



# Public Health Association

## A U S T R A L I A

# Strategic Plan 2021-25

(Adopted April 2021)



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## FOREWORD

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In the midst of a global pandemic, the enduring role of public health professionals has been both critical and visible.

Public health has a population focus, whereas health care begins with an individual. A good health system incorporates both these perspectives, and their overlap at a community level.

Public health aims to maximise the overall level of health and wellbeing in a community, while ensuring that no-one or no group is left behind.

It does this in three main ways: promoting health in the community; preventing disease before it occurs; and managing a wide variety of risks, whether natural or man-made.

It acknowledges and addresses the many determinants of health - social, economic, environmental and commercial – and is therefore inherently multidisciplinary.

Our national public health association has a key role in supporting and linking the efforts of our members, in policy, practice and advocacy. We organise ourselves through state and territory branches, and a range of special interest groups, supported by our national office and board.

Our focus is not just on Australian residents and citizens, but extends to our regional neighbours. We see our wellbeing as connected to the global community, including those people fleeing violence and poverty, and seeking refuge and asylum in Australia. As COVID-19 has taught us, none of us are safe unless all of us are safe.

PHAA has a specific commitment to the health of Aboriginal and Torres Strait Islander peoples, who collectively endure the worst health and wellbeing outcomes in our nation. Our commitment to Reconciliation is documented in our PHAA Reconciliation Action Plan, which should be read in conjunction with this strategic plan.

Finally, we accept the criticality of climate action in the next decade, and we commit to leading by example and working with other organisations to effect society-wide change.

We will need to be agile in the face of a rapidly changing context for public health action over the next five years, as we emerge from the COVID-19 pandemic with clear choices as to the direction for recovery – more of the same that got us to this point, or a fundamental rethink about who and what we value. We trust this strategic plan will guide our members and our organisation to follow a clear direction and achieve outcomes for the good of all.



Tarun Weeramanthri  
President

## The Objects of the Association

*[Adopted in 2001]*

- 1 To make a strong contribution to public health policy by –
  - (a) advocating for the reduction in health inequality across the Australian and international communities *[para added in 2006]*
  - (b) encouraging research and promoting knowledge relating to the problems, needs and development of public health, which may include study in the following areas:
    - (i) the distribution, determinants and significance of health, sickness and disabilities in communities
    - (ii) the social, behavioural and biological sciences in relation to health and disease
    - (iii) the impact of the physical and social environment on health, and the prevention and control of disease
    - (iv) the economic, social and personal resources required for the optimum health of individuals
    - (v) the health problems and needs of the community, and the distribution and utilisation of health resources
    - (vi) the structure and organisation, and function, planning and management of health services and health information systems
    - (vii) the causes and likely remedies for a reduction of social and economic inequities in health status, especially the inequities between Indigenous and Non-Indigenous populations
    - (viii) to advocate for the safeguarding of health via protection of the planetary ecological systems that support life and human civilisation *[item added in 2016]*
  - (c) promoting and providing a forum for the regular exchange of views and information, and developing policies, in relation to the areas set out in (b) above;
  - (d) promoting the development and education of workers engaged in these areas;
  - (e) promoting excellence in public health practice; and
  - (f) advocating the objects and policies of the Association.

- 2 To support the following Health Equity Values Statement *[added in 2012]*:
  - (a) Health is a human right, a vital resource for everyday life, and a key factor in sustainability. Health equity and inequity do not exist in isolation from the conditions of society that underpin people's health. The health status of all people is impacted by the social, 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.
  - (b) Equity in health, whether nationally or internationally, is about eliminating unnecessary, avoidable, and preventable health differences among and between population groups and communities. Social position is directly correlated with health, resulting in a 'social-health gradient' that affects all parts of society. The widening gap across the social gradient is of increasing concern. Health inequities are underpinned by social inequities and are understood primarily at the level of populations rather than individuals.
  - (c) The PHAA believes that systematic differences in social equity and health impose a growing threat to the fabric of Australian society, to productivity and our sense of fairness. Health is created by universal quality health care but is primarily produced in families, schools and workplaces, in playgrounds and parks, in the air we breathe, the water we drink, and the food we eat
  - (d) The PHAA will act, and call for action, to address the social determinants of health in a concerted manner at all levels of government and by all relevant sectors and stakeholders. Together it is our responsibility to strengthen prevention and health promotion to focus on social deprivation and health inequities.
- 3 To support the following Ecosystem and Health Values Statement *[added in 2016]*:
  - (a) PHAA recognises the foundational role of the Earth's ecosystems to human civilisation, prosperity, health and wellbeing, the nature of humanity's inextricable relationships with the ecosystem of which we are a part;
  - (b) PHAA recognises, in this context, that these ecological determinants of health (an Eco-social viewpoint) are entwined with health and wellbeing along with socially determined influences;
  - (c) PHAA will act and call for action for the promotion and protection of the health of the ecosystems in a concerted manner in its policy development and implementation.

