

Annual Report 2003–2004





Vision

The Foundation envisages a community where:

- health is a fundamental human right;
- everyone shares in the responsibility for promoting health; and
- everyone benefits from improved health outcomes.

Mission

The Foundation's mission is to build the capabilities of organisations, communities and individuals in ways that:

- change social, economic, cultural and physical environments to improve health for all Victorians; and
- strengthen the understanding and the skills of individuals in ways that support their efforts to achieve and maintain health.

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Cover Image: Healthy habits start young. Programs such as the Walking School Bus and the Out of School Hours Sports Program encourage young people to develop physically active habits and remain socially connected.

Inside Cover Image: State Sporting Associations have made tremendous progress over the past 12 months with many adopting a much more inclusive approach to seeking and welcoming new members.



VicHealth Chair's Report



My first annual report as Chair of VicHealth provides a welcome opportunity to recognise the extraordinary contribution of Professor John Funder.

When he retired as Chair of VicHealth in March 2004, Funder had completed seven years at the helm. Each of those years was marked by significant and sustainable advances at VicHealth and as I look back over the highlights of this year, each can be tracked back to decisions taken during Funder's chairmanship.

His 1998 appointment of Rob Moodie has guided the tone and direction of VicHealth since then. An inspired appointment, Rob has overseen significant changes to the organisation and raised Victoria's profile as a leader in health promotion, both nationally and internationally. The importance of this leadership was fully brought home when Victoria hosted the 18th World Conference on Health Promotion and Health Education in Melbourne in April 2004.

With almost 3000 delegates from 90 countries, this was the largest-ever conference on health promotion. Rob and his co-chair, Marilyn Wise, led a conference which brought enthusiastic praise from the World Health Organisation (WHO), the International Union of Health Promotion and Health Education, universities, research centres and health promotion bodies around the world.

VicHealth in particular was recognised for the contribution it makes in a range of policy areas, including tobacco control, mental health promotion, physical activity and especially our focus on participation in sport, and the Walking School Bus Program. We also attracted positive feedback on the efforts we have made to build a highly trained public health research workforce.

The development of a strong public health research workforce flowed from a 1999 decision to position VicHealth as an evidence-based organisation.

The importance of evidence was highlighted this year when VicHealth, in partnership with the Department of Human Services, supported research into the burden of disease associated with intimate partner violence. It found that violence was the most significant modifiable risk factor for ill health for women up to the age of 45 years and a problem that cannot be ignored. My special thanks go to Police Commissioner Christine Nixon, the Hon. Bronwyn Pike and the Hon. John Thwaites for helping us raise awareness of this issue at the launch of the report.

The success of the 2000 decision to focus on a mental health promotion approach was recognised this year. The mental health promotion stream at the World Conference was a first ever and provided a perfect opportunity to launch the summary report of a publication currently being produced by WHO in partnership with VicHealth and the University of Melbourne. The publication, *Promoting Mental Health: Concepts, Evidence and Practice*, draws together the knowledge and expertise of over 100 people working across the globe to document our most recent understandings in this area. We look forward to the publication of the book this year.

The 2001-2002 initiative to regularly hold Board meetings throughout regional Victoria owes its origins to a favourite "Funderism" - "We are VicHealth not Melbourne Health." Our final meeting for this year was held in Horsham and was real evidence of the success of this initiative and highlighted how it has developed since its infancy. The time in Horsham provided a wonderful opportunity to listen to the issues facing this part of Victoria and to understand how they are being tackled. My thanks go to all of those in the Wimmera who shared their experiences and made us feel so welcome.

This year saw some changes to the Board of VicHealth. We farewelled

Tim Jacobs after 4 years and Leeanne Grantham left us to move to South Australia. Their wise counsel and energy contributed much to VicHealth and we greatly value the contribution they made. We welcomed Jerril Rechter, the Director of the Footscray Community Arts Centre to the Board and Jerril is already making a significant contribution, both at the Board table and on our Arts advisory panels. The energy, effort and enthusiasm of all the Board members cannot be overstated. They provide invaluable advice and support and have my heartfelt thanks.

So too, those who give of their time and expertise to serve on our advisory panels make a real contribution to the Victorian community and the Board greatly appreciates their input.

Rob Moodie and his special team of people have once again put in an exceptional year and coped with significant extra external pressures, such as the conference, while bedding down changes to more closely align the internal structure with VicHealth's external focus. They have risen above every challenge.

And finally, thanks to Funder for a great job well done.

A handwritten signature in blue ink, appearing to read 'Jane Fenton'.

Jane Fenton, AM Chair

Message to the Minister

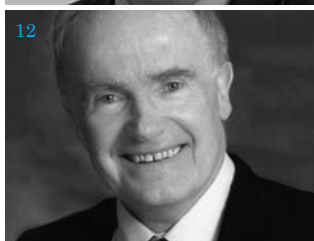
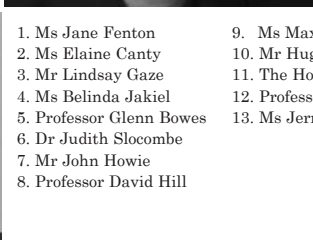
In accordance with the Tobacco Act 1987, I have pleasure in submitting to you the Victorian Health Promotion Foundation's Annual Report for the 12 months of operation to 30 June 2004.

The report reviews the progress made by the foundation in the promotion of health for all Victorians.

A financial statement for 2003-2004 is included in the report with the Auditor General's Report.

Jane Fenton, AM Chair

VicHealth Board of Governance



- | | |
|--------------------------|---------------------------------|
| 1. Ms Jane Fenton | 9. Ms Maxine Morand |
| 2. Ms Elaine Canty | 10. Mr Hugh Delahunty |
| 3. Mr Lindsay Gaze | 11. The Hon. Bill Forwood |
| 4. Ms Belinda Jakiel | 12. Professor Richard Smallwood |
| 5. Professor Glenn Bowes | 13. Ms Jerril Rechter |
| 6. Dr Judith Slocombe | |
| 7. Mr John Howie | |
| 8. Professor David Hill | |

Chair Ms Jane Fenton, AM

Jane Fenton is the principal of Fenton Communications, a strategic communications consultancy. She is a Fellow of the Public Relations Institute of Australia, a Life Governor of Very Special Kids and a Director of the Murdoch Children's Research Institute.

Ms Elaine Canty

Elaine Canty is a broadcaster, lawyer and a non-executive director of Athletics Australia, Queen Victoria Market, Women's and Children's Health and Royal Botanic Gardens. She is also a member of the AFL Tribunal and the State Sports Centre Trust.

Mr Lindsay Gaze

Lindsay Gaze is coach of the Melbourne Tigers in Australia's National Basketball League (NBL), a member of the Sport Australia Hall of Fame Board, and one of Australia's most prominent and experienced coaches. He represented Australia in basketball as a player in three Olympics and as a coach in four Olympics.

Ms Belinda Jakiel

Belinda Jakiel is a Wotjobaluk woman born and raised in Ballarat. She currently works as business manager at Athlete Development Australia, is a qualified teacher, and an elite athlete. Her professional experience has involved extensive work with young people, indigenous communities and high-risk groups.

Professor Glenn Bowes

Professor Glenn Bowes is Stevenson Professor and Head, Department of Paediatrics, The University of Melbourne and has broad experience in clinical and academic medicine and as a public health researcher.

Dr Judith Slocombe

Dr Judith Slocombe established her veterinary diagnostic business in 1989, sold it to the Gribbles Group and is now General Manager of their Veterinary Division. She was the 2001 Telstra Australian Business Woman of the Year.

Mr John Howie

John Howie is a lawyer and senior partner in the firm of Howie & Maher, Solicitors. He is the Chair of the Victorian Legal Aid Commission, the Chair of the VicSport Board and a Member of the Melbourne and Olympic Park Trust.

Professor David Hill

Professor David Hill is Director of The Cancer Council, Victoria. He is one of Australia's leading public health researchers, and is widely regarded as a leading international expert in social marketing and public health campaigns. In 2001, he was made a member of the Order of Australia (AM) for 'services to the promotion of community health, particularly in the development of cancer awareness and prevention programs'.

Ms Maxine Morand

Maxine Morand, MLA for Mount Waverley, is a Labor Party member of State Parliament. Maxine has spent her working life in public health. She spent some years in public hospitals, before taking a research position at the Cancer Council of Victoria. Maxine worked for three years as an advisor to the previous Minister for Health before being elected to Parliament in 2002.

Mr Hugh Delahunty

Hugh Delahunty, MLA for Lowan, is a National Party member of State Parliament. Hugh was a Councillor and Mayor of the former Horsham City Council, Chairman of Commissioners of the Mildura Rural City and the first Mayor of the new Horsham Rural City Council. Hugh played football with the Essendon Football Club and is a Life Member of the Murtoa Football Club.

The Hon. Bill Forwood

The Hon. Bill Forwood, MLC for Templestowe, is a Liberal Party member of State Parliament. He has had a long involvement in business and politics and is a member of numerous local community groups.

Professor Richard Smallwood

Professor Richard Smallwood has a wealth of experience in senior medical and public health positions, most recently as Commonwealth Chief Medical Officer. He is Chair of the Victorian Ministerial Taskforce for Cancer and former Chair of the National Health and Medical Research Council and past President of the Royal Australasian College of Physicians. He is an international speaker in the areas of research, clinical and health service related topics, and author/co-author of over 250 publications.

Ms Jerril Rechter

Jerril Rechter is the Director of the Footscray Community Arts Centre. In 1992 Jerril formed the ground-breaking youth arts company, Stompin Youth Dance Company, where she remains as Artistic Executive. Jerril has contributed to numerous state and federal arts and funding policies as an industry advisor and as Deputy Chair of the Australia Council Dance Fund, Chair of the Theatre Panel for Arts Tasmania and a member of the Tasmanian Arts Advisory Board. Jerril also worked from 2002 as Artistic Associate at the Melbourne International Arts Festival.

Departing Board Members

Mr Tim Jacobs

Served from 20 April 1999 until 31 March 2004

Ms Leeanne Grantham

Served from 15 July 2003 until 9 April 2004

VicHealth sincerely thanks both Tim and Leeanne for their expertise, input and support while serving on the VicHealth Board.



VicHealth CEO's Report



During the last year we have focused on the three of the most important preventable causes of death and disease among Victorians; physical inactivity, tobacco and poor mental health.

One of our key goals is to increase participation in physical activity

In Victoria only 60 per cent of adult males and 53 per cent of adult females are sufficiently active to enjoy the health benefits of physical activity¹. As part of three year funding agreements, VicHealth funds 51 State Sporting Associations (SSAs) through the Partnerships for Health Scheme to increase participation in sport. The scheme encourages innovative approaches to attract and maintain new members, coaches, managers and volunteers. The Participation in Community Sport and Active Recreation (PICRAR) Program began to take effect as Regional Sports Assemblies connected with local people who were inactive and found ways to increase their access to, and participation in a variety of activities, ranging from walking groups to table tennis. In 2003-2004 there were 28 Partnership Grants and 72 Local Grants provided to local communities across the state to promote active participation. By the end of 2004, 48 local councils and at least 200 primary schools will be implementing the Walking School Bus Program across Victoria, up from the initial pilot program of four councils and 16 schools in 2002. The pilot Out of School Hours Sports Program developed jointly by VicHealth and the Australian Sports Commission has now received federal funding and will be known as the Active After-School Communities Program.

Quit is at the front line of efforts to reduce smoking

In Victoria 19.2 per cent of the adult population still smoke, but among those aged 18-29 years the percentage remains at 24 percent². These figures are from 2002, and although they reveal a steady

decline, demonstrate that we need to keep the pressure on to reduce smoking prevalence. It's not just a health imperative. The economics of prevention stack up too. The Quit Program, which VicHealth has funded since 1987, has overseen a decline in smoking prevalence from 34.2 per cent in 1983 to 19.2 per cent. It has proved 500 to 1000 times more cost effective than treating end-stage lung cancer³. During the successful evaluation of Quit and the VicHealth Centre for Tobacco Control, which took place in 2003-2004, international reviewers emphasised the outstanding contribution that both have made to tobacco control research, advocacy and smoking cessation in Victoria.

We're breaking new ground in the area of mental health and wellbeing

As Jane Fenton mentioned in the Chair's Report, our work in mental health and wellbeing has been recognised by the World Health Organisation. We played a lead role in the collaboration that saw the release in June of *The Health Costs of Violence: Measuring the burden of disease caused by intimate partner violence*. We are establishing the VicHealth Centre for Excellence in Mental Health and Wellbeing to build the evidence base and ensure the impact of our work is felt long into the future.

We are continuing to invest in a public health research workforce funding five new public health fellows and six new scholarships last year as well as offering supporting funds to three fellows and eight scholars in 2003-2004. We are currently fully funding or supporting 55 fellows and scholars.

The World Conference on Health Promotion and Health Education had a huge impact

As Jane has pointed out, health promotion's "Olympics" – the 18th World Conference on Health Promotion and Health Education – generated excitement and energy in April 2004.

I want to pay special thanks to the conference secretariat and those organisations (see page 32) who supported the idea before, during and long after the event. The conference showed how connections and conversations across borders can make health promotion activity more effective everywhere and received good local media coverage. By being engaged internationally, VicHealth can connect people and organisations with great ideas and support them to work towards mutual goals. We continue to do so within the state, within the country and around the world.

We have restructured to get better results

During the last year we have aligned our internal structure to our key health promotion focus areas: Physical Activity (and healthy eating), Mental Health and Wellbeing (and health inequalities) and Research Workforce and Tobacco Control. These core health promotion units are supported by Health Promotion Innovations, a new unit with a brief to ensure we maintain a leading position in health promotion excellence, and the Communications and Marketing and Finance and Administration units.

We wish our departing Chair the best of luck

I can't sign off without mentioning the retirement from the Board of the inspirational and supportive Chair, Professor John Funder. He has been a mentor and guide, always offering support, new ideas and highly constructive debate. We are indeed fortunate to have Jane Fenton, who has served on the Board since 1998, as our new Chair.

Dr Rob Moodie CEO, VicHealth

Main Image: From little things big things do grow. Social inclusion has a positive effect on our mental health and wellbeing.

¹ Department of Human Services and VicHealth, *Physical Activity Patterns of Victorian Adults: Findings from the Victorian Population Health Survey 2002*. Melbourne 2004

² CCV, Victorian Smoking and Health Population Survey, 2002

³ Commonwealth Department of Health and Ageing. *Returns on Investment in Public Health: An Epidemiological and Economic Analysis*, Canberra, 2003

Results, Activity, Focus Investments at a Glance

More Efficient

In September 2003, we introduced a new organisational structure to increase the alignment between our longer-term strategy and internal work functions and processes.

The new structure and changes to some of our processes are assisting us in delivering greater efficiencies in our grant-making process and, importantly, in our ability to collect, analyse, generate and share new knowledge, which will support the broader adoption of health promoting policies and activities.

Expenditure

In 2003–04, VicHealth contributed \$25,211,139 towards program activity, research grants and associated expenditure.

Grants expenditure (program activity, research grants) accounted for \$23,253,233.

Associated expenditure accounted for \$1,957,906 and included developmental and scoping projects, evaluation, the mental health social marketing campaigns, dissemination and publications supporting grants.

Applications

In 2003–2004 VicHealth received 2207 applications for funding. VicHealth approved 1166 applications. A total application approval rate in 2003–2004 was 52.8%, up from a 40.1% approval rate in 2002–2003.

Of the 1166 applications approved, there were:

- 339 grant applications (41.4% approval rate)
- 400 Sport Injury Prevention grant applications (61.5% approval rate)
- 427 Sun Shade grant applications (56.5% approval rate)

In addition to approved applications, 162 projects were carried over from previous years. Therefore the total number of projects funded in 2003–2004 financial year was 1328.

	Total
Number of applications	2207
Number approved	1166
Approval Rate	52.8%

Figures 1 and 2 Investments by Health Action Areas

Level of investment in areas of high priority

In 2003–04 financial year, 71% of investments were directed towards tobacco control, mental health and physical activity.

Over 60% of investments were directed to these same health action areas in 2002–2003. Figure 1 demonstrates investments in priority health action areas.

Some of the investment in sport was allocated to mental health promotion and we also invested in the VicHealth Centre for Research and Practice in the Promotion of Mental Health and Social Wellbeing. This explains, in part, the increased investments towards mental health promotion.

** Investments in “Other health action areas” include investments to projects focusing on communicable and non-communicable diseases, sexual and reproductive health, environmental health and projects with multiple focus.

Figure 3 Investments by Population Groups

We focus on improving the health status of all population groups while reducing health inequalities. We therefore maintain a strategic balance between whole of population and specific population focus. One of the main indicators is that at least 30–40% of grants focus on specific population group activities.

In 2003–2004, \$12,842,776 (55.2%) was invested in projects targeting the general community and \$10,410,457 (44.8%) was invested in projects targeting specific population groups.

Figure 4 Investments by Geographical Location

VicHealth takes action to tackle inequalities that arise due to variations in geography, income, education and heritage (indigenous and cultural and linguistic). We therefore measure the geographical focus of our investments.

The graph indicates that the majority of investments were made to major Victorian cities (eg: Melbourne and Geelong) and inner regional Victoria (this stretches between Pyrenees, Indigo, Campaspe and Wellington Shires).

Victoria does not have many remote areas, hence the investment in remote areas is very low.

* Classification of Remoteness was used to analyse investments by geographical regions of Victoria. This classification was changed to better represent investments by the level of geographical advantage/disadvantage. The four remoteness areas measured here are: Major Cities of Victoria, Inner Regional Victoria, Outer Regional Victoria and Remote Victoria.

The classification is not directly comparable to the classification previously used by VicHealth (metropolitan, regional, rural areas).

* ASGC Remoteness Classification: Purpose and Use. ABS, 2003

Figure 1 - Investments by Health Action Areas 2002 - 2003

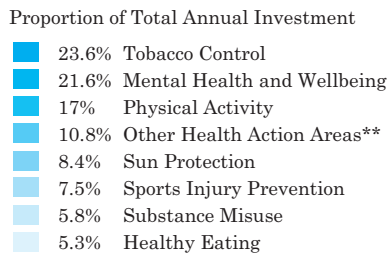
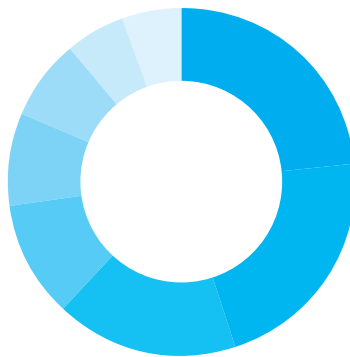


Figure 2 - Investments by Health Action Areas 2003 - 2004

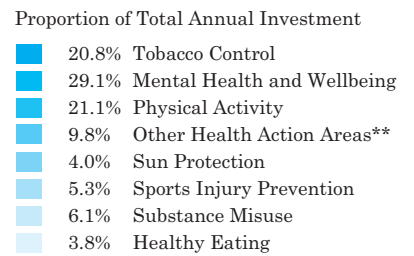
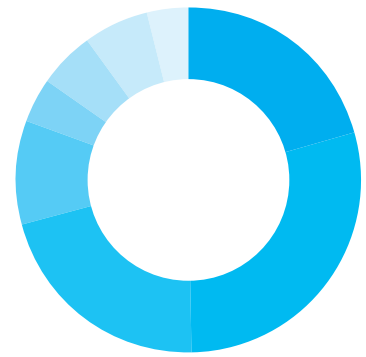


Figure 3 - Investments by Population Groups 2003-2004

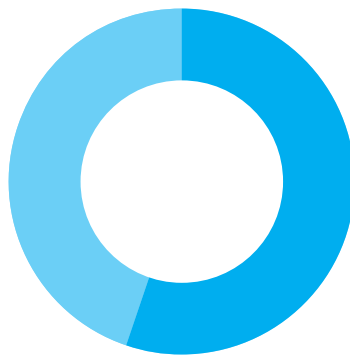
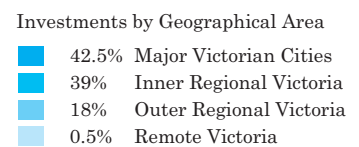
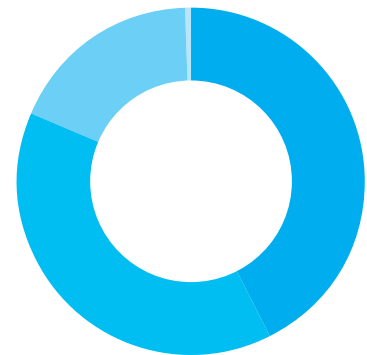


Figure 4 - Investments by Geographical Location 2003-2004



Results, Activity, Focus

An Active Year

VicHealth focuses on achieving practical solutions to problems identified by quality research, evaluation and consultation. In 2003–2004, with support from a range of partners, we made inroads on many of our health promotion objectives. Here is a snapshot of how we are moving towards our objectives:

To reduce smoking



Fund the internationally renowned Quit Program

VicHealth undertook a review of the Quit Program, which involved leading national and international public health experts. The review highlighted the excellence of the Victorian Quit Program. In 1987 smoking prevalence stood at 32% of the adult population. Now 19.2% of the adult population smoke – a positive achievement for health.

To build an evidence base to underpin the promotion of mental health and wellbeing



Establish the Research Centre for Excellence Mental Health and Social Wellbeing

The VicHealth Research Centre for Excellence in Mental Health and Social Wellbeing is being established in the University of Melbourne's School of Population Health.

To ensure children are physically active



Jointly fund the pilot Out of School Hours Sports Program in partnership with the Australian Sports Commission

In the Victorian pilot, 43 Outside School Hours Care (OSHC) services commenced in third term 2003. Ten Victorian State Sporting Associations ran their junior development programs through the OSHC service, enabling 1400 children to have a fun, safe and healthy sporting experience. It was so successful the Federal Government has funded the Active After-School Communities Program to ensure children remain physically active.



Fund and Support Walking School Buses

By the end of 2004, 48 local councils and at least 200 primary schools across Victoria will be implementing the Walking School Bus Program. In 2002 we started a pilot Walking School Bus Program with four councils and 16 schools.



Conduct a Mental Health Promotion Evidence Review

In 2003 the Sydney Health Projects Group was commissioned to undertake a review of the literature pertaining to the VicHealth Mental Health Promotion Framework – particularly literature published since 1998, when the documentation that informed its development was first compiled.

To reduce the likelihood of injury so more people play sport



Fund the Sports Injury Prevention Program

The risk of injury can stop people from participating, so VicHealth funds organisations to ensure sport is played safely. Just over 400 local sporting clubs and organisations were funded in 2003–2004 to purchase first aid training and/or sports safety equipment to improve the safety of sporting environments.

To improve access to fresh food



Support innovative ideas and disseminate what was learnt

Many people in Victoria do not have access to fresh food, whether due to their own lack of mobility, funds, cooking facilities or geographical location. VicHealth released *Food for all*, in November, 2003. This publication showed strategies used to improve access to fresh food for people from the City of Maribyrnong and homeless people in the City of Yarra.

To build a public health research workforce



Support the development of a critical mass of health promotion/public health researchers.

In 2003–2004 VicHealth funded five new fellowships and six new scholarships as well as offering supporting funds to three fellows and eight scholars.

We are currently fully funding or supporting 55 fellows and scholars.

Image: Dr Anna Peeters, Public Health Fellow

To narrow health inequalities



Ensure participation strategies in funded initiatives address the needs of groups experiencing disadvantage

The community arts participation scheme creates opportunities for participation in community arts activity for young people and people experiencing disadvantage due to geographic and socio-economic circumstances to improve mental health and wellbeing.

To get the messages across



18th World Conference on Health Promotion and Health Education

The conference, held 26–30 April 2004, gave VicHealth a unique opportunity to expand and build global partnerships. The conference was very successful, with over 3000 people from 90 countries assembling.

Results, Activity, Focus

Health Promotion Action

VicHealth's strategic directions to December 2006 build on our progress over the past four years in the primary areas of tobacco control, physical activity, promotion of mental health and wellbeing, healthy eating, as well as health inequalities. We have maintained our effort to support innovation in health promotion and public health and continue to try to nurture partnerships in a range of sectors, such as sport, recreation, arts and community, which hold promise for positive changes for health and wellbeing. Supporting others to promote health requires us to pay attention to their health promotion knowledge and skill capabilities and significant effort is focused on how best to share our know-how and skills.

The Issues

1. Reducing Smoking 16
2. Increasing Physical Activity 19
3. Supporting Research 22
4. Promoting Mental Health and Wellbeing 24
5. Addressing Health Inequalities 27

Image: Take the plunge. Physical activity is beneficial for your health at any age.



