interest of good health and community wellbeing I commend it to all Australians.

A handwritten signature in black ink, appearing to read 'Nicola', with a long, sweeping underline that extends to the right.

Nicola Roxon  
Minister for Health and Ageing

# 1. Introduction

There is widespread agreement amongst health experts and governments that to build a healthier Australia we need to strengthen our health promotion effort and take more concerted actions to prevent ill health.

Australia has a long-held commitment to fairness.<sup>1</sup> We know that good and bad health are unevenly distributed and that those Australians with less money, less education, and insecure working conditions are much more likely to experience illness and to die earlier. These disparities are especially acute for Aboriginal and Torres Strait Islander peoples, people with disability, those with poor access to prevention and health services and those with limited access to affordable healthy lifestyle choices.

The establishment of the Australian National Preventive Health Agency (ANPHA) provides a new national capacity that will drive change and innovation around health policies and programs that take prevention and health promotion reforms forward in a systematic and evidence-based way, and which accords with the national commitment to improving health outcomes for all.

ANPHA's first strategic plan shapes a new organisation, while setting in place longer-term directions for an enduring institution that will play a significant role in making Australia a healthier country. This Plan sets out ANPHA's vision, its mission, and the values and strategies that will underpin its work. To achieve its vision and mission ANPHA will collaborate with governments and with research, industry, media, non-government and community partners. ANPHA will work to enhance the exchange of knowledge, advice and support for prevention and health promotion efforts throughout Australia.

## **Building capacity through national infrastructure**

All Australians can play a part in building our capacity for sustained good health.

Leadership and national support from governments at all levels can create an enabling environment and support strong contributions from individuals and families, as well as from industry, schools, the non-government sector, primary health and other health care services, and through the media.

The Australian Government has accepted the recommendations of the Council of Australian Governments (COAG), the National Health and Hospitals Reform Commission and the National Preventative Health Taskforce for the establishment of ANPHA as Australia's first national preventive health agency with the capacity to lead, facilitate, coordinate and be a catalyst for the 'ramping up' of prevention and health promotion efforts.

ANPHA is underpinned by the landmark National Partnership Agreement on Preventive Health (NPAPH), agreed by COAG in July 2008.<sup>ii</sup> This agreement commits \$872.1 million over six years (from 2009–10) to a comprehensive range of prevention and health promotion measures. In collaboration with the states and territories, the NPAPH includes significant funding for settings-based approaches that target children, workers and communities and for social marketing campaigns focused on tobacco and obesity.

The NPAPH<sup>1</sup> and the creation of ANPHA form part of the Government's response to the National Preventative Health Taskforce's final report.<sup>iii</sup> Other measures include an additional \$50 million for the National Binge Drinking Strategy, \$52 million to support a comprehensive Australian Health Survey, a 25% increase in tobacco excise, the introduction of legislation that will require the plain packaging of tobacco products, and an additional \$195 million for Australian sport, to be directed according to the plan outlined in *Australian Sport: the Pathway to Success*.<sup>iv</sup>

In developing this Strategic Plan, ANPHA has reflected the well-documented evidence that effective prevention and health promotion require approaches that:

- ▶ reach whole populations;
- ▶ include targeted strategies to meet the particular needs of diverse groups;
- ▶ include multiple strategies and comprehensive approaches, delivered at scale and over time;
- ▶ have a strong commitment to measuring and reporting; and
- ▶ are implemented in a variety of settings where people grow, live, go to school, work and spend time in recreational activities.

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1 The National Partnership Agreement on Preventive Health (NPAPH) was announced by the Council of Australian Government (COAG) on 29 November 2008. It builds on the COAG Australian Better Health Initiative and the National Reform Agenda's Type II Diabetes Initiative, and supplements the National Health Care Agreement.

## Tackling the burden of chronic disease and risk

Australia enjoys one of the highest life expectancies in the world, built on past successes in infectious disease control, high living standards, safer environments, improvements in nutrition, and declining smoking rates and other public health gains, as well as access to high quality health and medical care.

Australia's achievements in health also bring new challenges, particularly related to the growing burden of illness associated with chronic diseases in Australia,<sup>v</sup> at a time when our population is ageing. Common chronic disease conditions among Australians include heart disease, asthma, stroke, Type 2 diabetes, kidney disease, arthritis, osteoporosis, lung and other cancers.

Chronic diseases place significant strain on Australia's health and hospital systems and the strength of the economy. Cardiovascular disease, the most expensive disease group, accounted for 11% (\$5.9 billion) of total Australian health expenditure in 2007–08, while cancer accounted for 7.2% (\$3.8 billion). Much of the expenditure was related to admitted patient services, but out-patient services and prescription pharmaceuticals also contributed significantly.<sup>vi</sup>

Chronic diseases are also responsible for a considerable level of disease burden and mortality. Chronic kidney disease, diabetes and cardiovascular disease together account for approximately one-quarter of the disease burden in Australia, and just under two-thirds of all deaths.<sup>vii</sup>

Some risk factors for chronic disease are non-modifiable such as age, sex and genetics. But other factors – both lifestyle and biomedical – can be modified. These include tobacco smoking, high blood pressure and overweight and obesity which accounted, respectively, for 7.8%, 7.6% and 7.5% of the total disease burden in 2003.<sup>viii</sup> Other chronic disease risk factors include harmful alcohol consumption, limited physical activity and poor diet and nutrition.

