Public Health Association of Australia
submission on Establishing a National
Action Plan for the Health of Children and
Young People: 2020 to 2030

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PHAA submission on Establishing a National Action Plan on the Health of Children and Young People: 2020 to 2030

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Preamble

The Public Health Association of Australia

The Public Health Association of Australia (PHAA) is recognised as the principal non-government organisation for public health in Australia working to promote the health and well-being of all Australians. It is the pre-eminent voice for the public’s health in Australia.

The PHAA works to ensure that the public’s health is improved through sustained and determined efforts of the Board, the National Office, the State and Territory Branches, the Special Interest Groups and members.

The efforts of the PHAA are enhanced by our vision for a healthy Australia and by engaging with like-minded stakeholders in order to build coalitions of interest that influence public opinion, the media, political parties and governments.

Health is a human right, a vital resource for everyday life, and key factor in sustainability. Health equity and inequity do not exist in isolation from the conditions that underpin people’s health. The health status of all people is impacted by the social, cultural, political, environmental and economic determinants of health. Specific focus on these determinants is necessary to reduce the unfair and unjust effects of conditions of living that cause poor health and disease. These determinants underpin the strategic direction of the Association.

All members of the Association are committed to better health outcomes based on these principles.

Vision for a healthy population

A healthy region, a healthy nation, healthy people: living in an equitable society underpinned by a well-functioning ecosystem and a healthy environment, improving and promoting health for all.

The reduction of social and health inequities should be an over-arching goal of national policy and recognised as a key measure of our progress as a society. All public health activities and related government policy should be directed towards reducing social and health inequity nationally and, where possible, internationally.

Mission for the Public Health Association of Australia

As the leading national peak body for public health representation and advocacy, to drive better health outcomes through increased knowledge, better access and equity, evidence informed policy and effective population-based practice in public health.
PHAA Response to the consultation paper

Structure of the Action Plan

Is the overall structure of the Action Plan appropriate and easy to follow? Yes/No and why? (200 words)

The structure is clear in the strategy overview.

Do the sections: About the Action Plan and the Action Plan in context provide adequate context and background for the Action Plan? Yes/No and why? (200 words)

On page 10, the paragraph about health literacy could be reworded to reflect contemporary understanding that health literacy is both a combination of an individual’s skills and abilities and the healthcare context (see WHO definition, and the Aust fed govt policy on health literacy).

The section on ‘Improving health equity for children and young people’ could better reflect the needs of marginalised young people’s health system navigation. Strategies, in addition to those listed, include increasing young people’s awareness of the health system and providing navigation support.

Priority areas

Do you agree with the priority areas identified for the Action Plan? Yes/no and why? (200 words)

The priorities are appropriate, however could do better to reflect support for young people, especially marginalised young people who may have disengaged from families. Among priority groups, homeless children and young people should be added to the Out of home care group.

The Action Plan could better address the need for across sector collaboration – for example a health and wellbeing in all policies approach across government.

Priority area 1: Enhance services for rural and remote areas. Noting that further actions and activities may be determined as the Action Plan is operationalised, are the initial actions and activities specified for Priority area 1 appropriate? Yes/no and why? (200 words)

Enhancing services for rural and remote areas is essential and welcome, but community led solutions to complex problems such as community wellbeing and youth suicide also need to be supported.

Priority area 2: Expand support for families, especially families living with adversity. Noting that further actions and activities may be determined as the Action Plan is operationalised, are the initial actions and activities specified for Priority area 2 appropriate? Yes/no and why? (200 words)

With a focus on families and young children this Action Plan may exclude marginalised young people, who have disengaged from family, particularly those who are homeless, including gender and sexuality diverse young people. There is clear evidence that gender and sexuality diverse young people are at serious and ongoing risk for poor mental health and wellbeing. They should be recognised as a priority group with policies developed to support them.

Access to safe housing is a critical issue for young people in both urban and rural areas. Additional support for youth leaving out-of-home care is also urgently needed.
Priority area 3: Increase investment in research, policy and practice translation. Noting that further actions and activities may be determined as the Action Plan is operationalised, are the initial actions and activities specified for Priority area 3 appropriate? Yes/no and why? (200 words)

School-based programs to build resilience and positive mental health are required. Anti-bullying programs at different levels for primary and secondary schools should be continued and enhanced.

National leadership on child and youth suicide is urgently needed. In 2017, 21 children between the ages of 5-14 took their own lives, and 77 children aged between 15-17 years. Particular attention is needed for suicide among Aboriginal and Torres Strait Islander young people, who are at increased risk and need programs which are developed and implemented through Indigenous leadership and in partnership with local communities.

Priority area 4: Commit to nationally consistent data collection. Noting that further actions and activities may be determined as the Action Plan is operationalised, are the initial actions and activities specified for Priority area 4 appropriate? Yes/no and why? (200 words)

The Action plan mentions child health headline indicators. It needs to add National Youth Information Framework (NYIF) indicators.

Overall comments

PHAA commends the collaboration with children, young people and families through the proposed Youth Health Forum. Continual engagement with children and young families will encourage an inclusive and collaborative approach.

PHAA supports the National Action Plan but notes that there needs to be a clear mechanism for engagement across government. The draft lacks detail on governance, monitoring and evaluation – factors which will be essential to its demonstrable success. Timelines, responsibilities and reporting requirements should be clearly outlined.

The PHAA appreciates the opportunity to make this submission and the opportunity to contribute to the National Action Plan for the Health of Children and Young People 2020-2030.

Please do not hesitate to contact us should you require additional information or have any queries in relation to this submission.

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PHAA Child Health Special Interest Group

28 March 2019
References

3. Ferfolja T, Asquith NL, Brady B, Hanckel B. Diversity and safety on campus @ Western. Sydney; 2018.