1.

Reducing Smoking

The Fact

Tobacco is the leading cause of preventable death and disease in Victoria, accounting for 13 per cent of all deaths and 2.5 per cent of all hospitalisations¹.

The Issue

In Victoria, 19.2 per cent of the adult population still smoke. More men than women smoke; younger age groups, 18-29 year olds, have the highest rates of smoking.; blue collar workers have higher smoking rates than their white collar counterparts.

The Aim

Reduce smoking overall and specifically focus on sections of the population where smoking rates are highest.

The Research Workforce and Tobacco Control Unit

> Funds cessation programs, legal and regulatory reform, advocacy and research through the Quit Program and VicHealth Centre for Tobacco Control (VCTC).

Quit operates smoking cessation programs (Quitline), advocates for policy change around tobacco control and smoke-free environments, and is a leading public voice for tobacco control in Victoria. The VCTC conducts research into tobacco control related issues, provides advice on regulatory and legislative issues, particularly around the conduct of tobacco companies, and advocates policy change in tobacco control.

> Creates smoke-free sporting environments by funding and supporting sports stadiums to go smoke-free.

In 2002, VicHealth implemented a two-year program of support for sports stadiums to implement smoke-free policies and provide a healthier environment for players, administrators and spectators. This program was conducted in collaboration with Quit Victoria.

> Supports Indigenous tobacco control efforts through Quit Victoria and the VicHealth Koori Health Research and Community Development Unit, consortium partners in the National Centre for Excellence in Indigenous Tobacco Control.

> **VicHealth supports two Research Fellows working in tobacco control:** Professor Melanie Wakefield (Senior Research Fellow), Director of the Centre for Behavioural Research in Cancer; and Dr Mohammad Siahpush (Public Health Research Fellow), Senior Social Scientist, Centre for Behavioural Research in Cancer. (See funded projects page 56)

The Action

In 2003–2004 the unit made the following major advances in these areas:

- > VCTC and Quit both underwent successful procedural reviews, with international reviewers emphasising the outstanding contribution that both have made to tobacco-control research, advocacy and smoking cessation in Victoria. In recognition of Quit and VCTC activities in tobacco control and smoking cessation, the Australian Medical Association (AMA) and the Australian Council on Smoking and Health (ACOSH) ranked Victoria equal second in the 2003 Tobacco Scoreboard Award.
- > The work of the VCTC led to six jurisdictions – the Commonwealth, Victoria, New South Wales, Queensland, Western Australia and Tasmania – enacting exemptions to exclude legal claims against the tobacco industry from some of the changes recently introduced to personal injury litigation law. The exemptions were important to ensure that the tobacco industry would not benefit from the personal injury reforms that were introduced to deal with public liability insurance concerns.
- > The VCTC wrote three major submissions advocating changes to Commonwealth regulation of health warnings and tobacco advertising. The submissions, written on behalf of the major Australian tobacco control organisations, drew together a large volume of local and international research and practice. They brought together legal, economic, social and psychological perspectives, in an excellent example of the value of cross-disciplinary research and advocacy. The introduction of new, graphic health warnings has been announced by the Commonwealth, with the new warnings to become mandatory on all tobacco packaging in March 2006. The two submissions on health warnings can be viewed at www.vctc.org.au.

- > Six sports stadiums in Victoria (Bob Jane Stadium, Dandenong Basketball Stadium, the MCG, Melbourne Knights Stadium, Optus Oval and Skilled Stadium) have implemented smoke-free policies and created healthier environments for players, spectators and administrators.
- > VicHealth, Quit and the VicHealth Koori Health Research and Community Development Unit were among the consortium partners that successfully bid for the National Centre of Excellence in Indigenous Tobacco Control. The centre was established to improve co-ordination, advocacy and communication in indigenous tobacco control, building capacity among indigenous health workers and developing health promotion resources.
- > Dr Mohammad Siahpush, Senior Social Scientist, Centre for Behavioural Research in Cancer at the Cancer Council, was awarded a VicHealth Public Health Research Fellowship for his research into socio-economic status and pathways to smoking.

Main Image: A campaign encouraging women to call the Quitline as the first step to stopping smoking won a VicHealth award for health promotion excellence in December 2003, while advocacy around creating more smokefree areas, particularly in pubs and clubs, is based on evidence that the community does not support unrestricted smoking in bars.



Highlight Project

Call the Quitline

Ring the Quitline – 131 848 – is the best first step towards quitting that a smoker can make. Quitline is a free telephone information and advice service for people who want to quit smoking. It is very effective, uses trained counsellors and advice is tailored to individual needs.

Because of its effectiveness, one of Quit's priorities is to get people to ring the Quitline. It develops media campaigns, including television advertising, to encourage its target groups to ring the line or access the Quit website – www.quit.org.au.

Todd Harper, Executive Director at Quit, says the objective of the advertising is simple: "It's about putting the idea of stopping smoking up a person's list of priorities so that it's not put off to another day."

Quit's campaigns target 18 to 40-year-old smokers with a skew towards smokers from a low socio-economic background, in recognition of higher smoking prevalence among these groups. However, individual campaigns target smaller groups within this broader group to maximise the effectiveness of television advertising².

In 2003 Quit ran a successful campaign targeting young women and expectant mothers, called "Reeling them in". Currently 18 per cent of Australian women aged 14 years or over are daily smokers, with highest rates in the 20–29 and 30–39 age groups. Approximately 24 per cent of Australian women in these age groups smoke on a daily basis. Based on the number of deaths in Australia, it's estimated that around 1500 Victorian women die each year from tobacco-related illness³. On the day before the campaign was launched, the Quitline received 40 calls. On the day after it was run it received 120 calls – the most on a Thursday recorded for the year. **Quit won a 2003 VicHealth Excellence in Health Promotion Award for its campaign.**

Campaigns involve running two advertisements during the same period in order to reach the objective. The ads are strategically placed to reach their target audience. A "pull" ad encourages the person to seek help. In this campaign the action of picking up the phone and ringing the Quitline was shown as simple, immediate and appropriate as soon as people decided they wanted to give up smoking. A "push" ad is then run in the same ad break to demonstrate how smoking can cost people their lives and quality of life. In this campaign the centrepiece was an ad featuring the real-life story of Jenny, a 42-year-old mother of three with terminal lung cancer. This ad gave people further incentive and impetus to make that important call. As part of any campaign development, Quit messages are tested with smokers, providing crucial feedback as to which ads are most effective. "We're always asking how we can support people to quit," said Harper.

An average of 25,000 calls per year were made to the Quitline number in Victoria between 2001 and 2003⁴ and studies have shown a quit rate of 29 per cent for callers to the Quitline⁵. Research has also shown that counselling effectively doubles abstinence rates⁶.

VicHealth has funded Quit since 1987. In 2003–2004 it allocated \$3,090,700 to the Quit campaign and undertook a successful review of the program.

Heading towards

- > further reduction in young people taking up smoking
- > A clean and safer environment where less people are exposed to tobacco smoke
- > Greater accountability by the tobacco industry to cover health and social costs of smoking



“We’re always asking how we can support people to quit,” said Harper.

¹ Victorian Department of Human Services. 2002, The Victorian Drug Statistics Handbook: Patterns of Drug Use and Related Harm in Victoria, Melbourne, July.

² Quit Victoria, submission to the Victorian Health Promotion Foundation, The Cancer Council Victoria, May 2004.

³ www.quit.org.au/index2.html: Quit's campaign for women smokers.

⁴ Quit Victoria, submission to the Victorian Health Promotion Foundation, The Cancer Council Victoria, May 2004, p. 106.

⁵ M. Wakefield & C. Miller, "Evaluation of the national Quitline service", in K. Hassard (ed.), Australia's National Tobacco Campaign Evaluation Report, vol. one, Commonwealth Department of Health and Aged Care, 1999.

⁶ Shu-Hong Zhu et al., "Evidence of real world effectiveness of a telephone Quitline for smokers", New England Journal of Medicine, vol. 347: 1087-1093, October 3, 2002, no. 14.

2.

Increasing Physical Activity

The Fact

There is now convincing evidence that regular physical activity can improve health and wellbeing and reduce the risk of premature death, illness and disability¹. In fact, physical inactivity is ranked second only to smoking as the most important factor affecting our health.

The Issue

In Victoria, only 60 per cent of adult males and 53 per cent of adult females are sufficiently active to enjoy the health benefits of physical activity².

The Aim

Increase participation in physical activity across the community. We especially focus on finding ways to assist people currently not participating to take part.

The Physical Activity Unit

The Physical Activity Unit maximises opportunities for individuals and communities to participate in physical activity.

The unit works in partnership with State Sporting Associations (SSAs) to assist sporting clubs to create healthy and welcoming environments to attract and retain more participants to their sport. Many SSAs are engaging in new ways of working to reduce barriers (time, cost, uniforms, travel, cultural differences) that may have prevented potential participants from playing their sport in the past.

The unit aims to increase participation in both structured and unstructured physical activity by **advocating for social and physical environments that encourage people to be active.** For example, our work with local government and urban planners has increased the recognition of the need to consider health when designing environments in which we live: more footpaths, walking tracks or places for people to meet.

Both individual and community capacity are being improved so physical activity options can be provided that are relevant, affordable and in appropriate and accessible locations.

Regional Sports Assemblies link organisations and people within local communities. For example, in Ballarat, a hospital and a gymnasium worked together to provide a weekly circuit routine for older people; It was held at the hospital.

A walking program, Be Smart, Walk Your Heart, was introduced in the Mildura, Ouyen and Sunraysia districts to encourage people to undertake walking. Over 400 people registered with the aim to walk regularly until they walked 48,600 kilometres – the same distance as the equator. In conjunction with the local Primary Care Partnership, local walking opportunities were identified and promoted through local media and community groups.

The unit works with sectors outside sport, such as local government and education, to establish programs that increase participation in physical activity. For example, **the Walking School Bus Program** provides a way for more children to walk to school. The Out of School Hours Sports Program has ensured children develop physically active habits by participating in a structured sports program in a safe environment.

In 2003-2004 14 research projects were funded to focus on physical activity and healthy eating. VicHealth Research Fellow Dr Colin Bell's collaboration with health, community and sporting agencies and local government in the western Victorian town of Colac focuses on community-based interventions to help prevent childhood obesity. About 1000 kindergarten and primary school aged children are involved in the Colac project. The three-year research project will determine the efficacy of intervention programs, such as the walking school bus and out of school hours programs, in preventing children becoming overweight and obese.

The Action

In 2003–2004 the unit supported efforts to increase participation in physical activity in the following ways:

- > By the end of 2004, 48 local councils and at least 200 primary schools will be implementing the Walking School Bus Program across Victoria.
- > The VicHealth/Australian Sports Commission Out of School Hours Sports Program – a Victorian pilot was a catalyst for the development of the Commonwealth Government's national Active School Communities initiative.
- > Of the 79 local councils, 74 have been exposed to the planning resource, *Leading the Way, Councils Creating Healthier Communities*, through council presentations, training workshops or case studies. Local government plays a key role in creating the environment for communities to prosper and enjoy improved health and wellbeing. This resource explains the factors that influence health and wellbeing, and equips councils to respond to local circumstances with practical solutions.

- > A feature of the Participation in Community Sport and Active Recreation Scheme (PICSAR) has been the increased understanding and acceptance of the synergies between the "sport and recreation" and "health" sectors. This has had a positive impact on local health agendas around physical activity.

Underpinning the scheme are Regional Sports Assemblies who work closely with communities and organisations at the local level, developing partnerships across a wide range of sectors. Across rural Victoria over 100 different initiatives are in place. The Active Participation Grants which focus on increasing physical activity opportunities in regional and metropolitan Victoria support local activity on the ground (see highlight project p21). There was a 16 percent increase this year in the number of projects supported through Active Participation Grants.

- > All 51 State Sporting Associations (SSA's) involved in the Partnerships for Health Scheme have gained a better understanding of the link between sport and health through their participation in a two-day health promotion workshop. The SSA's have made tremendous progress over the past 12 months with many adopting a much more inclusive approach to seeking and welcoming new members, by developing modified rules to encourage young and 'veteran' players, special programs for Kooris and those newly arrived to Australia, subsidising a range of participant costs, introducing a specified club liaison or welcoming ambassador and adopting flexible practice and playing times and venues.



Main Image (page 19): The main aim is to get people who are not active participating in physical activity. Communities not only need to work as a team to produce the best results but also look at the situation from all angles to create lasting solutions. Banksia Bulls Basketball Club established five extra teams in 2003–2004.

Highlight Project

Bridging Gaps Through Basketball

In VicHealth terms, the Banksia Bulls Basketball Club in West Heidelberg was a premiership club in 2004, well before it had even scored a point. It established five extra teams – average eight players per side – in 2004, with the Bridging Gaps Through Basketball project.

The project was funded through the VicHealth's Participation in Community Sport and Active Recreation Program.

The club literally achieved this result by observing those at its front door and welcoming them in. In some ways it was as simple as that. Rhonda Hernandez, a volunteer at the club and a worker at the Northern Migrant Resource Centre (NMRC), would see teenagers hanging around the basketball stadium shooting baskets but not playing in a team. Many were of Somali background. She kept thinking that they should be playing. "I really believe that both the community and these kids benefit so much from playing sport," said Hernandez. She visited Banksia Secondary College and was swamped with interest – not just from children with Somali background but those with Tongan, Vietnamese and Samoan backgrounds.

From there it was a matter of tapping into the local community to turn the idea into a reality. Representatives from the Banyule City Council, NMRC, the Banksia Secondary College, the local police and the Banksia Basketball Club, as well as a Somali youth worker, supported the project. The VicHealth funding helped NMRC purchase uniforms, coaching courses and a driver to transport the new players to and from games. The local police provided coaches and the school provided time in the gymnasium for training. The teams are still learning to play together but the talent on display has surprised many,

not least Hernandez. "I often wonder why there are not more sporting people chasing these kids. Some of them are such natural athletes," she said.

In 2003–2004 there were 28 Partnership Grants (maximum of \$30,000 per grant) and 72 Local Grants (maximum of \$3000 per grant) provided to local communities under the program.

Heading towards

- > social, physical, economic and cultural environments that encourage greater participation in physical activity such as urban design that supports physically active communities
- > more children walking to school and engaged in organised sport
- > reducing barriers such as cost, lack of transport, time constraints, cultural differences that can stop many Kooris, women, young people, older people and people of culturally and linguistically diverse (CALD) backgrounds participating in community sport and active recreation
- > sporting clubs that attract more members by providing healthy and inclusive environments, flexible approaches and customer focused delivery models
- > effective partnerships between sporting and recreational organisations, local government, health and education sectors that have an interest in increasing participation in physical activity



“I really believe that both the community and these kids benefit so much from playing sport.” said Hernandez

1 National Public Health Partnership. Be Active Australia, Draft National Physical Activity for Health Action Plan, Melbourne, 2004

2 Mathers C, Stevenson C. Australian Institute of Health and Welfare 1999. Burden of disease and injury in Australia, AIHW Catalogue PHE 17. Canberra November 1999

3 Department of Human Services and VicHealth, Physical Activity Patterns of Victorian Adults: Findings from the Victorian Population Health Survey 2002. Melbourne 2004

3.

Supporting Research

The Fact

In 1999 VicHealth changed its research priorities with a strategic investment in the public health research system. The total number of researchers now receiving full or partial VicHealth support is 55.

The Issue

Researchers need to be actively supported and networks created between researchers and practitioners to ensure that the benefits of both their work and knowledge translates to health promotion practice.

The Aim

VicHealth aims to increase the impact of health promotion and public health programs by supporting excellent research, improving the overall skills of researchers, providing networking opportunities for researchers and connecting research to policy and practice.

Research Workforce

The Research Workforce and Tobacco Control Unit has responsibility:

> **to lead the development and expansion of the public health/health promotion research workforce in Victoria**

VicHealth supports outstanding public health/health promotion research by awarding up to two Senior and up to three Public Health Research Fellowships per annum. Each Fellow is funded for five years. VicHealth supports young researchers through the provision of up to six Public Health PhD Research Scholarships per annum. Scholars are funded for three years.

> **to provide a sound, rigorous evidence base for VicHealth's programs and interventions and to support research activity in areas including: tobacco control, sun protection, physical activity, healthy eating, mental health and wellbeing, health inequalities, alcohol and substance misuse and sexual health.**

VicHealth centres bring together key researchers to build capacity in a particular area of public health/health promotion research. Four centres (Centre for Adolescent Health; Australian Research Centre in Sex, Health and Society; Mother and Child Health Research; VicHealth Centre for Tobacco Control) and one unit (VicHealth Koori Health Research and Community Development Unit) have been established to date, with the newest centre (Centre for Mental Health and Social Wellbeing) to be launched in late 2004.

> **to support innovative research in several areas of health promotion/public health with particular relevance to VicHealth's strategic directions.**

For example, Dr Jo Lindsay of Monash University has completed a study of the alcohol consumption of young people in metropolitan Melbourne, with particular attention to the role of class and gender on drinking behaviours. The study identified environments and situations in which high-risk public drinking took place, and looked at possible changes to venues that would encourage safer drinking.

> **to facilitate the transfer of public health/health promotion research into policy and practice.**

The Victorian Public Health Research and Education Council (VPHREC) aims to provide advocacy services that build, strengthen, enhance and sustain public health education, training and research in Victoria and facilitates the transfer of research findings into policy and practice.

Through the Conference Support Scheme, VicHealth provided support to 21 conferences conducted by other providers in 2003–2004.

The Action

In 2003–2004 the unit supported research in the following ways:

- > VicHealth has restructured its core health promotion units in order to strengthen its relationships with the researchers it funds, improve collaborations with researchers working in VicHealth priority areas, and enable a better translation of VicHealth-funded research into policy and practice.
- > VicHealth funded five new fellowships: Dr John Fitzgerald, Dr Mohammad Siahpush, Dr Priscilla Pyett, Dr Linda Bennett and Dr Bruce Hollingsworth, and six new scholarships: Catherine Russell, Leah Brennan, Vicki Inglis, Seana Paul, Richard Hayes and Frances Edmonds, as well as offering supporting funds to three fellows and eight scholars, taking the total number of researchers receiving full or partial VicHealth support to 55.
- > VicHealth continued its investment in VPHREC, working to build capacity in, and promote the work of, the Victorian public health research workforce.
- > VicHealth established the Fellows Network, which provides professional development and networking opportunities with key public health leaders to VicHealth Research Fellows. In 2004, the Fellows met with public health leaders, including VicHealth Visiting Fellow Billie Giles-Corti (UWA) and Professor Fiona Stanley, AC.

Highlight Project

Secondary Schools Shade Intervention

Finding a way to protect active, healthy adolescents from the sun's harmful rays is a real challenge. VicHealth funded the Centre for Behavioural Research at Cancer Council Victoria to conduct a pilot study Secondary Schools Shade Intervention Study to help put one possible solution to the test. VicHealth Senior Fellow Professor Melanie Wakefield was an associate investigator during the study.

The study tested the likelihood of secondary students using shade for protection from the sun if purpose built shade structures were installed at schools. The research project monitored, through the use of videos, the number of students using specific areas before and after the installation of a shade structure. Principal Investigator Suzanne Dobbinson says two shade structures were built at the site, Loyola Secondary College, Watsonia. One was built in an active area above a handball court and one in a lunch/barbeque area. The results of the pilot study were promising enough for further funding to be allocated to the research by the National Medical and Health Research Council (NHMRC) for further investigation. This will see 60 schools become part of the project during 2004–2006. Dobbinson says it's a matter of establishing what approaches might work: "A large proportion of adolescents aren't getting protection from the sun. This project will show us whether teenagers will use the shade if it's available or whether they will still want a tan and therefore move outside of the shade chasing one."

Principal Investigator:
Suzanne Dobbinson

Associate Investigators:
Melanie Wakefield, Dallas English, Vicki White, Trish Livingston.

Heading towards

- > A strengthened and vibrant public health research community contributing to a healthy and productive Victoria
- > Research that has the power to influence and guide key decision makers that leads to the development of strong healthy communities
- > Future innovative solutions that can transform our current way of thinking to enrich and improve our lives

Real effort is being made to build a highly trained public health research workforce.

Main Image: VicHealth now provides full or partial support to 55 researchers in the areas of health promotion/ public health research. The Secondary Schools Shade Intervention pilot study supported by VicHealth was extended through NHMRC funding to 60 schools this year. The roll-out will happen from 2004–2006.

4.

Promoting Mental Health and Wellbeing

The Fact

By the year 2020, depression will constitute the second-largest cause of disease burden world wide¹.

The Issue

The global burden of mental ill health is well beyond the treatment capacities of developed and developing countries²

The Aim

VicHealth focuses on the social and economic factors that determine mental health and wellbeing in populations. VicHealth's support for research, policy development, practice and advocacy aims to make a measurable contribution to state, national and international work in mental health promotion.

The Mental Health and Wellbeing Unit

The Mental Health and Wellbeing Unit focuses on three main factors as being particularly important for good mental health: social inclusion, access to economic resources, and living a life free from violence and discrimination.

The unit's focus is to:

- > Improve the evidence base for promoting mental health and wellbeing.
- > Develop the skills, resources, policies and practices that will sustain mental health promotion in selected sectors
- > Consolidate state, national and international collaborations across sectors to improve mental health promotion policy and practice.
- > Broaden community understanding of the social and economic influences on mental health and wellbeing.

The Action

In 2003–2004 the unit promoted mental health and wellbeing in the following ways:

Improving the evidence base

- > The VicHealth Centre for Excellence in Mental Health and Social Wellbeing is being established. The centre, to be launched late 2004, will initiate and support research and evaluation investigating the social and economic influences on our mental health and wellbeing.
- > Focused on improving the link between funded research and the development of policy and practice. For example, Professor Sandy Gifford's *Off to a Healthy Start* is a longitudinal ethnographic study of the health and wellbeing of newly arrived youth. It will describe the social contexts and factors that promote mental and social wellbeing for newly arrived refugee youth and their families during the settlement process, and provide impetus to changes in resettlement programs.

- > *The Health Costs of Violence* – a world-first report on the burden of disease impact of intimate partner violence – was developed, launched and disseminated (see highlighted project, p26).
- > Evidence reviews were conducted to ensure the evidence-based approach to the work is maintained. The four reviews were: (1) VicHealth Mental Health Promotion Evidence Review: A literature review focusing on the VicHealth Mental Health Promotion Framework; (2) Public Health, Mental Health and Violence Against Women: Scoping report (led to *The Health Costs of Violence* report); (3) Promoting Mental Health and Wellbeing Through Community and Cultural Development: A review of literature focusing on the Communities Together Scheme, Globalism Institute RMIT; (4) Promoting Mental Health and Wellbeing Through Community and Cultural Development: A review of literature focusing on Community Arts Practice, Globalism Institute RMIT.
- > Two multi-site evaluations were conducted and documented. They were (1) Promoting the Mental Health and Wellbeing of New Arrival Communities: Learnings and Promising Practices and (2) Promoting Young People's Mental Health and Wellbeing Through Economic Participation.

Workforce development and dissemination of learnings

- > A short course in mental health and wellbeing was developed, as well as tools and resources to enhance practice.

Funded health promotion activity – schemes and projects

- > Five hundred organisations from a variety of sectors were involved in development and implementation of the range of funded activity. Some of the activity funded to promote mental health and wellbeing included: the Indigenous Leadership Scheme, new arrival projects, youth projects, the Community Arts Participation Scheme, the Major Arts Partnership Scheme, the Communities Together Scheme as well as a range of investments to lessen health inequalities (see page 44 for funded projects).

International, national and state collaborations

International

- > Joint production of the first World Health Organisation text on mental health promotion, called *Promoting Mental Health: Concepts, Evidence and Practice*, Summary Report, WHO 2004.
- > Development of the first mental health promotion stream to be included in the 18th World Conference on Health Promotion and Health Education.
- > Membership of the Global Collaboration for Mental Health and Wellbeing.

National

- > Input to ongoing development of the national agenda for mental health promotion through representation on the National Promotion, Prevention and Early Intervention Working Party.

State

- > Sixty per cent of funded activity resourced through collaborative funding partnerships either during or after VicHealth involvement.

Increased community understanding

- > Together We Do Better campaign: The campaign continued to positively influence the attitudes of Victorians on the value of social connectedness to mental health and social wellbeing. At least a quarter of all Victorians reported seeing advertising that said, "being friendly, being involved and including others can lead to a sense of belonging that is good for our health".

Main Image: Research released by VicHealth in *The Health Costs of Violence* revealed that intimate partner violence is responsible for more preventable ill health and premature death in Victorian women under the age of 45 than any other of the risk factors, including high blood pressure, obesity and smoking. It lifted the lid on a problem that is often hidden.



