



VicHealth strategy and business plan 2009–2013

Promoting health and preventing illness

First published in December 2009 by the
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Cover photo: Surfing Victoria

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Photo: Mark Farrelly

Our strategic framework

Contemporary challenges in health

Health is the top priority for most Australians. Without health it's difficult for people to live lives they value.

Yet despite all the sophistication of our healthcare system and our high living standards, we are a country facing some very serious health problems: ever-increasing girths; more people requiring treatment for chronic or life-threatening illnesses such as type 2 diabetes and cancer; an increase in alcohol-related injury; increasing rates of depression; and a large gap in the life expectancy of the most disadvantaged in our community compared to those living in more privileged conditions.

Injury and chronic disease account for 70% of the total disease burden and 70% of all deaths. Treatment and rehabilitation costs amount to some 40% of total health expenditure.¹

In Victoria, the greatest burden of disease is related to illness that can be reduced or prevented through lifestyle changes and improved living conditions.

Many people in the health system – including those who are running hospitals and the health services – recognise that better treatment alone is not going to deliver better health. Much of the heart disease, cancer, diabetes, asthma and mental illness now being experienced by Australians could have been avoided through better diets, more physical activity, less smoking and drinking, less stress, and less social and economic marginalisation.

To prevent future increases in sickness and disability, and the associated demand on our healthcare system, we need to do something about the way we live. And that requires an artful mix of creativity, vision and bold thinking to tackle the challenges we face.

We know how to do this. We have shining examples of successful illness and disease prevention campaigns that have saved lives, billions of dollars, and helped maintain workplace productivity, including tobacco control (which has been shown to keep people out of hospitals and save the healthcare system at least \$500 million every year), skin cancer prevention, road trauma programs, and prevention of coronary heart disease.

In particular, we need to ensure that gains in health and life expectancy in Victoria are sustainable and that they address deeply entrenched health inequalities. Health inequalities are complex, but can be explained largely by unequal access to material resources necessary for health, such as good housing, adequate income and healthy food. As well as having a direct impact on health, inequalities may also result in psychological and social conditions which are damaging to health.

We also need to further research the relationship between climate change, biodiversity and human health, including food safety and security. The health of Victorians will increasingly depend on the effectiveness of our efforts to adapt to the many challenges these issues present.²

These challenges will shape VicHealth's focus for the next four years. With commitment, innovative thinking, rigorous evaluation and research, and the involvement of many sectors we will help ensure significant health improvements for Victorians, now and for future generations.

SOCIETY

- Policy (e.g. social, education, employment, infrastructure, health, environmental sustainability).
- Distribution of power and resources.
- Economic wealth.
- Social and cultural beliefs.
- Social structures and institutions.
- Social cohesion.

COMMUNITY

- Neighbourhood facilities and infrastructure.
- Local services and amenities.
- Living and working conditions.
- Social networks and support.
- Group and peer norms.
- Participation opportunities.
- Community cohesion and stress.

FAMILY/HOUSEHOLD

- Employment, income and wealth.
- Housing and living conditions.
- Family structure and relationships.
- Health related behaviours and exposures.

INDIVIDUAL

- Behaviour.
- Age. Sex. Genes.

What influences health?

How much you earn, your social position, your level of education or your capacity to be involved in activities that help connect you to others in your community are important factors in determining your health and wellbeing.

Social disadvantage, material deprivation, and poor living and working conditions are clearly linked to poor health. Likewise, tobacco use, alcohol use, lack of physical activity and an unhealthy diet also contribute to ill health.

It is this understanding that illustrates why illness prevention needs to embrace more than clinical intervention in the precursors of disease (such as providing vital drugs to manage high blood pressure or cholesterol).

To promote health in a population we need improvements to social, economic, cultural and physical environments in addition to developing skills and knowledge for individuals and the community.

All of these influences interact in a complex way to either increase the risk of poor health or to produce improved health. For example, an individual's diet may be influenced by their knowledge of nutrition and by their family environment (such as family income or whether family members eat together), as well as by neighbourhood factors (such as the availability of local food outlets) and broader societal influences (such as the regulation of food advertising and income security policies).

In recent years there have been a number of highly successful strategies targeting systemic interventions. Notable examples include programs to reduce smoking and improve road safety. Two factors have been important to their success. First, they have targeted determinants at all levels – individual, organisational, community and societal. Second, they have used a range of strategies in ways that reinforce one another. For example, smoking has been reduced through a combination of: cessation programs; social marketing campaigns to raise individual awareness, change attitudes and build positive social norms; organisational reforms to achieve 'smoke-free' environments; and legislative change to regulate behaviour and control the promotion and availability of tobacco products.

The challenge facing VicHealth and its partners is to consolidate and extend this approach to deal with the complex range of factors contributing to the contemporary disease and injury burden.

VicHealth's sustained role and contribution

VicHealth's focus is on health promotion and primary prevention of non-communicable diseases.



Primary prevention is about addressing the causes of poor health to prevent problems from developing in the first place. It can focus on individual risk factors and behaviours or broader social, economic and environmental contributors to disease. The latter is often referred to as 'health promotion'.

Health promotion does more than merely prevent poor health. It seeks to increase the prospects of achieving optimal health. This is vital to meet both the productivity requirements of a skill- and knowledge-based economy as well as to realise widely shared aspirations for a just and sustainable society.

With over 20 years' experience, VicHealth has an acknowledged track record in drawing diverse groups together to influence individuals' health-related lifestyles and to improve the social, economic, cultural and physical environments required to sustain health.

We highlight what can be achieved by integrating funding activities, research and rigorous evaluation. We also build opportunities for people to be informed, learn new skills, have greater access to activities that promote good health, and share healthier environments.

This innovative role allows us to lead and advocate for excellence in the development of appropriate health promoting policies and programs, as well as maintain strategic alliances with national and global public health interests to strengthen health promotion action and advocacy.

The Ottawa Charter for Health Promotion 1986

Building on the World Health Organization's Declaration of Alma Ata, the Ottawa Charter defines health promotion as: "...the process of enabling people to increase control over, and to improve, their health. To reach a state of complete physical, mental and social wellbeing, an individual or group must be able to identify and to realise aspiration, to satisfy needs, and to change or cope with the environment. Health is, therefore, seen as a resource for everyday life, not the objective of living. Health is a positive concept emphasising social and personal resources, as well as physical capacities. Therefore, health promotion is not just the responsibility of the health sector, but goes beyond healthy lifestyles to wellbeing."

Jakarta Declaration on Leading Health Promotion into the 21st Century

"Health is a basic human right and is essential for social and economic development. Increasingly, health promotion is being recognized as an essential element of health development. It is a process of enabling people to increase control over, and to improve, their health. Health promotion, through investment and action, has a marked impact on the determinants of health so as to create the greatest health gain for people, to contribute significantly to the reduction of inequities in health, to further human rights, and to build social capital. The ultimate goal is to increase health expectancy, and to narrow the gap in health expectancy between countries and groups."

Who we are

The Victorian Health Promotion Foundation (VicHealth) was established by the Victorian Parliament under the *Tobacco Act 1987* with a mandate to promote good health for all Victorians.