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## VISION

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PHAA members want to see a healthy population, a healthy nation and a healthy world, with all people living in an equitable society, underpinned by a well-functioning ecosystem and a healthy environment.

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## MISSION

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PHAA members will work to promote 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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## GOALS

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During the life of this Strategy, we have the following goals for our community:

Public health ideas	Effective promotion of public health thinking, health equity values and ecosystem and health values, driven by evidence-based research and policy.
Public health action	Growth in investment in public and preventive health programs, public health research, the public health workforce, and our national public health capacity.
Equity and equality	Continual reduction of social and economic health inequities and inequality.
Climate and health	An effective response to climate change and its impact on planetary and human health.
Reconciliation and health	A successful Reconciliation process among all Australians, and improved health to close the gaps for Aboriginal and Torres Strait Islander people.

PHAA also supports the globally relevant United Nations Sustainable Development Goals (SDGs). Our work links most directly to *SDG 3 – Good Health and Wellbeing*, and other SDGs closely relevant to public health include *SDG 2 – Zero Hunger*, *SDG 6 – Clean Water and Sanitation*, *SDG 10 – Reduced Inequalities*, and *SDG 13 – Climate Action*. However, we also recognise that all of the 17 sustainable development goals are interconnected and mutually supporting.

Closer to home, we also have the vital goal of sustaining PHAA as a vibrant civil society organisation, founded in its engaged and enthusiastic members, and continuously active through our advocacy, our professional development and educational events (member-based and public), our assistance to the public health professions, and our general communications (including our journal, our social media presence and our media interactions).

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# VALUES

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Success in our mission and vision is underpinned by our values of –

- Respect** We will always show respect to all people, recognising the wide and ever-changing diversity of human society
- Inclusiveness** We will engage with all people, and welcome a diversity of views and opinions
- Integrity** We will be honest and open in all our actions, and demonstrate good governance, democratic principles, transparency, and accountability
- Evidence** We will always utilise high-quality evidence-based research in all our work
- Leadership** We will demonstrate leadership and fulfil our responsibility to be the voice of public health

The following three sections set out:

- **Key priority** activities for the 2021-25 period (pages 5-6)
- **Ongoing activities** that will maintain PHAA's organisational performance (pages 7-8)
- Some of the **continuing practices** which we will follow (page 9)

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## KEY PRIORITIES

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### 1 Achieving major improvements in policies on public health and disease prevention

PHAA will work to promote a public health/preventive understanding of policies by all governments and officials.

Starting in 2021, we hope to see a sound National Preventive Health Strategy emerge at national level, followed by effective implementation by all governments.

### 2 Achieving a major boost in national spending on public health and disease prevention

PHAA will advocate to all governments about the merits of ensuring that a minimum of 5% of health budgets is dedicated to preventive health. We will advocate for the related creation of a national 'Preventive Health Future Fund' to secure financial resources towards this goal.

We will also enhance our monitoring of all government's budgetary efforts on public health and prevention, and develop tools for analysis and advocacy to drive greater government investment.

### 3 Achieving increased investments in the national public health workforce

PHAA will advance an integrated suite of programs relating to attraction, education, career options, permanent positions in an expanded workforce. This will include advocacy for increased resourcing of public health research. It will also include advocacy for reform of government public health agencies and governance.

### 4 Pursuing near-term policy priorities

Emerging and changing political scenarios bring various of PHAA's many policy goals to the fore. PHAA will maintain a rolling list of 'near term focus' policy goals, annually revised in discussion with the Board.

*(see Attachment A – Near-team Policy Focus List for 2021, which will be revised annually)*

## 5 Continue delivering professional development opportunities

Our events program has over several years developed into a major part of our services to PHAA membership, as well as non-members and stakeholders. The purpose of this work is to provide opportunities for sharing and testing evidence-based peer reviewed public health knowledge and expertise, and ensure researchers practitioners and policy makers are updated with the most recent available public health science and thinking. The events program also maximises opportunity for network-building, collaboration and active respectful scientific discussion and debate on important public health issues.

The COVID pandemic provided an opportunity to re-engineer events into virtual formats. Into the future, PHAA will leverage the learnings from virtual events, and develop hybrid events with a combination of face to face and virtual components. This will enable better accessibility to events for more people, as well as allow events to respond to changing environments where physical events are not a safe option.