Highlight Project

Intimate partner violence – a major burden on mental health

Intimate partner violence is responsible for more preventable ill health and premature death in Victorian women under the age of 45 than any other of the well-known risk factors, including high blood pressure, obesity and smoking³.

Our 1999 review of the causes of poor mental health indicated that a range of forms of violence required attention. Violence against women, particularly that occurring in the context of an intimate relationship, emerged as an especially common phenomenon having serious mental health impacts. Accordingly, in 2003, we conducted a more detailed study to determine the contribution VicHealth could make to support primary prevention of violence against women.

This study, carried out by Professor Theo Vos, with significant contribution from a range of researchers, policy-makers and practitioners, was the first of a number of current and planned VicHealth activities being undertaken to address this issue.

The findings of the study, *The Health Costs of Violence: Measuring the burden of disease caused by intimate partner violence. A summary of findings*, were both revealing and shocking.

They demonstrate that intimate partner violence is all too common, has severe and persistent effects on women's physical and mental health and carries with it an enormous cost in terms of premature death and disability.

It contributes nine per cent to the total disease burden in Victorian women aged 15–44, with 60 per cent of this burden attributed to mental ill health. In June 2004 the report was launched by Victorian Police Commissioner Christine Nixon, Health Minister the Hon. Bronwyn Pike and Acting Premier the Hon. John Thwaites. Its contents received enormous media coverage and national and international recognition (see page 31 for details on media coverage).

The full report can be found at www.vichealth.vic.gov.au/ipv

Heading towards

- > Improving our ability to monitor and plan to address the negative impacts social isolation, economic exclusion, violence and discrimination on mental health and wellbeing. A program of community wellbeing indicators will be consolidated in 2004–2005 to assist local governments to plan and assess their progress in responding to the social and economic factors that influence mental health and wellbeing.
- > Identifying and documenting models of good practice in mental health promotion. This will be measured through evaluation of funded projects and programs that aim to increase social inclusion and economic participation and promote acceptance of diversity.

- > Increased capacity of organisations and practitioners to implement and sustain mental health promotion activity, supported by workforce development and training resources, as well as funding. VicHealth has developed a two-day free Mental Health and Wellbeing Professional Development Course to provide the workforce with a range of skills to plan, implement, evaluate and report on their activity. It will begin in the 2004–2005 financial year.
- > Consolidation of partnerships to foster mental health promotion activity across the state. The Victorian Schools Commission Partnership, including VicHealth, Centre for Multicultural Youth Issues (CMYI) and Victorian Foundation for the Survivors of Torture and Trauma is set up to improve the educational pathways for students from newly arrived backgrounds.
- > Increased community understanding of the social and economic factors affecting mental health and wellbeing achieved through communications, media and advocacy activity.

Intimate partner violence is responsible for more preventable ill health and premature death in Victorian women under the age of 45 than any other well known risk factors, including high blood pressure, obesity and smoking.

References

¹ Murray, C and Lopez, A (eds 1996) the global burden of disease: a comprehensive assessment of mortality and disability from diseases, injuries and risk factors in 1990 and projected to 2020, Harvard School of Public health on behalf of the World Health Organisation and the World Bank, distributed by Harvard University, 1996.

² Saxena, S., Hermann, H and Moodie, R. (co-editors) Promoting Mental Health: Concepts, Evidence and Practice, summary report, WHO, April, 2004.

³ VicHealth, The Health Costs of Violence. Measuring the burden of disease caused by intimate partner violence. A summary of findings. VicHealth, Melbourne, 2004.

5. Addressing Health Inequalities

We continue to engage in strategy development and advocacy work in the areas of healthy eating and health inequalities.

Health Inequalities

VicHealth is committed to addressing inequalities in health. We focus on the whole population, but give particular attention to those most in need when developing projects and programs.

This helps to ensure that opportunities for maintaining and improving health are available to a broad spectrum of communities. A proportion of all VicHealth grants are targeted to particular groups experiencing health inequalities which can arise from variations in geography, income, education and heritage (indigenous and cultural and linguistic).

In addition VicHealth:

- > funds specific activities aimed to increase knowledge about and ways of addressing health inequalities
- > works in partnership with disadvantaged groups to address inequalities

These activities focus on food insecurity, refugees and asylum seekers and the health of indigenous Victorians.

The Action

In 2003-2004 the following activity occurred to meet our objectives to address health inequalities:

Research projects were supported to improve understanding of:

- > factors supporting the settlement of new arrivals, in particular young people
- > the impact of social, cultural and environmental context on health
- > the role of health impact assessment in addressing health inequality
- > ways in which research can be conducted in partnership with indigenous communities
- > appropriate approaches to health promotion with blue collar workers

Projects were supported to

- > evaluate demonstration projects to address barriers to people accessing healthy foods
- > support community based services to secure pro-bono health services for refugees and asylum seekers
- > support the development of the Rumbalara Football and Netball club as an important focus for social connection for indigenous communities in Shepparton
- > increase access to skill development and employment for young people residing in rural Victoria

VicHealth also provided ongoing support to the Koori Health Research and Community Development Unit which plays an important role in supporting research activities in indigenous communities and enhancing links between the communities and mainstream services.

VicHealth's activity in healthy eating is a great example of how our work is geared to addressing health inequalities.

Healthy Eating

The Physical Activity Unit focuses on healthy eating, because good nutrition contributes to physical and mental wellbeing.

The unit's objective is to:

- > increase the understanding of social, environmental and cultural factors that influence healthy eating; and
- > contribute to reversing the trends in obesity in the population over the next 10 years².

It has been identified that communities have different eating patterns according to their food access options, which are often influenced by the areas in which they live.

Local government is in a good position to implement healthy eating initiatives that address existing barriers. For example, improving footpaths may make food access easier in some areas, allowing more locals to walk to shops that sell healthy food.

The Action

In 2003-2004:

- > VicHealth built on lessons learned from funded projects such as the North Yarra Community Health and Maribyrnong City Council Food Insecurity Community Demonstration projects. A report, *Food for all?* was launched in November 2003.
- > VicHealth continued to collaborate with other government and non-government bodies to improve our understanding of the social, environmental and cultural factors that influence food choices. VicHealth was a member of the Eat Well Victoria Partnership established by the Department of Human Services, which released a report entitled *Healthy Eating and Physical Activity in Early Childhood Services*.
- > A report, *A review of the literature describing the link between poverty, food insecurity and obesity with specific reference to Australia*, was released at the 'Healthy, Not Wealthy, But Wise' seminar held at VicHealth in May 2004. This report showed that the risk of obesity is 20 to 40 per cent higher in women who have low incomes and are experiencing food insecurity. This was observed consistently across the United States, Europe and Australia².
- > VicHealth continued to fund several research programs to investigate influences on healthy eating (see page 43).

Heading towards

- > identifying and removing barriers to food access and supply of healthy food choices in areas of social and economic disadvantage;
- > advocating for an increased role for local government in public health nutrition to address problems with food supply and food access systems; and
- > replicating, expanding and consolidating successfully trialled models using VicHealth's Leading the Way framework.

¹ Victorian Health Promotion Foundation, Strategic Directions 2003-2006, Melbourne 2003

² Victorian Health Promotion Foundation, A review of the literature describing the link between poverty, food insecurity and obesity with specific reference to Australia, Melbourne, 2004

Raising Awareness Out and About

One of VicHealth's core responsibilities is to raise awareness about health issues and develop and promote innovative opportunities for promoting health. By speaking at seminars and conferences, submitting articles and editing and contributing to books in the area of health promotion, VicHealth staff ensure the latest health promotion evidence and thinking is made widely available. VicHealth also assists communities and organisations to develop skills in submission writing and partnerships so that more can become involved to effectively run health promotion projects and programs. The following presentations and papers were delivered in 2003–2004.

Conference Papers and Presentations

Basinski, D. & McLean, P. 2004, "*Celebrations for Health*" poster presentation, World Conference on Health Promotion and Health Education, Melbourne, April 2004

Butera, R. *Children and Physical Activity: The Walking School Bus*, World Conference on Health Promotion and Health Education, Melbourne, April 2004

Butera, R. *Integrated Planning and Health: Leading the Way*, Walk 21 Conference, Copenhagen, Denmark, Melbourne April, June 2004

Jolly, K. *Leading the Way: Councils Creating Healthier Communities*, Integrating Health in Local Government Conference, Melbourne, October 2003

Jolly, K. *Leading the Way: Councils Creating Healthier Communities*, Moorabool Shire Council, October 2003

Jolly, K. *Setting the Scene: Our Well Being, Our Community*, City of Whitehorse Women's Forum, November 2003

Jolly, K. *Taking It to the Streets*, LGPO Annual Conference, February 2003

Maher, S. & Strachan, J. *Partnerships for Health*, World Conference on Health Promotion and Health Education, poster presentation, Melbourne, April 2004

Moodie, R. *The Art and Science of Health Promotion*, Australian Hepatitis Council Conference, Adelaide, February 2004

Moodie, R. *The Best Years of Our Lives ... or Are They?*, Keynote address, National Conference on Bullying November 2003

Moodie, R. *Dealing with the Government: Getting their attention and action*, Leadership Victoria – Williamson Community Leadership Program, May 2004

Moodie, R. *Education, Training and Workforce Development Stream: Strengthening the Capacity for Health Education and Training*, World Conference on Health Promotion and Health Education, Melbourne, April 2004

Moodie, R. *Establishing Health Promotion Foundations and Other Innovative Infrastructures and Financing Mechanisms*, World Conference on Health Promotion and Health Education, Melbourne, April 2004

Moodie, R. *Measuring the Effectiveness of Health Promotion Policy*, Institut National de Promotion et Education de la Sante (INPES), Paris, December 2003

Moodie, R. *Opening Address*, Rural Mental Health Conference, Deakin University (Warrnambool), July 2003

Moodie, R. *Planning and Building Healthy Communities*, Planning Institute of Australia State Conference, "Juggling the Agenda", September 2003

Moodie, R. *Social Determinants of Health*, Municipal Association of Victoria (MAV), Councillor Development Weekend, July 2003

Moodie, R. *Wellbeing for All – Mental Health*, Leadership Victoria – Williamson Community Leadership Program, July 2003

Moodie, R. *"What's In It for Me?", Why Everybody Needs to Have a Street Party!*, People, Planning, Places, Southern Region DHS, August 2003

Moodie, R. *Why Invest in Population Health and Wellbeing?*, Leadership Series in Population Health, June 2004

Moodie, R. & Jolly, K. *Councils Leading the Way*, Municipal Association of Victoria (MAV) Councillor Development Weekend, July 2003

Moodie, R. & Siau, L. C. *Is It the End of the Cul-de-sac? Making Health Promoters Out of Planners*, Planning Institute Australia State Conference, 2003

Sheehan, C. *Koori Sports Camp – Submission Writing*, Sport and Recreation Victoria, November 2003

Sheehan, C. *Submission Writing*, Australian Public Health Association, February 2004



Sheehan, C. & Verins, I. *Increasing Participation in the Wimmera: Submission writing, partnership development and local issues*, Board Forum, Horsham, May 2004

Siauw, L. C. *Beyond Welfare: A Health Promotion Response to Food Insecurity*, International Food Insecurity Conference, Lisbon, July 2003

Siauw, L. C. *Environments for Physical Activity*, Inner South East Partnership in Community and Health PA Network, April 2004

Siauw, L. C. *Funding Opportunities and Project Management*, 72nd Australian Institute of Environmental Health Victorian State Conference, August 2003

Siauw, L. C. *Hot Tips on Funding Workshop*, Hobsons Bay City Council, July 2003

Strachan, J. *Partnerships for Health Scheme, Active Participation Guidelines*, National Physical Activity Conference, WA, November 2003

Van Vugt, J. *Promotion and Prevention in Mental Health Strategies*, National Association for Loss and Grief (Vic.), Grief Week Forum: Loss and Grief Is a Mental Health Issue, August 2003

Van Vugt, J. *Promoting Mental Health and Wellbeing*, keynote address, Community Network State Conference 2003 – Diabetes Australia Victoria, October 2003

Van Vugt, J. *Promoting Mental Health and Wellbeing*, Mental Health Network of the General Practice Divisions Victoria, December 2003

Van Vugt, J. *Promoting Mental Health and Wellbeing: Together we do better*, Communities Project, Community Participation Forum, Borough of Queenscliffe, April 2004

Van Vugt, J. *Victorian Attitudes to Bullying – data and media advocacy for Health Promotion* World Conference on Health Promotion and Health Education, Melbourne, 2004

Verins, I. *Applying a Youth Focus*, Victorian Home Economics and Textiles Teachers Association, November 2003

Verins, I. *Assessment of Awards for Innovation and Excellence in Primary Health Care Primary and Community Health Network*, September 2003

Verins, I. *National Forum on Workforce Development at VicHealth*, reflecting partnerships with Auseinet, Flinders and Queensland University, Public Health Education Research Project, August 2003

Verins, I. *Partnerships presentation to Catholic Education Office*, May 2004

Verins, I. *Social Connectedness in Rural Communities*, Royal Agricultural Society Symposium, University of Melbourne, Ballarat, December 2003

Verins, I. *South Coast Health Services Consortium*, February 2004

Verins, I. *VUT Health Sciences Student Presentation*, April 2004

Walker, Lyn. *Social Alienation, Discrimination, Masculinity and Violence*, panel presentation, Youth Gang Forum

Walker, Lyn (Chair). *Violence, Human Rights and Mental Health Stream*, World Conference on Health Promotion and Health Education, April 2004

Books

Moodie, R. & Hulme, A (eds) *Hands on Health Promotion*, IP Communications, Melbourne, 2004

Saxena, S., Herrmann, H. & Moodie, R. (co-editors) *Promoting Mental Health: Concepts, Evidence and Practice, summary report*, WHO, April 2004

International Delegations

Presentation to Thai study tour, July 2003

Presentation to Vietnamese study tour, July 2003

Thai Health study tour, 23–24 October 2003

Project Manager, Mr Edmund Ewe, from the Malaysian Health Promotion Foundation, attended VicHealth 27–30 October 2003

Health Minister from Tonga, Dr Viliami Tangi, visited VicHealth May 2004

Presentations to ThaiHealth officials, May 2004

Presentations to Korean health academics, June 2004

Article

Verins, I. *Linking Arts, Sports, Recreation and Community Mental Health and Wellbeing*, City of Port Phillip, Cultural Vitality Conference website, March 2004

Publications

Moodie, R. 2004, "Introduction: getting your hands on" in R. Moodie & A. Hulme (eds), *Hands on Health Promotion*, IP Communications, Melbourne

Moodie, R., Campbell, P. & Saan, H. 2004, "Leadership and Management" in R. Moodie & A. Hulme (eds), *Hands on Health Promotion*, IP Communications, Melbourne

Walker, L., Moodie, R. & Herrman, H. 2004, "Promoting mental health and wellbeing" in R. Moodie & A. Hulme (eds), *Hands on Health Promotion*, IP Communications, Melbourne

Walker, Lyn. 2004 (contributor), *Promoting Mental Health: Concepts, Evidence and Practice, summary report*, WHO, April 2004

Staff Images: Top (left to right).

Edith Fry, Dee Basinski, Sue Ball

Raising Awareness Far and wide

VicHealth aims to build and share health promotion knowledge. It focuses on gaining media coverage, delivering seminars and developing publications to get credible and accessible information to its target audiences.

Major Publications

Corporate

Victorian Health Promotion Foundation
September 2003, *Strategic Directions 2003–2006*, VicHealth, Melbourne

VicHealth Letters

Victorian Health Promotion Foundation,
Mental Health and Wellbeing, VicHealth,
Melbourne, July 2003

Victorian Health Promotion Foundation,
Health 2004 Special Edition, VicHealth,
Melbourne, February 2004

Victorian Health Promotion Foundation,
Arts for Health, VicHealth, Melbourne,
June 2004

Physical Activity

Sport and Recreation Victoria, *Victorians' Participation in Exercise, Recreation and Sport* (2001–2002), VicHealth, Melbourne, November 2003

Healthy Eating

Victorian Health Promotion Foundation,
Food for All? Food Insecurity Demonstration Projects – Maribyrnong City Council and North Yarra Community Health Case Studies, VicHealth, Melbourne, November 2003

Mental Health and Wellbeing Research

Victorian Health Promotion Foundation,
The Health Costs of Violence: Measuring the burden of disease caused by intimate partner violence. A summary of findings, VicHealth, Melbourne, June 2004

Mental Health Evaluations

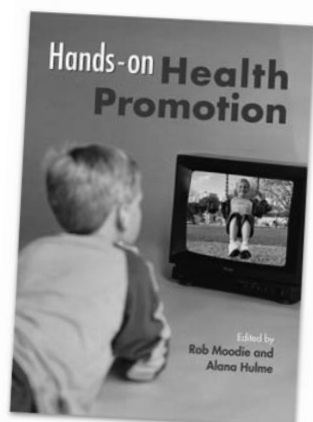
Victorian Health Promotion Foundation,
Promoting Young People's Mental Health and Wellbeing through Participation in Economic Activities, VicHealth, Melbourne, December 2003

Victorian Health Promotion Foundation,
Promoting the Mental Health and Wellbeing of New Arrival Communities
VicHealth, Melbourne, September 2003

Walking School Bus

Victoria University/VicHealth *Walking School Bus Pilot Program 2001–2002 Key Learnings*, VicHealth, Melbourne, December 2003

Victorian Health Promotion Foundation,
Walking School Bus: A Guide for Parents and Teachers, October 2003



Media

A Case Study

The Health Costs of Violence

"Facing up to the home truths of domestics" ran The Age editorial headline on Friday 18 June, in the week when VicHealth released what the newspaper described as an "international first study...which found that domestic violence is the single greatest preventable risk factor associated with death, disease and disability for younger Victorian women". The editorial stated that "awareness of domestic violence is but a first step to coming up with adequate responses" and concluded, "there can be no excuses for ever again disregarding the urgency of the issue for criminal, health or social policy".

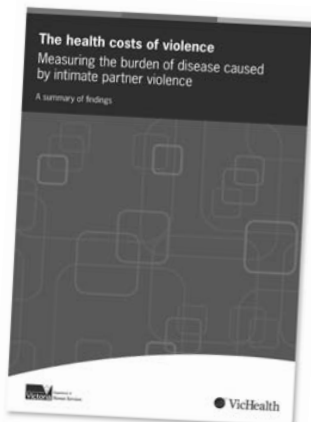
Coinciding with the release of the study, *The Health Costs of Violence*, described by *The Australian* as "groundbreaking", VicHealth rolled out the first stage of a communications strategy designed to both disseminate the results of the study and to raise awareness of the issue itself. A media release and accompanying fact sheet outlining the study's findings were distributed to major news organisations throughout Australia and key regional media across Victoria.

As a consequence, on the day the study was released more than 20 radio news services and talk-back programs around the country reported on the alarming impact intimate partner violence has on the health and wellbeing of women. That same day, 14 television news bulletins broadcast items featuring the results contained in the VicHealth study.

The communications strategy involved targeting both mainstream and specialist media. In the weeks following the release of the study, issues associated with intimate partner violence including prevalence, impact and how to get support, were featured across a range of media outlets, including the *Medical Observer*, *Marie Claire* and *The Australian Women's Weekly*. Several Victorian regional and suburban newspapers featured problems caused by domestic violence in articles with headlines such as "Breaking the culture" and "Domestic violence takes a harsh toll".

Media Coverage Numbers

Excluding the coverage gained from the World Conference on Health Promotion and Health Education, VicHealth was mentioned in over 670 newspaper articles between 2003–2004. Of these, at least 225 articles explored a health promotion issue in some depth. In addition nearly 200 radio items and 50 television stories ran.



Staff Images: From top

Trish Mundy retired in 2004 after 15 years of service at VicHealth, Caroline Sheehan, Xa Dinh, Shelley Maher

Raising Awareness World Conference

18th World Conference on Health Promotion and Health Education

The 18th World Conference on Health Promotion and Health Education was held from 26 to 30 April 2004, at the Melbourne Convention Centre. Melbourne was selected as the site for the conference at a General Assembly of the IUHPE at the time of the 17th World Conference, which was held in Paris in July 2001. The conference title and theme was *Health 2004: Valuing Diversity, Reshaping Power: Exploring Pathways for Health*.

The four days of the conference were very successful, with over 3000 people from 90 countries assembling. The program included 244 sessions and over 1000 speakers, as well as on-site activities during breaks and major social events in the evenings.

The participants in the conference engaged in diverse issues and debates but confirmed emphatically that there are proven solutions to most of the major public health problems around the world. Health improvements are achievable when people, communities and organisations across sectors work together and set an agenda for change. Australia has been a leader in developing the evidence for effective health promotion action, namely in tobacco control, HIV/AIDS prevention and road trauma, to name a few.

While it was an opportunity to celebrate these achievements, it was also time to reflect on areas in which we have failed, such as indigenous health. It was clear from many of the first-nations people at the conference that we need to relearn the importance of respecting indigenous knowledge, experience and beliefs when working to improve the health of all peoples.

VicHealth was involved as a founding sponsor of the conference, but the overall success was dependent on other partners and sponsors, such as the Commonwealth Department of Health and Ageing, and the Victorian Department of Human Services. One of the significant strengths of the conference was the decision by the Australian Health Promotion Association, Public Health Association of Australia and the Health Promoting Schools Association of Australia to fold their annual conferences into Health 2004. This not only strengthened the organisational talent pool but also ensured a very substantial Australian turnout.

The Cancer Council Victoria, the National Heart Foundation, Deakin University, La Trobe University, Australian Centre for Health Promotion, AusAID and a variety of international organisations such as the World Health Organisation, the Centers for Disease Control and the Canadian International Development Agency also made significant contributions in terms of money, personnel and energy.

There were three one-day conferences: HIV/AIDS, Cervical Screening and Health Promoting Schools streams held at the Exhibition Centre, while a series of gateway conferences and the International Conference on the Reduction of Drug Related Harm were held in the days before the main conference. Supported by AusAID and the Australian National University, sessions in the La Trobe Theatre were broadcast via the Global Development Learning Network to World Bank offices and other sites around the world, and audiences in Colombo and Hanoi were able to participate in sessions.

A small scholarship program funded the participation of over 70 people in the conference, while the media coverage was the best ever achieved at the conference.

The success of the conference was due to the enormous voluntary contribution made by hundreds of individuals, giving their time to developing programs, managing logistics, building relationships and advocating for better health.

VicHealth was privileged to be part of this wider health promoting community.



Raising Awareness VicHealth Awards

2003 VicHealth AGM Award Winners and Commendations

Outstanding achievements in promoting health were announced on Wednesday 17 December, 2003, at VicHealth's Annual General Meeting at the National Gallery of Victoria. The recipients of the 2003 VicHealth Awards were recognised for their contribution to promoting the health of Victorians.

Health Promotion Through Community Participation – Projects less than \$30,000

Winner – Hothouse Theatre: Burn!

Burn! was a participatory project that spanned five months, involved 54 community members from 22 towns in regional and rural Australia working with a team of 10 theatre professionals, to create an acapella theatre show that celebrated the stories and lives of the people of regional Australia.

Commended – South West Sports Assembly: Beyond the Farm Gate

Health Promotion Through Community Participation – Projects between \$30,000 and \$50,000

Winner – City of Greater Shepparton: Greater Shepparton Walking School Bus

The Greater Shepparton Walking School Bus (GSWSB) operated in four different townships within Greater Shepparton – Shepparton, Murchison, Tatura and Mooroopna. The community was involved in every phase of the GSWSB development, including the engagement of a number of disadvantaged groups. The program created a variety of opportunities for people of different ages, backgrounds and abilities to develop new skills, self-esteem, confidence, a greater sense of social connectedness and vital support networks within their community – as well as increasing their level of physical fitness and having fun.

Commended – Westside Circus Inc.: Footprints – A Youth Circus & Theatre Project

Excellence in Health Promotion – Projects between \$50,000 and \$100,000

Joint Winner – Netball Victoria: Safety Net Program

Netball Victoria conducted a country football/netball structure and facility review in 2001. The study identified a lack of risk management and injury prevention practices at club level, as well as poor facilities and amenities.

Joint Winner – Maribyrnong City Council: Maribyrnong Food Insecurity Demonstration Project

The City of Maribyrnong has a significant population at risk of food insecurity, or lack of access to the food they need. This Demonstration Project developed, implemented and evaluated innovative and sustainable strategies to reduce the prevalence and impact of food insecurity in this municipality. Extensive consultation and networking between community individuals and organisations, local agencies and government ensured a comprehensive, multilateral approach that addressed short- and long-term food access issues.