Reducing risk, especially in situations where multiple risk factors occur, will have an impact on a wide range of health problems. Taking strategic and sustained action can prevent hundreds of thousands of premature deaths and through reducing the burden of chronic illness, reduce the load on health and hospital systems, increase the productivity of Australia's workforce, avoid health and social costs and improve the health status of the most disadvantaged.

There is good evidence on which to make the move towards a healthier Australia. In this first Strategic Plan, ANPHA is outlining a plan for action based on the findings from the extensive consultations undertaken, and the expert advice received and compiled, between 2008 and 2010 by the National Health and Hospitals Reform Commission and the National Preventative Health Taskforce.

## Other areas of risk

ANPHA has been charged with focussing its initial efforts on the risks and burden of disease associated with obesity, tobacco use and harmful alcohol consumption. At the same time, there is evidence that these risk factors do not occur in isolation from each other, or in isolation from other risk factors and conditions such as illicit drug use, injury, mental health or communicable disease. Over time, opportunities will no doubt arise to contribute to prevention efforts in other areas as part of comprehensive approaches to prevention and health promotion.

Over the life of this first Strategic Plan, ANPHA may identify additional priority areas where there is scope for enhanced preventive health effort. Where appropriate, ANPHA may provide advice to Government on future prevention and health promotion priorities and establish links with organisations already working in these areas to ensure that ANPHA's work is consistent with current efforts and contributes to enhancing outcomes.

## 2. What is ANPHA?

ANPHA is Australia's first national preventive health agency. The Commonwealth has established ANPHA under the *Australian National Preventive Health Agency Act 2010* ("the Act") to strengthen Australia's investment and infrastructure in preventive health.

The establishment of the Agency was a key recommendation of the National Health and Hospitals Reform Commission<sup>x</sup> and the National Preventative Health Taskforce.<sup>x</sup> Establishment of the Agency and funding for the Agency was agreed with states and territories through the National Partnership Agreement on Preventive Health.<sup>xi</sup>

ANPHA is a statutory authority, responsible through its Chief Executive Officer (CEO) to the Commonwealth Minister for Health and Ageing. For financial purposes, ANPHA operates under the *Financial Management and Accountability Act 1997* and for staffing purposes, under the *Public Service Act 1999*.

The ANPHA Act also provides for the Health Minister to appoint an Advisory Council of up to 11 members comprising individuals with a breadth of experience and expertise, including members representing the states and territories and the Commonwealth.

The preparation of this strategic plan is also required under the Act (section 43). Under the Act, the first strategic plan ends on 30 June 2015 and subsequent plans will be for a period of five years from the date of 1 July immediately following the end of the prior plan.

## Responsibilities

The Act sets out the functions and responsibilities of the CEO. In summary these are as follows:

- ▶ advise on, lead and be a catalyst for national prevention and health promotion programs;
- ▶ effectively collect, analyse, interpret and disseminate evidence in relation to prevention and health promotion strategies;
- ▶ facilitate a national prevention and health promotion research infrastructure;
- ▶ generate new and innovative partnerships with workplaces, communities and for schools;
- ▶ support the ongoing development of a workforce skilled in prevention and health promotion; and
- ▶ lead a national approach to social marketing for prevention and health promotion programs.

ANPHA will respond to requests for advice from, or provide advice to, the Commonwealth Minister for Health and Ageing about preventive health and may be requested to advise, or make recommendations to, the Australian Health Ministers' Conference (AHMC), a state or territory government and the Australian Local Government Association.<sup>2</sup> This provides a new opportunity to influence processes in ways that promote cohesive prevention and health promotion policy and strategy development across the country. ANPHA will be a catalyst for the strong integration of work already underway by the Commonwealth, states and territories and the non-government and community sectors and for the scale-up of programs and interventions to get the best outcomes from available resources.

ANPHA will follow through and build on the extensive risk factor work outlined by the NPAPH and in the Government's response to the National Preventative Health Taskforce. A renewed national focus on evidence-informed efforts in prevention and on the development of integrated approaches to address health risk, including the social determinants of health and through primary health care services, should follow. ANPHA will develop, support and investigate promising approaches to speed up the development of evidence for further action. It will provide national leadership in the dissemination of knowledge and, with partners, to strengthen national data and information capacity in order to better measure and report on progress.

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2 Refer subsection 11(1) of the *Australian National Preventive Health Agency Act 2010* regarding the CEO's functions.