The objectives of VicHealth as mandated by the *Tobacco Act 1987* are:

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

Under section 33 of the Act, the budget of the organisation must include provision for payments to sporting bodies (not less than 30%) and to bodies for the purpose of health promotion (not less than 30%).

VicHealth is an independent, statutory authority with a Board of Governance that is responsible to the Minister for Health. The Board has a breadth of experience in health, sport, the arts, research and communication. The Board are supported by a staff of around 45 full-time employees.

With support across the political spectrum we work in partnership with governments, organisations, communities and individuals from a broad range of sectors including sport, community, urban planning, transport, local government, education and the arts. Fundamental to our success is the strength of these partnerships.

Our health promotion investments target the greatest preventable risk factors for ill health: smoking; poor nutrition; harmful use of alcohol; lack of physical activity; social and economic exclusion; and the effects of UV exposure.

While working to improve the health of all Victorians, we also focus on the needs of those with the poorest health by targeting many of our activities and supporting research initiatives on health inequalities.

Our flexible, responsive, imaginative and evidence-informed approach is the cornerstone of our success.

Our vision

VicHealth 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.

Our mission

Our 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 skills of individuals in ways that support their efforts to achieve and maintain health.

Our values

- Brave
- Just
- Creative



Photo: Jerry Galea

The policy environment

VicHealth continues to align itself strategically with international, national and state policy health initiatives.

International

The World Health Organization's Commission on Social Determinants of Health identifies the following areas of immediate focus:

- Improve daily living conditions.
- Tackle the inequitable distribution of power, money and resources.
- Measure and understand the problem and assess the impact of action.

National priorities for prevention and health promotion

The National Health Priority Areas initiative identifies the following chronic diseases requiring special attention:³

Reducing cancer, diabetes, cardiovascular disease, arthritis and other musculoskeletal conditions, asthma, injury, and mental health problems including stress, anxiety and depression.

State strategies for prevention and health promotion

The Victorian Government has developed several state-level strategies targeting specific areas:

- *Victorian Tobacco Control Strategy* (2008–13) – reducing the toll of tobacco
- *Restoring the balance: Victoria's Alcohol Action Plan* (2008–13) – actions to prevent and reduce harm associated with alcohol misuse in Victoria
- *A Fairer Victoria* (2006–10) – addressing social disadvantage
- *All of Us: Victoria's multicultural policy* – strengthening and promoting multiculturalism
- *Because Mental Health Matters: State Mental Health Strategy* (2009–19) – focusing on prevention, early intervention, recovery and social inclusion to reform mental health
- *Department of Human Services: health promotion priorities* (2007–12) – to improve overall health and reduce health inequalities
- *Action Plan: Strengthening Community Organisations* – strengthening communities
- *Creative Capacity Plus: Arts Victoria* (2000–10 and under review) – developing a culture of participation through the arts
- *State Violence Prevention Plan*.

VicHealth strategic framework 2009–2013

Priorities for focus

- | | | | | | |
|--------------------|-----------------------|------------------------------|--------------------------------|--|----------------------------------|
| • Reducing smoking | • Improving nutrition | • Reducing harm from alcohol | • Increasing physical activity | • Increasing social and economic participation | • Reducing harm from UV exposure |
|--------------------|-----------------------|------------------------------|--------------------------------|--|----------------------------------|

Key result areas

KRA 1 Health inequalities

- 1.1 Improve the physical and mental health of those experiencing social, economic or geographic disadvantage.
- 1.2 Contribute to closing the health gap between Indigenous⁴ and non-Indigenous Victorians.

KRA 2 Participation

- 2.1 Increase participation in physical activity.
- 2.2 Increase opportunities for social connection.
- 2.3 Reduce race-based discrimination and promote diversity.
- 2.4 Prevent violence against women by increasing participation in respectful relationships.
- 2.5 Build knowledge to increase access to economic resources.

KRA 3 Nutrition, tobacco, alcohol and UV

- 3.1 Create environments that improve health.
- 3.2 Increase optimal nutrition.
- 3.3 Reduce tobacco use.
- 3.4 Reduce harm from alcohol.
- 3.5 Reduce harmful UV exposure.

Our approach

To lead the development and implementation of innovative ways to promote health through partnering, advocacy and capacity building.

Key result areas

KRA 4 Knowledge

- 4.1 Produce, synthesise and translate practical health promotion knowledge.
- 4.2 Evaluate health promotion practice.

KRA 5 Communications

- 5.1 Develop, implement and evaluate marketing and communications approaches to improve health.
- 5.2 Develop evidence on effective social marketing.
- 5.3 Provide accurate, credible and timely information to stakeholders on health promotion issues.

KRA 6 Business operations

- 6.1 Ensure effective business and risk processes and systems.
- 6.2 Develop high-performing people in a healthy and sustainable work environment.
- 6.3 Operate transparently and with accountability.

Setting the focus of our activity

We define our business activities by drawing on the health promotion action areas identified in the Ottawa Charter.

Health promotion actions

- Create and use knowledge acquired through **research and evaluation**.
- **Create environments** that foster good health.
- Encourage the **development of systems** that support and sustain health.
- **Communicate** about priority health issues.
- **Develop communities** which are inclusive, accessible, equitable and safe.
- **Support organisations** to plan, implement and evaluate health promotion activity.
- Facilitate **participation and skill development**.
- Contribute to and advocate for healthy public **policy and regulation**.

We design our work to reach populations most affected.

Priority populations

In addition to whole-of-population approaches, VicHealth will focus its efforts on those in our community who experience the greatest disadvantage.

We focus our effort within settings that best reach our targeted populations.

Priority settings for action

Workplace and education

Community and local government

Culture, sports, arts, media and information technology



Photo: Mark Farrelly

Our business plan

KRA 1: Health inequalities

Objective 1.1:

Improve the physical and mental health of those experiencing social, economic or geographic disadvantage

What we know:

People from low-income households are more likely to:

- report their general health as fair or poor
- experience depression
- have days off work due to ill health
- report greater levels of physical impairment
- have greater difficulty accessing affordable, appropriate health care.⁵

Our role:

VicHealth has a strong history in supporting research and activity to reduce health inequalities.

We will strengthen this role over the next four years with increased attention on building knowledge on the social and economic factors which impact on health. We will also focus on reviewing models of good practice for effective cross-sector activity that can reduce health inequalities.