Commended – Victorian Aboriginal Community Services Association: Koorie Community Leadership Project (VACSAL/RMIT)

Excellence in Health Promotion – Projects with a research focus

Winner – Australian Research Centre in Sex, Health and Society: Australian Study of Health and Relationships

The Australian Study of Health and Relationships (ASHR) is the largest and most comprehensive survey of sexual health ever undertaken in this country. Its overall aim was to collect representative data about the sexual health, knowledge and behaviours of the Australian people.

Telephone interviews were conducted with 19,307 randomly selected respondents between the ages of 16 and 59 years. The response rate was 73.1 per cent, which compares favourably with other population-based national samples. The sample was weighted to reflect the location, age and sex distribution of the 2001 census and is therefore regarded as being broadly representative of the Australian population.

Some of the implications for health promotion practice include the fall in age of first intercourse over the last four decades, the importance of GPs in providing opportunistic information about sexually transmissible infections and the complexity of the picture in relation to same-sex attraction and sexual behaviour.

The findings of the study were submitted for peer review and published in the form of 21 papers in a dedicated edition of the Australian and New Zealand Journal of Public Health. A broadsheet summarising the findings was also produced at the time of the journal publication, to make the outcomes more accessible to those wanting an overview and to those who may be inexperienced in reading academic material. The findings have therefore been, and will continue to be, widely distributed and will provide a significant body of information to inform health promotion and public health initiatives for many years to come.

Excellence in Health Promotion – Projects \$100,000+

Winner – Quit Victoria: Reeling them in: An integrated advertising strategy to promote the Quitline

The Quitline is an inexpensive, accessible service for smokers wanting to quit. There is clear evidence of the effectiveness of Quitlines in increasing the success rates of smokers attempting to quit. However, as few as four per cent of smokers who had attempted to quit in the past six months reported using the service. There is great potential to harness the effectiveness of the Quitline (and its internet-based cessation assistance) with mass media activities to reach large sections of the population. This can encourage quitting and assist a greater proportion of quitters to quit successfully (see page 18).



Funded Projects 2003–2004

Investment Highlights

In 2003–2004, VicHealth funded 1328 projects. The total amount of funding to these projects was \$23,253,233. The projects are listed according to which unit manages the investment. The units are the Physical Activity Unit, the Mental Health and Wellbeing Unit, the Research Workforce and Tobacco Control Unit and Health Promotion Innovations Unit.

Projects funded under programs or schemes are listed first in each section followed by research that focuses on that particular health action area.

Walking School Bus Program

There were 30 local councils funded in 2003-2004 to roll out more walking school bus projects (see page 41).

Participation in Community Sport and Active Recreation

To encourage participation in community sport and active recreation VicHealth distributed funds through Active Participation Grants. There were 28 partnership grants (up to \$30,000) provided and 72 local grants (up to \$3,000). VicHealth also worked with Regional Sports Assemblies to link groups within local communities. (see page 36)

Sports Injury Prevention

402 sporting clubs received \$627,177 to purchase first aid training and/or sports safety equipment to improve the safety of sporting environments. (see page 42)

Sun Protection

Along with the Portable Shade for Sports Clubs Grants (distributed to 293 sporting clubs throughout Victoria), VicHealth funded the Cancer Council's SunSmart program. (see page 55)

Quit Campaign

Continued support of the Quit campaign investing \$3,090,700 to reduce smoking prevalence and the exposure of people to the harmful effects of tobacco. (see page 56)

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Physical Activity and Healthy Eating Investments

Programs - Physical Activity and Healthy Eating

Participation in Community Sport and Active Recreation (PICSAR) Scheme

PICSAR supports community sport and active recreation projects delivered in a flexible manner to accommodate groups that do not normally participate.

Initiatives such as offering sport and active recreation at more flexible times, modifying uniform or rule requirements, encouraging social participation and specifically targeting particular sections of the community are the types of initiatives VicHealth supports through the scheme.

The key organisations involved in the delivery of the PICSAR scheme are Regional Sports Assemblies (RSAs). RSAs are working in rural and regional Victoria to identify opportunities to increase community involvement in physical activity. Active Participation Grants are made to support the aims of the PICSAR scheme.

Participation in Community Sport Scheme – Regional Sports Assemblies

Central Highlands Sports Assembly

• \$90,000

Gippsport

• \$90,000

Leisure Networks

• \$90,000

Mallee Sports Assembly

• \$97,683

The Centre

• \$30,000

South West Sports Assembly

• \$90,000

Sports Focus

• \$90,000

Valley Sport

• \$90,000

Wimmera Regional Sports Assembly

• \$90,000

PICSAR Support and Development Programs

Through PICSAR VicHealth funded initiatives to increase the understanding of how to best address barriers in accessing community sport and active recreation faced by Koori groups, culturally diverse communities and women.

Women's Support Function

Womensport and Recreation Victoria Inc.

Expert advice and support provided to increase women's participation in community sporting activities. Support was provided to key organisations involved in the Participation in Community Sport and Active Recreation Scheme.

• \$85,000

Koori Support Function

Victorian Aboriginal Youth Sport and Recreation Cooperative (VAYSAR)

Expert advice and support provided to increase Koori participation in community sporting activities. Support was provided to key organisations involved in the Participation in Community Sport and Active Recreation Scheme.

• \$85,000

Developmental Project

Womensport and Recreation Victoria Inc

Project to analyse current LGA female physical activity policy. Encourage, educate and implement policy, procedures and programs that will assist local communities to increase female participation numbers.

• \$70,000

Sport and Recreation Project: Oct 2003 – Oct 2006 Developmental Project

Centre for Multicultural Youth Issues

Increasing access to sport and recreation for culturally diverse communities by working with state sporting associations, local governments, leisure centres and ethnic communities

• \$137,675

Active Participation Grants

Active Participation Grants were made as part of the Participation in Community Sport and Active Recreation Scheme. The Active Participation Scheme made available both Partnership and Local Grants.

The Active Participation Grants aim to:

- support community sport and active recreation projects that encourage and increase participation in physical activity for population groups that are currently inactive, or may traditionally encounter barriers to participation;
- support community sport and active recreation projects that specifically address the target population groups identified by VicHealth, in a culturally appropriate way and enhance their connection to others;
- support community sport and active recreation projects that facilitate development of partnerships within the community to increase physical activity; and
- evaluate, document and disseminate the outcomes of the funded activity to ensure continued learning in community sport and active recreation regarding health promotion.

Partnership Grants

Grants of up to \$30,000 were made available to these projects. Partnership grants address longer-term barriers to participation in community sport and active recreation faced by the nominated population groups. Partnership grants have a strong emphasis on participation in physical activity; benefit people who are not currently active and benefit those from one or more identified target groups. The target groups were women, youth (aged 12–25), people from culturally and linguistically diverse backgrounds, Kooris and older people.

Africa Active

City of Greater Dandenong

• \$29,867

Bones and No Groans

Bendigo & District Aboriginal Cooperative

• \$23,356

Bridging Gaps with Basketball

Banyule City Council

• \$26,364

Cardinia Casey Strength Training Network Pilot Project*Victorian Council of YMCA*

- \$27,920

Community Soccer Program*Victorian State Council of YMCAs Inc*

- \$30,000

Cycling for Health*Bicycle Victoria*

- \$30,000

Exercise Referral Program*Brimbank City Council*

- \$25,362

Get Active*South Gippsland Shire Council*

- \$30,000

Getting Yarra Ranges Active*Shire of Yarra Ranges*

- \$30,000

Girls in Recreation, Leisure and Sport*City of Kingston*

- \$30,000

Heel to Go - Loddon on the Go*Loddon Shire Council*

- \$30,000

The Hockey Hook Project*Hockey Ballarat Inc*

- \$17,620

Healthy Leisure Activities for Kooris*Helenic Sporting Club Mildura United Inc*

- \$30,000

Maffra Future Leaders Program*Wellington Shire Council*

- \$6,950

Newly Arrived Migrant and Refugee Young People's Recreation Project*Maribyrnong City Council*

- \$30,000

On Track – Indigenous Program*Central Gippsland Aboriginal Health & Housing Co-op*

- \$30,000

Participation Made Possible*City of Greater Shepparton*

- \$30,000

Physical Activity Promoting Cultural Heritage*Dandenong District Aboriginal Cooperative Ltd*

- \$30,000

Physical Activities through Community Houses*Warragul Community House*

- \$30,000

Positively Charged*LaTrobe City Council*

- \$30,000

R.A.D! Project*Golden Plains Shire Council*

- \$30,000

See Your Way Fit*Banyule/Macleod YMCA*

- \$30,000

The Strong Shop*Fitness Victoria*

- \$30,000

Strength Training – Training Trainers*Council on the Ageing (Victoria)*

- \$30,000

Surf Coast Innovative Participation Program*Surf Coast Shire*

- \$29,940

West Sunshine Youth Sport and Recreational Focus Program*The State Council of the YMCA of Victoria Inc.*

- \$29,665

Winda Mara Active Recreation & Health Project*Winda Mara Aboriginal Corp*

- \$30,000

“Work It Out”*Reclink Australia Inc*

- \$29,000

Local Grants

Grants of up to \$3000 were made available to these projects.

After School Program*Sunshine Bowling Club Inc.*

- \$2,985

Anglicare Youth Sailing Project*Rye Yacht Club Inc.*

- \$2,670

A League of Ladies*Mt Clear Cricket Club*

- \$3,000

Aquatic Participation*Southern Grampians Shire Council*

- \$2,230

Ballam Park Bulls Disability Football Club*Football Integration Development Association*

- \$3,000

Basket Boomers*Blackburn Basketball Association*

- \$3,000

Be Better – Be Active*Tatura Community House*

- \$3,000

Bounce Back with Babes*South West Sports Assembly*

- \$3,000

“BREAKOUT”*City of Yarra - Recreation Planning & Development*

- \$3,000

Breaking Isolation - Chinese Elderly Healthy Activities*Flemington Neighbourhood Centre*

- \$3,000

Budja Budja Golf Group*Budja Budja Aboriginal Cooperative*

- \$3,000

Bush Walking Club*Omeo Golf Club*

- \$3,000

Come 'n' Be Active @ Carrajung*Carrajung Hall and Memorial Park Committee of Management Inc.*

- \$3,000

Community Involvement*Werribee Softball Association*

- \$3,000

Develop Community Involvement in Junior Lacrosse*Chadstone Lacrosse Club Inc.*

- \$3,000

“Fit and Fab for the Over 40s”*Ocean Grove Neighbourhood Centre Inc.*

- \$3,000

Football Fun for Everyone*Moe Saints Junior Football Club*

- \$3,000

Fun and Fitness for All*Terang/Mortlake Football-Netball Club*

- \$3,000

Fun and Fitness*Shire of Campaspe*

- \$3,000

Gentle Exercise*Hallam Community Centre Inc.*

- \$2,800

Girls Under 14 Baseball Competition*Malvern Baseball Club Inc.*

- \$2,960

Girls' Soccer Clinics*Western Victorian Soccer Association (WVSA)*

- \$2,440

Golden Glories*Seymour Sports and Aquatic Centre*

- \$3,000

Golf Is the Go At Goroke*Goroke Golf Club*

- \$1,800

Halls Gap Aerobics and Exercise Classes*Halls Gap Caravan Park and Recreation Ground Committee of Management Inc.*

- \$2,900

Health Through Sport*Murray Valley Aboriginal Cooperative*

- \$3,000

Increasing the Participation of Young Women in Cricket*Dandenong Women's Cricket Club Inc.*

- \$3,000

Indoor Soccer*Wonthaggi Indoor Soccer Association Inc.*

- \$3,000

Introduction to Badminton through Social & Club Links*Wimmera Badminton Association Inc.*

- \$3,000

Kicking Goals*East Geelong Football Club – Women's Division*

- \$3,000

Let's Get Healthy*Lancefield Neighbourhood House*

- \$2,830

Life through Golf Clinics*Moe Golf Club Inc.*

- \$3,000

Living Longer Living Stronger – Strength Training*Upper Beaconsfield Community Centre Inc.*

- \$3,000

Melbourne Argonauts Junior Squad Establishment*Melbourne Argonauts Queer Rowing*

- \$2,890

Melbourne Airport Women's Golf Program*Melbourne Airport Golf Club*

- \$3,000

Mums on the Move*Banyule City Council*

- \$3,000

Netball and Basketball*Kirrae Health Services*

- \$2,660

New Start to Life Cardio Exercises for Older Adults*Northern Mallee Older Adults Recreation Network Inc.*

- \$3,000

New Starters Program*Omeo Golf Club*

- \$2,600

Oh to Call Benalla Home*Benalla Rural City*

- \$3,000

Petanque Along!*Golden Plains Shire*

- \$3,000

Pro-Active Petanque*Sea Lake Petanque Club Inc*

- \$3,000

Project Bounty*Preston Baseball Club*

- \$3,000

Promotion of Lawn Bowls*Mitcham Bowling Club Inc.*

- \$3,000

Recreation & Participation for Seniors*Cloverdale Community Centre Inc.*

- \$3,000

Senior Citizens Health & Fitness Club*Norlane Neighbourhood House*

- \$3,000

Springhurst Linedancing

Recycled Teens Springhurst

• \$2,928

Strength Training

Blind Bight Community Centre

• \$3,000

Strength Training for the Over Fifties

Yarram Community Learning Centre

• \$3,000

Stride 'n' Stroll

Echuca & District YMCA

• \$3,000

Social and Human Wealth Capital

Colac Otway Shire, Bluewater Fitness Centre

• \$3,000

Swing into Life – New Vogue Dance

Yarrawille Community Centre

• \$3,000

Swordplay

Brunswick Dragons Fencing Club Inc.

• \$3,000

Table Tennis for Girls of All Ages

Maccabi Table Tennis Club

• \$3,000

Table Tennis Sunshine

Sunshine District Table Tennis Association Inc.

• \$3,000

Tai Chi Classes

Rochester Community House Inc.

• \$3,000

Tai Chi for Older Vietnamese

City of Greater Dandenong

• \$2,970

Teenage Afterschool Recreation Program

YMCA of Moonee Valley

• \$2,657

Tennis For a Healthy Community

Donald Lawn Tennis Club Inc.

• \$2,900

Tennis for "Take-a-break" Mums

Sydenham Tennis Club Inc.

• \$3,000

Try Bowls and Secondary Schools Bowls Competition

Blackburn North Bowling Club Inc.

• \$1,529

Turkish Women's Health and Well Being (Dancing/Walking)

Turkish Women's Recreation Group Inc.

• \$1,960

VicHealth Active Participation Grant

Echuca Moama Hockey Club

• \$2,650

Viking

Waverley Softball Association

• \$3,000

Walking Parks Project

Life Activities Club of Darebin Inc.

• \$3,000

Wekkih

Wathaurong Aboriginal Cooperative

• \$3,000

Women's Aquatic Program

City of Whittlesea

• \$3,000

Women Making Waves

City of Yarra – Recreation Planning and Development

• \$3,000

Women's Yoga

Gormandale Community House Inc.

• \$2,970

Young Active Women

City of Casey

• \$3,000

Youth Paddling Development Program

Tarwin River Canoe Club Inc.

• \$3,000

Youth Participation

City of Moonee Valley

• \$1,974

Partnerships for Health – State Sporting Associations

Under the Partnerships for Health Scheme, state sporting associations have undertaken a range of activities to increase participation and create welcoming environments within their sports. This has involved the associations in:

- developing sport-wide policies and practices that promote health;
- promoting environments that are conducive to health;
- encouraging communication of the role sport plays in improving the health of Victorians;
- expanding the range of people who participate in sport; and
- contributing to the evidence base on the promotion of health through sport.

Athletics Victoria

• \$53,000

Badminton Victoria

• \$30,000

Bocce Federation of Victoria

• \$20,000

Boxing Victoria

• \$20,000

Calisthenics Victoria Inc.

• \$45,000

Football Victoria

• \$670,000

Handball Federation of Victoria

• \$20,000

Hockey Victoria

• \$45,000

Indoor Sports Victoria

• \$35,000

Lacrosse Victoria

• \$35,000

Motorcycling Victoria

• \$25,000

Netball Victoria

• \$300,000

Pool Victoria Inc.

• \$20,000

Pony Club Association of Victoria

• \$30,000

<i>Skate Victoria Inc.</i>	• \$20,000
<i>Rowing Victoria Inc.</i>	• \$25,000
<i>Royal Life Saving Society Aust - Vic Branch</i>	• \$70,000
<i>Royal Victorian Bowls Association</i>	• \$40,000
<i>Sporting Shooters' Assoc. of Aust. - Vic Branch</i>	• \$30,000
<i>Surf Life Saving Victoria</i>	• \$100,000
<i>Surfing Victoria</i>	• \$50,000
<i>Swimming Victoria Inc.</i>	• \$50,000
<i>Table Tennis Victoria</i>	• \$35,000
<i>Taekwondo Victoria</i>	• \$25,000
<i>Tennis Victoria</i>	• \$220,000
<i>Triathlon Victoria</i>	• \$25,000
<i>Victorian Amateur Fencing Association</i>	• \$20,000
<i>Victorian Baseball Association Inc.</i>	• \$70,000
<i>Victorian Canoe Association</i>	• \$40,000
<i>Victorian Cricket Association</i>	• \$250,000
<i>Victorian Croquet Association</i>	• \$25,000
<i>Victorian Diving Association Inc.</i>	• \$20,000
<i>Victorian Golf Association</i>	• \$50,000
<i>Victorian Gymnastics Association</i>	• \$65,000

<i>Victorian Little Athletics Association</i>	• \$60,000
<i>Victorian Orienteering Association</i>	• \$30,000
<i>Victorian Rugby League</i>	• \$20,000
<i>Victorian Rugby Union Inc.</i>	• \$55,000
<i>Victorian Snowsports Association</i>	• \$50,000
<i>Victorian Soccer Federation</i>	• \$110,000
<i>Victorian Softball Association</i>	• \$45,000
<i>Victorian Squash Federation</i>	• \$70,000
<i>Victorian Touch Association</i>	• \$25,000
<i>Victorian Water Polo Inc.</i>	• \$10,000
<i>Victorian Weightlifting Association</i>	• \$20,000
<i>Volleyball Victoria Inc.</i>	• \$40,000
<i>Women's Golf Victoria Inc</i>	• \$110,000
<i>Yachting Victoria</i>	• \$50,000

Partnerships for Health – Support to State Sporting Associations on specific health issues

Support for Health Promotion Practice – Healthy Eating	
<i>International Diabetes Institute</i>	• \$25,000
Support for Health Promotion Practice – Injury Prevention	
<i>Sports Medicine Australia</i>	• \$85,000

Support for Health Promotion Practice – Responsible Alcohol Management	
<i>Australian Drug Foundation</i>	• \$80,000

Support for Health Promotion Practice – Smoke Free	
<i>Cancer Council Victoria</i>	• \$80,000.

Support for Health Promotion Practice – Sun Protection	
<i>Cancer Council Victoria</i>	• \$25,000

Partnerships For Health – Support Function	
<i>Vicsport</i>	• \$140,000

Out of School Hours Sports Program

A joint initiative between VicHealth and the Australian Sports Commission is concerned with providing a positive, safe, nurturing and healthy sporting experience for primary school aged children in outside of school hours care, particularly between the hours of 3.30 – 6.30pm using recognised junior development programs delivered by State Sporting Associations.

<i>Badminton Victoria</i>	• \$20,000
<i>Gymnastics Victoria</i>	• \$20,000
<i>Netball Victoria</i>	• \$20,000
<i>Tennis Victoria</i>	• \$20,000
<i>Victorian Baseball Association</i>	• \$20,000
<i>Victorian Soccer Federation</i>	• \$20,000
<i>Victorian Softball Association</i>	• \$20,000
<i>Women's Golf Victoria</i>	• \$21,000

Out Of School Hours Sports Program - Phase 1 – 14 OSHC Services

Outside School Hours Care services

- \$8,500

Out Of School Hours Sports Program - Phase 2 – 15 OSHC Services

Outside School Hours Care services

- \$16,120

Out Of School Hours Sports Program - Phase 3 – 14 OSHC Services

Outside School Hours Care services

- \$8,000

Walking School Bus Program - Phase 2 and 3

VicHealth's Walking School Bus Program is a partnership between local government councils/shires and community agencies, who work with local primary schools to establish Walking School Buses in their municipalities. The purpose of the program is to create change in the school travel patterns of Victorian primary school children.

The Walking School Bus Program delivers considerable individual and community benefits.

- Health benefits – walking to and from school provides children with the opportunity to engage in regular physical activity.
- Environmental benefits – every journey made on foot reduces traffic congestion and pollution outside and around schools and helps improve the local environment for all.
- Safety benefits – walking helps people become more familiar with their community, increases the number of people on the streets, thereby improving a sense of personal and community safety, and provides children with the chance to develop and improve road safety and pedestrian skills.
- Mental health benefits – the Walking School Bus Program relies on the establishment of partnerships in the community for its success. The establishment of co-operative relationships between local government, primary schools, families and the community has the potential to contribute to a more positive sense of community and increase the opportunities for people to access social networks.

Bayside City Council

- \$25,000

Cardinia Shire Council

- \$25,000

Central Highlands Sports Assembly

- \$22,518

City of Casey

- \$25,000

Colac Otway Shire Council

- \$25,000

Darebin City Council

- \$24,029

City of Greater Geelong

- \$25,000

Horsham Rural City Council

- \$25,000

City of Kingston

- \$25,000

Frankston City Council

- \$15,000

Knox City Council

- \$25,000

Latrobe City Council

- \$25,000

Manningham City Council

- \$25,000

Maribyrnong City Council

- \$25,000

Maroondah City Council

- \$25,000

City of Melbourne

- \$25,000

Moonee Valley City Council

- \$25,000

Moreland City Council

- \$25,000

Nillumbik Shire Council

- \$25,000

Greater Shepparton City Council

- \$25,000

Stonnington City Council

- \$24,924

Surf Coast Shire Council

- \$24,912

Rural City of Wangaratta

- \$25,000

Warrnambool City Council

- \$25,000

Wellington Shire Council

- \$25,000

City of Whitehorse

- \$25,000

City of Wodonga

- \$25,000

Wyndham City Council

- \$25,000

Shire of Yarra Ranges

- \$25,000

Walking School Bus - The Greenlight Project - City Of Port Phillip

Research conducted by the City of Port Phillip identified barriers for the Walking School Buses at signalised crossings.

City of Port Phillip

- \$14,982

Health Enhancing Clubs and Venues

Smartplay Program

Department for Victorian Communities

A joint initiative between the Department of Victorian Communities, the Department of Human Services and VicHealth to promote and support sports injury prevention through communication, education and advocacy.

- \$45,000

Healthy Sporting Venue Project

Iconica Pty Ltd

Supporting the Melbourne Cricket Club to make the Melbourne Cricket Ground a model health promoting venue.

- \$20,000

Portable Shade for Sports Clubs Grant

293 Local Sporting Clubs/organisations

To promote participation in sport by assisting sporting clubs to provide sun shade.

• \$476,305

Sports Injury Prevention Program

402 Local Sporting Clubs/organisations

402 sporting clubs funded to purchase first aid training and/or sports safety equipment to improve the safety of sporting environments.

• \$627,177

Developmental Work – Sport

Sport & Recreation Vic: A C Nielsen – Exercise, Recreation and Sport Survey

Department of Tourism, Sport and the Commonwealth Games

The Victorian oversample of the Exercise, Recreation and Sport Survey was a joint initiative between VicHealth and the Department of Victorian Communities to collect adequate data to plan, evaluate and monitor interventions designed to increase community participation in physical activity.

• \$29,412

Football Victoria Planning Project

Football Victoria

Support for the development of a strategic plan to underpin overall investment.

• \$37,114

Community Participation in Sport & Recreation - a developmental initiative

Victoria University

A joint initiative between VicHealth and Victoria University to undertake and complete an action research study.

• \$20,000

Innovation Programs – Sport

Hands Up, Hands On

Melbourne 2005 Deaflympic Games Ltd

Supporting participation of deaf and hearing impaired people in the 2005 Deaflympic Games as sports officials, volunteers and athletes.

• \$45,000

Program for Culturally Diverse Communities

Surf Life Saving Victoria

A pilot project encouraging both culturally and linguistically diverse (CALD) people and Kooris to learn basic water safety skills and become involved in Surf Life Saving activities.

• \$30,000

Broadening the Base for Victorian Surfing – A Pilot Program

Surfing Victoria

A pilot project designed to create more opportunities for young women and young Kooris to participate in surf activities.

• \$50,000

Physical Activity – Communications

VicSport Newsletter

VicSport

VicSport Newsletter 'Sportsview' used as a communication mechanism to inform the sports sector on how to develop healthy sporting environments.

