



Public Health Association
AUSTRALIA

Public Health Association of Australia submission on Health and Wellbeing Queensland Bill 2019

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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.



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AUSTRALIA

Introduction

PHAA welcomes the opportunity to provide input to the Health and Wellbeing Queensland Bill 2019.

The PHAA provided a submission to the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee Inquiry into the Healthy Futures Commission Queensland Bill 2017, which may be found on our website [here](#). In that submission, PHAA recommended that the focus be population-wide rather than restricted to children and families; take a holistic view of health rather than being focused on obesity; clearly include addressing social determinants of health as a core function; and be adequately funded.

We are pleased that these recommendations appear to be reflected in the current Bill, and commend the Queensland Government.

The Bill

The stated objective of the Bill is to establish a health promotion agency, to be known as Health and Wellbeing Queensland (HWQ), as a statutory body.

HWQ will contribute to:

- Improving the health and wellbeing of Queenslanders;
- Reducing the risk factors associated with chronic disease; and
- Reducing health inequalities

The Bill also amends the *Hospital Foundations Act 2018* to enable the establishment of a foundation to support HWQ in achieving its objectives.

The Bill is part of a response to *The health of Queenslanders 2018, Report of the Chief Health Officer Queensland*, which identified continuing public health challenges including obesity, chronic disease burden, disparities for Aboriginal and Torres Strait Islander people and the adverse effect of socioeconomic factors; and to election commitments from the 2017 Queensland election.

There have been calls for a health promotion commission in Queensland since the 2015 Parliamentary Inquiry, which recommended that an agency be established but could not agree on a model. In May 2017 the Healthy Futures Commission Queensland Bill 2017 was introduced to the Legislative Assembly but lapsed when the Queensland Parliament was dissolved prior to the 2017 election. The 2017 Bill was the subject of an Inquiry by the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee of the Legislative Assembly, and the submissions to that Inquiry, along with its reports, were used to develop the model for HWQ.

HWQ is intended to take a multi-strategy, multi-sector approach to enable illness prevention and health promotion activities to be implemented across portfolios. It will invest in innovative projects generated by local community partnerships to create environments that support health and wellbeing, using flexible funding models to source private and non-government revenue streams such as corporate partnerships and sponsorships.

This will include supporting activities to address the social determinants of health such as education, employment, housing, socioeconomic status and other environmental and societal factors that influence individual and community health and wellbeing.

The stated core functions of the HWQ are to:

- Facilitate and commission activities to prevent illness or promote health and wellbeing
- Develop partnerships and collaborate across government and with entities such as businesses, industry organisations, community organisations, academia, local governments and individuals, to further its objective or carry out its functions
- Give grants for activities to prevent illness or promote health and wellbeing
- Develop policy, and advise the Minister and government entities, about illness prevention or promotion of health and wellbeing
- Coordinate the exchange of information about activities to prevent illness or promote health and wellbeing

The Board will be appointed by the Governor in Council for periods of up to 4 years, and be responsible to the Minister. It will comprise up to 10 members, including up to four chief executives of government departments. The remaining members will be persons with knowledge, skills or experience in business or financial management, law, public health, academia, community service organisations, the not-for-profit sector or other areas considered relevant by the Minister. At least one person on the Board will be an Aboriginal or Torres Strait Islander person.

The initial operating budget of HWQ will be \$32.955 million in 2019-20. Existing prevention activities delivered by Queensland Health will transition to HWQ to deliver.

PHAA Response to the Bill

The scope of the bill

The PHAA commends the Queensland government on the expanded scope of HWQ, in comparison with the narrower 2017 model, both in terms of its scope being population-wide rather than restricted to children and families and, that HWQ will address chronic disease more broadly rather than a focus on obesity alone. A population-wide approach is more consistent with the need to address risk factors throughout the life course and across generations.¹

Similarly, the PHAA commends the Queensland Government for its focus on addressing inequities both of access and of outcomes, and recognition of the need to address social determinants of health.