ANPHA will play an important role in ensuring a balance between ‘top-down’ approaches – traditionally the role of AHMC, the Commonwealth and state and territory governments – and ‘bottom-up’ approaches – from families, communities and industry – to all together play a significant part in achieving progress on strategic priorities. Governments agree that a comprehensive approach to preventive health must include the full range of players that can help make healthy choices easy choices for all Australians.

ANPHA’s Strategic Plan 2011–2015 reflects its responsibilities under its enabling Act through an approach built on collaborative and strategic partnerships with all levels of government, throughout the health system, with the research community, industry, media, and non-government and community sectors. ANPHA recognises and will build on their significant contribution to prevention and health promotion.

This Plan recognises the external policy context and draws on existing national efforts and commitments in setting out the key result areas and strategies which are necessary to achieve ANPHA’s objectives. The Plan also reflects ANPHA’s obligations under its enabling Act and priorities, opportunities and constraints within the government context, as well as its governance and corporate requirements.

In the period of this first Strategic Plan, ANPHA will play a leading role in the ongoing social marketing campaigns that target obesity and tobacco. ANPHA will lead the Government’s expanded efforts to address binge drinking and support preventive health research including the translation of research into practice. ANPHA will provide support for the integration of effective preventive health programs into primary health services, particularly through Medicare Locals.<sup>3</sup>

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3 As part its health reforms, the Australian Government is establishing a nationwide network of primary health care organisations to better support health professionals, improve the delivery of primary care services at the local level and improve access to after hours primary care.

## 3. The Policy Context

ANPHA is conscious of the need to reflect the best evidence as well as the social and health policy context in which it operates.

The policy context in which ANPHA operates includes a number of Australian Government and COAG priorities and commissioned reports including:

- ▶ A Stronger, Fairer Australia<sup>xii</sup>
- ▶ The National Partnership Agreement on Preventive Health<sup>xiii</sup>
- ▶ A Healthier Future for all Australians<sup>xiv</sup>
- ▶ Closing the Gap and associated annual reports<sup>xv</sup>
- ▶ Australia: the Healthiest Country by 2020. National Preventative Health Strategy – a roadmap for action.<sup>xvi</sup>
- ▶ Taking Preventative Action<sup>xvii</sup>
- ▶ Building a 21st Century Primary Health Care System – Australia’s First National Primary Health Care Strategy<sup>xviii</sup>
- ▶ 4th National Mental Health Plan<sup>xix</sup>
- ▶ National Drug Strategy 2010–2015<sup>xx</sup>
- ▶ National Tobacco Strategy<sup>xxi</sup>
- ▶ National Alcohol Strategy 2006–2011<sup>xxii</sup>
- ▶ Parliamentary Inquiry into Obesity in Australia<sup>xxiii</sup>
- ▶ Obesity in Australia: Technical Report<sup>xxiv</sup>
- ▶ National Disability Strategy 2010–2020<sup>xxv</sup>
- ▶ National Chronic Disease Strategy<sup>xxvi</sup>
- ▶ National Male Health Policy<sup>xxvii</sup>
- ▶ National Women’s Health Policy<sup>xxviii</sup>
- ▶ National Early Childhood Development Strategy<sup>xxix</sup>.

ANPHA's Strategic Plan also recognises the broad and compelling evidence that underlies efficient, effective and fair approaches to disease prevention and health promotion that include the following:

- ▶ many of the underlying causes of poor health derive from the environmental and social contexts in which people grow, live, work and age. Addressing these social determinants of health requires an integrated approach involving governments at all levels and across a range of sectors;<sup>xxx</sup>
- ▶ a wide range of social, economic and environmental factors influence health and contribute to health inequalities in Australia, with some population groups experiencing poorer health than others. These groups include Aboriginal and Torres Strait Islander peoples, rural and remote populations, economically, socially or educationally disadvantaged groups, people from cultural and linguistically diverse backgrounds, new immigrant and refugee groups and people with disabilities;
- ▶ the life expectancy of Aboriginal and Torres Strait Islander peoples is significantly lower than that of the total Australian population and initiatives that target Indigenous Australians must be embedded within communities and use local knowledge and expertise. For Indigenous communities, particularly in remote and regional areas, community-controlled health services play an important role in the delivery of health services and comprehensive prevention and health promotion programs; and
- ▶ experiences in pregnancy, maternal attachment and early childhood affect physical health and well-being throughout life. Fostering a healthy start in life and engaging young people in healthy lifestyles and environments is beneficial for their future health, educational and social outcomes.

ANPHA is not starting from scratch. The Agency recognises the significant contribution to prevention and health promotion policy and programs already being made by Commonwealth, state, territory and local governments, non-government organisations (NGOs), health promotion foundations, primary care, health services, industry, community groups and families. ANPHA will seek to add value to, and broker, the scaling up of current and future evidence-based effort through the development of partnerships and collaborations.