• \$50,000

VicSport Awards

VicSport

Give profile to the role the sporting industry plays in promoting health within Victoria and to highlight examples of best practice.

• \$50,000

Caribou Publications: Herald Sun Tour 2003 – 2005

Caribou Publications

Promotion of Active for Life and physical activity for health messages through a high profile cycling event that travels throughout Victoria passing through many regional towns.

• \$50,000

Herald Sun Tour 2003 – 2005 Support Function

VicHealth

Support of community participation events staged at several locations throughout the Herald-Sun Cycling Tour.

• \$50,000

Planning and Health Initiatives to Promote Physical Activity

Leading the Way – Councils Creating Healthier Communities

PDF Management Services Pty Ltd

In partnership with DHS, continued to promote the distribution and use of the resource package, Leading the Way, among councillors and senior managers in Victorian councils, using a presentation approach tailored to the needs of individual councils.

• \$50,000

Building Local Government Capacity for Pedestrian and Bicycle Friendly Actions – Phase 2

International Council for Local Environmental Initiatives (ICLEI)

Project focusing on supporting local governments to implement pedestrian and bicycle-friendly strategies to reduce greenhouse emissions. Actions are undertaken through the Cities for Climate Protection Program. This will involve the development of polls to access and measure multiple project benefits and build a triple bottom line business case to facilitate the implementation and sustainability of active transport initiatives.

• \$50,000

Planning for Health

Planning Institute Australia (Victoria Branch)

To form a strategic partnership with the Planning Institute Australia (PIA) to encourage planners to consider the health and wellbeing implications of their planning activity.

• \$50,000

Heart Foundation Victoria: Healthy Built Environments Workshops (Urban Design Guidelines)

Heart Foundation Victoria

Improve skills of planners and relevant health professionals to recognise that physical activity and shade is part of the integrated planning and design of sustainable environments for healthy communities

• \$50,000

Healthy Eating Initiatives

Literature Review to Scope Potential Link – Poverty, Food Insecurity & Obesity

Deakin University

This project aims to provide a literature review on the association between food insecurity, poverty and obesity and identify outstanding research initiatives and interventions around this topic nationally and internationally.

• \$50,000

Research – Physical Activity and Healthy Eating

Fellowships

The relationship between the built, social and policy environment and physical activity in families

Deakin University

Dr Jo Salmon. This fellowship is investigating the relationship between the built, social and policy environment and the level of physical activity families achieve. The focus is on young families living in low socioeconomic areas and consists of an environmental intervention in collaboration with Parks Victoria.

• \$100,000

Interventions to improve cardiovascular health in Aboriginal people

The University of Melbourne

Dr Kevin Rowley. This project evaluates the effectiveness of programs run by Aboriginal communities that are designed to create opportunities for better diet and increased exercise.

• \$100,000

Long-term implications of the increasing prevalence and duration of obesity for health in Australia: An aid to more effective and targeted prevention

Monash University

Dr Anna Peeters. This fellowship will investigate the long term health implications of adult obesity. It will inform more effective and targeted prevention programs.

• \$100,000

Environmental causes of obesity and measurement of the impact of approaches to prevention

Deakin University

Dr Colin Bell. Investigates the environmental causes of obesity and measures the impact of innovative approaches to prevention.

• \$80,000

Scholarships

The influence of the environment on children's physical activity

Deakin University

Clare Hume. This research assesses the influence of the local environment on physical activity among 10 year-old children living in low socioeconomic status areas.

• \$20,484

The role of nutrition promotion in secondary prevention of chronic diseases in older Victorians

Deakin University

Sylvia Mackay Pomeroy. This research program aims to improve the quality of care for older Australians by evaluating strategies utilised by general practitioners when promoting healthy eating to adults who have experienced a major event (cardiovascular or diabetes mellitus) and identify any barriers stopping this promotion taking place.

• \$20,484

ABFAB: the effect of breastfeeding education in the middle of pregnancy on the duration of breastfeeding

La Trobe University

Della Forster. This research aims to study whether breastfeeding education during pregnancy has an effect on the breastfeeding rate at hospital discharge and the duration of breastfeeding.

• \$21,343

Why Do Women Eat What They Do? Personal, social and environmental influences on eating behaviours of women from different socioeconomic backgrounds

Deakin University

Vicki Inglis. This project investigates the individual, psychosocial and environmental influences on the eating behaviours of women from different socioeconomic backgrounds. In particular, the study will examine why women from low socioeconomic status (SES) groups are more likely to consume a diet high in fat, and less likely to consume fruits and vegetables, than women from higher SES groups.

• \$20,484

Improving Body Composition and Function in Overweight and Obese Adolescents

RMIT University

Leah Brennan. This study aims to examine the impact of cognitive behaviour therapy and motivational interviewing on the: eating and physical activity habits; body composition and function; physical health; and psychological wellbeing, of overweight and obese adolescents.

• \$20,484

Dietary Risks and Alcohol as Determinants of Cardiovascular Disease in the Melbourne Collaborative Cohort Study

Monash University

Linton Harriss. This research aims to explain the role of dietary components and alcohol in cardiovascular risk, over and above 'traditional' risk factors.

• \$3,000

Contributions of Parental Socialisation to Food intakes and body weight in children in two cultures

Deakin University

Catherine Russell. This scholarship, jointly funded with Heart Foundation, will contribute to our understanding of how Australian and German parents influence their children's eating behaviours.

• \$10,242

Public Health Research Grants

Environmental and individual determinants of physical activity and dietary behaviour

La Trobe University

Dr Anne Kavanagh. This research project aims to determine why different socioeconomic groups differ in their physical activity participation and food purchasing behaviours, by examining the role of environmental, inter-personal and intra-personal factors.

- \$35,443

ARC Linkage Grant: The adoption and maintenance of physical activity for sedentary females in young adulthood

Victoria University Of Technology

Tony Morris. This project will target sedentary women aged 25-45 years and will develop ways to encourage these women to participate in physical activity.

- \$5,000

Physical Activity in Older Adults from CALD Communities: Environmental Influence

Sunshine Hospital

Project investigates the perceptions of culturally and linguistically diverse older adults in the Western suburbs of Melbourne towards their local built environment and what might either facilitate or prevent their participation in physical activity.

- \$25,000

Mental Health and Wellbeing Investments

Programs – Mental Health and Wellbeing

Community Arts Participation Scheme

The Community Arts Participation Scheme supports a range of projects valued at up to \$30,000 per year or \$60,000 over two years. Through collaborative and inclusive processes, community arts projects improve people's mental health and wellbeing by enabling them to express ideas about themselves and their communities in ways that celebrate and reflect their experience and identity.

The key aims of the scheme are to:

- achieve participation in creative activity for people living in rural Victoria, those who are socially or economically disadvantaged and young people;
- facilitate community development and contribute to sustainable community cultural activity;
- encourage partnerships between arts and non-arts organisations;
- identify models of good practice in health promotion within the Arts setting.

Age Shall Not Weary Her

POW Circus

- \$8,000

Artists Republics

Geelong Arts Alliance

- \$8,539

Art Program and Greeting Cards

Sacred Heart Mission

- \$11,000

Big Issue Project

Brotherhood of St Laurence

- \$25,000

Box Set by Rawcus

Theatreworks

- \$6,000

Cardinian Embroidery Project

Cardinia Shire Council

- \$15,000

Children of the Gods

St Martins Youth Arts Centre

- \$7,000

Community Arts at La Mama

La Mama

- \$30,000

Community Building

Jesuit Social Services

- \$22,000

Community Singing Across Victoria

Community Music Victoria

- \$17,000

Connecting Wendouree

City of Ballarat

- \$22,435

Cultural Development Network (Victoria)

Cultural Development Network

- \$30,000

Domes

Earthdance Inc.

- \$15,480

Drama Workshops

Break of Day Players

- \$20,000

DVA Theatre Co. Physical Theatre Project

DVA Theatre Company

- \$25,000

Express Yourself II

St Laurence Community Services – Club Wild

- \$60,000

Fabric

Maribyrnong City Council

- \$25,000

Festival for Healthy Living - Consolidation Project

Royal Children's Hospital

- \$30,000

Flow

Footscray Community Arts Centre

- \$25,000

FOOTPRINTS - Youth Circus Project*Westside Circus Inc.*

- \$30,000

Fruit Bats*Upper Hume Community Health*

- \$60,000

Girlstorey*YWCA Victoria*

- \$20,000

High Water Theatre - Rural Youth*Somebody's Daughter Theatre*

- \$30,000

Home or House*Melbourne Fringe*

- \$30,000

InterAct*Mental Illness Fellowship Victoria*

- \$15,000

Kingston Youth Street Theatre*City of Kingston*

- \$5,480

Now Screening*Visionary Images Inc.*

- \$20,000

Picturing Motherhood*Women's Health Goulburn North East*

- \$20,000

Plan B*Auspicious Arts Projects Inc (as auspice for Off the Map)*

- \$30,000

Platform Theatre: Workshop Program*Platform Youth Theatre Inc*

- \$29,110

Push it! 2004 for Young Women*The Push Inc.*

- \$20,000

Real to Reel*St Lukes Anglicare*

- \$30,000

Recipe Exchange*Emergency Accommodation & Support Enterprise*

- \$25,000

Reclaim the Right*Shire of Strathbogie*

- \$6,833

Re-igniting Communities 2003*The Torch - Brotherhood Of St Laurence*

- \$15,000

Residential Youth Camp*Ilbijerri*

- \$15,000

Respect The Rules*Gunditjmara Aboriginal Co-op*

- \$9,500

Roomers Spoken Word*Elwood / St Kilda Neighbourhood Learning Centre*

- \$59,400

SCRAYP Schools Program*Footscray Community Arts Centre*

- \$30,000

Sea Harmony*Aspire, A Pathway to Mental Health Inc*

- \$10,580

Space and Place*Y Space: Auspicious Arts*

- \$27,947

Spank and Inside The Angel House*Back To Back Theatre*

- \$30,000

The Production Company – Productions 2003*The Production Company*

- \$15,000

Thinking Out Loud*Brunswick Women's Theatre*

- \$20,000

Through the Mist – Stories of Trentham*Hepburn Health Service*

- \$15,000

Throw, Swing, Jump*Frankston Arts Centre*

- \$23,000

Top Arts*National Gallery of Victoria*

- \$15,000

Torch Re-igniting Communities 2004-05*Brotherhood of St Laurence*

- \$60,000

Victoria Sings: Stage 2*Community Music Victoria Inc.*

- \$60,000

Voyages*Regional Arts Victoria*

- \$29,850

What Is A Warrior?*Multicultural Arts Victoria*

- \$19,860

Woven Land*Gunditjmara Aboriginal Co-operative*

- \$9,150

Communities Together Scheme

The Communities Together Scheme supports the development and staging of community-based festivals and celebrations. The primary focus of this scheme is on the role of festivals and celebrations in strengthening local communities and the overall health and wellbeing of community members.

2003 Landsborough Summer Festival*Landsborough Festivals Inc.*

- \$3,435

25th Anniversary Celebrations*Ballarat and District Aboriginal Co-operative*

- \$10,000

Anatolion Wedding Exhibition*Moreland Turkish Education Centre*

- \$10,000

Arabic Youth Celebrate Arabic Elderly*Victorian Arabic Social Services*

- \$10,000

Art Is.. Freedom*Art Is Festival*

• \$10,000

**Art of Difference Festival -
Community Inclusion Strategy***Gasworks Arts Park Inc*

• \$5,000

Arts Colac Arts Extravaganza's*Arts Colac*

• \$5,000

Autumn Equinox Harvest Festival*CERES*

• \$10,000

Awakenings Festival*Wimmera Uniting Care*

• \$7,000

Bonfire*Moe Apex/Lions Clubs*

• \$4,000

**Boo Exhibition of Cultural
Superstitions***Hume City Council*

• \$4,500

Boolarra Folk Festival 2004*Boolarra Community Development*

• \$10,000

**Brown's Waterholes Community
Festival***Derrinallum & Lismore Community
Association Inc*

• \$5,548

Building Castles*Creatability Events Network*

• \$5,800

Church Street Fiesta*Gippsland Migrant Resource Centre*

• \$6,000

Colac Kana Festival*Colac Kana Festival Inc*

• \$9,500

Collingwood Harvest Festival*Goodshepherd Youth and Family Service*

• \$10,000

Come Together: Food and Fun Fair*Bentleigh Bayside CHS*

• \$6,264

Coming Home*Shepparton Arts Festival Inc.*

• \$8,000

**Coming Together: Kurdish
Community***Institute For Kurdish Studies in Australia*

• \$10,000

Community Beats and Feets*City of Port Phillip*

• \$10,000

Connecting the Community*Pines Connecting the Community Project*

• \$9,600

Cooking Stories Festival*Belgium Avenue Neighbourhood House*

• \$10,000

Cultural Quencher*Balmoral Harrow Community*

• \$2,000

Creswick Forestry Fiesta*Creswick and District Development
Association Inc*

• \$2,000

**Daylesford Community Embracing
Boite Singers Festival***Boite*

• \$5,000

Ensay New Year's Day Sports*Ensay Recreation Reserve*

• \$4,000

Feast of the Senses*Chameleon Arts Collective Inc.*

• \$5,000

Flying Feathers Film Festival*Shire of Strathbogie*

• \$10,000

Hopes and Dreams*Winterfest in Warburton*

• \$8,000

Horn of Africa Live Night*Horn of Africa Communities Network Inc.*

• \$10,000

**Kangaroos & Mountain Views
Festival***Grampians/Wartook Promotion Group*

• \$6,000

Lake Challenge*Access for All Abilities/PINarc*

• \$10,000

**Living in Harmony
in Our Global Village***Bendigo Festival of Culture*

• \$5,000

**Loddon Working with
the Community***Corrections Victoria*

• \$5,000

Lunar New Year/Tet Festival*Jesuit Social Services*

• \$10,000

Mixed Blessings Camp*Rumbalara Aboriginal Co-op.*

• \$6,000

**Moonambel Sparkling Affair
Fireworks***Moonambel Events Inc*

• \$10,000

Music Together*City of Darebin*

• \$5,000

Omeo Wool Challenge*Omeo Agricultural and Pastoral Soc.*

- \$5,000

One & All Festival*Mpower*

- \$8,000

Other Awards*Omeo District Hospital*

- \$4,000

pARTy in the Park*Central Goldfields Shire*

- \$20,000

Poetry in Motion 2004*Mallacoota Arts Council*

- \$10,000

Robinvale Cultural Festival*Robinvale Network House Inc.*

- \$9,250

Robinvale 80th Birthday Celebration*Robinvale Network House Inc*

- \$9,980

Roxburgh Park Multicultural Festival*Hume City Council*

- \$5,000

Sale Rocks*Sale Lions Club*

- \$8,000

Shakespeare on the River*Stratford Shakespeare Assoc.*

- \$6,000

Small Day Out*Hepburn Shire Council*

- \$8,000

Snowy Errinundra Festival*Orbost Community Development Group*

- \$8,340

Summer SPAN Community Festival*SPAN Community House*

- \$10,000

Tet Celebration 2005*North Richmond Community Health Centre*

- \$8,000

Township of Lethbridge 150th Birthday Celebrations*Lethbridge Recreation Reserve Committee of Management*

- \$5,000

Wandiligong Nut Festival*Wandiligong Nut Festival*

- \$8,000

Welcome Platypus Festival*Allwood Neighbourhood House*

- \$5,530

Where the Heart Is*RDNS Homeless Persons Program*

- \$6,000

Women on Farms Gathering*Wimmera Hub*

- \$8,000

Yackandandah Heartsong*Yackandandah Folk Festival*

- \$2,500

YEAH! Festival*Lead On Swan Hill*

- \$6,000

Major Arts Partnership Scheme

This program aims to make arts events accessible, encourage participation and value diversity to improve the mental health and wellbeing of the community and individuals who interact with the major partners.

Footscray Community Arts Centre

- \$50,000

Geelong Performing Arts Centre

- \$50,000

Hothouse Theatre

- \$50,000

Immigration Museum

- \$50,000

Koorie Heritage Trust Inc.

- \$50,000

Melbourne International Arts Festival

- \$50,000

Mildura Arts Festival

- \$50,000

Playbox Theatre Company Ltd.

- \$50,000

Regional Arts Victoria

- \$50,000

Victorian Arts Centre

- \$50,000

Projects Receiving Funding Specifically Under the Mental Health Promotion Plan**Capacity Building Project***Whitelion Inc.*

Project to establish inter-sectoral partnerships to promote young offenders' mental health - through linking these young people with role models and supported employment prior to and upon release from a juvenile justice facility.

- \$100,000

Children of Parents with a Mental Illness*Murdoch Children's Research Institute/ Centre for Adolescent Health*

Project to implement, evaluate and document a model of cross-sectoral collaboration in five sites across Victoria, which will engage and support young people (12-18 years) of parents who have a mental illness.

- \$300,000

Exploring Potential for Social Inclusion

Strathdon Community

To identify ways of reducing the barriers between older people in residential accommodation and organisations operating in the broader community, and to facilitate residents' social interaction with the broader community.

• \$1,800

Horticultural Program 2004

Royal Children's Hospital

A horticultural program run by specialist staff for children, adolescents and their families at the hospital, providing "hands-on" gardening activities, to provide relief from the stresses and discomfort often associated with hospital stays.

• \$25,000

Indigenous Arts Resource Project

Ilbijerri Theatre Co-op.

To develop and implement a framework to ensure young Kooris have access to information, education, participation in industry-based opportunities and career pathways in performance, visual, media and fine arts.

• \$30,417

Melbourne Refugee Health and Asylum Seeker Health Network (RASHN) Co ordination Project

Refugee and Asylum Seeker Health Network (RASHN)

Project to develop a network of health professionals to improve access to health services by refugees and asylum seekers through advocacy, professional development, program development and the identification of in-kind, volunteer and pro-bono services for those ineligible for Medicare.

• \$30,000

Rumbalara Football Netball Club: Capacity Building 2004 - 2006

Rumbalara Football Netball Club

This project aims to increase the organisational capacity of RFNC to achieve its health, social, cultural, economic and sporting goals by building appropriate organisational structures and systems and generating income.

• \$140,000

Sir Douglas Nicholls Indigenous Fellowship

Brotherhood of St Laurence

Fellowship for recognised Indigenous leader to strengthen Indigenous leaders' networks, facilitate forums, and achieve a common vision and action plan with both the Indigenous and broader community. The aim is to achieve practical and sustainable results over a five year period.

• \$100,000

The Horn of Africa Newspaper Project

Adult Multicultural Education Services

An initiative to promote mental health and wellbeing in newly emerging African communities by strengthening cultural identity, communication and networks through the establishment of a community language newspaper.

• \$50,000

Tracking Project: Youth Economic Participation Schemes

University of Melbourne Youth Research Centre

To monitor progress of youth economic participation for mental health and wellbeing activity across six projects.

• \$40,000

Vic Champs - Children of Parents with a Mental Illness

Eastern Health

Project involves the implementation, evaluation and documentation of a model of good practice which promotes the health and wellbeing of children (5–12yr) who have a parent with a mental illness.

• \$235,000

Victorian Indigenous Leadership Strategy

Aboriginal Affairs Victoria

A three-part Indigenous led strategy to trial and develop long-term plans and models for cultural strengthening, community building, and partnerships development in order to enhance economic and social sustainability for Victoria's Indigenous communities.

• \$500,000

Victorian Koori Community Leadership Project - SportConnect Leadership Program

Ramahyuck District Aboriginal Corporation

The leadership program is delivered by well-respected role models and enables young people to increase decision making skills and take an active role in their community. The program is delivered at 5 sites - Morwell/Traralgon, Sale, Bairnsdale, Lake Tyers, Orbost.

• \$100,000

Victorian Koorie Network for the Future

Victorian Aboriginal Youth Sport and Recreation Co-Op Ltd

An Indigenous 'think tank' of Koorie community leaders, academics and community members that coordinates leadership activities in Koorie communities and facilitates cross-community discussion of community agendas and future planning.

• \$40,000

Rural Racing

Three initiatives in VicHealth's Rural Racing scheme that aim to link family friendly community race meets with local community groups and organisations.

"A Gap in the Calendar" Program

Greyhound Racing Victoria

• \$50,000

Cultural Country Race Days

Country Racing Victoria

• \$150,000

Rural Racing Project

Harness Racing Victoria

• \$50,000

Professional Development Dissemination Projects

Key Centre for Women's Health in Society: Dissemination Strategy

Key Centre for Women's Health, University of Melbourne

Development and implementation of a rigorous approach to the dissemination of outcomes and learnings arising from the centre's research.

• \$35,000

Mental Health Promotion Short Course

Deakin University

Project to develop a two-day course on mental health promotion which will build the capacity of workforces across a range of sectors including the arts, sports, education, health, justice and local government.

• \$26,000

Website for Dissemination of Refugee Health Research

Key Centre for Women's Health

Project designed to provide information and resources for researchers from a range of sectors working with refugee health issues.

• \$5,000

Research – Mental Health and Wellbeing

Centres of Excellence for Research and Practice

Koorie Health Unit-Capacity Development Program

University of Melbourne

Assoc Prof. Ian Anderson. The establishment of a unit to undertake qualitative research in the social and cultural analysis of health services management, health promotion and health education policy, and urban health issues for Koorie people.

• \$103,549

VicHealth Centre for Research and Practice in the Promotion of Mental Health and Social Wellbeing

University of Melbourne

Establishment and development of a research and practice centre to promote mental health and wellbeing.

• \$800,000

Fellowships

Developing Sustainable Aboriginal Health Research Practice

The University of Melbourne

Dr Priscilla Pyett. To implement and evaluate an innovative program of research reform that will improve ethical, relevant and sustainable research practice in Aboriginal health, build research capacity and ultimately lead to improved health outcomes for Aboriginal peoples.

• \$100,000

Health, Development and Wellbeing of Young Children in Victoria

Royal Children's Hospital

Dr Elizabeth Waters. Collection of epidemiological data on the health, development, and wellbeing of young children in Victoria; review of the evidence base for characteristics and factors associated with effective public health interventions in childhood; and development of evidence-based public health and health promotion strategies to address child health inequalities.

• \$100,000

Integrated, Community-based Approaches to Health Promotion for Victorian Blue-collar Workers

The University of Melbourne

Dr Anthony LaMontagne. This research is developing new intervention approaches to address the parallel patterns of high risk health behaviours and adverse working conditions among low status workers with community participation.

• \$165,000

Measuring the Effect of Social, Cultural and Environmental Context on Health and Wellbeing

Deakin University

Dr Daniel Reidpath. To explore health beyond the impact of individual risk factors and examine the relationship between contextual factors and health and wellbeing.

• \$100,000

Promoting Long Term Health and Wellbeing in Refugees and Asylum Seekers: Informing policy and practice

The University of Melbourne

Dr Pascale Allotey. Research examining the mental and physical health outcomes of refugees and humanitarian settlers in Australia through programs such as Women at Risk, Community Refugee Settlement Scheme, special humanitarian programs and mandatory detention followed by temporary protection visa.

• \$100,000

Understanding the Importance of Place in Health Inequalities

La Trobe University

Dr Anne Kavanagh. This study will investigate whether living in socio-economically deprived areas is associated with poorer health status and will document variations in the social and physical environments of places (eg public transport and housing) in socially contrasting areas.

• \$165,000

Scholarships

Food, Fear and Self-Neglect: repatriation and the health and wellbeing of East Timorese asylum seekers

The University of Melbourne

Dr Catherine Lazaroo. Research examining the impact of the policy of repatriation of East Timorese asylum seekers on their physical and mental health.

• \$40,143

Influence of 'Hands-on' Nature-Based Activities on the Mental Health of Children

Deakin University

Cecily Maller. To explore the effect of 'hands-on' contact with nature via nature-based activities encountered during primary schooling on the mental health and wellbeing of children aged 8–12.

• \$20,484

Production of Aboriginal Art and its Relationship to the Health and Wellbeing of Koori's

The University of Melbourne

Frances Edmonds. This research aims to produce a rigorous social analysis that will inform future research such as in the field of social epidemiology.

• \$20,484

Research Projects

Evidence Review-Mental Health Promotion Framework, Consultancy (Research)

The University of Sydney

Project to review the research and literature relevant to the promotion of mental health and wellbeing with specific focus on reviewing the efficacy of activity designed to facilitate social inclusion, reduce discrimination and violence and facilitate economic participation.

• \$67,847

Mosaic

The Centre for the Study of Mothers' and Children's Health, La Trobe University

Dr Angela Taft. MOSAIC is a community intervention trial, evaluating whether trained and supportive General Practitioners and Mentor-mothers can reduce intimate partner abuse and depression and strengthen the health, wellbeing and mother-child bonds among women pregnant or with children under 5 years.

