Strategic Plan
2013-2018
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INTRODUCTION

This five year Strategic Plan reflects the growth in the PHAA at the same time as it brings new challenges and new areas of work. This is a time for the PHAA to develop public health in a thoughtful and visionary way. The first Strategic Plan was primarily introspective. The second looked to see how public health could be enhanced in Australia without losing the key elements of the first Strategic Plan. This third Strategic Plan looks forward to the most effective ways the Association can support and enhance public health outcomes without undermining those earlier achievements.

The public health challenges continue to be great. Social tensions and upheavals, growing social inequities, erosion of the health of our environment, continued growth in dominance of economic imperatives and mantras, misdirected health services policies and lack of focus on sustaining and building healthy communities. As the leading independent public health association in Australia, we not only have a role but also a responsibility to lead and influence public health discourse and advocacy actions. That said, we are also very modest in size and most of our actions are taken through the voluntary capacities of our members. Thus we need to remain very strategic in how we view our role and where we can exert most influence. This includes supporting members’ actions, working in collaboration with others, taking up key positions of influence and profiling public health in the public arena.

The 2013 – 2018 Strategic Plan outlines the next steps in building on our considerable policy and advocacy work in Australia. As public health issues are not restricted to national boundaries, this Plan also incorporates our contributions to advancing public health within our region and globally.

The PHAA’s Strategic Plan should be considered a guide for public health actions broadly, not just as a blueprint for where the organisation will be directing its efforts. The challenges are common to us all, as is our shared commitment to advancing public health outcomes. Please consider this Plan as one that directs your Association’s actions, including how the PHAA can assist you to effect improvements in public health outcomes within your communities, organisations and networks.

Heather Yeatman
President PHAA

Yvonne Luxford
Vice-President (Development)

Michael Moore
CEO
OVERVIEW

Vision for a healthy population

- A healthy region, a healthy nation, healthy people: Living in a healthy society and a sustaining environment, improving and promoting health for all

PHAA’s Mission

- As the leading public health advocacy group, to drive better health outcomes through health equity and sound, population-based policy and vigorous advocacy

PHAA “Health Equity Statement”

Aims

- Advance a caring, generous and equitable Australian society with particular respect for Aboriginal and Torres Strait Islanders as the first peoples of the nation
- Promote and strengthen public health research, knowledge, training and practice
- Promote a healthy and ecologically sustaining human society across Australia, including tackling global warming, environmental change and a sustainable population
- Promote universally accessible people centred and health promoting primary health care and hospital services that are complemented by health and community workforce training and development
- Promote universal health literacy as part of comprehensive health care
- Support health promoting settings, including the home, as the norm
- Assist other countries in our region to protect the health of their populations, and to advocate for trade policies that enable them to do so.
- Promote the PHAA as a vibrant living model of its vision and aims

Guiding elements

- Provide population health leadership
- Tackle the reduction of inequities
- Focus on determinants of health
- Focus on Primary prevention

- Priority settings for home school health and urban
- Rely on science, evidence and best practice
- Develop partnerships for shared responsibility
- Priority on structural change

- Goals

1.1 Strengthen PHAA Advocacy
1.2 Promote a Population Health Approach
1.3 Strengthen Capacity and Public Health Understanding
1.4 Address PHAA Policy Priorities

2.1 Build International Networks and Capacity
2.2 Strengthen the PHAA
2.3 Profile Public Health

3.1 Build PHAA’s strategic and operational capability to continue to be an effective and efficient health advocacy organisation

4.1 Build PHAA’s capability in research, evaluation and knowledge translation

Building PHAA

- Use PHAA Branches, Special Interest Groups, members and our networks to ensure opportunities for growth, capacity and participation
- Retain consistency with WPHIA Strategy, strengthen the relationship at global and regional level, implement PHAA Equity plan

Aims

- Advance a caring, generous and equitable Australian society with particular respect for Aboriginal and Torres Strait Islanders as the first peoples of the nation
- Promote and strengthen public health research, knowledge, training and practice
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- Promote the PHAA as a vibrant living model of its vision and aims
PHAA Strategic Plan Goals
Seeking better and more equitable health outcomes

1.1 Advocacy for PHAA priorities
- Setting policy agenda, development, submissions etc
- Build networks, media presence
- Build relationships to influence governments
  - Political spectrum, submissions, advice
- Health equity, literacy, risk factors, diseases, conditions, workforce,

