



Queensland University of Technology

Faculty of Health

School of Public Health and Social Work

Victoria Park Road

Kelvin Grove Qld 4059 Australia

Phone +61 7 3138 5879 Fax +61 7 3138 3369

qut.phsw@qut.edu.au

www.hlth.qut.edu.au/ph

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Submission to Queensland Parliament Health and Ambulance Services Committee

Personal Health Promotion Interventions using Telephone and Web-based Technologies

To whom it may concern,

Thank you for the opportunity to respond to the call for submissions into personal health promotion interventions using telephone and web-based technologies.

The School of Public Health and Social Work at the Queensland University of Technology is one of the foremost research active health promotion University departments in the state. Its researchers and academic staff have considerable expertise in identifying health concerns of the Queensland population, describing these in an epidemiologically sound way, and deriving and testing interventions to alleviate these health concerns.

Our particular expertise lies in interventions which increase physical activity, including for mothers of babies and patients who receive treatment for cancer or are in the subsequent survivorship phase after active treatment, or suffer from lymphoedema, and for people at risk of skin cancer. Over the past decade, several of these interventions were successfully delivered via telephone or web-based technologies and the researchers have published original research findings as well as highly cited research reviews which provide in-depth insight. These interventions and their evaluation were most commonly funded by the relevant national or state research agencies including the NHMRC, Cancer Australia, The Cancer Council Queensland, or Health Promotion Queensland.

Some key points reiterated from these research findings (we added the e-prints link to key publications published in peer reviewed journals for further reference by the committee in the reference list):

- Health promotion interventions can be delivered safely and efficiently via telephone or web-based technologies;
- Such interventions are comparable in their effectiveness to face-to-face interventions;
- Telephone or web-delivered interventions provide a means to reach at-risk or vulnerable populations such as those located in regional or rural areas of Queensland, or those unable to reach a health care provider due to limitations in their own mobility or absence of suitably qualified health professionals in their area;
- The effect size achieved by such interventions is commonly in the medium range;

- Stringent evaluations are needed for each individual health promotion program, as unintended or unexpected effects may occur;
- In settings where the interventions are delivered via an authority rather than via individual enrolment (for example within workplaces) care must be taken to not place undue pressure on people to join a program against their free will;
- As with any intervention, there is potential to miss at-risk groups, for example those without access to telephone or internet; those with limited hearing or those with limited reading abilities and care must be taken to ascertain access for such subgroups of the population.

While these research findings are promising and point to significant quality of life gains and potential for cost savings for the Queensland population, there has been a drought in relevant state funding for this high quality research or collaborations between Universities, not-for-profit organisations and relevant government agencies in the past few years, largely due to the absence of any research funding for health promotion since the closure of Health Promotion Queensland. Given the high quality, world-class and world-leading research that has been produced in Queensland there is considerable scope for reigniting collaboration and cooperation between Universities, government agencies, research institutions, community organisations and the business sector to improve the health of Queenslanders through such telephone and web-delivered interventions.

Please do not hesitate to contact me with any further questions on (07) [REDACTED] during business hours or by email [REDACTED]

Yours Sincerely



Prof MaryLou Fleming
Head, School of Public Health and Social Work,
QUT



Associate Professor Monika Janda
IHBI Theme Leader - Health Determinants and
Health Systems | School of Public Health and
Social Work, QUT

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