Health promotion action:	Our planned activities:
Research and evaluation	<p>Synthesise and disseminate research findings documenting:</p> <ul style="list-style-type: none">• disparities in health experienced by specific population groups; and• social and economic factors underpinning health inequalities. <p>Support research exploring the links between poor social and economic environments and:</p> <ul style="list-style-type: none">• participation• tobacco use• alcohol use• access to healthy food. <p>Explore models of good practice in creating environments which benefit the health of priority populations, including:</p> <ul style="list-style-type: none">• children• Indigenous communities• new arrival communities• those with a disability• those experiencing disadvantage due to social, economic or geographic circumstances. <p>Support the McCaughey Centre and other organisations to consolidate research and evaluation activity on the social and economic determinants of health.</p> <p>Implement a survey program to complement existing research into the health behaviours of specific population groups and the impact of their social and economic environments.</p> <p>Identify and support gaps in research into emerging areas of concern, such as housing, focusing on their health impact and reforms required to deal with these impacts.</p>

Health promotion action:	Our planned activities:
Communication	Develop communication strategies to inform key stakeholders and the public of existing inequalities in health and the factors underpinning health status disparity.
Organisational support	<p>Provide support to housing, education, employment and peak community organisations to implement and evaluate programs addressing the social and economic determinants of health.</p> <p>Provide skills training across sectors in practices focusing on the social and economic determinants of health.</p> <p>Support the translation and dissemination of Community Indicators Victoria data and other services to assist strategy development by local governments and other relevant organisations.</p>
Contribute to policy and regulation	<p>Strengthen national and state collaborations across academic, government and non-government settings to ensure health inequalities are addressed in relevant policy and program reforms.</p> <p>Strengthen international collaborations with the World Health Organization, the International Union for Health Promotion and Education, the Global Consortium for the Advancement of Promotion and Prevention in Mental Health, the World Federation for Mental Health, the Carter Center USA, and the Clifford Beers Foundation UK.</p> <p>Disseminate the <i>Melbourne Charter for Promoting Mental Health and Preventing Mental and Behavioural Disorders</i> to international audiences to support increased policy and program focus on the social and economic determinants of mental health.</p> <p>Contribute to state and national policy and programs on health promotion and the prevention of illness focusing on the social and economic determinants of health.</p>

Objective 1.2: Contribute to closing the health gap between Indigenous and non- Indigenous Victorians

What we know:

The life expectancy of Indigenous people is significantly lower than that of the total Australian population.⁶

The Indigenous population is relatively young compared to the non-Indigenous population, with more than half (58%) aged under 25 years.⁷

Aboriginal youth are four times more likely to die before the age of 25, twice as likely to be obese, twice as likely to smoke and 13 times more likely to be in prison.⁸

Our role:

Over the past 10 years VicHealth has developed partnerships with organisations in Indigenous communities to respond to Indigenous health issues.

Over the next four years we will continue to work with cross-sector organisations and academic institutions to address the factors that have an impact on Indigenous health and enhance Indigenous health outcomes. We will also focus on supporting Indigenous communities to promote their stories and celebrate their successes in tackling health issues.

Health promotion action:	Our planned activities:
<p>Research and evaluation</p>	<p>Synthesise and disseminate the findings of research focusing on:</p> <ul style="list-style-type: none"> • the health status of Indigenous communities; and • the impacts of the social and economic environment on Indigenous health. <p>Explore models of good practice in Indigenous communities designed to:</p> <ul style="list-style-type: none"> • reduce tobacco use and alcohol use • increase access to healthy food • increase physical activity and social participation • reduce discrimination. <p>Support a Research Practice Leader to explore the social and economic determinants of Indigenous health.</p> <p>Support strengthening of data collection and analysis to monitor improvements in Indigenous health.</p> <p>Consolidate research, training and community development activities within the Onemda VicHealth Koori Health Unit and strengthen focus on the social and economic factors and their Indigenous health impacts.</p>

Health promotion action:	Our planned activities:
Communication	<p>Document and disseminate the success of the Rumbalara Football Netball Club in developing a community environment which fosters good health.</p> <p>Work with Indigenous leaders to promote positive images of Indigenous culture and contribution to Australian society.</p>
Community development	<p>Support organisations such as the Fitzroy Stars Football Club to establish a community hub from which to develop health promotion activity.</p> <p>Support activity designed to strengthen Indigenous leadership across Victoria.</p>
Organisational support	<p>Support Indigenous sports, arts, education and community organisations to strengthen their approaches in dealing with the social and economic determinants of health.</p>
Contribute to policy and regulation	<p>Consolidate a cross-sector National Indigenous Advisory Committee to identify key reforms required and to support VicHealth’s contribution to reducing inequalities.</p>



Photo: Mark Farrelly

KRA 2: Participation

Objective 2.1: Increase participation in physical activity

What we know:

Physical inactivity has been estimated to account for 6.6% of the burden of disease and injury in Australia and rates second only to tobacco smoking.⁹ It also accounts for 22% of heart disease, 11% of stroke, 14% of diabetes and 10% of breast cancer.⁹

Physical inactivity is responsible for an estimated 8000 deaths per year in Australia, and costs the health system at least \$400m in direct health care costs. 54% of Australian adults are not doing enough physical activity to achieve health benefits.⁹

Parents' fear for the safety of their children is the most significant barrier to increasing walking rates amongst children.¹⁰

Participating in sport and active recreation activities also has positive social and psychological effects including increased self-esteem, better development of life skills, decreased involvement in risky behaviours such as drug taking and an increase in academic achievement.

Our role:

From its inception, VicHealth has played a significant role in supporting organisations to promote and encourage increased physical activity.

Over the next four years, we will continue to work with government and community organisations to expand opportunities for participation in organised sport, active recreation, walking and cycling. We will also explore the social and economic barriers to participation and how to best overcome them.

Health promotion action:	Our planned activities:
<p>Research and evaluation</p>	<p>Synthesise and disseminate research findings documenting:</p> <ul style="list-style-type: none"> • the links between physical activity participation and physical and mental health; and • physical activity participation rates across the population and sub-populations. <p>Support research into models of good practice for increasing physical activity participation rates for:</p> <ul style="list-style-type: none"> • children • Indigenous communities • new arrival communities • those with a disability • those experiencing disadvantage due to social, economic or geographic circumstances. <p>In collaboration with relevant organisations such as VicSport and Sport & Recreation Victoria, support a Research Practice Leader to strengthen data collection and analysis systems to monitor changes in participation in all forms of physical activity.</p> <p>Explore models of good practice in alleviating parental fear associated with children participating in unsupervised physical activity.</p>

Health promotion action:	Our planned activities:
Create environments	<p>Support development of environments in sporting organisations and targeted workplace settings which:</p> <ul style="list-style-type: none"> • sustain responsible alcohol management policies • have diminished reliance on alcohol sponsorship • provide healthy food choices • are accessible, inclusive, equitable and safe • encourage women’s participation in governance activities. <p>Explore opportunities with partners to foster and promote ethical and just conduct in sport.</p>
Systems development	<p>Work with Sport & Recreation Victoria and other sporting and community organisations to investigate models for those with a disability to increase physical activity participation.</p>
Communication	<p>Support Victoria Walks to develop communication strategies designed to promote the physical and mental health benefits of walking for transport.</p>
Community development	<p>Support organisations such as Victoria Walks to resource communities to increase participation in walking and cycling.</p>
Organisational support	<p>Support partnership development between State Sporting Associations, Regional Sports Assemblies and community organisations to remove barriers and increase access to participation for population groups with low participation rates.</p> <p>Support partnerships between local government and schools to increase walking and cycling for children and young people.</p> <p>Provide skills training to sport and recreation sector staff and volunteers in practices designed to increase participation in physical activity.</p>
Participation and skill development	<p>Work with VicSport, the government and the corporate sector to sustain a small grants program targeted at removing barriers to participation in sport and preventing injury.</p> <p>Work with leaders from Indigenous and new arrival communities to develop strategic partnerships with a small number of national and state sporting bodies to increase participation in physical activity.</p>
Contribute to policy and regulation	<p>Support review and recommendations on legislation, policies and regulations that enhance or restrict physical activity, particularly in relation to walking and cycling.</p>

Objective 2.2: Increase opportunities for social connection

What we know:

People who are more likely to experience psychological distress and be more at risk of coronary heart disease tend to be less connected to their community as the result of:

- lower education and income levels
- social isolation and lack of quality social support
- unemployment or not being in the labour force
- being in non-professional occupations
- being born overseas
- reporting poor health status
- having no private health insurance coverage
- living in rental accommodation.¹¹

Communities with high levels of social cohesion, including participation by individuals in community organisations and activities, have better health than those with low levels of social cohesion.¹²

Our role:

VicHealth has a long history in supporting a variety of organisations to increase participation in arts and cultural practices, sports and physical activity, and education activities designed to promote health.