## 4. Understanding ANPHA

ANPHA's first strategic plan shapes a new organisation, while setting longer-term directions for an enduring institution that will play a significant role in making Australia a healthier country. ANPHA's vision, mission, values and strategies will underpin its work. Through all its work ANPHA will seek to collaborate with governments and with research, industry, media, non-government and community partners. ANPHA will work to facilitate, enable and enhance the exchange of information, knowledge, advice and support to advance enhanced and effective prevention and health promotion actions throughout Australia.

### **ANPHA's Vision**

- ▶ A healthy Australian society, where the promotion of health is embraced by every sector, valued by every individual and includes everybody.

### **ANPHA's Mission**

- ▶ To be the catalyst for strategic partnerships, including the provision of technical advice and assistance to all levels of government and in all sectors, to promote health and reduce health risk and inequalities, and to initiate actions to promote health across the entire Australian community.

### **ANPHA's Values**

- ▶ **Catalyst** – initiate, foster, broker, promote and add value to prevention and health promotion efforts throughout Australia;
- ▶ **Collaboration** – build and strengthen effective and lasting partnerships across all levels and all relevant portfolios of government and with the health system, the research community, industry, media, and the non-government and community sectors;
- ▶ **Credibility** – support and produce well-researched and high quality policies, programs and advice, based on the best available evidence and expertise;
- ▶ **Innovation** – facilitate solutions that go beyond the traditional silos and boundaries of institutions and sectors and actively seek new approaches to connect research with policy and practice;
- ▶ **Integrity** – be accountable for all facets of ANPHA's work, acting with honesty and transparency in all work; and
- ▶ **Learning** – foster continuous learning and development.

## 5. ANPHA's Strategic Goals

ANPHA has adopted six high level strategic goals which capture the scope of its activity and which will, through sustained attention and collaborative action, deliver the vision.

### The strategic goals for ANPHA's Strategic Plan 2011–2015

#### **Goal 1: Healthy Public Policy**

Promote and guide the development, application, integration and review of public, organisational and community-based prevention and health promotion policies.

#### **Goal 2: Health Risk Reduction**

Provide policy advice and program leadership to support the development, implementation, evaluation and scaling up of evidence-informed health promotion and health risk reduction strategies for population groups across the lifespan and in a range of settings, with an initial focus on obesity, tobacco and harmful alcohol consumption.

#### **Goal 3: Knowledge Management**

Drive the development of dynamic knowledge systems that enable evidence-informed policy and practice in prevention and health promotion across Australia.

#### **Goal 4: Information and Reporting**

Guide improvements in national surveillance systems for prevention and health promotion and ensure that information on the progress of prevention and health promotion strategies is made readily available and regularly reported.

#### **Goal 5: Capacity Building**

Build broad and comprehensive prevention and health promotion capacity.

#### **Goal 6: Organisational Excellence**

Establish ANPHA as an innovative, reliable, transparent and accountable organisation, highly regarded by governments, partners, staff and the community with a strong national identity.

The strategic goals, key result areas and strategies that ANPHA will pursue in its first five years are set out in detail in the tables below.

## Goal 1: Healthy Public Policy

Promote and guide the development, application, integration and review of public, organisational and community-based prevention and health promotion policies.

Key Result Area	Strategies
<p><b>Policy leadership:</b> <i>Provide leadership on effective prevention and health promotion policies for application at national, state and local levels</i></p>	<ul style="list-style-type: none"> <li>▶ Work with Governments at all levels to enable innovative and effective policy development and to promote health in public policy across all sectors.</li> <li>▶ Support the use of best evidence and practice for the development of innovative policy and programs that lead to more effective investment in prevention and health promotion outcomes.</li> <li>▶ Work with and across government departments and agencies to support effective policy implementation and to promote inter-sectoral planning and implementation.</li> <li>▶ Engage with community and non government organisations, education settings, workplaces, industry, and media to share learnings and influence the development of evidence-informed health promoting policies.</li> <li>▶ Develop model policies to assist the development, application and review of public, organisational and community-based prevention and health promotion policy.</li> </ul>
<p><b>Policy advice:</b> <i>Work with national expert advisory groups and other partners to provide independent, timely and evidence-based advice on effective prevention and health promotion policies</i></p>	<ul style="list-style-type: none"> <li>▶ Monitor national and international research, policy environments and other sources for emerging knowledge and evidence to support policy-related advice.</li> <li>▶ Respond to requests for expert advice, and provide expert advice to the Commonwealth Minister for Health &amp; Ageing, state, territory and local governments, AHMC and other relevant ministerial councils on priorities and options for prevention and health promotion policies, research and programs.</li> <li>▶ Actively measure, evaluate and report on existing policy, approaches and interventions.</li> <li>▶ Support the prevention and health promotion-related policy efforts of all partners through issue-based, evidence-informed information and briefings, including to media.</li> </ul>