## 6 Build PHAA's membership

PHAA individual membership size has been stable for several years, ranging annually between 1,500 and 1,900 individuals. The recent trend is for slow but steady underlying growth.

With public health education and employment in Australia continuing to grow – and with the community manifesting significantly increased awareness of public health driven by the pandemic – PHAA will set goals for growing our membership. This involves efforts to retain existing and recruiting new members.



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## MAJOR ONGOING ACTIVITIES

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### 1. Vibrant Branches and SIGs

Active membership is the heart of our organisation. PHAA members are automatically members of the state and territory Branches, and also self-organise into Special Interest Groups (SIGs). These will be supported by National Office with administrative support, policy and communications support, and assistance with specific events and projects.

This Plan establishes a simple new framework for Branches and SIGs to set their own focus priorities each year (see pages 10-11 below).

### 2. Networks and relationships

We will build and maintain networks of influence with like-minded stakeholders, governments, agencies, political parties, media and others. This will include maintaining a range of standing alliances with other NGOs, as well as participation in occasional advocacy campaigns on public health and related issues.

### 3. Influencing public discourse

We will contribute to and seek to influence public discourse about public health through communications including commercial, public, public interest and specialist media, social media platforms, and online publishing.

### 4. Policy development cycle

We will maintain PHAA's long-established, evidence-based, consultative processes for policy statement development, featuring an annual cycle that reviews 1/3 of all current policies while also developing new policies.

### 5. Continuous policy advocacy

We will work to turn PHAA's public health policies into government and community policy and action by continually making policy-driven, evidence-based submissions to parliamentary, agency and other inquiries and reviews, including follow-up appearances.

### 6. Communicating public health information

Information is the lifeblood of public health expertise. We will monitor, gather and disseminate relevant reports, research and evidence to PHAA members and stakeholders through:

- Pump e-bulletin
- Intouch blog
- social media platforms
- commercial, public, public interest and specialist media

We will also maintain effective day-to day communications and media response capability to promote public health perspectives, rebut unhealthy marketing and corporate influence, and promote the role of PHAA to the world.

### 7. Our ANZJPH journal

The *ANZ Journal of Public Health* is Australia's premier journal on the full range of public health topics. It is independently edited to rigorous standards, and is the most widely read journal in the stable of its scientific publisher.

The Journal will continue in its established role, with appropriate responsiveness to changing cost and revenue realities.

## 8. Deliver PHAA's major Events program

PHAA has long-standing commitments to deliver a continuous programme of major conference and events, while developing new conference proposals, using in-person and virtual formats.

## 9. Workshops, webinars and other micro-events

Underway before 2020, but clearly made 'new normal' by the pandemic, PHAA will continue to build capacity to conduct online workshops, webinars and other popular micro-events of interest to our membership. Where possible, revenue opportunities will be pursued.

## 10. Reconciliation

PHAA is committed to national Reconciliation between all Australians. We will maintain and regularly refresh the Reconciliation Action Plan we have adopted under the aegis of Reconciliation Australia, and ensure that goals and targets are met.

## 11. Good governance

PHAA's organisation is stable and well-managed, with effective internal governance. National Office operates effectively based on strong workplace values. This position must be maintained by careful management.

## 12. Financial management

PHAA has a track record of sound financial management, supporting all our operations and preserving our corporate reputation. This will continue to be a key focus of National Office.

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## CONTINUOUS PRACTICES

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Sustaining all our priorities and activities will be the following ongoing practices:

- Nurture an engaged membership that broadly represents Australia’s public health workforce and researchers and other stakeholders such as community-based groups
- Provide governments and parliaments, government agencies, and the wider community with an independent voice for expert advice, comment, advocacy, and the promotion of our public health goals
- Promote conversation about public health through commercial, public, public interest, and specialist media, as well as social and digital communication platforms
- Influence public health debate on the national stage through evidence-based policy, advocacy, and commentary
- Contribute to the development of Australia’s public health workforce through educational events, mentoring, networking opportunities, and related services
- Provide avenues for Board, Branch, Special Interest Group, and individual member involvement in our activities.
- Maintain accountable organisational governance with adherence to legislative requirements
- Act consistently with global frameworks including the World Federation of Public Health Associations’ *Global Charter for the Public’s Health* and the United Nations Sustainable Development Goals
- Maintain good relationship with partners and stakeholders at global, regional, national, state and territory, and local levels.

## BRANCH ACTIVITIES

State and territory Branches are the most immediate grouping of PHAA members. All PHAA members are automatically members of the Branch of the state/territory in which they reside. Maintaining vibrant PHAA Branches is a major organisational priority.

As provided for in the Constitution, election of Branch office-bearers and renewal of the Branch Committee should happen annually. Each Branch should hold an annual general meeting and, if desired, other strategic discussions, in the period October-December.