Over the next four years we will work with sport, the arts, local governments and schools to extend this work. In acknowledgement of the increasing role that technology plays in the lives of young people, we will also explore opportunities for increasing social connection through cyberspace.

Health promotion action:	Our planned activities:
<p>Research and evaluation</p>	<p>Synthesise and disseminate research findings documenting the links between social connection and health.</p> <p>Explore models of good practice in increasing social connection via participation in sports and arts activity.</p> <p>Explores the impact of cyberspace and new media on young people’s social relationships.</p> <p>Support a Research Practice Leader to research and document effective local-level strategies designed to facilitate social connection via increased participation in arts activity.</p>
<p>Systems development</p>	<p>Support and evaluate local government activity designed to strengthen infrastructure that enhances arts and cultural participation.</p> <p>Support cyberspace initiatives which enhance positive social relationships and connections for young people.</p>

Health promotion action:	Our planned activities:
Community development	<p>Support arts and sporting organisations to increase access to participation for community members.</p> <p>Support school-based initiatives designed to strengthen social relationships between students, teachers and parents.</p> <p>Contribute to the Victorian Fire Recovery effort through support for local community initiatives.</p>
Organisational support	<p>Provide skills training across sectors in practices designed to increase social participation and connection.</p>
Participation and skill development	<p>Implement an <i>Arts and New Media Innovations</i> program to trial and identify contemporary strategies to increase social connection for young people.</p>
Contribute to policy and regulation	<p>Contribute to the development of national and state activity designed to increase social inclusion for marginalised populations.</p>

Objective 2.3: Reduce race-based discrimination and promote diversity

What we know:

In Australia, 47% of people born in non-English speaking countries report having experienced discrimination (compared with 20% of the Australian-born) and 14% report experiencing discrimination in the last 12 months (compared with 7% of the Australian-born).¹³

One in 10 Victorians believe that some races are inferior to others and that people from different racial backgrounds should not marry one another, while around one in three hold views suggesting some discomfort with people from different ethnic backgrounds.¹⁴

Discrimination is among a number of factors contributing to inequality and disadvantage experienced by Indigenous Victorians and some migrant and refugee communities.¹⁵

Our role:

VicHealth has focused its attention on promoting positive attitudes and behaviours about diversity in the wider community and on strengthening organisational environments, their policies and practices. We have worked with a range of partners to trial new approaches and build skills and knowledge to reduce discrimination.

Over the next four years we will have a particular focus on reducing discrimination affecting Victorians from Indigenous backgrounds and settlers from the Middle East, Africa and the Asian and Indian sub-continent. We will work closely with these groups to promote more accurate representations of their communities and to lead and contribute to efforts to tackle discrimination.

Health promotion action:	Our planned activities:
Research and evaluation	<p>Synthesise and disseminate research findings documenting discrimination consequences to health to raise awareness and the capacity to deal with it.</p> <p>Support research and evaluation initiatives to:</p> <ul style="list-style-type: none"> • increase understanding of discrimination and its health, social and economic consequences, in particular on children and young people • assess good practice models for reducing discrimination by promoting sustained opportunities for inter-cultural contact • build knowledge and skills for reducing discrimination and promoting diversity in local government, workplace, education and arts settings and the media. <p>Support the development of systems to monitor the prevalence and geographic and demographic patterns of discrimination, and attitudes toward race and diversity in Victoria.</p> <p>Support a Research Practice Leader and other academics to research and document effective local-level strategies designed to reduce race-based discrimination and promote diversity.</p> <p>Conduct evidence reviews to identify strategies to reduce discrimination in key settings, initially targeting workplaces.</p>
Systems development	<p>Build networks with local government and the Municipal Association of Victoria to strengthen the role of councils and communities in reducing discrimination and promoting diversity.</p> <p>Build knowledge networks with key academic and policy stakeholders to assist the development of policies and programs to promote diversity and reduce discrimination.</p>
Communication	<p>Support arts organisations to implement a range of strategies to reduce race-based discrimination and promote diversity.</p> <p>Develop cross-sector communication tools designed to reduce race-based discrimination.</p>
Community development	<p>Work with local governments to implement a multi-faceted approach to reducing discrimination and promoting diversity.</p> <p>Support the development of leadership and advocacy skills among migrant, refugee and Indigenous communities to strengthen their capacity to take or contribute to action to reduce discrimination.</p> <p>Support Indigenous and migrant and refugee communities to define and document their ethnic and cultural identity and to promote positive representations of their communities.</p>
Organisational support	<p>Develop resources to support personnel in local government, workplaces, education, arts and sports organisations to take action to reduce discrimination.</p> <p>Provide skills training across sectors in practices designed to reduce discrimination and promote diversity.</p>
Participation and skill development	<p>Support community sector organisations to develop opportunities to increase sustained contact between people from different ethnic and racial backgrounds.</p>
Contribute to policy and regulation	<p>Work in partnership to develop and promote the adoption of a policy framework to guide cross-sector action to prevent discrimination and promote diversity.</p> <p>Collaborate with the Victorian Government in the implementation of the Mental Health Strategy with specific focus on reducing discrimination.</p>



Photo: Emma Phillips

Objective 2.4: Prevent violence against women by increasing participation in respectful relationships

What we know:

Intimate partner violence is the leading preventable contributor to death, disability and illness in Victorian women aged 15–44 years, with depression and anxiety making up the majority of the health burden imposed.¹⁶

One in three women in Australia who have ever had a boyfriend or husband report experiencing at least one form of violence during their lifetime from an intimate male partner.¹⁷

Since the age of 15, one-third of women have experienced inappropriate comments about their body or sex life, one-quarter (25%) have experienced inappropriate sexual touching, and one in five (19%) have been stalked.¹⁸

Our role:

Over the past five years VicHealth has worked with academic institutions, the government and the non-government sector to develop evidence-based policies and programs designed to prevent violence against women. It is acknowledged that VicHealth has made a global contribution to increasing the knowledge about the health impacts of violence against women and models of good practice in preventing this violence.

Over the next four years we will continue to implement a program of activity designed to support communities and organisations to create safe and inclusive environments for women. We will also focus on mechanisms to facilitate the development of respectful relationships in which women and men can participate on equal terms.