1.4 Setting PHAA priorities
- Population health leadership
  - Equity – PHAA Health Equity Values
  - Statement
  - Aboriginal and Torres Strait Islanders
  - Determinants of health and primary prevention
  - Structural change and key settings
  - Partnerships for shared responsibility

1.2 A Population Health Approach
- Actions build on PHAA policies and principles
  - Remain vibrant and updated

1.3 Building capacity and understanding
- Conferences run successfully
  - Branches and SIGs
    - Branches and SIGs vibrant
    - Mentoring systems established
  - ANZJPH, bulletins, website, social media optimal
  - Appropriate recognition through awards

2.2 Strengthen the PHAA
- World Federation of Public Health Associations
  - WFPHA Conferences “PH4 Equity” Plan
  - Support PHERT and PHRAG
  - Support members and member services
  - Registration & accreditation processes
  - Population Health Partners & other Networks
  - AHCRA, NAAA, SDOHA, CAHA

2.1 International
- Action TPPA and international treaties
- Participate in WFPHA conferences, publications, meetings
- Build WFPHA relationships world and region
  - President, Geneva, other PH Associations
  - Seek to run 2017 WFPHA Congress in Melbourne
- Build workforce programs with WFPHA as appropriate

1.5 PHAA operations
- Build PHAA Profile – including Branches and SIGs
- Membership growth by 100 per year to 2500 in 2018
- Continuously strengthen the Association
  - Good governance
  - Sound financial management
Part 1 – CONSOLIDATION OF PHAA ACHIEVEMENTS

Goal 1.1 - Advocacy for PHAA Priorities
The members of the PHAA expect to have influence. Currently governments around Australia spend about 2% of the health budget on prevention according to the Australian Institute of Health and Welfare (AIHW). This is just one indicator that public health is not taken seriously enough by government when very few Australians would argue against the notion that ‘prevention is better than cure’. The PHAA has already illustrated how leadership in the area of advocacy can have a significant impact in influencing policy by appropriate contact with politicians, government, media and other influential groups. A key element will be advocacy to better fund and support public health practice, policy and research. The PHAA will consolidate and build its advocacy, especially through the Branches and SIGS, and through building capacity amongst emerging public health leaders.

1.1 Reporting indicators: PHAA advocacy
- Strength of the relationships with networks
- PHAA agenda set through and reflected in actions of National Office, SIGs and Branches
- Relationships with governments – submissions; expert committees
- Media presence and strong profile

Goal 1.2 - Promote a Population Health Approach
A significant strength of the PHAA is its clear aims and principles, which are reflected in the policies of the organisation. A population health approach will continue to be promoted to politicians, governments and the broader community through the appropriate development of policies and supported by advocacy. In ensuring an appropriate population health approach the PHAA will encourage a systems approach to building healthier communities and ensuring there is a focus on appropriate settings. The approach will also draw on the PHAA Health Equity Values Statement from the Constitution and place specific focus on vulnerable groups such as Aboriginal and Torres Strait Islander peoples, socio-economically disadvantaged groups and people from culturally and linguistically diverse backgrounds. Adopt opportunities to build a population health approach through partnerships such as that with the Australian Health Promotion Association, the Australasian Epidemiological Association and the Australasian Faculty of Public Health Medicine (Population Health Congress Partners).

1.2 Reporting indicators: Population Health Approach
- Submissions that reflect and support PHAA principles/policies
- Collaborate with networks such as Pop Health Congress partners
- Policy base remains vibrant and contemporaneous
- Submissions and actions advocate social equity
- PHAA action taken within a ‘settings’ context
Goal 1.3 - Strengthen Capacity in Public Health

In increasing the power of the PHAA to influence health outcomes it remains important to build the capacity of the organisation and the public health community. In order to achieve this, the PHAA will continue to run at least three national conferences each year. Additionally, from time to time there will be seminars and symposia that address specific issues. The National Office, Branches and SIGs will create opportunities to mentor early career public health professionals. These mentoring opportunities will build on formal and informal networks. As part of the capacity building and mentoring efforts, Branches and SIGs will seek and foster opportunities to work together, and separately, to conduct seminars and symposia. The PHAA website will be developed further to encourage capacity building through appropriate use of emerging social media capability as well as managing a public health knowledge base – particularly for information gathered through conferences and seminars. Similarly, PHAA will continue to provide and further develop publications to its members and networks. The Australian New Zealand Journal of Public Health (ANZJPH) will be maintained and further efforts made to ensure widespread dissemination of the information. The PHAA also will maintain and expand its awards system as part of its capacity building and acknowledgement actions.