## Goal 1: Healthy Public Policy continued

Key Result Area	Strategies
<p><b>Partnerships:</b> <i>Establish a culture of cooperation, collaboration and dialogue for prevention and health promotion policy development</i></p>	<ul style="list-style-type: none"> <li>▶ Develop and strengthen policy partnerships in health and with other sectors including primary health (e.g. Medicare Locals), community based health services, workplaces, industry, community organisations and school networks.</li> <li>▶ Where there is alignment towards common goals, collaborate with partners to achieve those goals and advance their work.</li> <li>▶ Establish and contribute to existing expert panels and networks working directly or indirectly in key areas such as obesity, tobacco and alcohol in order to assist effective policy and program development and implementation.</li> <li>▶ Pursue transparent, appropriate and ethical engagement with industry in order to advance ANPHA's strategic goals.</li> </ul>
<p><b>Funding models:</b> <i>Examine and provide advice to the Commonwealth on future funding models to support enhanced and effective investment in prevention and health promotion</i></p>	<ul style="list-style-type: none"> <li>▶ Scope projects, commission advice and report on options for innovative funding models that lead to more effective investment in health promotion and to prevention outcomes.</li> </ul>

## Goal 2: Health Risk Reduction

Provide policy advice and program leadership to support the development, implementation, evaluation and scaling up of evidence-informed health promotion and health risk reduction strategies for population groups across the lifespan and in a range of settings with an initial focus on obesity, tobacco and harmful alcohol consumption.

Key Result Area	Strategies
<p><b>Integrated responses to health risk:</b></p> <p><i>Develop comprehensive population-health based approaches to health risk that focus on the social and other determinants of disease and risk such as illicit drug use, injury or communicable disease and associated comorbidities</i></p>	<ul style="list-style-type: none"> <li>▶ Develop policy advice and program approaches that better identify and integrate multiple aspects of health risks and their determinants.</li> <li>▶ Commission studies and modelling of health risks and future scenarios and of the potential benefits from prevention-related investments.</li> <li>▶ Establish and maintain the partnerships required to progress action on agreed priorities for an integrated, comprehensive approach to prevention and health promotion, recognising a broad range of partners including community and non-government groups, industry, families and governments at all level and across sectors.</li> <li>▶ Respond to requests from governments, and be ready to advise on risk areas, prevention priorities and program approaches that merit future attention.</li> </ul>

## Goal 2: Health Risk Reduction continued

Key Result Area	Strategies
<p><b>Reduce obesity:</b> <i>Support, extend and improve policies and programs that aim to reduce the prevalence of overweight and obesity, through research, analysis and advice</i></p>	<ul style="list-style-type: none"> <li>▶ Support innovation that helps build the evidence base to guide policies, programs and large scale interventions to address obesity and to strengthen design, implementation and evaluation capacity.</li> <li>▶ In collaboration with an expert advisory group, provide leadership and technical advice to strengthen and extend social marketing and other programs, towards both an enabling environment and behavioural change.</li> <li>▶ In collaboration with an expert advisory group, provide technical advice on emerging policy areas and options that relate to obesity, food, healthy eating and physical activity.</li> <li>▶ Monitor and engage with industry and other partners on food products and marketing, including products for children and marketing to which they are exposed with attention to energy-dense, nutrient-poor foods and beverages.</li> <li>▶ Facilitate alliances between communities and organisations to consolidate program development within and across sectors and groups to enable scaling up of interventions and investment.</li> <li>▶ In collaboration with partners, promote and support environmental changes that support physical activity and healthy eating.</li> <li>▶ Strengthen, up-skill and support the primary health care workforce (with a specific focus on Medicare Locals) and the general health workforce to support people in making healthy lifestyle choices.</li> </ul>
<p><b>Reduce the use of, and exposure to, tobacco:</b> <i>Support evidence-based action to reduce smoking and exposure to tobacco through strong policies and programs</i></p>	<ul style="list-style-type: none"> <li>▶ Support innovation to guide the ongoing development and evolution of policies and programs that address tobacco use.</li> <li>▶ Lead, strengthen and extend existing social marketing and other programs, working with expert groups and partnerships.</li> <li>▶ With the support of an expert advisory group, support innovation and enhanced efforts to ensure the reach and effectiveness of campaigns and other programs for all ages and sections of the community, with a special focus on those especially at risk and from hard-to-reach groups.</li> <li>▶ Support enhanced knowledge and skills across services and systems, including in and through primary health services, that prevent smoking uptake, support smoking cessation and protect from the harms of passive smoking.</li> </ul>