Health promotion action:	Our planned activities:
<p>Research and evaluation</p>	<p>Synthesise and disseminate review findings from national and international evidence related to the prevalence and impact of violence against women.</p> <p>Support research to assist schools, workplaces, sporting organisations and local governments to foster respectful workplace behaviours, policies and environments that are inclusive and safe for women and girls.</p> <p>Support a Research Practice Leader and other academics to explore effective models of good cross-sector practice in preventing violence against women.</p> <p>Undertake a national community attitudes survey to benchmark and monitor the effect of new activities designed to prevent violence before it occurs.</p>

Health promotion action:	Our planned activities:
Systems development	Support the development of networks within government, local government and the community which strengthen research, policy and practice designed to prevent violence against women.
Communication	<p>In collaboration with the Commonwealth Government, design and evaluate a social marketing campaign designed to promote development of respectful relationships between women and men.</p> <p>Support analysis of the media discourse on violence against women and identify methods for strengthening media coverage and reporting.</p>
Organisational support	<p>Develop and disseminate tools and resources to support cross-sector practice designed to prevent violence against women.</p> <p>Support schools, workplaces, local governments and sporting organisations such as the Australian Football League Victoria to implement strategies promoting respectful behaviours, policies and environments.</p> <p>Provide skills training across sectors to foster respectful relationships between men and women.</p>
Contribute to policy and regulation	<p>Assist the Victorian Government in the development and implementation of its State Plan for the Prevention of Violence Against Women.</p> <p>Align program priorities with the strategies and actions contained within the Commonwealth Government's National Plan to Reduce Violence Against Women and their Children.</p> <p>Collaborate with the Victorian Government in the implementation of the Mental Health Strategy with specific focus on violence against women.</p>

Objective 2.5: Build knowledge to increase access to economic resources

What we know:

People who are employed generally report higher levels of self-assessed health than do people who are unemployed or not in the labour force.¹⁹

The combination of high job demand and low job control has been linked to elevated risk of cardiovascular disease, depression and other serious health outcomes.²⁰

Particular sub-populations of the Australian community are more likely to lack access to the social and economic resources for good health and wellbeing. Aboriginal people, new arrival communities and people with disabilities are more likely to be living in disadvantage.²¹

Our role:

VicHealth has contributed to knowledge and practice development focusing on the health benefits derived through better access to employment and education.

Over the next four years we will work with our partners to implement models of good practice in improving education and employment pathways for those needing support. We will also collaborate to create work environments which have a positive impact on our health.

Health promotion action:	Our planned activities:
Research and evaluation	Synthesis and disseminate research findings documenting the links between education and employment disadvantage and health. Support research and evaluation activity into models of good practice designed to: <ul style="list-style-type: none"> • increase access to education and employment for young people from Indigenous and refugee backgrounds • increase access to employment for older people wishing to re-enter the workforce • assist implementation of workplace policies and procedures which promote health • implement workplace policies and procedures which reduce discrimination and increase respectful relationships between men and women.
Systems development	Support the implementation of models of good practice to improve education and employment pathways for young people from Indigenous and refugee backgrounds. Support the implementation of models of good practice in workplace programs designed to improve health.
Contribute to policy and regulation	Participate in relevant state and national policy forums designed to improve workplace health.



Photo: James Geer

KRA 3: Nutrition, tobacco, alcohol and UV

Objective 3.1: Create environments that improve health

What we know:

Lifestyle factors such as alcohol use, tobacco use and unhealthy eating contribute significantly to the burden of disease in Australia.²²

Leading health promotion and population health agencies have identified the need to create environments that improve health and address environments that contribute to lifestyle-related harms.²³

There are specific social, physical and economic environments that can avoid the consumption of tobacco, alcohol and unhealthy foods and/or reduce unhealthy consumption behaviours.

Changing the social, physical and economic environments that structure consumption and UV exposure can have profound impacts on health outcomes.

Our role:

From its inception VicHealth has invested in supporting research and multidisciplinary programs targeting the impacts of tobacco and alcohol use.

Over the next four years we will increase emphasis on strategies that move beyond the traditional focus on individual behaviours. We will focus our attention on the social, physical and economic environments that determine exposure to unhealthy and harmful consumption of tobacco and alcohol. We will place more emphasis on research into environments that reduce UV exposure and in building knowledge about healthy eating and optimal nutrition.

Health promotion action:	Our planned activities:
<p>Research and evaluation</p>	<p>Support research to examine the links between social, physical and economic environments and</p> <ul style="list-style-type: none"> • tobacco use • alcohol use • healthy eating • UV exposure <p>Explore models of good practice in creating environments which benefit the health of priority populations.</p>
<p>Systems development</p>	<p>Support the translation of knowledge-building activities into initiatives designed to develop effective systems targeting healthy environments.</p> <p>Coordinate with government agencies to deliver interventions that support healthy environments.</p>

Health promotion action:	Our planned activities:
Communication	Facilitate the use of evidence in public policy, legislative review, community, news and online media as it relates to nutrition, tobacco, alcohol and UV.
Community development	Participate as a partner in community-level and planning activities that facilitate the creation of safer social, physical and economic environments relating to tobacco, alcohol, healthy eating and UV exposure.
Organisational support	Support development of sporting organisations and targeted workplace settings which: <ul style="list-style-type: none"> • sustain responsible alcohol management policies • sustain healthy food policies.
Contribute to policy and regulation	Support and develop a range of policy and advocacy coalitions targeting healthy environments linked to our strategic priority areas.

Objective 3.2: Increase optimal nutrition

What we know:

10% of people consume the recommended intake of vegetables, with 47% consuming the recommended intake of fruit.²⁴

Inadequate vegetable and fruit intake is responsible for 30% of coronary heart disease, 20% of gastrointestinal cancer and 14% of stroke.²⁵

One in 20 people reported running out of food on at least one occasion in the past 12 months and couldn't afford to buy more.²⁶

Our role:

VicHealth's focus in optimal nutrition has been to fund reviews and studies into food systems and the factors that influence the relationships between demand access and production of fresh food. This relationship between demand and access is a crucial one as it is the nexus between broader commercial, social, cultural and behavioural factors.

Over the next four years VicHealth will target the systems that structure the relationship between the demand for food and access to food as they apply to the determinants of health.

Health promotion action:	Our planned activities:
Research and evaluation	<p>Support research and evaluation activity designed to increase knowledge about:</p> <ul style="list-style-type: none"> • the demand for food • access to healthy food • the relationship between demand and access • including a focus on the impact on Indigenous communities. <p>Synthesise and disseminate research and evaluation findings regarding food demand and supply systems.</p>
Create environments	Support the development of built, natural, social and economic environments that encourage healthy eating.
Communication	Use each of our strategic communication channels appropriately to provide knowledge to community, local government and government settings on strategies to increase healthy eating.
Organisational support	<p>Support organisations working in food demand and supply systems to implement evaluation activities.</p> <p>Support local governments with large, low-income populations to improve demand and access to nutritious food.</p> <p>Support the community, local government, government and research sectors to participate in skills training on sustainable food systems.</p>
Contribute to policy and regulation	Support the development of a Food Policy Coalition to promote healthy eating and advocate for food system reform, targeting access to healthy food.

Objective 3.3: Reduce tobacco use

What we know:

In 21 years, the smoking rate of Victorian adults has dropped from 34% to 17%.²⁷ Though much progress has been made, smoking remains the leading preventable cause of many cancers, respiratory, cardiovascular and other diseases.