• \$50,000

My Story/Our Stories: Growing and Connecting through Enacted Stories

The University of Melbourne

Assoc. Prof Angela O'Brien. Research project to investigate school-based arts programs in four schools in the Footscray region, conducted by SCRAYP, Youth Arts with an Edge. Investigation will focus on how social connection and relationships with peers, families and communities is facilitated through dramatic enactment of stories and the implications for the determinants of health.

• \$25,000

New Arrivals Regional Relocation Evaluation

Victoria University

A multi-site evaluation of refugee regional relocation projects in Swan Hill and Warrnambool to assess their impact on mental health and well-being and identify good practice approaches.

• \$20,000

Off to a Healthy Start: A Longitudinal Ethnography of the Social Contexts and Determinants of Health and Wellbeing Among Newly Arrived Refugee Youth

La Trobe University

Prof. Sandy Gifford. An ethnographic study to describe the social contexts and determinants that promote mental and social wellbeing for newly arrived refugee youth and their families during the settlement process. Two hundred newly arrived young people from refugee backgrounds aged 12-17 years will be followed over a five-year period. Broader contextual factors that facilitate or hinder wellbeing will be assessed at the level of school, family and community.

• \$128,401

Pathways to Success & Wellbeing for Australia's Young: Australia 21 Ltd

Youth Research Centre, University of Melbourne

Prof. Johanna Wynn. Project which aims to connect existing research on issues affecting young people's health with broader theories, leading to the development of evidence that stimulates fresh policy approaches in Australia and stimulates further research around gaps in knowledge.

• \$66,500

Unemployment, Health and Social Connectedness in the Rural Community

Monash University

Dr Gil-Soo Han. Project to investigate the factors that affect the health and wellbeing of ex-employees of the State Electricity Commission in the Latrobe Valley region.

• \$25,000

Wellbeing of Communities: Cultural Activities, Social Health and Community Sustainability

RMIT University, Globalism Institute

Prof. Paul James. A four-year research project to investigate at a community level, the connection between arts activity and mental health and wellbeing. It will examine the full impact of cultural activities such as arts events, festivals and commemorations on the wellbeing of communities.

• \$68,772

Evaluation

Community Arts Participation Scheme - Evaluation

Effective Change Pty Ltd

Evaluation of the effectiveness of the Community Arts Participation Scheme to meet the objectives of the Arts Program and of the Foundation. Includes production and dissemination of a final report.

• \$45,000

Communities Together – VicHealth Community Festivals and Celebrations Scheme - Research & Evaluation Grant

Centre for Popular Education, University of Technology, Sydney

Research and evaluation of the festivals and celebrations funded under the Communities Together Scheme over two years.

• \$42,500

Major Partnerships Scheme - Evaluation

McLeod Nelson & Associates Pty Ltd

Evaluation of the Major Partnership Program to assess the effectiveness in meeting the aims of the scheme and the aims of VicHealth.

• \$70,000

Multi-Project Evaluation of the VicHealth Rural Racing Scheme

Effective Change P/L

This evaluation report is to assess the role of the three racing organisations in contributing to mental health and wellbeing through community participation approaches. Given the range of approaches and the way that the racing organisations are working with other sectors there could be significant learnings that will apply more generally.

• \$25,000

Rumbalara Football/Netball Club Capacity Building- Evaluation – 2004–2006

Effective Management Solutions Pty Ltd

The evaluation and documentation of the three year project to increase the organisational capacity of Rumbalara Football Netball Club (RFNC)

• \$15,000

Research Workforce and Tobacco Control Investments

Centres of Excellence for Research and Practice

Australian Research Centre in Sex, Health and Society

La Trobe University

Prof. Marion Pitts. A Centre for Research and Practice undertaking social research and training into the areas of sex, sexuality, their place in society and their relationships to health.

• \$100,000

Centre for the Study of Mothers' & Children's Health

La Trobe University

Prof. Judith Lumley. The Centre is a multidisciplinary research centre which aims to: i) undertake and interpret research on mothers' and children's health; ii) contribute to policy development; iii) provide advice and resources to researchers in related fields; and iv) be involved in postgraduate and continuing education

• \$175,000

VicHealth Professor of Adolescent Health Research: Centre for Adolescent Health

Murdoch Children's Research Institute

Prof George Patton. The Centre for Adolescent Health mission is to improve the health of young people, through research, health promotion, education, training, advocacy and clinical services.

• \$100,000

Conference Support Fund

Through the Conference Support Fund, VicHealth provides limited support to conferences conducted by other providers to facilitate knowledge transfer in the field of health promotion.

15th International Conference on the Reduction of Drug Related Harm

Australian Drug Foundation

A conference to facilitate dialogue and understanding between consumers and affected communities with researchers, practitioners and policy makers on major harm minimisation themes.

• \$8,000

Best Practice in Service Delivery & Health Promotion in CALD Communities

Australian-Polish Community Services Inc.

This conference brought together members of funding bodies, researchers and policy makers and people providing support and health services (physical, mental and emotional health) to the aged population in Victoria.

• \$5,000

Conference 21: Positioning Our Future

Victorian Aboriginal Youth, Sport and Recreation

Aims of this conference included: (i) provide a culturally safe environment for members of the Indigenous community of Victoria to debate and decide on objectives and strategies to build both emotionally and physically healthy communities in the 21st century and (ii) provide opportunity to consider governance, imaging, history of path, leadership in a cultural framework, assimilation or integration, and economic and social capital.

• \$5,000

Does a Human Rights Perspective Improve Public Health?: exploring the mainstream and the marginalised

Key Centre for Women's Health, University of Melbourne

This conference brought together leaders in the area of health and human rights to debate and generate discussion on (i) whether and how a human rights framework adds value to public health policies and programs; (2) human rights impact assessments; (3) the relationship between the health and human rights status of marginalised groups; and bioethics and human rights.

• \$10,000

Engine Innovate

MIM Adolescent Services

Researchers, practitioners, policy makers and youth workers from various disciplines, and from around Australia discussed and evaluated current programs, practices and systems of care that operate within the context of the child's family and social ecology.

• \$3,000

Fringe Benefits? Young People on the Edge of Policy and Place

Youth Affairs Council of Victoria Inc.

Young people, organisations and individuals working with young people, community builders, local, state and federal government representatives, and community leaders gathered to discuss issues of diversity, multiculturalism, participation, marginalisation and creativity that are encountered by young people.

• \$6,000

From Rhetoric to Reality: Making Human Rights Work

Equal Opportunity Commission Victoria

This conference aimed to: (i) increase awareness and knowledge of human rights, including the right to health and its relevance to everyday life; (ii) develop frameworks and strategies for embedding health and human rights in policy and (iii) identify opportunities and strategies for health and human rights education.

• \$8,000

Futures III Victorian Rural Health Forum

Country Aids Network Victoria Inc.

This conference focused on HIV/AIDS, Hepatitis C and other blood-borne viruses and sexually transmitted infections in rural Victoria, with a view to raising awareness of health services, and of the issues related to discrimination, stigma and isolation for those with these infections. It also provided a forum for HIV, hepatitis C and sexually transmitted infections infected people to share their experiences of living with a virus; and sought to mobilise existing service providers towards a more collaborative approach.

• \$5,000

Inclusion: Everybody Matters

Orygen Youth Health (Orygen Research Centre)

This conference: (i) showcased good practice approaches that improve social inclusion, health and wellbeing for all young people in schools; (ii) developed and strengthened partnerships across schools and agencies to reduce health and social inequalities; and (iii) promoted and encouraged schools to implement innovative ways to improve mental health and wellbeing for all young people.

• \$4,000

Living and Loving in Diversity

The ALSO Care and Benevolent Society Inc.

Aims of this conference were to: increase understanding and awareness in the broader community about the issues impacting on the health and wellbeing of GBLTIQ Victorians; and to make recommendations with an action plan that will go to key stakeholders, community governments and health providers.

• \$5,000

Long Term Fix: What Is the Future of the Drug Sector in Victoria?

Victorian Alcohol and Drug Association – VAADA

Members of the community, drug and alcohol workers, social and health professionals came together to debate and generate discussion on: (1) workforce capabilities of the alcohol and drug sector; (2) quality of services to clients and to the community; (3) strategies to build stronger relationships in the community; and (4) developing strategies to respond to emerging drug trends.

• \$5,000

Moving West – A Regional Physical Activity Conference

WestBay Alliance

This conference provided information on various models of physical activity interventions, available resources and key stakeholders in physical activity promotion.

• \$3,000

Our Community Youth and Families

Rural City of Wangaratta

This conference focused on the themes of belonging, connectedness, partnerships, making a difference, and promoting positive outcomes for all across all levels of the community.

• \$6,000

Overcoming Genetic Challenges – GSNV in Regional Victoria

Genetic Support Network Victoria

This regional conference brought together people living with a rare genetic condition to debate current ethical issues in genetics and to promote mental health, particularly the importance of social connection.

• \$2,000

Outside Looking In - New Directions in Supporting Adolescents with Eating Disorders

The Butterfly Foundation

This conference provided networking opportunities and current knowledge of developments and best practices for health professionals, carers, families and people suffering from eating disorders.

• \$5,000

“Partnerships, Participation and Vision” a Victorian Sexual Assault and Domestic Violence National Forum

The Victorian Centres Against Sexual Assault Forum Inc. (CASA Forum)

An opportunity for service providers, policy makers, academics and victim/survivors to discuss, debate and highlight practice and policy issues relating to contemporary issues in sexual and family violence.

• \$10,000

POP (Prevention of Osteoporosis Program) Seminar for the Vietnamese Community

Western Region Health Centre

Aims of this conference included:

(i) educate the Vietnamese community in the Maribyrnong area on osteoporosis and arthritis management with peer educators; and (ii) educate and promote physical activity and awareness in the Vietnamese community.

• \$4,000

Second Annual Conference on Community Safety

Victorian Safe Communities Network Inc.

This conference provided a platform for community safety and health practitioners from across the state and country to present the latest innovative projects, health information and to form networks and alliances with other practitioners and organisations

• \$3,000

The Best Years of Our Lives – Or Are They?

The Alannah & Madeline Foundation

The conference aimed to:

(i) raise the issue of bullying and its impact on the wider community; (ii) examine best practice in dealing with the issues associated with bullying in the adolescent years; and (iii) make recommendations to government on future directions in dealing with bullying strategies in the wider community.

• \$10,000

VicHealth and VECCI Organisational Health Alliance

VECCI

Alliance to establish a cooperative relationship for the purposes of:

- furthering the objectives of VicHealth in the business and industry sector;
- expanding the range of benefits and information available to VECCI members;
- organising and conducting the Partnerships with Healthy Industry Calendar of Events

• \$25,000

Voices Against Violence: Women's Lives, Women's Health

Women's Health In The North

This conference sought to: (i) increase the understanding of violence encountered by women living in the northern metropolitan region; and (ii) to develop and enhance service providers response to the needs of the women.

• \$3,000

Work In Progress: Perspectives on Partnerships

Turning Point Alcohol and Drug Centre

This conference presented a range of Victorian alcohol and drug research work conducted at Turning Point. The theme of this year's conference was partnerships - with alcohol and drug researchers, practitioners and clients discussing, debating and reflecting on recent Victorian research.

• \$1,000

Senior Fellowships

Child health epidemiology and new vaccines in an Asian country

The University of Melbourne

Dr K. Mullholland. This project aims to: describe the epidemiology of childhood illness and injury in an urban and rural Asian community; define the burden of disease due to important respiratory and enteric pathogens in the same community; and conduct trials of new vaccines and vaccination strategies that have the potential to improve child health in both Australian and Asian societies.

• \$165,000

Contribution and Interactions of Individual, Community and Environmental Characteristics on Health (Supplementary Fellowship)

The University of Melbourne

Dr Margaret Kelaher. In order to effectively address disparities in health, health policy and promotion must strike a balance between addressing individual, family and community risk factors. The proposed research program aims to figure out the best method of striking this balance by building bridges between the body of evidence concerning individual risk factors, community level intervention research and population health research.

• \$13,200

Determinants of Breast Cancer Risk

University of Melbourne

Dr Dorota Gertig. A study of the modifiable risk factors of breast cancer risk and common genetic factors which may identify sub-groups of younger women at higher risk of breast cancer in order to enable targeted screening.

• \$165,000

Maternal Nutrition in Pregnancy and Growth in Infancy Outcome in Children

The University of Melbourne

Dr Ruth Morley. A series of inter-linked projects investigating the role of maternal nutrition and infant growth in determining outcomes for children from twin and singleton pregnancies. Emerging evidence that growth in infancy may be important for later health and cognition will be tested by non-interventional studies of birth size, growth in infancy and health and cognition in twins and singletons.

• \$165,000

Measurement of Individual and Social Benefits for the Reallocation of Resources in the Australian Health Sector (Supplementary Fellowship)

Monash University

Prof. Jeff Richardson. Instruments will be extended and created to measure individual and social benefits which are presently excluded or poorly measured in economic evaluation studies. Areas will include obesity, mental health, children/adolescent health and tobacco.

• \$29,250

Using Innovative Epidemiological Methods to Understand & Reduce Transmission of Blood-Borne Viruses & Sexually Transmitted Infections in Marginalised Populations (Supplementary Fellowship)

Macfarlane Burnet Institute for Medical Research & Public Health

Dr Margaret Hellard. The research aims to accurately measure the prevalence and risk factors leading to the transmission of blood-borne viruses and sexually transmitted infections in the community using innovative epidemiological sampling techniques and mathematical modelling.

• \$16,500

Social and Health Outcomes of the Australian Needle and Syringe Program (NSP)

The University of Melbourne

Dr John Fitzgerald. Australia's Needle and Syringe Program (NSP) is a primary strategy for preventing the spread of blood-borne viruses. This study will document how NSP services work and will develop sustainable social and health outcome data collection strategies.

• \$125,000

Social determinants of sexual and reproductive health

La Trobe University

Assoc. Prof. Anthony Smith. Social inequality and socioeconomic status are associated with many adverse health outcomes. This study will explore the ways in which they are related to sexual and reproductive health.

• \$125,000

Public Health Fellowships

Implementing and evaluating system-level change to improve adolescent health and wellbeing

The University of Melbourne

Dr Lyndal Bond. (This fellowship is a joint VicHealth & DHS Public Health Fellowship). A project to develop and evaluate a generic system-level intervention and evaluation framework.

• \$100,000

Muslim Youth, Social Connectedness and Reproductive/Sex Education (Supplementary Fellowship)

La Trobe University

Dr Linda Bennett. The research explores how religion, ethnic identity and Islamic education impact upon the social connectedness of Muslim youth in Melbourne. Reproductive/sex education in Islamic schools provides a specific case study for examining the values and behavioural expectations of young Muslims, and how these compare with non-Muslim youth.

• \$80,000

Outcomes Associated with Non-Fatal Heroin Overdose in Melbourne

Turning Point Alcohol & Drug Centre

Dr Paul Dietze. Study will follow a group of people who experience non-fatal heroin overdose in Melbourne over three years, in order to describe the long-term outcomes for this group of people.

• \$100,000

Women's Health After Childbirth: a Prospective Cohort Study of 1,900 Women Having a First Child

La Trobe University

Dr Stephanie Brown. This study examines the extent to which common health problems affecting women after childbirth occur as new problems in pregnancy, or after childbirth.

• \$100,000

Scholarships

Investigation of Interventions Aimed at Enhancing Women's Sexual Health

The University of Melbourne

Richard Hayes. Recent research has shown that up to 60 percent of Australian women suffer some degree of sexual difficulty, such as loss of interest in sex, arousal disorder or anorgasmia. We aim to determine the prevalence of sexual difficulties in couples attending the Melbourne Sexual Health Centre (MSHC) using a cross-sectional study design. The ultimate aim is to provide primary care with relatively easy tools for detecting these conditions and increase clients access to appropriate interventions.

• \$20,484

Long-Term Outcome after Stroke and its Association with the Management of Stroke Risk Factors

The University of Melbourne

Seana Paul. Determine long-term (3–5 year) outcome after stroke, and in particular: to determine long-term survival, recurrence and dependency for stroke subtypes; to identify factors at baseline that predict mortality, recurrent stroke, and good outcome (functional independence); to determine whether (and how) the management of known stroke risk factors by patients can influence their long-term outcome.

• \$20,484

Social meanings of inhalant misuse in Victoria: implications for the development of policy and effective interventions

The University of Melbourne

Sarah MacLean. This research aims to document the prevalence of inhalant misuse, to critically analyse the social meanings around inhalant misuse in Victoria and to relate this analysis to the development of policy and effective intervention.

• \$20,484

Study exploring the cultural basis of drug and alcohol consumption and health outcomes in a rural centre

The University of Melbourne

Nicki Welch. Research examining the cultural basis of drug and alcohol consumption and health outcomes in a rural centre (Bendigo), using a number of qualitative tools in order to provide evidence for a relationship between culture and health outcomes in a rural centre.

• \$21,344

Contribution of Anxiety to the Course of Physical Illness in Older Adults

The University of Melbourne

Christina Bryant. The aim of this study is to ascertain the relationship of anxiety to functional and psychosocial outcomes in older hospital patients.

• \$3,000

Cultural and Mental Health Predictors for Positive Ageing of Older Filipinos in Urban and Rural Communities in Australia

RMIT University

Mila Cichello. This project aims to: Investigate the relationship between settlement experiences, coping strategies, general and mental health, and use of community health services by Filipino migrants; identify the cultural and health factors that influence health service usage by this geographically disparate ethnic community living in urban, rural and remote areas; propose a culturally appropriate model of health and aged care service.

• \$3,000

Determinants and Mental Health Outcomes of Women's Paid Employment in the First Postpartum Year

The University of Melbourne

Amanda Cooklin. To explore the determinants and mental health outcomes of women's return to paid work in the first postpartum year.

• \$3,000

Efficacy, Effectiveness and Efficiency of Prevention Interventions in Stroke

The University of Melbourne

Dominique Cadilhac. The project aims to further develop and refine a 'Model of Resource Utilisation Costs and Outcomes for Stroke' (MORUCOS) as a tool for the economic evaluation of preventive interventions.

• \$3,000

Epidemiology of Diabetic Complications in the Australian Population and their Impact on Quality Of Life

International Diabetes Institute

Robyn Tapp. An overview of the epidemiology of diabetic complications and their impact on quality of life within Australia is needed to plan for the future needs of the diabetic population.

• \$3,000

From Crisis Care to Population Health: Developing Public Health Practice in an Aboriginal Community

The University of Melbourne

Anke Van Der Sterren. This research aims to investigate Indigenous organisational structures and processes to implement a public health approach in the context of an urban Aboriginal community-controlled health service. It seeks to describe an Indigenous perspective on public health practice.

• \$3,000

Role of Maternal and Childhood Exposures in the Development of Atopy in Children with a Genetic Predisposition

The University of Melbourne

Adrian Lowe. This database contains detailed measures of family history of atopy, environmental exposures (both prior to birth, during infancy and early childhood), and clinical variables (symptoms of illness and allergic reactions, and lung function and skin prick tests) for over 600 children, over a 10-year follow-up period.

• \$3,000

Public Health Research Grants

Health & Nature Clearinghouse Deakin University

Deakin University

The Health and Nature Research Group, Deakin University, in collaboration with Parks Victoria and the Lort Smith Animal Hospital, have undertaken research that indicates that contact with nature may be an important factor in human health and wellbeing. Funding is to support the development of a searchable online database, with research from disparate research centres in Universities in Australia and overseas.

• \$5,000

Public Health Advocacy Project

Victorian Public Health Research Education Council - VPHREC

Dr Kathy Meade. Victorian Public Health Research Education Council (VPHREC) is an industry body established to foster co-operative research; strengthen links between research organisations, industry, and educational, government and non-government institutions; and develop a strong culture of public health research and education.

• \$50,000

Research Workforce Development Project - Phase 1

Victorian Public Health Research & Education Council (VPHREC)

Dr Kathy Meade. Victorian Public Health Research and Education Council (VPHREC) aims to provide advocacy services that build, strengthen, enhance and sustain public health education, training and research in Victoria; to increase capacity of health promotion/public health research in Victoria and to facilitate the transfer of research findings into policy and practice.

• \$5,000

Systematic investigation of the effectiveness of the pre-vetting and complaints system for alcohol

Australian Drug Foundation

Geoff Munro. The project will investigate the effect of the new alcoholic beverage code on print and electronic advertising of alcohol.

• \$56,672

WRAD: Australian Schools' Survey Project On Alcohol & Drugs (AUSSPAD)

Western Region Alcohol and Drug Centre

Jean Wyldbore. The project seeks to develop an Australian version of the European Schools' Survey Project on Alcohol and Drugs, for use in Australian schools. Funding contributes to the development of the survey, and pilot in secondary schools (public, private, secular and faith-based) in rural areas of Western Victoria.

• \$5,000

Surveillance and Applied Research

Victorian Injury Surveillance and Applied Research Function (VISAR)

Monash University

Ms Erin Cassell. VISAR aims to reduce the number and severity of injuries in the community by identifying hazards, disseminating information, supporting research and monitoring trends.

• \$330,000

Health Action Areas

Alcohol

Good Sports Program 2003-2005

Australian Drug Foundation

Program to assist sporting clubs to develop and implement policies to promote responsible alcohol usage and serving practices within the club environment.

• \$200,000

Sun Protection

SunSmart Program 2003 – 2006

The Cancer Council of Victoria

Major statewide skin cancer prevention program using media and community based strategies to promote behaviour change and to influence structural barriers and social factors which affect skin cancer risk

• \$400,000

Tobacco Control

Centre for Research and Practice

VicHealth Centre for Tobacco Control

The Cancer Council of Victoria

Dr Ron Borland. The aim of the VicHealth Centre for Tobacco Control is to contribute to the decline in smoking levels in general and in population sub-groups with high smoking levels in particular. The Centre aims to achieve this by carrying out research and development to identify and promote innovative ways of reducing exposure to tobacco.

• \$500,000

Fellowships

Impact of Changes in Anti-Smoking Advertising – Effects on Adults and Children (Senior Fellowship)

The Cancer Council of Victoria

Prof. Melanie Wakefield. This project proposes to develop and track indices of Australians' exposure to anti-smoking advertising, news coverage about tobacco on television, radio and in newspapers; and film, television and music video clip portrayal of tobacco, and to construct retrospective indices where data are available. The project will then relate such indices to state and national survey measures of tobacco-related beliefs, intentions and behaviour among adults and school children, and records of per capita tobacco consumption.

• \$165,000

Pathways of the Link Between Socio-economic Status and Smoking Behaviour (Public Health Fellowship)

The Cancer Council Victoria

Dr Mohammad Siahpush. This research examines why smoking prevalence among socially/economically disadvantaged groups is markedly higher than among other groups. Do they have more stressful lives? Do they lack necessary social support? Or is it because of factors such as working and living in environments with no smoking restrictions or having many friends who smoke?

• \$100,000

Quit Campaign

Quit Campaign Program (Health)

The Cancer Council of Victoria

The Quit Program aims to reduce the prevalence of smoking in Victoria and to reduce the exposure of non-smokers and smokers to the harmful substances in tobacco smoke. A broad range of policy and program initiatives is used to achieve objectives adding up to a comprehensive program on tobacco addressing cessation, prevention, exposure reduction and policy advancement.

• \$3,090,700

Quit Social Marketing - Sport

Tobacco Control Initiative

South Melbourne Hellas Soccer Club

An initiative supporting the smoke-free status of the Bob Jane Stadium.

• \$50,000

Tobacco Control Initiative

Carlton Football Club

An initiative to support Optus Oval becoming a smoke-free venue.

• \$50,000

Tobacco Control Initiative

Brand New Media - MCG & Telstra Dome

A communication strategy to encourage people to quit smoking.

• \$318,000

Tobacco Control Initiative

Melbourne Knights Soccer Club

An initiative supporting the smoke free status of the Melbourne Knights Stadium.

• \$20,000

Tobacco Control Initiative

Geelong Football Club

An initiative supporting the smoke-free status of the Skilled Stadium.

• \$27,000

Tobacco Control Initiative

Dandenong Basketball Association

An initiative communicating the Quit message at the Dandenong Basketball Stadium.

• \$14,500

Health Promotion Innovations Investments

Research Projects

Cochrane Collaboration - Cochrane Field for Health Promotion

Project to create greater capacity in Australia to support evidence-based health promotion – through the production and dissemination of systematic reviews of research.