1.3 Reporting indicators: Capacity Building and understanding of public health

- Conferences run successfully
- Branches and Special Interest Groups (SIGs)
  - Branches and SIGs vibrant and actively contributing
  - Mentoring systems established
  - Website and social media operational
- Journal strengthens Impact Factor and readership
- Appropriate recognition through awards

Goal 1.4 - Address PHAA Policy Priorities

The Board will maintain an overview of the PHAA policy priorities in consultation with the Branches, Special Interest Groups and the National Office. The social and environmental determinants of health will underpin all of the policies. The SIGs have a major role to play in ensuring that their policies remain up to date and new matters are raised. The SIGs may also influence the Executive and the National Office from time to time to ensure their issues become part of any current advocacy action. Health literacy, risk factors and action to be taken on communicable diseases may form an umbrella for actions to be taken by members of the PHAA, SIGs, Branches and National Office. The PHAA consider application population health approaches in new areas – for example regarding death and palliative care. The issue of setting the priorities for the PHAA should, where possible, be an agenda item for face to face combined meetings of the Branches, SIGs and Board of the PHAA and provide guidance for the National Office in its media and advocacy endeavours.

1.4 Reporting indicators: PHAA Priorities

- Implementation of priorities agreed by Board
- Determinants of Health in submissions, media releases and other action
- Health literacy policies established and disseminated
- Action (media, submissions, conferences, networking) taken on
  - Risk factors - tobacco, alcohol, unhealthy food and weight, injury etc
  - Diseases and conditions
Goal 1.5 - Continue to develop PHAA Operations

The profile of the PHAA has increased since the adoption of the first Strategic Plan in 2008. However, there is more that can be done to increase the PHAA profile. This includes working with Branches and SIGs to encourage advocacy and to grow the membership. A fundamental part of the ongoing success of the PHAA is sound financial management. The Board will ensure appropriate revenue and expenditures in each of the budgets and there will be ongoing efforts to identify new sources of funds. With good governance goes a greater level of trust for non-government organisations and so the Board will ensure appropriate checks and balances are in place across PHAA operations. It is also important for PHAA to grow its relationships with close partners such as the Population Health Congress partners (AHPA, AEA and AFPHM) and other networks such as AHCRA, NAAA and SDOHA. The PHAA through the Board, National Office, the Branches, SIGs will use processes of continuous improvement. Reporting against the Strategic Plan will be regularly to the Board and on an annual basis to members through the Annual Report of the Association.

1.5 Reporting indicators: PHAA operations

- PHAA Profile strong – including Branches and SIGs
- Membership growth by 100 per year to 2500 in 2018
- Areas for improvement in operations identified and tackled
- Good governance
  - Sound financial management – unqualified audit reports continue
  - Appropriate checks and balances
- Process of continuously strengthening the association
- The PHAA will report to the members each year through the Annual Reports

PHAA President Heather Yeatman with Hon Nicola Roxon, PHAA CEO Michael Moore and Past President Mike Daube
Part 2 – THE NEXT STEPS

Goal 2.1 – Build International Networks and Capacity
The focus of the PHAA in the first Strategic Plan was internal – getting our own house in order. In the Second Strategic Plan the Association looked outward to ensure that influence was brought on government and the community to ensure better health outcomes. It is now important for the PHAA to look beyond Australia to improve health outcomes. This is nowhere more obviously illustrated than to look at how Big Tobacco is attempting to use Australia’s treaty obligations to override our sovereignty and undermine legislation that is clearly in the public interest. By playing an active and engaged role with the World Federation of Public Health Associations (WFPHA) the PHAA can both expand its own international influence, and develop broader partnerships and networks and, where appropriate, include other Australian organisations. This is especially applicable in the region. It is important for PHAA to work with other organisations, such as AusAid, the International Union for Health Promotion and Education (IUHPE) and the People’s Health Movement, to develop this strategic international direction.