## Goal 2: Health Risk Reduction continued

Key Result Area	Strategies
<p><b>Reduce the harmful consumption of alcohol:</b></p> <p><i>Promote and support evidence-based approaches to address harmful alcohol consumption through strong policies and programs</i></p>	<ul style="list-style-type: none"> <li>▶ Help build the evidence base to guide innovative policies and programs that address the harmful consumption of alcohol and strengthen design, implementation and evaluation capacity.</li> <li>▶ With the support of an expert advisory group provide to, and respond to requests from governments and AHMC, on options to strengthen policies and programs through pricing-related mechanisms, regulation, responsible marketing and the protection of children from exposure to promotion, and on strengthening standards and advice around the supply of alcohol to minors and alcohol-related licensing.</li> <li>▶ Support the development of policies and programs that will promote a change in the drinking culture among young people and play a leading role in the ongoing roll-out of government and community-supported programs that address harmful alcohol consumption.</li> <li>▶ Support and contribute to national dialogue on drinking culture, public and individual safety and alcohol-related harm.</li> <li>▶ Promote and support workplace programs that prevent and reduce alcohol-related harm.</li> <li>▶ Promote informed community action to minimise alcohol use in pregnancy, and promote awareness of the NHMRC Guidelines that recommend delaying the onset of alcohol use for as long as possible, preferably to the age of 18.</li> </ul>

## Goal 3: Knowledge Management

Drive the development of dynamic knowledge systems that enable evidence-informed policy and practice in prevention and health promotion across Australia.

Key Result Areas	Strategies
<p><b>Prevention and health promotion research:</b></p> <p><i>Ensure prevention and health promotion policies and programs are underpinned by the best possible evidence with world-class, sustainable research capacity in Australia</i></p>	<ul style="list-style-type: none"> <li>▶ In partnership with the NHMRC, and other relevant groups, develop a national prevention and health promotion research strategy with a focus on the translation of research into practice particularly in areas such as interventions, evaluation, policy, cost-benefit analyses and social epidemiology.</li> <li>▶ Establish a national prevention and health promotion research network, research register and dissemination system to ensure coordinated, efficient research programs and the associated development of research capacity.</li> <li>▶ Support targeted, high-quality applied research projects and approaches that contribute new evidence to inform innovative policies and large-scale programs including prevention through primary health care (e.g. Medicare Locals).</li> </ul>
<p><b>Evidence analysis and dissemination:</b></p> <p><i>Collect, analyse, interpret and disseminate knowledge for improving and expanding prevention and health promotion practice across sectors and settings</i></p>	<ul style="list-style-type: none"> <li>▶ Establish a national internet-based knowledge hub as a central, organised and authoritative source for prevention and health promotion information, including policies and programs.</li> <li>▶ Ensure information is presented and disseminated in a form that can be readily used by different sectors and communities and that promotes active learning, feedback and good practice.</li> <li>▶ Manage, analyse and disseminate information for a wide range of sectors and communities to ensure widespread and effective adoption of prevention and health promotion actions, particularly for culturally and linguistically diverse groups, for Aboriginal and Torres Strait Islander peoples, and in disadvantaged communities.</li> </ul>

### Goal 3: Knowledge Management continued

Key Result Areas	Strategies
<p><b>Prevention and health promotion evaluation:</b></p> <p><i>Promote and support evaluation and the development of an evaluation culture in all programs and policies related to prevention and health promotion, in order to build evidence and capacity</i></p>	<ul style="list-style-type: none"> <li>▶ Develop an evaluation framework and oversee the evaluation of the NPAPH.</li> <li>▶ Work with experts in intervention and evaluation to review policy and program evaluation practice and develop guidelines for improvement in practice.</li> <li>▶ Contribute to the Australian and international evidence base on effective and efficient prevention interventions and evaluations of national multi-component prevention policy initiatives.</li> <li>▶ Work with partners to strengthen the competencies and capacity to undertake complex evaluations, including those required for multifaceted community interventions.</li> <li>▶ Ensure timely and effective collation, analysis, interpretation and dissemination of evaluation findings to make information accessible and usable by all.</li> </ul>

## Goal 4: Information and Reporting

Guide improvements in national surveillance systems for prevention and health promotion and ensure that information on the progress of prevention and health promotion strategies is made readily available and regularly reported.

Key Result Areas	Strategies
<p><b>National systems for surveillance<sup>4</sup></b></p> <p><i>Provide advice and support to the ongoing development and improvement of national surveillance systems in all areas related to prevention and health promotion related policies and programs</i></p>	<ul style="list-style-type: none"> <li>▶ Advise on national infrastructure requirements for strengthening surveillance, monitoring and reporting, including through improved data-linkage and other connection and coordination mechanisms.</li> <li>▶ Support ongoing and new data-collection systems including the Australian Health Survey.</li> <li>▶ Work strategically with partners such as the Department of Health and Ageing, Australian Institute of Health and Welfare, the Australian Bureau of Statistics and the Public Health Information Development Unit to improve data collection and fill gaps in current systems.</li> </ul>
<p><b>Information analysis and reporting</b></p> <p><i>Monitor, synthesise, analyse and disseminate information about prevention and health promotion in Australia and provide timely and authoritative reporting</i></p>	<ul style="list-style-type: none"> <li>▶ Establish a comprehensive and user-friendly information management system for the development, discussion and dissemination of prevention and health promotion policies and programs.</li> <li>▶ Provide authoritative, timely and consolidated information on the state of prevention and health promotion in Australia, including through a biennial CEO's report.</li> <li>▶ Ensure (as part of biennial reporting on progress with prevention and health promotion) that progress towards COAG targets is measured and reported.</li> </ul>

4 The World Health Organisation defines public health surveillance as the continuous, systematic collection, analysis and interpretation of health-related data needed for the planning, implementation and evaluation of public health practice.