• \$200,000

Connecting for Health: the Role of Networks and Partnerships in Improving Health and Well Being

The University of Melbourne

Dr Jenny Lewis. Research that analyses the role of collaborative arrangements in improving health and well being in Victoria, by examining public networks and policy development and the investigation of case studies on partnerships. (This fellowship is a joint VicHealth & DHS Public Health Fellowship).

• \$110,000

Business Projects

ConnectUs

VicHealth invested in the ConnectUs project in accordance with funding received from the Premier's Drug Prevention Council and from other sources. ConnectUs is an initiative of the council which aims to prevent young people from developing problematic drug and alcohol use through the provision of training and employment opportunities.

• \$413,000

XVIIIth World Conference on Health Promotion & Health Education

Melbourne 2004 World Conference Company Ltd.

A four-day international conference in association with national and regional partners to assess the current status of health promotion across the world and identify practical ways to move forward. Indigenous and marginalised peoples whose health is seriously compromised by their living conditions are given particular attention.

• \$213,000

Report of Operations 2003–2004

1. ESTABLISHMENT OF THE VICTORIAN HEALTH PROMOTION FOUNDATION

The Victorian Health Promotion Foundation is established by the *Tobacco Act 1987* No. 81 (the Act).

The responsible Minister is the Minister for Health, the Hon Bronwyn Pike MLA.

2. OBJECTS

The objects of the Foundation, as set out in the Act, are:

- (a) to fund activity related to the promotion of good health, safety or the prevention and early detection of disease; and
- (b) to increase awareness of programs for promoting good health in the community through the sponsorship of sports, the arts and popular culture; and
- (c) to encourage healthy lifestyles in the community and support activities involving participation in healthy pursuits; and
- (d) to fund research and development activities in support of these objects.

3. FUNCTIONS

The functions of the Foundation, as set out in the Act, are:

- (a) to promote its objects;
- (b) to make grants from the Health Promotion Fund for activities, facilities, projects or research programs in furtherance of the objects of the Foundation;
- (c) to provide sponsorships for sporting or cultural activities;
- (d) to keep statistics and other records relating to the achievement of the objects of the Foundation;
- (e) to provide advice to the Minister on matters related to its objects referred by the Minister to the Foundation and generally in relation to the achievement of its objects;
- (f) to make loans or otherwise provide financial accommodation for activities, facilities, projects or research programs in furtherance of the objects of the Foundation;

- (g) to consult regularly with relevant Government Departments and agencies and to liaise with persons and organisations affected by the operation of this Act; and
- (h) to perform such other functions as are conferred on the Foundation by this or any other Act.

The Foundation performs and manages these functions by:

- (a) developing a strategic plan, including concept, context and operations;
- (b) initiating, facilitating and organising the development of projects and programs to fulfil the strategic plan;
- (c) ensuring an excellent standard of project management for all project and program grants paid by the Foundation;
- (d) developing systems to evaluate the impacts and outcomes of grants; and
- (e) ensuring that such knowledge is transferred to the wider community.

4. POWERS

As set out in the Act, the Foundation has power to do all things necessary to be done in the performance of its functions or achievement of its objects.

In addition to its other powers the Foundation has power, following consultation with the Minister, to make grants from the Health Promotion Fund for the relief of loss suffered as a result of the application of this Act to anything existing at or before the date of enactment of this Act where special circumstances warrant assistance of that kind.

5. NATURE AND RANGE OF SERVICES

The Foundation provides health promotion services within Victoria in accordance with the objects set out in the Act.

6. MEMBERS OF THE BOARD OF GOVERNANCE 1 JULY 2003 - 30 JUNE 2004

Professor John Funder	(Chairperson - until 31 March 2004)
Ms Jane Fenton	(Chairperson - from 1 April 2004)
Professor Glenn Bowes	(from 15 July 2003)
Ms Elaine Canty	
Mr Hugh Delahunty MLA	
The Hon Bill Forwood MLC	
Mr Lindsay Gaze	
Ms Leeanne Grantham	(until 9 April 2004)
Professor David Hill	(from 15 July 2003)
Mr John Howie	(from 15 July 2003)
Mr Tim Jacobs	(until 31 March 2004)
Ms Belinda Jakiel	
Ms Maxine Morand MLA	
Ms Jerril Rechter	(from 1 April 2004)
Dr Judith Slocombe	(from 15 July 2003)
Professor Richard Smallwood	(from 1 April 2004)

7. CHIEF EXECUTIVE OFFICER

Dr Rob Moodie

8. SENIOR OFFICERS AT 30 JUNE 2004

Director: Communications and Marketing, Ms Jackie Van Vugt

Director: Finance and Administration, Mr Randall Kent

Director: Health Promotion Innovations, Ms Barbara Mouy

Director: Mental Health and Wellbeing, Ms Lyn Walker

Director: Physical Activity, Ms Kellie-Ann Jolly

Director: Research Workforce and Tobacco Control, Mr John Biviano

9. WORKFORCE DATA

	30 June 2004		30 June 2003	
	No.	EFT	No.	EFT
Staff establishment	44	39.5	44	37.7
Cost recovery and special projects	4	3.8	2	1.5
Total	48	43.3	46	39.2

Note: Workforce data represents actual numbers of staff employed at 30 June.

10. FINANCIAL INFORMATION

	2003-04 \$000	2002-03 \$000	2001-02 \$000	2000-01 \$000	1999-00 \$000
(A) SUMMARY OF FINANCIAL RESULTS					
Income					
Health Promotion Grant	27 707	27 140	26 216	25 400	24 761
Investment Income	453	413	362	485	369
Other	1 150	1 053	993	715	1 413
Total Income	29 310	28 606	27 571	26 600	26 543
Expenditure					
Grants and Associated Expenses	25 931	25 039	23 091	23 663	21 879
Business Projects Expenses	586	257	-	-	-
Operating	4 155	3 820	3 717	3 614	3 720
Total Expenditure	30 672	29 116	26 808	27 277	25 599
Net Result	(1 362)	(516)	763	(677)	944

Balance Sheet as at	30/6/04 \$000	30/6/03 \$000	Change \$000
(B) SUMMARY OF SIGNIFICANT CHANGES IN FINANCIAL POSITION			
Current Assets	2 066	3 456	(1 390)
Non-Current Assets	2 407	2 529	(122)
Total Assets	4 473	5 985	(1 512)
Current Liabilities	2 229	2 394	(165)
Non-Current Liabilities	267	252	15
Total Liabilities	2 496	2 646	(150)
Equity	1 977	3 339	(1 362)
Total Equity and Liabilities	4 473	5 985	(1 512)

11. OPERATIONAL OBJECTIVES, SIGNIFICANT ACTIVITIES AND ACHIEVEMENTS

(a) OPERATIONAL OBJECTIVES

The Foundation's primary operational objectives for 2003/04 were:

1. Innovating for excellence in health promotion
2. Building on and sharing health promotion knowledge and skills
3. Working across sectors to broaden the benefit

Research, development and implementation activity was primarily focused in the areas of tobacco control, promoting mental health and well being; promoting physical activity and healthy eating; and tackling health inequalities.

The key sectors the Foundation collaborated with were:

- Sport and Active Recreation
- Community
- Local Government
- Health
- The Arts
- Education

These priorities were consistent with Victorian Government policies and National Health Priority Areas.

Significant activities and achievements in relation to these objectives are set out elsewhere in the Foundation's 2003/04 Annual Report.

(b) SUMMARY OF MAJOR CHANGES

There were no major changes or factors which have affected the achievement of the Foundation's operational objectives for the year.

(c) EVENTS SUBSEQUENT TO BALANCE DATE

There have been no events subsequent to balance date that may have a significant effect on the operation of the Foundation in subsequent years.

(d) CONSULTANCIES

Six consultancies costing less than \$100,000 were engaged during the year. The total cost of consultancies was \$172,000 (2002/03 \$94,000).

(e) COMPLIANCE WITH LEGISLATION

No requests for information were received and no critical incidents arose during the year under the following legislation. To the best of my knowledge the Foundation has complied with this legislation or policy, where relevant.

Freedom of Information Act 1982

Information Privacy Act 2000

Whistleblowers Protection Act 2001

Occupational Health and Safety Act 1985

Victorian Managed Insurance Authority Act 1996

Building Act 1993

National Competition Policy

Equal Opportunity Act 1995

The Foundation is an equal opportunity employer. The Foundation complies with relevant Government guidelines and employee principles.

(f) OCCUPATIONAL HEALTH AND SAFETY

The Foundation had no Workcover claims or critical occupational health and safety incidents during the year.

(g) OTHER INFORMATION

Additional information, as listed in Financial Reporting Direction 22, has been prepared where applicable and is available to the responsible Minister, Members of Parliament and the public on request (subject to the FOI Act).



Dr Rob Moodie
Chief Executive Officer

Signed at Melbourne this day 20th of September 2004.

Financial Statements 2003–2004

CERTIFICATION

In our opinion the financial statements of the Victorian Health Promotion Foundation, comprising a statement of financial performance, a statement of financial position, a statement of cash flows and notes to the accounts:

- (i) have been prepared in accordance with Directions of the Minister of Finance under the *Financial Management Act 1994*, Australian Accounting Standards and other mandatory professional reporting requirements; and
- (ii) present fairly the results of the financial transactions of the Foundation for the year ended 30 June 2004 and the financial position as at that date.

At the date of signing these statements we are not aware of any circumstances which would render any particulars included in the statements to be misleading or inaccurate.



Ms Jane Fenton
Chairperson



Dr Rob Moodie
Chief Executive Officer



Mr Randall Kent
Director: Finance and Administration
Signed at Melbourne this 7th day of September 2004

AUDITOR-GENERAL'S REPORT

To the Members of the Parliament of Victoria, the responsible Ministers and the Members of the Board of the Victorian Health Promotion Foundation

Audit Scope

The accompanying financial report of the Victorian Health Promotion Foundation for the financial year ended 30 June 2004, comprising the statement of financial performance, statement of financial position, statement of cash flows and notes to the financial statements, has been audited. The Members of the Foundation's Board of Governance are responsible for the preparation and presentation of the financial report and the information it contains. An independent audit of the financial report has been carried out in order to express an opinion on it to the Members of the Parliament of Victoria, responsible Ministers and Members of the Foundation's Board of Governance as required by the *Audit Act 1994*.

The audit has been conducted in accordance with Australian Auditing Standards to provide reasonable assurance as to whether the financial report is free of material misstatement. The audit procedures included an examination, on a test basis, of evidence supporting the amounts and other disclosures in the financial report, and the evaluation of accounting policies and significant accounting estimates. These procedures have been undertaken to form an opinion as to whether, in all material respects, the financial report is presented fairly in accordance with Accounting Standards and other mandatory professional reporting requirements in Australia and the financial reporting requirements of the *Financial Management Act 1994*, so as to present a view which is consistent with my understanding of the Foundation's financial position, financial performance and its cash flows.

The audit opinion expressed in this report has been formed on the above basis.

Audit Opinion

In my opinion, the financial report presents fairly in accordance with applicable Accounting Standards and other mandatory professional reporting requirements in Australia and the financial reporting requirements of the *Financial Management Act 1994*, the financial position of the Victorian Health Promotion Foundation as at 30 June 2004, its financial performance and cash flows for the year then ended.



J.W. Cameron
Auditor-General

MELBOURNE 14 September 2004

STATEMENT OF FINANCIAL PERFORMANCE FOR THE YEAR ENDED 30 JUNE 2004

	Notes	2003-04 \$000	2002-03 \$000
Revenue From Ordinary Activities			
Operating Revenue			
Health Promotion Grant	1(k)	27 707	27 140
Other Operating Revenue	2	1 080	992
		28 787	28 132
Non-Operating Revenue			
Investment Income		453	413
Proceeds of Sale of Assets		70	61
		523	474
		29 310	28 606
Expenses From Ordinary Activities			
Grants and Associated Expenses	4	25 931	25 039
Business Projects Expenses	1(m),5	586	257
Operating Expenses	3	4 155	3 820
		30 672	29 116
Net Result for the Year	6	(1 362)	(510)
Adjustment Directly to Retained Earnings		0	(6)
Total changes in equity other than those resulting from transactions with the Victorian State Government in its capacity as owner		(1 362)	(516)

The accompanying notes form part of these financial statements.

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2004

	Notes	2004 \$000	2003 \$000
Current Assets			
Cash Assets	7	36	818
Receivables	8	457	637
Prepayments		24	1
Other Financial Assets	1(h),9	1 549	2 000
Total Current Assets		2 066	3 456
Non-Current Assets			
Other Financial Assets	1(h),9	1 506	1 500
Furniture, Fittings, Equipment and Motor Vehicles	12	901	1 029
Total Non-Current Assets		2 407	2 529
Total Assets		4 473	5 985
Current Liabilities			
Payables	1(f),10	1 858	2 114
Deferred Lease Benefit	15(b)	18	18
Provisions	1(d),11	353	262
Total Current Liabilities		2 229	2 394
Non-Current Liabilities			
Provisions	1(d),11	163	130
Deferred Lease Benefit	15(b)	104	122
Total Non-Current Liabilities		267	252
Total Liabilities		2 496	2 646
Net Assets		1 977	3 339
Equity			
Funds Held For Restricted Purposes	1(e),6	257	426
Retained Earnings		1 720	2 913
Total Equity		1 977	3 339

The accompanying notes form part of these financial statements.

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2004

	Notes	2003/04 \$ 000 Inflows (Outflows)	2002/03 \$ 000 Inflows (Outflows)
Cash Flows From Operating Activities			
Receipts from health promotion grant		30 477	29 853
Investment income		490	428
Other receipts		1 360	880
Total Receipts		32 327	31 161
Payments of grants and associated expenses		(29 278)	(27 096)
Payments to suppliers and employees		(4 091)	(2 685)
GST remitted		(113)	(554)
Total Payments		(33 482)	(30 335)
Net Cash Provided By (Used in) Operating Activities	16(b)	(1 155)	826
Cash Flows From Investing Activities			
Proceeds from sale of assets		70	61
Proceeds from redemption of investments (investment outlays)		445	(2)
Payments for purchase of fixed assets		(142)	(154)
Net Cash Provided By (Used in) Investing Activities		373	(95)
Net Increase in Cash Held		(782)	731
Cash at 1 July		818	87
Cash at 30 June	16(a)	36	818

The accompanying notes form part of these financial statements.

1. STATEMENT OF ACCOUNTING POLICIES

A summary of the significant accounting policies adopted by the Foundation is set out in this note. The policies adopted are in accordance with accounting standards generally accepted in Australia. The general purpose financial statements have been prepared in accordance with the Directions of the Minister of Finance under the Financial Management Act 1994, Australian Accounting Standards, Statements of Accounting Concepts and other authoritative pronouncements of the Australian Accounting Standards Board, and Urgent Issues Group Consensus Views.

(a) Accrual Basis of the Preparation of the Accounts

Except where otherwise stated these financial statements have been prepared on the accrual basis whereby revenues and expenses are recognised when they are earned or incurred, and are brought to account in the period to which they relate.

(b) Historical Cost Basis of the Preparation of the Accounts

The financial statements have been prepared on a going concern basis and on the historical cost basis whereby assets are recorded at purchase price plus costs incidental to their acquisition and do not take into account changing money values nor the current cost of non-current assets (unless specifically stated).

(c) Fittings, Equipment and Motor Vehicles

The Foundation has adopted a capitalisation policy for fixed assets for capital purchases in excess of \$1,000 (2002/03 \$1,000).

Furniture, fittings, equipment and motor vehicles are carried at cost, in accordance with AASB 1041. Assets are depreciated at rates based upon their expected useful economic lives to the Foundation, using the straight-line method. The Foundation reviews the remaining useful lives of assets each year. There has been no change in estimated useful lives of assets since 2002/03.

Fixed Asset Category	Depreciation Rate (%)
Office Furniture	10.0
Fixtures and Fittings	10.0
Computer Equipment	33.3
Other Office Equipment	20.0
Motor Vehicles	17.5

(d) Employee Entitlements

(i) Annual leave

Calculations of provisions for annual leave are based on remuneration rates expected to apply when the obligation is settled in accordance with AASB 1028. Calculations of provisions for long service leave are based on pay rates current at balance date.

(ii) Superannuation

The Foundation has, in its staffing profile, a number of employees who are members of the following superannuation schemes:

- State Superannuation Fund Revised Scheme
- State Superannuation Fund New Scheme
- Victorian Superannuation Fund VicSuper Scheme
- Health Super Defined Benefit Scheme

In the case of employees who are members of the State Superannuation New Scheme the notional share of unfunded liabilities attributable to the Foundation, as assessed by the State Superannuation Scheme as at 30 June 2004, was nil.

The State Superannuation VicSuper Scheme is fully funded and there are no unfunded liabilities with this scheme.

During 2003-04 the Foundation's contributions to the above schemes totalled \$238,000 (2002/03, \$215,000). No contributions were outstanding at 30 June 2004 (2002/03, Nil).

1. STATEMENT OF ACCOUNTING POLICIES (CONTINUED)

(ii) Superannuation (continued)

The policy adopted for calculating employer contributions is based on the advice of the Scheme's actuary. The employer contribution rates for 2003/04 varied from 9% to 15.5% depending on the scheme and the rate contributed by each employee (2002/03 9% to 15.5%).

(iii) Long service leave

Provision for long service leave has been calculated in accordance with Australian Accounting Standard 30, Accounting for Employee Entitlements. The entitlement, under the Foundation's enterprise agreement, becomes payable upon completion of ten years' service. The proportion of long service estimated to be paid within the next financial year is classified as a current liability. The balance of the provision is classified as a non-current liability, measured at the present value of the estimated future cash outflow arising from employees' service to date, using Commonwealth bond rates to discount future cash flows.

(iv) Employee benefits on-costs

Employee benefit on-costs (Workcover and superannuation costs) are recognised and included in employee benefit liabilities and costs when the benefit to which they relate are recognised as liabilities in accordance with AASB 1028.

(e) Funds Held for Restricted Purposes

Funds Held for Restricted Purposes represent funds to be devoted to specific health promotion activities according to the Tobacco Act, 1987 and in accordance with the policies of the Foundation.

In accordance with the Tobacco Act the proportion on which the health promotion grant is to be paid is as follows:

Sporting Bodies	Not less than 30%
Health Promotion	Not less than 30%

(f) Trade and Other Creditors

(i) Creditors and accrued expenses

Creditors and accrued expenses represent liabilities for goods and services provided to the Foundation prior to balance date and which are unpaid. The amounts are unsecured and are usually paid within 30 days of recognition. All creditors are payable within one year.

(ii) Grants payable

Grants payable represent grant instalments which have been approved for payment during 2003/04. These instalments were unpaid as at 30 June 2004 and have been disclosed as a current liability. The accrued grants are expected to be paid within 12 months.

Grants approved for payment in 2004/05 and subsequent years have been recognised in the notes to these financial statements as commitments (see Note 14).

(g) Receivables

Trade debtors are carried at amounts receivable. The collectability of debts is assessed on an ongoing basis. Debts which are known to be uncollectable are written off. Normal credit terms are 30 days. A provision for doubtful debts is raised when some doubt as to collection exists.

(h) Investments

Investments are brought to account at cost. Interest revenue is recognized as the interest accrues.

Investments consist of four commercial bank bills. Maturity dates range from 15 days to 5 years.

1. STATEMENT OF ACCOUNTING POLICIES (CONTINUED)

(i) Leases

Expenditure relating to leases deemed to be operating leases is expensed as incurred.

(j) Goods and Services Tax

Revenues, expenses and assets are recognised net of GST except where the amount of GST incurred is not recoverable, in which case it is recognised as part of the cost of acquisition of an asset or part of an item of expense or revenue. GST received from and payable to the Australian Taxation Office (ATO) is included in the Statement of Financial Position. The GST component of a receipt or payment is recognised on a gross basis in the Statement of Cash Flows in accordance with Accounting Standard AAS 28, Statement of Cash Flows.

(k) Health Promotion Grant

From its inception in 1987 until June 1992 the Foundation was funded by a hypothecated percentage of Victorian ad valorem tobacco franchise fees. Since July 1992, the annual amount allocated to the Foundation from tobacco franchise fees has been determined by the Treasurer.

On 5 August 1997 the High Court of Australia invalidated State and Territory business franchise and licence fees, including tobacco fees. In order to maintain the Foundation's funding the Victorian Treasurer arranged for funds to be transferred from the Consolidated Fund, for the remainder of the 1997/98 year.

Since 1 July 1998, annual funding for the Foundation has been determined by the Treasurer, appropriated as part of Victoria's annual budget within the appropriation for the Department of Human Services and transferred electronically in equal monthly instalments to the Foundation. The health promotion grant is recognised as revenue upon receipt.

(l) Impact of Adopting AASB Equivalents to IASB Standards

The Foundation has assessed the key issues and the likely impacts resulting from the adoption of Australian equivalents to International Financial Reporting Standards (IFRSs). Based on this assessment, the Foundation expects no material impact on its future financial position and future financial performance.

(m) Business Projects

The financial statements include transactions relating to two business projects. Transactions in respect of the Premier's Drug Prevention Council business project, ConnectUs, have been brought to account in accordance with an agreement between the Foundation and the Secretary of the Department of Human Services. Transactions in respect of an International Union for Health Promotion and Education (IUHPE) conference have been brought to account in accordance with agreements between the Foundation and the Commonwealth Government, the Secretary of the Department of Human Services and Health 2004.

(n) Comparatives

Where necessary the figures for the previous year have been reclassified to facilitate comparison.

(o) Rounding

All amounts shown in the financial statements are expressed to the nearest \$1,000.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 30 JUNE 2004

	2003-04 \$000	2002-03 \$000
2. OTHER OPERATING REVENUE		
Government Project Grants	442	531
Non-Government Project Grants	67	375
Consulting and Training Fees	30	28
Sundry Income	6	23
	545	957
Business Projects Revenue:		
ConnectUs Project Revenue	421	0
IUHPE Conference Revenue	114	35
Total Other Operating Revenue	1 080	992
3. OPERATING EXPENSES		
General Administration	59	90
Occupancy Costs	371	351
Office Costs	267	264
Personnel Costs	2 919	2 699
Transport Costs	102	94
Members Fees	114	78
Depreciation	214	205
Provision of Long Service Leave	53	8
Written Down Value of Assets Sold	56	31
Total Operating Expenses	4 155	3 820

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 30 JUNE 2004

	2003-04 \$000	2002-03 \$000
4. GRANTS AND ASSOCIATED EXPENSES		
Payments to Sport and Recreation Bodies for Purposes of Health Promotion		
Partnerships for Health grants	3 413	2 596
Participation in Community Sports and Active Recreation grants	2 123	2 489
Health Enhancing Clubs and Venues grants	1 170	636
Other payments	1 702	2 401
Total Payments to Sport and Active Recreation Bodies	8 408	8 122
Payments to Community Bodies for Purposes of Health Promotion		
Arts for Health Grants	2 136	1 475
Population Group Grants	1 510	974
Quit Program and SunSmart Grants	3 591	5 252
Other Payments	1 707	1 905
Total Payments to Community Bodies	8 944	9 606
Public Health Research		
Public Health Research Project Grants	1 048	1 004
Centres for Research and Practice	2 013	1 193
Surveillance and Applied Research Grants	469	380
Fellowships and Scholarships	2 779	2 254
Total Public Health Research Grants	6 309	4 831
Research Dissemination Expenses	59	80
Evaluation Expenses	470	139
Total Payments for Public Health Research	6 838	5 050
Associated Expenses		
Developmental Activities	456	498
Communications and Marketing	1 285	1 763
Total Associated Expenses	1 741	2 261
Total Grants and Associated Expenses	25 931	25 039

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 30 JUNE 2004

	2003-04 \$000	2002-03 \$000
5. BUSINESS PROJECT EXPENSES		
ConnectUs Business Project	413	0
IUHPE Conference	173	257
<u>Total Business Project Expenses</u>	<u>586</u>	<u>257</u>
6. EQUITY AND MOVEMENTS IN EQUITY		
Retained Earnings		
Balance at 1 July	2 913	2 890
Surplus (Deficit) for the Year	(1 362)	(510)
<u>Adjustments resulting from change in Accounting Policy</u>	<u>0</u>	<u>(6)</u>
Transfer (to) from Funds Held for Restricted Purposes	169	539
<u>Balance at 30 June</u>	<u>1 720</u>	<u>2 913</u>
FUNDS HELD FOR RESTRICTED PURPOSES		
Sporting Bodies Commitments Fund		
Balance at 1 July	110	213
<u>Transfer (to) from Retained Earnings</u>	<u>(28)</u>	<u>(103)</u>
<u>Balance at 30 June</u>	<u>82</u>	<u>110</u>
Public Health Research Commitments Fund		
Balance at 1 July	0	440
Transfer (to) from Retained Earnings	0	(440)
<u>Balance at 30 June</u>	<u>0</u>	<u>0</u>
Common Solutions Commitments Fund		
Balance at 1 July	57	31
<u>Transfer (to) from Retained Earnings</u>	<u>10</u>	<u>26</u>
<u>Balance at 30 June</u>	<u>67</u>	<u>57</u>
ConnectUs Commitments Fund		
Balance at 1 July	0	0
<u>Transfer (to) from Retained Earnings</u>	<u>8</u>	<u>0</u>
<u>Balance at 30 June</u>	<u>8</u>	<u>0</u>
Mental Health Promotion Commitments Fund		
Balance at 1 July	200	–
<u>Transfer (to) from Retained Earnings</u>	<u>(100)</u>	<u>200</u>
<u>Balance at 30 June</u>	<u>100</u>	<u>200</u>
IUHPE Conference Commitments Fund		
Balance at 1 July	59	281
<u>Transfer (to) from Retained Earnings</u>	<u>(59)</u>	<u>(222)</u>
<u>Balance at 30 June</u>	<u>0</u>	<u>59</u>
Total Equity	1 977	3 339

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 30 JUNE 2004

6. EQUITY AND MOVEMENTS IN EQUITY (CONTINUED)

The Sporting Bodies Commitments Fund represents the difference between 30% of the health promotion grant and payments to sporting bodies, on a cumulative basis. The transfer of \$29,000 from the Sporting Bodies Commitments Fund to Retained Earnings represents the amount by which payments to sporting bodies, and associated sport expenses, for 2003/04 exceeded 30% of the health promotion grant for 2003/04.