Goal 2.2 - Strengthen the PHAA
By developing the public health workforce, the PHAA will be strengthening its own organisation as well as the public health community. The PHAA should examine the ramifications of building a workforce accreditation and registration system based on core competencies only to be implemented if supported at a general meeting of the Association. To do this the PHAA should work very closely with AHPA, the Council of Academic Public Health Institutions Australia (CAPHIA) as well as the WFPHA. Building knowledge and understanding of the professional nature of the public health workforce amongst local government, State and Territory governments and the Commonwealth will need to go hand in glove with any registration/accreditation scheme. The PHAA is stronger and more flexible because of the Public Health Research Advisory Group (PHRAG) and the tax deductible arm of the Association the Public Health Education and Research Trust (PHERT).
Goal 2.3 – Improve Public Health Profile
At the same time as building the Association, the PHAA must also take action to build the profile of public health. The current average spending of around 2% of health budgets on prevention (AIHW) reflects that the community does not understand or value public health interventions and programs. They are largely taken for granted. Building understanding of public health as a central tenet of Primary Health Care and ensuring the adoption of Health in All policies will have a major long term impact on health outcomes in our community. The challenge for the Board, Branches, SIGs and National Office is to get the message out to our own members, to the media and direct to the general public. The approach may be enhanced by working closely with key partners such as the Population Health Congress Partners. This will require a concerted effort in those areas with stronger focus on the importance of public health around election times in each State and Territory. One way of building this is to use scorecards to assess the public health efforts of governments. Part of the concerted effort for the PHAA will rely on effective social media being deployed to build the profile of public health, with the side benefit of building the profile of the PHAA.

CONCLUSION

The ideas, goals and aspirations are detailed in this 2013-2018 Strategic Plan. It is now up to the members, the Branches, the Special Interest Groups, the National Office and the Board to ensure they are familiar with the Plan so they can ask what role they can play to ensure its most effective implementation.

In this way the Public Health Association of Australia can provide more effective influence on improving health outcomes of all Australians as well as our neighbours in the Asia Pacific region.

The next step is to provide a sound Implementation Plan. The structure of the Implementation Plan 2013-2018 will include a table as set out below. It will also include a much more detailed view of the issues set out in broad terms by the Strategic Plan 2013-2018. Responses to each element of the Strategic Plan and the Implementation Plan will be reported on by the CEO and the National Office as well as Branches and SIGs and regularly at meetings of the Board. The Annual Report, which is the formal instrument for reporting to the members, will be structured to report against the goals of the Strategic Plan as executed through the Implementation plan.

<table>
<thead>
<tr>
<th>2.3 Reporting indicators: Profile public health</th>
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<tbody>
<tr>
<td>✗ Advocacy for adoption of Health in all policies approaches by governments</td>
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<tr>
<td>✗ Apply innovative ways of disseminating the message</td>
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<tr>
<td>✗ Scorecards of public health action and impact, used appropriately</td>
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<tr>
<td>✗ Intouch, Roundup, Bulletin contribute to understanding of public health</td>
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<tr>
<td>✗ Effective use of social media</td>
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</tbody>
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IMPLEMENTATION PLAN
The implementation plan will INCLUDE a format similar to the following and will be developed by the National Office for consideration by the Board, Branches and SIGs.

<table>
<thead>
<tr>
<th>GOAL</th>
<th>TASK</th>
<th>TIMING</th>
<th>ACTIONS</th>
<th>RESPONSIBILITY</th>
<th>RESOURCES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Advocacy for PHAA Priorities</td>
<td>Year 1 Year 2 Year 3 Year 4 Year 5</td>
<td>Media</td>
<td>No Board SIG Branch</td>
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<tr>
<td>1.2</td>
<td>Population Health Approach</td>
<td>Year 1 Year 2 Year 3 Year 4 Year 5</td>
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<tr>
<td>1.3</td>
<td>Strengthen Capacity in Public Health</td>
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<td>1.4</td>
<td>PHAA Priorities</td>
<td>Year 1 Year 2 Year 3 Year 4 Year 5</td>
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<td>1.5</td>
<td>PHAA Operations</td>
<td>Year 1 Year 2 Year 3 Year 4 Year 5</td>
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<td>2.1</td>
<td>International</td>
<td>Year 1 Year 2 Year 3 Year 4 Year 5</td>
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<td>2.2</td>
<td>Strengthen PHAA</td>
<td>Year 1 Year 2 Year 3 Year 4 Year 5</td>
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<td>2.3</td>
<td>Improve Public Health Profile</td>
<td>Year 1 Year 2 Year 3 Year 4 Year 5</td>
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