## Goal 5: Capacity Building

Build broad and comprehensive prevention and health promotion capacity.

Key Result Area	Strategies
<p><b>Prevention and health promotion workforce and systems</b></p> <p><i>Strengthen the strategic underpinnings and planning for inclusion of prevention and health promotion as a core component of a capable, sustainable and motivated workforce and health care system</i></p>	<ul style="list-style-type: none"> <li>▶ Review, monitor and analyse prevention and health promotion-related workforce capacity, including in the research sector.</li> <li>▶ Promote comprehensive strategies and policies that will improve capacity and identify and address future needs across the health care system.</li> <li>▶ Work collaboratively and strategically with partners such as Health Workforce Australia, the tertiary training sector and peak professional bodies to ensure strategies and plans are efficiently and effectively developed and implemented, including for program design, delivery, evaluation and research-related competencies.</li> <li>▶ Provide advice on capability and competency-based systems for accreditation, standards and credentials for prevention and health promotion.</li> <li>▶ Develop and promote networks to support workforce learning and development, linking researchers, policy makers and community-level practitioners.</li> <li>▶ Develop and promote model national standards for the roll-out of prevention and health promotion programs through primary care systems, including Medicare Locals, community-controlled health services and other segments of the Australian health care system.</li> </ul>
<p><b>Quality improvement</b></p> <p><i>Support and recognise continuous quality improvement, best practice and excellence in prevention and health promotion practices</i></p>	<ul style="list-style-type: none"> <li>▶ Develop a system to guide, promote, recognise and reward continuous quality improvements in prevention and health promotion practice and interventions.</li> <li>▶ Support the introduction of an awards scheme that recognises and provides incentives for quality improvement, development, best practice and excellence in prevention and health promotion practice and interventions.</li> </ul>

## Goal 6: Organisational Excellence

Establish ANPHA as an innovative, reliable, transparent and accountable organisation, highly regarded by governments, partners, staff and the community with a strong national identity.

Key Result Area	Strategies
<b>Governance</b> <i>Establish robust governance and management systems</i>	<ul style="list-style-type: none"> <li>▶ Establish and maintain a robust governance framework that enhances organisational performance.</li> <li>▶ Support the work and functions of the Advisory Council.</li> <li>▶ Create and maintain sound, transparent and accountable resource management systems that conform to public sector standards and include processes for procurement, contract, financial, legal and risk management.</li> <li>▶ Establish clear delegation of authority, responsibility, accountability and reporting consistent with ANPHA's responsibilities under its enabling Act.</li> </ul>
<b>Human resources</b> <i>Attract, retain and develop high performing staff in a healthy work environment</i>	<ul style="list-style-type: none"> <li>▶ Promote work/life balance and good health for staff and adopt policies and practices to create a work environment that promotes health and wellbeing.</li> <li>▶ Develop and implement a workforce plan for ANPHA.</li> <li>▶ Establish, and regularly review, ANPHA's human resource policies and procedures.</li> <li>▶ Develop and implement a performance management and staff development system.</li> <li>▶ Develop appropriate industrial instruments including an Enterprise Bargaining Agreement for staff.</li> </ul>

**Goal 6: Organisational Excellence continued**

Key Result Area	Strategies
<p><b>Identity and Communications</b></p> <p><i>Ensure ANPHA's role in, and approach to, prevention and health promotion is understood and communicated to all partners in all sectors, including for governments</i></p>	<ul style="list-style-type: none"> <li>▶ Develop an information and communication strategy to build and promote awareness of ANPHA's identity, role, responsibilities and partnership approach.</li> <li>▶ Develop and implement an information and communication technology strategy and policies to support ANPHA's work.</li> <li>▶ Establish ANPHA's systems and capacity to engage, consult, collaborate and communicate with all partners including NGOs, community groups, governments at all levels, industry and media.</li> <li>▶ Develop effective references, procedures and processes to use the expertise and networks of the Advisory Council and the states and territories.</li> </ul>
<p><b>Organisational effectiveness</b></p> <p><i>Ensure ANPHA develops as a learning organisation</i></p>	<ul style="list-style-type: none"> <li>▶ Measure and continuously improve ANPHA's organisational health and effectiveness, building in regular reflection and review.</li> </ul>

## 6. Outcomes for ANPHA by 2015

ANPHA has adopted an ambitious program of work for its first five year phase. This Strategic Plan identifies areas where, through sustained effort, expertise, collaboration and enthusiasm, there is great scope for advancement in prevention and health promotion, reduction in risk factors and behaviours, reduced health disparities and improved system capacity.