The Foundation has adopted the policy that future budget allocations to public health research will be determined in accordance with strategic priorities and available funds. Accordingly no amount has been transferred to or from Retained Earnings in respect of the Public Health Research Commitments Fund.

The Common Solutions Commitments Fund represents the difference between grants received for the Common Solutions project and the expenditure incurred for this project on a cumulative basis. The transfer of \$10,000 from Retained Earnings to the Common Solutions Commitments Fund represents the difference between grants received, and expenditure incurred, for the Common Solutions project, during 2003/04.

The ConnectUs Commitments Fund represents the difference between grants received for the ConnectUs project and the expenditure incurred for this project on a cumulative basis. The transfer of \$8,000 from Retained Earnings to the ConnectUs Commitments Fund represents the difference between grants received, and expenditure incurred, for the ConnectUs project, during 2003/04.

The Mental Health Promotion Commitments Fund represents the difference between a grant received for mental health promotion projects and the expenditure incurred for these projects. The transfer of \$100,000 from the Mental Health Promotion Commitments Fund to Retained Earnings represents the difference between the grant received, and expenditure incurred, for the mental health promotion projects, during 2003/04.

The IUHPE Conference Commitments Fund represents the difference between grants received for the IUHPE conference and expenditure incurred, on a cumulative basis. The transfer of \$59,000 to Retained Earnings from the IUHPE Conference Commitments Fund represents the difference between grants received, and the expenditure incurred, for the IUHPE conference project during 2003/04.

	2003-04 \$000	2002-03 \$000
7. CASH ASSETS		
Bank Balance	(386)	580
At Call Deposits	422	238
Total	36	818
8. RECEIVABLES		
Sundry Debtors	416	560
Accrued Income	41	77
Total	457	637
9. OTHER FINANCIAL ASSETS		
Current Investments		
Commercial Bank Bills	1 549	2 000
Total	1 549	2 000
Non-Current Investments		
Commercial Bank Bills	1 506	1 500

\$256,000 of financial assets relate to Funds Held for Restricted Purposes (2002/03 \$426,000).

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 30 JUNE 2004

	2003-04 \$000	2002-03 \$000
10. PAYABLES		
Trade Creditors	1 103	1 276
Grants Payments Accrued	587	694
Accrued Salaries	59	41
Other Accrued Expenses	109	103
Total	1 858	2 114
11. PROVISIONS		
Current		
Employee entitlements		
Annual Leave	211	175
Long Service Leave	142	87
Total	353	262
Non-Current		
Employee entitlements		
Long Service Leave	163	130
Total	163	130
Aggregate Carrying Amount of Provisions		
Current	353	262
Non-Current	163	130
Total	516	392

	At Cost \$000	Accumulated Depreciation 30/06/04 \$000	Written Down Value 30/06/04 \$000	Written Down Value 30/06/03 \$000
12. FURNITURE, FITTINGS, EQUIPMENT AND MOTOR VEHICLES				
(a) Written Down Value				
Office Furniture	142	64	78	90
Fixtures and Fittings	826	250	576	658
Office Equipment	402	303	99	142
Motor Vehicles	178	30	148	139
Total	1 548	647	901	1 029

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 30 JUNE 2004

	Balance 1 July \$000	Additions \$000	Disposals \$000	Depreciation \$000	Balance 30 June \$000
12. FURNITURE, FITTINGS, EQUIPMENT AND MOTOR VEHICLES (CONTINUED)					
(b) Reconciliations					
2004					
Office Furniture	90	1		(13)	78
Fixtures and Fittings	658	0	–	(82)	576
Office Equipment	142	51	(6)	(89)	98
Motor Vehicles	139	90	(50)	(30)	149
Total	1 029	142	(56)	(214)	901
2003					
Office Furniture	98	5		(13)	90
Fixtures and Fittings	722	17	–	(81)	658
Office Equipment	166	61	(5)	(80)	142
Motor Vehicles	125	71	(26)	(31)	139
Total	1 111	154	(31)	(205)	1 029

13. FINANCIAL INSTRUMENTS

(a) Interest Rate Risk Exposures

The Foundation's exposure to interest rate risk and the effective weighted average for each class of financial assets and financial liabilities are set out below. Exposures arise predominantly from assets and liabilities bearing variable interest rates as the Foundation intends to hold fixed rate assets and liabilities to maturity.

	Floating interest rate \$000	Fixed interest maturing in 1 year or less \$000	Fixed interest maturing in more than 1 year \$000	Non-interest bearing \$000	Total 30/06/04 \$000	Total 30/06/03 \$000
Financial Assets						
At Call deposits (refer note 7)	422				422	238
Receivables				457	457	637
Investments		1 549	1 506		3 055	3 500
Total	422	1 549	1 506	457	3 934	4 375
Weighted Average Interest Rate %	5.00	6.20	6.83			
Financial Liabilities						
Payables				1 858	1 858	2 146
Bank Balance (refer note 7)				386*	386*	(580)
Total				2 244	2 244	1 566

* Amount relates to unrepresented cheques. The Foundation has not operated an overdraft during the year. Accordingly, no interest has been charged.

13. FINANCIAL INSTRUMENTS (CONTINUED)

(b) Credit Risk Exposures

The credit risk on financial assets of the Foundation, which have been recognised in the statement of financial position, is the carrying amount, net of any provision for doubtful debts. The Foundation minimises concentrations of credit risk by undertaking transactions with various organisations. The Foundation is not materially exposed to any individual debtor.

(c) Net Fair Values of Financial Assets and Liabilities

The net fair value of financial assets and liabilities are not materially different to the carrying value of the financial assets and liabilities recognised in the statement of financial position.

14. FUTURE GRANT COMMITMENTS

The Foundation has entered into certain agreements for funding of grants for multiple years. The payment of future years' instalments of these grants is dependent on the funded organisations meeting specified accountability requirements.

Instalments of grants to be paid in future years subject to the funded organisations meeting accountability requirements are:

	2003-04 \$000	2002-03 \$000
Payable within one year	10 093	11 536
Payable later than one year but not later than five years	9 031	9 929
	19 124	21 465
Grants approved for payment in 2004/05 or later years, but where funding agreements are yet to be executed are:		
Payable within one year	1 860	2 897
Payable later than one year but not later than five years	4 124	4 843
	5 984	7 740

15. LEASES

(a) The Foundation has an operating lease of its premises. The Foundation executed a further tenancy lease for office accommodation, for a three-year term, in December 2002. Lease commitments are as follows:

	2003-04 \$000	2002-03 \$000
Payable within one year	258	258
Payable later than one year but not later than five years	959	1 055
Payable later than five years	570	851
	1 787	2 164

b) The Foundation relocated its offices to 15 Pelham Street, Carlton in April 2001 and has executed a 10-year tenancy lease commencing 1 April 2001. In respect of this lease the Foundation received certain incentives. In accordance with Australian Accounting Standards and Urgent Issues Group Abstract 3 Lessee Accounting for Lease Incentives Under a Non-Cancellable Operating Lease a rent-free period and a lessor contribution towards fit-out costs is being amortised over the 10 year term of the lease.

16. CASH FLOW INFORMATION

(a) Reconciliation of Cash

For the purpose of the Statement of Cash Flows the Foundation considers cash to include cash on hand and 'at call' deposits with financial institutions. Cash at the end of the year as shown in the Statement of Cash Flows is reconciled to the relevant items in the Statement of Financial Position:

	2003-04 \$000	2002-03 \$000
Bank balance	(386)	580
At Call Deposits	422	238
Cash at 30 June	36	818

(b) Reconciliation of Net Result from Ordinary Activities
with Net Cash Flows from Operating Activities

Net Result for the year	(1 362)	(510)
Adjustment directly to Retained Earnings	0	(6)
Total changes in equity	(1 362)	(516)
Adjustments for non-cash income and expense items		
Depreciation	214	205
Increase in provisions	124	29
Net loss (profit) on sale of assets	(14)	(30)
Increase (decrease) in grants payments accrued	(107)	476
Decrease (increase) in prepayments	(23)	1
Net decrease (increase) in accrued income	36	16
Increase (decrease) in trade creditors and accruals	(149)	877
Increase (decrease) in deferred lease benefit	(18)	(19)
Net decrease (increase) in trade debtors	144	(213)
Net Cash Provided / (Used) By Operating Activities	(1 155)	826

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 30 JUNE 2004

17. CONTINGENT LIABILITIES

As at 30 June 2004 the Foundation had no legal matters outstanding and is not aware of any other contingent liabilities (2002/03, \$200,000).

18. CONTINGENT ASSETS

Contingent assets as at 30 June 2004 was Nil. (2002/03, Nil)

19. RESPONSIBLE PERSONS AND RELATED PARTY DISCLOSURES

(a) Responsible Minister

The Hon. Bronwyn Pike MLA, Minister for Health, is the responsible Minister.

(b) Members of the Foundation

The following persons held positions as Members of the Foundation during the year:

Ms Jane Fenton (Chairperson) (from 1 April 2004)

Professor John Funder (Chairperson) (until 31 March 2004)

Ms Elaine Canty

Mr Lindsay Gaze

Mr Tim Jacobs (until 31 March 2004)

Ms Belinda Jakiel

Professor Glenn Bowes (from 15 July 2003)

Ms Leeanne Grantham (until 9 April 2004)

Mr John Howie (from 15 July 2003)

Dr Judith Slocombe (from 15 July 2003)

Professor David Hill (from 15 July 2003)

Ms Jerril Rechter (from 1 April 2004)

Professor Richard Smallwood (from 1 April 2004)

Mr Hugh Delahunty MLA

The Hon Bill Forwood MLC

Ms Maxine Morand MLA

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 30 JUNE 2004

19. RESPONSIBLE PERSONS AND RELATED PARTY DISCLOSURES (CONTINUED)

(c) Remuneration of Members of Board of Governance

The total remuneration paid by the Foundation to Members of the Board of Governance was \$81,000 (2002/03 \$58,000). No payment was made to Parliamentary Members.

Remuneration Band \$	2003-04 No.	2002-03 No.
0-9 999	13	14
10 000-19 999	0	1

(d) Related Party Transactions

The Foundation paid grants to organisations with which certain Members of the Foundation are employed or associated. All such grants were at arm's length from the relevant Members and were made in accordance with the Foundation's normal procedures and policy on declarations of interests.

Amounts paid to	Board Member	2003-04 \$000	2002-03 \$000
The Cancer Council of Victoria	Prof. D Hill	4 461	4 524
Sports Federation of Victoria	Mr. J Howie	172	55
Victorian Arts Centre	Mr. T Jacobs	50	50
Royal Children's Hospital	Prof. G Bowes	155	125
Murdoch Children's Research Institute	Ms. J Fenton, Prof. G Bowes	400	420
Footscay Community Arts Centre	Ms. J Rechter	105	0
Melbourne International Arts Festival	Ms. J Rechter	50	0
Total		5 393	5 174

(e) Accountable Officer

Dr Rob Moodie is the Accountable Officer of the Foundation. Remuneration of the Accountable Officer, who is not a Member of the Foundation, is included in Executive Officer remuneration.

(f) Executive Officers

Remuneration Band \$	Total Remuneration		Base Remuneration	
	2003-04 No.	2002-03 No.	2003-04 No.	2002-03 No.
100,000 - 109,999	3	1	1	
110,000 - 119,999	2	1	1	1
160,000 - 170,000			1	1
190,000 - 199,999	1	1		
Total Number	6	3	3	2
Total Remuneration	735,000	409,000	383,000	279,000

Total remuneration includes performance incentive payments.

	2003-04 \$000	2002-03 \$000
20. AUDITOR'S REMUNERATION		
Audit fees paid or payable to the Victorian Auditor-General's Office for the audit of the Foundation's financial statements	10	10

ORGANISATIONAL CHART

Chief Executive Officer

Dr Rob Moodie

Senior Officers as at 30 June 2004

Director: Communications and Marketing, Ms Jackie Van Vugt

Director: Finance and Administration, Mr Randall Kent

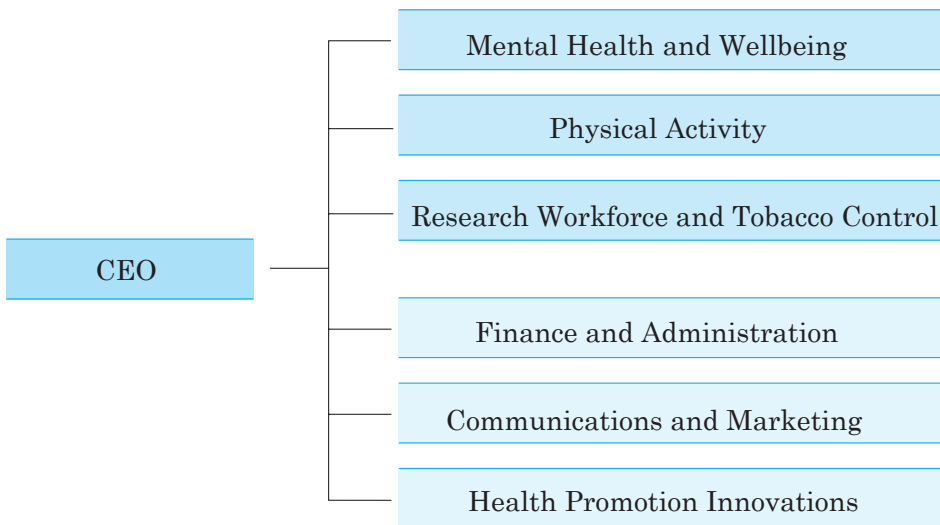
Director: Health Promotion Innovations, Ms Barbara Mouy

Director: Mental Health and Wellbeing, Ms Lyn Walker

Director: Physical Activity, Ms Kellie-Ann Jolly

Director: Research Workforce and Tobacco Control, Mr John Biviano

Structure adopted September 8, 2004



BOARD APPOINTED STANDING COMMITTEES 2003-2004

VicHealth Audit Committee

Ms Jane Fenton
Ms Linda Berry
Mr John Hayes (Chair) From 1 July 2004
Mr John Kehoe
Ms Maxine Morand
Mr William Phillips (Departed Chair) Until 30 June 2004
Mr Hugh Delahunty
The Hon. Bill Forwood

VicHealth Finance & Human Resources Committee

Mr John Hayes
Ms Linda Berry
Ms Anne Fairhall
Ms Jane Fenton (Chair)
Dr Judith Slocombe

BOARD APPOINTED ADVISORY PANELS 2003-2004

Research Excellence/Workforce Development

Prof. Terry Nolan (Chair) University Of Melbourne
Dr John Carnie Department of Human Services
Prof. Sandy Gifford Latrobe University
Dr Andrew Wilson University Of Queensland
Pror. Melanie Wakefield The Cancer Council Victoria
Dr Rob Moodie VicHealth
Prof. Glenn Bowes University Of Melbourne
Dr Julia Shelley Latrobe University
Dr Michelle Callander (Convenor) VicHealth

VicHealth Centres For Research And Practice

Prof. John Funder (Chair) VicHealth Board
Dr David Hill Cancer Council/VicHealth Board
Prof. Glenn Bowes University of Melbourne
Prof. Doreen Rosenthal La Trobe University
Dr Stephen McMahon Institute of International Health
Dr Ross Bury Department of Human Services
Dr Rob Moodie VicHealth
Dr Michelle Callander (Convenor) VicHealth

Mental Health And Wellbeing

Ms Jane Fenton VicHealth Board (Chair)
Prof. Helen Herrman St Vincent's Mental Health Services
Mr. Paul Briggs Rumbalara Football And Netball Club
Ms. Vivienne McCutcheon Council of The Ageing
Prof. Johanna Wynn University of Melbourne/ Youth Research Centre

Mr. Paris Aristotle Vic. Foundation For Survivors of Torture
Ms. Suzanne Cooper Ovens And King Community Health Service
Ms Leonie Young Beyond Blue
Ms Kerry Weber Commonwealth Dept. of Health And Family Services

Ms Jerril Rechter VicHealth Board
Ms Cath Scarth Brotherhood of St Laurence
Ms Jenny Smith Department of Human Services
Justice Jenny Coate County Court
Ms Carmel Guerra Multicultural Youth Issues

BOARD APPOINTED ADVISORY PANELS 2003-2004 (CONTINUED)

Mental Health And Wellbeing (continued)

Mr Mick Daniher	Victorian Football Development
Mr Bernie Marshall	Crime Prevention Victoria
Assistant Commissioner Ashley Dickinson	Victoria Police
Dr Rob Moodie	VicHealth CEO
Ms Lyn Walker (Convenor)	VicHealth

Communities Together Scheme Sub-Panel of Mental Health

Ms Belinda Jakiel (Chair)	VicHealth Board
Mr David Eedle	Fest Net
Ms Julieanne Hilbers	Sydney University of Technology
Mr Dean Michael	City of Brimbank
Ms Carmel Guerra	Multicultural Youth Issues
Ms Jenny Stokes	Crime Prevention
Ms Shea Sutton	Arts Victoria
Ms Melika Yassin Sheikh-Eldin	AMES
Ms Philippa McLean (Convenor)	VicHealth

Community Arts Participation Advisory

Ms Vic Marles (Chair)	Circus Oz
Ms Elaine Canty	VicHealth Board
Mr Paul Morgan	Sane Australia
Ms Fiona Beckwith	Arts Victoria
Mr Stephen Richardson	Department of Premier And Cabinet, Eureka 150 Project
Ms Nicki Melville	Upper Hume Health Centre
Ms Sue Ball (Convenor)	VicHealth

Intimate Partner Violence

Prof Jenny Morgan	University of Melbourne
Dr Pascale Allotey	University of Melbourne
Ms Maria Amiridis	VCCA
Hon. Justice Sally Brown	Family Court of Australia
Hon. Judge Jennifer Coate	Children's Court of Australia
Dr Rhonda Cumberland	Domestic Violence Crisis Centre
Ms Jennifer Farley	Office of The Status of Women
Asst. Comm. Leigh Gassner	Victoria Police
Ms Tania Farha	Victoria Police
Ms Rachel Green	DVC, Women's Policy
Ms Kathy Lester	The Victorian Law Foundation
Ms Therese McCarthy	Scoping Project On Violence Against Women
Dr Suellen Murray	RMIT University
Ms Deb Pietch	DHS
Ass. Prof. Julie Stubbs	Sydney University
Dr Angela Taft	Latrobe University
Dr Caroline Whitzman	Melbourne University
Ms Caroline Worth	Monash Medical Centre
Prof. Anthony Zwi	University of New South Wales
Prof. Theo Vos	University of Queensland
Prof. Jill Astbury	University of Melbourne
Dr Melanie Heenan	Australian Institute of Family Studies
Mr Sunil Piers	DHS, Public Health
Ms Anne Magnus	DHS, Public Health
Ms Lyn Walker (Convenor)	VicHealth

BOARD APPOINTED ADVISORY PANELS 2003-2004 (CONTINUED)

Participation In Community Sport and Active Recreation

Mr Leanne Grantham	VicHealth Board (Chair Until April 9, 2004)
Ms Belinda Jakiel	VicHealth Board (Acting Chair After April 9, 2004)
Ms Valerie Benson	SRV, DVC
Ms Sue Hendy	Council of The Ageing
Mr Michael Neoh	Sports Assemblies Vic.
Mr Peter Utri	Parks And Leisure Aus-Vic
Ms Kellie-Ann Jolly	VicHealth
Ms Sharon Ruyg	VicHealth (Convenor)
Ms Kate Rathbun	VicHealth (Convenor)

Healthy Eating

Ms Elaine Canty	VicHealth Board (Chair)
Dr Beverley Woods	Consultant, Food, Nutrition And Dietetics
Ms Cath Scarth	Brotherhood of St Laurence
Mr Colin Mitchell	Koori Diabetes Service
Dr David Crawford	Deakin University
Ms Enerestine Van Herweden	National Heart Foundation Vic.
Ms Sue Baudinette	South West Health Care
Ms Sue Booth	DHS, SA
Ms Sue Noy	Consultant
Ms Veronica Graham	DHS, Public Health
Ms Kellie-Ann Jolly	VicHealth
Ms Lee Choon Siau	VicHealth (Convenor)

Planning And Health

Mr Hugh Delahunty	VicHealth Board (Chair)
Ms Clare Hargreaves	Municipal Association of Victoria
Mr Neville Kurth	City of Whittlesea
Mr Tony Mcbride	Health Issues Centre
Ms Monica Kelly	DHS, Public Health
Dr Judith Slocombe	VicHealth Board
Mr Tony Diamond	City of Ballarat
Mr Leigh Snelling	Victorian Local Government Association
Ms Bernadette George	Planning Institute of Australia
Dr Bob Birrell	Monash University
Ms Mandy Chapman	Dept of Victorian Communities
Ms Kellie-Ann Jolly	VicHealth
Ms Rita Butera	(Convenor) VicHealth
Mr Phil Harlott	Department of Infrastructure
Mr David Williamson	Darebin City Council
Ms Maria Simonelli	ICLEI

Healthy Sports Clubs/Venues

Mr Lindsay Gaze	VicHealth Board (Chair)
Ms Maxine Morand	VicHealth Board
Ms Kay Copeland	Sports Medicine Australia
Ms Julie Hassard	SunSmart Program, Cancer Council, Victoria
Mr John Strachan	(VicHealth) Convenor

VICHEALTH STAFF

Staff list current at time of publication

CEO's Office

Chief Executive Officer	Dr Rob Moodie
Executive Assistant	Jenny Williams

Physical Activity Unit

Director	Kellie Ann Jolly
Program Staff	Rita Butera
	Lee Choon Siau
	Shelley Maher
	Monica O'Dwyer
	Jo Poxon
	Kate Rathbun
	Sharon Ruyg
	John Strachan

Out of School Hours Project	Megan Kerr
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Mental Health & Wellbeing Unit

Director	Lyn Walker
Program Staff	Sue Ball
	Dee Basinski
	Betty Bougas
	Philippa McLean
	Kenton Miller
	Irene Verins
	Kim Webster

Research, Workforce & Tobacco Control Unit

Director	John Biviano
Program Staff	Michele Agustin-Guarino
	Michelle Callander
	Rebecca Conning

Health Promotion Innovations Unit

Director	Barb Mouy
Program Staff	Ali Barr
	Ngare Knight
	Irina Ross
	Jane Potter
	Caroline Sheehan
Librarian	Edith Fry

Finance & Administration

Director	Randall Kent
Senior Finance Officers	Iromi Kodikara
	Ajay Vazirani
Finance Officer	Sandra Burston
Information Technology	Xa Dinh
Records Management	Norma Bradley
	Chris Davis
Office Management	Chris Huggins
Admin	Robyn Flett
HR Systems Support	Lisa Pittard

Communications & Marketing

Director	Jackie Van Vugt
Media Relations	Robyn Thompson
Corporate Events & Production	Sharon Osman
Publications	Peter Ryan
Reception	Helene Finnie
Admin	Jo Hillas
	Natalie Lleonart

Associates

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	Sabrina Gupta
ConnectUs	Alana Hulme
	Kerry Moylan

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