In Victoria, smoking costs approximately 4000 lives and \$5 billion each and every year.²⁸ Smoking rates remain disproportionately high in many of our communities, causing avoidable hardship and ill health among many of the people who can least afford it.²⁹

Our role:

VicHealth is a key partner of the Victorian Government in the implementation of its Tobacco Control Strategy 2008–2013. Our partnership with Quit and the VicHealth Centre for Tobacco Control (VCTC) represents the single largest annual program investment by VicHealth, and is a testament to VicHealth’s continuing commitment to tackling the biggest preventable cause of death and disease in Victoria.

Over the next four years, together with Quit and the VCTC, VicHealth aims to maintain Victoria’s position as a leader in reducing smoking prevalence. We will also ensure Indigenous tobacco control strategies are a priority.

Health promotion action:	Our planned activities:
Research and evaluation	<p>Assist the development of the investment case for tobacco control, particularly as it relates to reducing the burden of tobacco-caused illness among disadvantaged groups.</p> <p>Support research relating to key tobacco control strategies including pricing, marketing and packaging.</p> <p>Synthesise and disseminate research and evaluation findings on key tobacco issues.</p>
Systems development	<p>Support the development coalitions of agencies and citizen advocates to advance tobacco control.</p> <p>Provide support for the development and dissemination of models of best practice for tobacco control.</p> <p>Work with Onemda VicHealth Koori Health Unit, Victorian Aboriginal Community Controlled Health Organisation and Quit to enhance tobacco control strategies within Indigenous communities.</p>
Communication	<p>Disseminate knowledge on effective tobacco control policies and strategies to key stakeholders.</p> <p>Participate in relevant state and national policy forums designed to stimulate innovation in tobacco control strategies.</p>
Contribute to policy and regulation	<p>Advocate for tobacco control policies and regulations that support the creation of healthy environments in regard to tobacco control.</p>

Objective 3.4: Reduce harm from alcohol

What we know:

Alcohol remains the most widely used drug in Victoria with nearly half of Victorians over the age of 14 years being daily or weekly drinkers.³⁰

33 per cent of all Victorian adults (aged 18 or over) drink at risky or high-risk levels for short-term harm at least yearly.³¹ This figure is substantially higher among 18–24 year olds, with 18% undertaking risky drinking at least weekly, 44% at least monthly and 64% at least yearly.³²

Alcohol is related to the causes of more than 60 different medical conditions, and is estimated to directly account for 4.9% of the total burden of disease in Victoria.³³

Our role:

Since its formation, VicHealth has supported and funded a range of programs and research initiatives that tackle the harmful consumption of alcohol. VicHealth's focus on alcohol is based upon the philosophy of harm minimisation. This requires a multi-pronged strategy that spans beyond the traditional health sector and into the areas of law enforcement, market regulation, taxation and social marketing.

Over the next four years we will focus our efforts on facilitating a consolidated approach to reduce alcohol use. We will continue to build evidence on the social impacts of alcohol consumption and effective interventions for reducing alcohol-related harms. We will assist in developing programs to reduce alcohol-related harm.

Health promotion action:	Our planned activities:
Research and evaluation	Support research to inform development of innovative alcohol prevention policies and programs. Synthesise and disseminate research and evaluation findings on key alcohol policy issues.
Create environments	Facilitate the creation of environments that promote a safer drinking culture, particularly in community sport settings.
Communication	Develop a communication strategy to maximise the impact of alcohol prevention work.
Community development	Provide advice and support for local communities regarding alcohol issues, particularly liquor licensing matters, planning matters and issues relating to health inequalities. Develop a community mobilisation strategy to inform and sustain alcohol policy advocacy campaigns.
Contribute to policy and regulation	Develop an Alcohol Policy Coalition to produce, disseminate and advocate for evidence-based prevention policies and programs. Support advocacy for alcohol policies that support the creation of healthy environments with regard to alcohol use.

Objective 3.5: Reduce harmful UV exposure

What we know:

More than 1600 Australians die from skin cancer each year,³⁴ with at least two in three Australians being diagnosed with skin cancer before 70 years of age.³⁵

In 2002, skin cancers accounted for over 80% of all cancers diagnosed in Australia.³⁶ Melanoma is now the third most common cancer diagnosed in Victorian women and the fourth most common in Victorian men.³⁷

In 2005, in Victoria, there were 2,347 new cases of melanoma and 245 people died from melanoma.³⁸ In the same year, there were 405 deaths from non-melanoma skin cancer in Australia.³⁹

Of all cancers, skin cancer is the most expensive burden on our health system. Ironically, skin cancer is one of the most preventable cancers in Australia.⁴⁰

Our role:

Since 1988, VicHealth has contributed more than \$12 million to the SunSmart program aimed at reducing harmful UV exposure. VicHealth has also promoted and supported the inclusion of the SunSmart message in a range of other funded initiatives, including the *Health Promoting Schools* framework, and adequate sun protection for outdoor sports and arts activities.

Over the next four years we will continue our commitment and partnership with the Cancer Council Victoria, which with others has seen significant changes in social norms and the population's health including decreased rates of melanoma and non-melanoma skin cancer in young people.

Health promotion action:	Our planned activities:
Research and evaluation	Support research into effective social marketing strategies for UV protection.
Create environments	Improve environmental protection strategies, including shade audits, identifying options for built and natural shade.
Communication	Assist to increase investment in public education campaigns. Promote the SunSmart UV Alert and position Victoria to be a leader in dealing with the effects of climate change on skin cancer rates. Target adolescents and young adults with SunSmart messages to increase UV protective behaviours. Focus awareness-building activity in settings and activities where people mostly get burnt including sport, water/beach related activities, active and passive recreation.
Community development	Support development of a tailored response to UV protection with sections of the population that are more likely to be at risk of vitamin D deficiency.
Organisational support	Trial new UV protection strategies in active recreation settings, particularly community sports and arts. Work with the sport and government sectors to assist sporting organisations to reduce UV exposure.



Photo: Mark Farrelly

KRA 4: Knowledge

Objective 4.1:

Produce, synthesise and translate practical health promotion knowledge

What we know:

Many publicly funded research agencies have shifted interest away from a narrow focus on research to a broader system of knowledge-making, from the production of knowledge through to its translation into real-world effects.⁴¹

Internationally, there is a public policy need to put knowledge to work for a broader public benefit than simply for the production of knowledge itself.⁴²

Health and wellbeing emerge from complex systems based on different forms of knowledge (such as clinical, cultural, social and organisational knowledge). It is through being open to different forms of knowledge that solutions to the complex systems underpinning health and wellbeing can be achieved.

There is a growing appreciation internationally that collaborative approaches to knowledge can produce significant outcomes for public health through a range of activities such as synthesis, transfer, brokering and knowledge translation.⁴³

Increasingly public health research funding bodies are designing their funding investments around a range of collaborative innovations to improve health intelligence and health services.

Our role:

VicHealth has a strong tradition of investing in public health research to drive evidence-based interventions promoting the health and wellbeing of Victorians. Since our inception, we have directed research funding towards three imperatives – innovation, capacity building and contemporary public health priorities, through the funding of centres, fellowship programs and scholarship programs. Our approach has been to translate research into practical health promotion practice.