Measuring progress in health outcomes against the strategic goals and key result areas in this plan will, however, be difficult in the early years. Comprehensive and coordinated national surveillance and monitoring systems are currently not in place for everything on which the Agency would wish to report, nor are there agreed baseline data in all cases. Addressing this, and the opportunities for improving national prevention and health promotion information systems, is one of ANPHA's priorities.

The Commonwealth, states and territories have agreed, through the National Healthcare Agreement,<sup>xxx</sup> to report annually on the prevalence of key chronic conditions and associated lifestyle risk factors. In addition to this the states and territories have agreed to report on indicators related to unhealthy weight, smoking, physical inactivity and nutrition through the NPAPH.<sup>xxxii</sup> The data that emerge will assist ANPHA in tracking progress.

The comprehensive approach ANPHA has adopted in this plan will contribute to these medium to long-term outcomes, and will assist in building the capacity for robust measuring, reporting and accountability.

ANPHA has identified a number of quantitative, qualitative and aspirational targets against which it can assess progress towards its vision of *a healthy Australian society, where the promotion of health is embraced by every sector, valued by every individual and includes everybody.*

ANPHA's annual Operational Plans will describe in greater detail proposed policy, program, and capacity building activity to be undertaken by the Agency each year. Annual reporting against the annual Operational Plan will include a measure of progress against agreed process and system indicators.

## What we're aiming for by 2015

### *ANPHA will contribute towards a healthy Australian society:*

#### *where health risk is addressed.....*

- ▶ the prevalence of daily smoking has continued to decline annually
- ▶ the rise in the prevalence of overweight and obesity has been halted
- ▶ the proportion of Australians who drink at short-term risky or high-risk levels has declined
- ▶ a changed drinking culture which no longer sees binge drinking by young people as appropriate
- ▶ strong policies, infrastructure and systems are established at all levels of government, and for non-government organisations and communities, so that a range of risk factors can be addressed over time and in an equitable and integrated manner

#### *where the promotion of health is embraced by every sector.....*

- ▶ significant growth in the number of workplaces that have adopted healthy lifestyle and/or health promotion programs for employees
- ▶ significant growth in the number of schools that have incorporated healthy lifestyle and health promotion programs into curriculum and/or the school's extra-curricular programs
- ▶ annual growth in the number of local government areas embracing health promoting policies and structural change as well as community-focused programs
- ▶ strategic partnerships between ANPHA, governments, the health sector, the research community, industry, media and the non government and community sectors

#### *valued by every individual.....*

- ▶ the population has shifted towards placing a greater value on prevention and health promoting policy and interventions

#### *and includes everybody.....*

- ▶ prevention and health promotion policies and programs at all levels incorporate specific reference to, and provision for, Aboriginal and Torres Strait Islander peoples, people from culturally and linguistically diverse communities, and people with mental illness and other disabilities and their carers.

## 7. Conclusion

This first Strategic Plan (2011–2015)<sup>5</sup> articulates ANPHA's vision, its mission, and the values which underpin ANPHA's work. The plan sets out strategic directions and goals for the first five year term of operation providing a balanced, phased and measured approach to achieving both short-term and longer term outcomes. The Plan will guide ANPHA in its role as a catalyst for enhanced prevention and health promotion effort throughout Australia. As the foundation Strategic Plan for the Agency, it also includes a focus on organisational establishment.

The Plan focuses clearly on the prevention of chronic illness and associated risk factors, through programs and policies that promote a health lifestyle and good nutrition, reduce tobacco use, minimise harmful alcohol consumption and reduce the incidence of obesity amongst Australians. It also sets in place the national infrastructure needed to progress prevention and health promotion policy, and to strengthen the link between research, policy and practice.

ANPHA'S Strategic Plan (2011–2015) is complemented by more detailed annual operational plans, commencing with the first year Operational Plan (2011–2012).

Every two years, ANPHA will review, report and publish actions taken under the Plan and the progress made in reducing risk factors and in health and social outcomes.

ANPHA has been established as a dedicated, national organisation focused on addressing the complex challenges of preventable chronic disease and the burden this places on communities, families and public resources. Through leadership and collaborative action with partners, ANPHA aims to play a significant role in putting Australia on the path to becoming a healthier country.

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5 While section 43 of the *Australian National Preventive Health Agency Act 2010* provides that ANPHA's strategic plans will be for 5-year periods, it specifically provides that the first strategic plan will end on 30 June 2015 and that subsequent strategic plans will begin on the 1 July immediately following the end of the prior period.

# Acronyms

<b>AHMC</b>	Australian Health Ministers' Conference
<b>ANPHA</b>	Australian National Preventive Health Agency
<b>CEO</b>	Chief Executive Officer
<b>COAG</b>	Council of Australian Governments
<b>NGO</b>	Non-government organisation
<b>NHHRC</b>	National Health and Hospitals Reform Commission
<b>NHMRC</b>	National Health and Medical Research Council
<b>NPAPH</b>	National Partnership Agreement on Preventive Health

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