Collaboration across sectors

Commitment to collaborate across sectors

The PHAA strongly supports the proposed HWQ functions to develop partnerships and collaborate both across government and with entities such as businesses, industry organisations, community organisations, academia and local governments, and as indicated at the 13th March 2019 HWQ public briefing, the commitment to broader engagement of stakeholder groups and flexible cross-sectoral relationships and partnerships.

Intersectoral action for health² and the notion of collaborative advantage³ have long underpinned health promotion and public health practice, and in order to make continuous incremental improvements toward the overall goals of reducing chronic disease, reducing health inequity and increasing the number of

Queenslanders with a healthy body weight by 10% (by 2026), a health-in-all policies approach and cross-sector partnerships will be needed (per [2017 PHAA submission](#)).

Status of HWQ

HWQ policy development role

The PHAA notes that as a statutory body, HWQ will be responsible to the Health Minister and be of a status equivalent to a Hospital and Health Service Board.

The PHAA supports the role of HWQ in developing policy and advising the Minister and government agencies about preventing illness and promoting health and wellbeing. We see value in giving voice to health promotion and aiming to influence policy, and policy implementation, in other sectors. Without action involving other sectors, the goals of the HWQ are unlikely to be attained.

Government investment in health has positive benefits not only for population health, but for the economy as a whole.⁴ However, although approximately one third of chronic disease that affects the population is considered preventable, in Australia less than 2% of health expenditure is dedicated to prevention,⁵ rendering it a marginal activity. Given this status of prevention activities, the process of obtaining and maintaining buy-in from sectors outside of health will require careful and sustained monitoring and facilitation, strong leadership and ongoing advocacy for the HWQ.^{3,6}

Evidence from other jurisdictions suggests that even in environments with an historically strong commitment to health promotion, key foundations for cross-sectoral health promotion can be eroded over time.⁷ Therefore it is important to monitor impact⁸ and get some early runs on the board, for example by considering a balance between strategies that offer a return on investment and cost-effectiveness.⁹

The Composition of the Board and the Community Voice

The Composition of the Board

The PHAA commends the decision to include at least one Aboriginal person or a Torres Strait Islander person on the HWQ board. A gender equity requirement should also be considered, in which case the composition of the board should be mandated to include at least one woman.

Community voice

The PHAA commends the Queensland Government on its commitment to including the 'community voice' in the work of the HWQ. Engagement with citizen groups is a promising approach for addressing health inequities.¹⁰ The inclusion of consumer/citizen representation within governance structures of the HWQ should also be considered.

The PHAA would willingly provide a representative to the Board if that was considered appropriate.

Funds allocated to grants

The new bill does not provide an indication of the proportion of the overall budget that will be made up of grants paid in a financial year. The PHAA recognises the complexity associated with staff redeployment and salary reallocation processes and note that, per the 13th March 2019 HWQ public briefing, salaries plus administrative and associated costs will make up approximately 20% of overall funds.

For transparency and accountability purposes for HWQ to demonstrate meeting its core functions, it would be preferable for the Bill to stipulate a minimum proportion of the funding to be committed to grants, and to other and existing prevention activities.

Conclusion

PHAA supports the broad directions of the Health and Wellbeing Queensland Bill 2019, and commends the Queensland government for expanding the scope and clearly outlining a focus on the social determinants of health. However, we are keen to ensure effective implementation in line with this submission. We are particularly keen that the following points are highlighted:

- Monitoring and evaluation will be key to maintaining support
- Board positions to ensure gender diversity and representation of consumer voice should be designated
- For transparency and accountability, the Bill should stipulate the proportion of funding allocated to grants, and other prevention activities

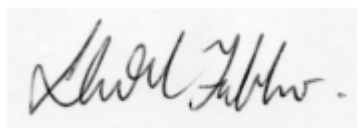
The PHAA appreciates the opportunity to make this submission and the opportunity to contribute to the development of the Health and Wellbeing Queensland agency.

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



Terry Slevin
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20 March 2019



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