We recognise that knowledge is valued as a process of collaboration, networking and individual endeavour. Over the next four years we will continue to apply a balanced approach to our knowledge investments, focusing on creating conditions in the changing knowledge environment that lead to enhancement of the health and wellbeing of the Victorian community.

Health promotion action:	Our planned activities:
Research and evaluation	Produce knowledge through a balanced range of research programs: <ul style="list-style-type: none"> • An innovation program focusing on new and creative knowledge production. • Linkage research to create synergies between academic and non-academic partners. • Support Research Practice Leaders to link knowledge production research to health promotion practice. • Commissioned research targeted at emerging public health priorities.
Systems development	Create and maintain knowledge systems, data collections and data platforms that aggregate health promotion data. Provide mechanisms for investigators to access and examine data and knowledge systems.
Communication	Use each of our strategic communication channels appropriately to disseminate and translate knowledge priorities, findings and key initiatives.
Community development	Maintain a leadership role in supporting trials of health promotion interventions.
Organisational support	Support the creation of networks of research communities of interest. Maintain dialogue platforms between knowledge producers, policy makers, practitioners and advocacy coalitions through virtual networking and events, forums and conferences. Apply knowledge to the development of tools and resources for skills-based training that we roll out through our program activities.
Participation and skill development	Build research workforce capacity through funding for individual scholars. Support linkages between local scholars and international best practice.
Contribute to policy and regulation	Use knowledge to inform evidence-based advocacy in public health policy making through submissions, reviews and active leadership in healthy public policy processes.

Objective 4.2: Evaluate health promotion practice

What we know:

The benefits of evaluation range from accountability, impact assessment, cost effectiveness and quality improvement.

Evaluation also enables practitioners to document, disseminate and promote effective practice.

Evaluation makes a significant contribution to world knowledge about effective action to improve health and wellbeing.⁴⁴

Our role:

VicHealth has a long history of applying learning to produce change by working closely with our partners through evaluation practice. Whether those partners are service providers, researchers, policy makers, government, community organisations or private industry, VicHealth invests in partnerships to facilitate sustainable advocacy, policy and structural change to benefit health promotion and public health.

Over the next four years we will continue to support a range of evaluation approaches to health promotion practice including the program logic framework, concept mapping, and the Department of Human Services' planning and evaluation Framework.

Health promotion action:	Our planned activities:
Research and evaluation	Promote and use of a range of evaluation techniques across VicHealth's projects, programs and supported centres targeted at the needs of the population and settings.
Create environments	Maintain a leadership role in supporting evaluation trials of health promotion interventions.
Systems development	Support linkage activities between academic and non-academic stakeholders to foster comprehensive evaluation activities. Publish and disseminate evaluation instruments and tools to support effective evaluation of health promotion interventions.
Communication	Use each of our strategic communication channels appropriately to disseminate and translate evaluation projects and outcomes.
Organisational support	Support Research Practice Leaders to lead the evaluation of our health promotion priorities.
Contribute to policy and regulation	Use evaluation outcomes to inform contributions to public health policy processes.

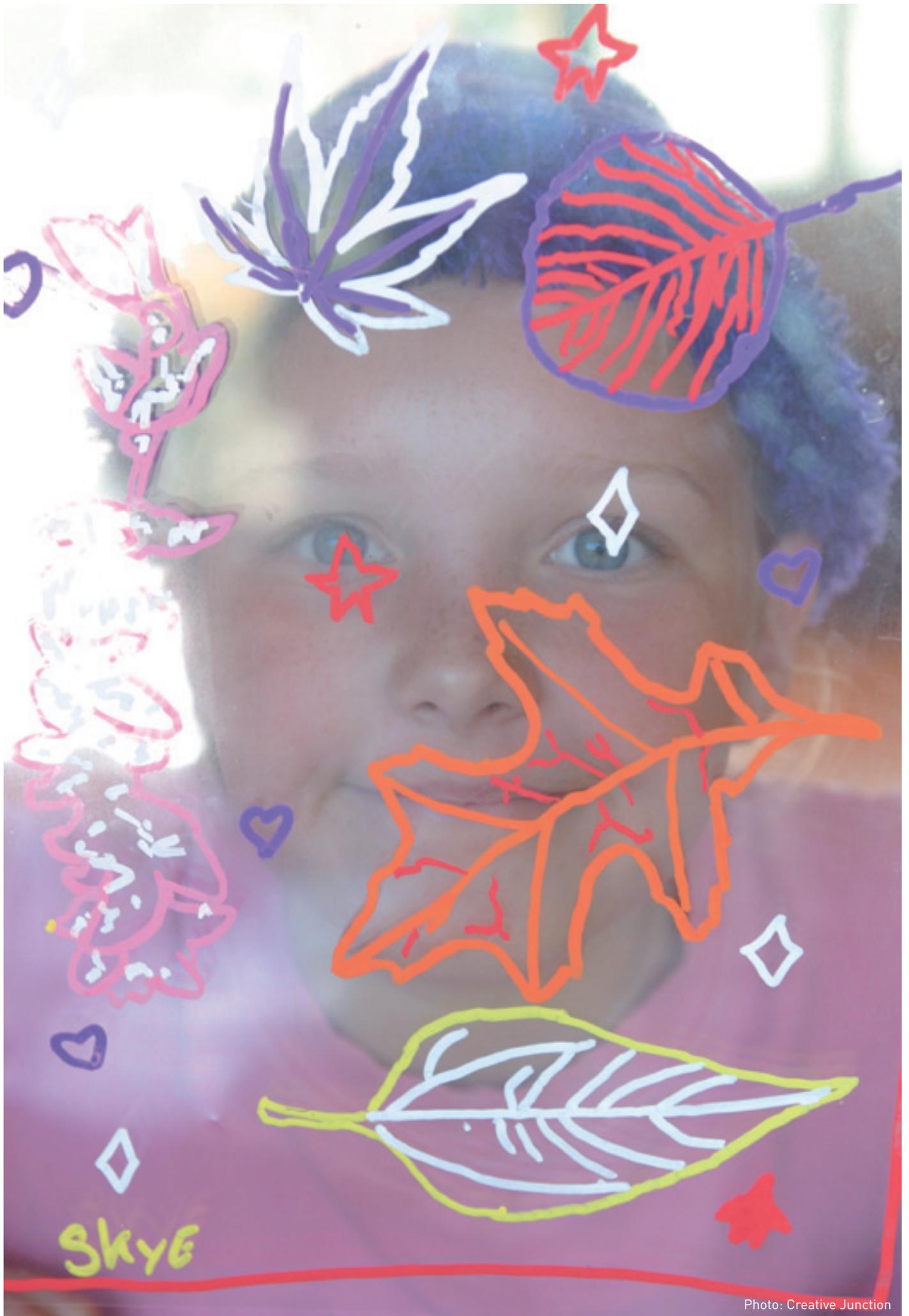


Photo: Creative Junction

KRA 5: Communications

Objective 5.1: Develop, implement and evaluate marketing and communications approaches to improve health

VicHealth recognises the importance of effective marketing and communication to improving health. We focus our communication activity on raising awareness, understanding and support for our strategic priority areas: reducing smoking, improving nutrition, reducing harm from alcohol, increasing physical activity, increasing social and economic participation, and reducing harm from UV exposure.