Each Branch should maintain, and annually review, a **Branch Focus Statement**, setting out 3-5 areas of focus for the Branch in the coming year. Areas of focus should be stated in a single sentence. While each branch should determine its focus areas, the following are suggested as up to three initial items:

- Overseeing the continuing growth and vibrant activity of the Branch, including by organising regular member events.
- Representing PHAA, in liaison with National Office as needed, in interactions with state/territory government, parliament and committees, health agencies, local media, and local community
- Making submissions, in liaison with National Office, to state/territory parliaments and other agencies and stakeholders on state/territory level policy issues.

Each Branch should then develop 1-2 additional areas of focus for their work for the coming year. These might include engaging with public debate during a state/territory election, engaging with reforms of local public health agencies and institutions, addressing major local health concerns, or any other matters that the Branch sees as a priority.

Branch Focus Statements should be shared with National Office, all other Branches, and the full PHAA membership.

The content of the focus statement for each Branch should be used to frame the Branch's contributed report to the PHAA Annual Report.

### The Objects of the Association

- ④ To encourage and develop membership of the Association by promoting, maintaining and extending the interests of the Branches and Special Interest Groups of the Association and of any affiliated organizations.

– PHAA Constitution

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## SPECIAL INTEREST GROUP ACTIVITIES

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Special Interest Groups (SIGs) provide a more activity-based, expertise-based, and interest-based grouping of PHAA members. All PHAA members may join any SIG. Maintaining vibrant PHAA SIGs is a major organisational priority.

As provided for in our Constitution, appointment of SIG Convenors and Committees should happen annually. Each SIG should hold an annual general meeting and, if desired, other strategic discussions.

Each SIG should maintain, and annually review, a **SIG Focus Statement**, setting out 3-5 areas of focus for the SIG in the coming year. Areas of focus should be stated in a single sentence. While each SIG should determine its focus areas, the following are suggested as two initial items:

- Leading the development and renewal, on a three-year cycle, of the PHAA policy position statements associated with that SIG
- Working with National Office to generate submissions to parliaments, government entities, and other stakeholders on key policy issues relevant to the SIG.

Each SIG should then develop 1-3 additional areas of focus for their work for the coming year. These can cover any other matters that the SIG sees as a priority.

SIG Focus Statements should be shared with National Office, all other SIGs, and the full PHAA membership.

The content of the focus statement for each SIG should be used to frame the SIG's contributed report to the PHAA Annual Report.

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## IMPLEMENTATION

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The Board will oversee the implementation of this Plan by –

- establishing annual and other timelines for meeting of priorities
- establishing measures and targets where relevant
- establishing an efficient progress reporting mechanism
- monitoring resources and capabilities within National Office Branches and SIGs to carry out the activities and achieve the objectives of this Plan.

The Board will formally review progress –

- at 'half-way' through the Plan period, namely mid-2023
- during the last 6 months of the Plan period, namely mid/late-2025

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## KEY RESOURCES

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- [Constitution](#)
- [National Policy Directions](#) (2019)
- [Immediate Policy Priorities](#) (prepared for the 2019 federal election)
- The World Federation of Public Health Associations developed [A Global Charter for the Public's Health](#)
- [Reconciliation Action Plan 2019-20](#) [note: our 2021-23 RAP is currently being developed]
- [The Top 10 Public Health Successes Over the Last 20 Years](#) (2018)
- PHAA [Policy Position Statements](#)
- PHAA [Submissions](#)
- PHAA [Advocacy campaigns](#)
- [Previous Strategic Plan](#) (2016)

## NEAR-TERM POLICY FOCUS LIST FOR 2021

The near-term policy activity focus list for 2021 includes the following:

- A. Work with government to create an effective National Preventive Health Strategy and Implementation Plan.
- B. Promote government actions to address the key preventable health issues and diseases, through government policy, resourcing, social marketing campaigns and other means.
- C. Advocate for an integrated suite of programs relating to attraction, education, career options, permanent positions in an expanded public health workforce, including public health research.
- D. Ensure that the health impacts of climate change are understood, and help strengthen the call for climate action.
- E. Work to secure increased resourcing and autonomy for Aboriginal and Torres Strait Islander public and preventive health programs and services.
- F. Ensuring that the National Obesity Strategy, due for finalisation in 2021, has strong policy commitments and public health focus and a clear time-bound implementation plan.
- G. Securing the establishment of a National Nutrition Strategy.
- H. Ensure that food regulation in Australia remains health-focused.
- I. Ensure that governments maintain the precautionary approach in relation to e-cigarette regulation.
- J. Contribute to public discussion of issues relating to the COVID-9 pandemic.