Over the next four years we will communicate directly with our stakeholders and also partner with other organisations to develop social marketing programs to promote health.

We will provide information and support to enable others to contribute to increasing awareness of our strategic priority areas.

Health promotion action:	Our planned activities:
<p>Communication</p>	<p>Develop a communications strategy identifying key initiatives to raise awareness of strategic priority areas.</p> <p>Incorporate communications strategy, practice and evaluation as a key component of planning and implementation of all VicHealth programs, projects and funded activities to generate greater awareness of the work that is being done across Victoria.</p> <p>Develop a digital strategy to enhance the effectiveness of our communication and marketing activities and to capitalise on emerging engagement opportunities.</p> <p>Implement the appropriate mix of communications tools to inform and engage with key stakeholders.</p> <p>Design and evaluate a social marketing campaign, in collaboration with the Commonwealth Government, to promote the development of respectful relationships between women and men, as part of a program of work for preventing violence against women.</p>
<p>Organisational support</p>	<p>Partner with other organisations to develop programs of social marketing activity across strategic priority areas.</p> <p>Provide media support, advice and training to program partners and funded projects to communicate program objectives and outcomes.</p>

Objective 5.2: Develop evidence on effective social marketing

Health promotion has the opportunity to lead and support the development of evidence-based integrated social marketing across key health action areas.

Over the past two decades, VicHealth’s investments in developing evidence-based approaches to health promotion have contributed to improving the health of Victorians and have been exported nationally and internationally.

Many of the lessons about effective social marketing in tobacco control can be applied to other priority areas.

Over the next four years, VicHealth will undertake further research to enhance our knowledge of effective social marketing in partnership with stakeholders.

Health promotion action:	Our planned activities:
Communication	<p>Synthesise and disseminate knowledge to stakeholders on effective social marketing practices to support them in the development of evidence-based social marketing across strategic priority areas.</p> <p>Support research and evaluation of social marketing across our strategic priority areas.</p> <p>Support a research fellowship in social marketing to build upon evidence-based approaches to social marketing across strategic priority areas.</p>
Organisational support	<p>Actively seek new partnerships to design and evaluate social marketing activities in strategic priority areas.</p>

Objective 5.3: Provide accurate, credible and timely information to stakeholders on health promotion issues

We need to ensure that our stakeholders are kept informed and engaged in the latest health promotion developments and debates, including research, evidence and program development across our strategic priority areas.

Over the next four years we will continue to provide our stakeholders with a credible source of up to date and reliable information.

Health promotion action:	Our planned activities:
<p>Communication</p>	<p>Develop communications strategies for strategic priority areas, incorporating publications, digital media, events and media relations appropriate for target audiences.</p> <p>Engage with VicHealth’s stakeholders to develop timely, accurate and reliable information on VicHealth’s strategic priority areas.</p> <p>Facilitate an ongoing events program including the VicHealth Annual General Meeting and Awards, seminars, conferences and forums to engage and inform stakeholders.</p> <p>Keep target audiences informed through the provision of regular information to mainstream and targeted media outlets through effective and timely media activities.</p> <p>Undertake regular stakeholder feedback and evaluation to ensure that communications activities remain relevant and effective.</p>



Photo: Mark Farrelly

KRA 6: Business operations

Objective 6.1: Ensure effective business and risk processes and systems

Effective processes and systems are central to business sustainability. Embedding a proactive risk management culture provides a platform of stability to our operations.

Over the next four years we will continue the ongoing process of reviewing and refining our operations.

Focus area:	Our planned activities:
<p>Business effectiveness</p>	<p>Ensure the effectiveness of our governance model in its ability to deliver the new strategic plan.</p> <p>Implement a business quality model to drive continuous improvement in our systems and processes.</p> <p>Establish an organisational monitoring and evaluation system to track success against our new strategic plan.</p> <p>Ensure effective finance systems and controls are in place to support our organisation to deliver against our strategic objectives.</p> <p>Continue to develop existing Information and Communications Technology services and leverage our recent investments in information systems to provide a flexible platform to support future business challenges.</p> <p>Review our project, contract and grant management practices and controls to identify and implement areas of improvement.</p> <p>Identify the capabilities and practices required in knowledge management to:</p> <ul style="list-style-type: none"> • support our knowledge production, synthesis and transfer activities • embed knowledge exchange at all levels of our internal and external operations. <p>Review our approach to servicing our stakeholders by:</p> <ul style="list-style-type: none"> • identifying our stakeholder groups and their needs • establishing the processes and systems required to meet their needs • establishing feedback mechanisms with our stakeholders to drive improvements in our service.
<p>Risk and compliance</p>	<p>Maintain compliance with all relevant legislation, financial management and governance regulations.</p> <p>Embed our corporate risk management system at all levels of operation to ensure compliance with the Victorian Government risk management framework, AS/NZS 4360:2004 and any subsequent risk management standards.</p> <p>Develop robust compliance management and reporting systems.</p> <p>Refresh our internal audit plan to identify areas of compliance risk and implement ongoing actions for improvement.</p>

Objective 6.2: Develop high-performing people in a healthy and sustainable work environment

As with any organisation, our people are our most important asset and we need to value their contribution and develop their potential.

As a leader in our sector, VicHealth needs to highlight the benefits of a healthy and sustainable workplace. Over the next four years, we will strive to 'walk the talk' in our own practices to demonstrate the benefits of a healthy, productive and sustainable organisation.

Focus area:	Our planned activities:
Our people	Promote continuous organisational development to achieve excellence in all aspects of our work by developing, implementing and reviewing our: <ul style="list-style-type: none"> • human resources plan for attracting, retaining, rewarding and developing our people • performance appraisal processes for skill development, training and recognition of achievement • innovative leadership practice and effective communication.
A healthy organisation	Embed our new values into our culture and operations. Develop and promote our workplace as an exemplary safe, healthy and productive environment that supports the physical and mental wellbeing of our people. Establish an Environmental Management System to benchmark, monitor and improve our environmental footprint.

Objective 6.3: Operate transparently and with accountability

As a public entity we understand our obligations to operate in a transparent manner. Our reporting structures need to deliver clear and appropriate information to each of our stakeholder audiences. We need to continuously review and improve the fitness for purpose of our financial and operational reporting channels to our stakeholders.

Accountability occurs at all levels of our organisation. We will continue to ensure that everyone understands their roles and responsibilities for both compliance and organisational achievement. Similarly, we will provide our stakeholders with the assurance that we are meeting all of our obligations in an effective manner.

Focus area:	Our planned activities:
Transparency	<p>Embed relevant aspects of the Institute of Chartered Accountant's <i>Enhanced not-for-profit annual and financial reporting</i> into our annual reporting and external reporting structures.</p> <p>Review how we engage with the Department of Human Services and other stakeholders to set up appropriate reporting channels.</p> <p>Using all available media effectively, including digital media, to improve our transparency in reporting.</p>
Accountability	<p>Improve the timeliness and availability of financial and operational data, both internally and externally, to tighten operational accountability.</p>

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December 2009

