



Western Australian Health Promotion Strategic Framework 2007–2011

Highlights of major achievements in
priority areas





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Suggested citation

Department of Health, Western Australia. Western Australian Health Promotion Strategic Framework 2007–2011. Highlights of major achievements in priority areas. Perth: Chronic Disease Prevention Directorate, Department of Health, Western Australia; 2013.

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Note on terminology

The use of the term “Aboriginal” within this document refers to Australians of both Aboriginal and Torres Strait Islander descent.



Chronic disease and injury in WA

One hundred years ago, the most common causes of death and disease in WA were infectious diseases. Men who were born in 1910 could look forward to an average life expectancy of 55 years, and for women it was closer to 60. Better sanitation and hygiene, safer working and living conditions, the discovery of antibiotics, and the development of vaccines against many of the killer diseases of the time, all lead to fewer children and adults dying from infectious diseases during the first half of last century, and a steady increase in life expectancy.

In 2007, life expectancy for most children born in Australia was about 79 years for males, and 84 years for females, among the longest in the world. But not all Australians were doing so well. There was (and remains) a significant disparity in life expectancy for Aboriginal people, which is almost 12 years lower for men, and almost 10 years lower for women than for other Australians.

Now we face a new disease epidemic. As life expectancy has increased, chronic diseases have become the most important causes of ill-health in this state. Changes in the way we work, relax and eat mean that more of us spend much of our time being sedentary, and that the foods and drinks we consume are more likely to be higher in kilojoules and poorer in nutrition. Nearly one third (30%) of the total amount of sickness, disability and deaths (including loss of quality of life) experienced in WA in 2006 was due to preventable risk factors. Being overweight was the most important risk factor, followed by smoking and physical inactivity. Injury is an important cause of disability and death for all age groups, and it is the leading cause of death for children in WA. Aboriginal people are at greater risk of chronic disease and injury than non-Aboriginal people.

Chronic disease and injury have a major and growing impact on WA's health care system.

To help address this, WA Health developed its first comprehensive policy framework for the prevention of chronic disease and injury. The *Western Australian Health Promotion Strategic Framework 2007–2011* (HPSF) outlined the key directions for the promotion of healthier and safer lifestyles for the WA population. Its priority areas were:

- Preventing smoking
- Healthy eating
- Physical activity
- Healthy weight
- Low risk alcohol use
- Preventing injury

This report gives a brief overview of the major achievements during the lifespan of the HPSF, delivered by WA Health and through a range of partnerships.



PREVENTING SMOKING 2007–2011

Aims

- Reduce the prevalence of tobacco use
- Reduce exposure to tobacco products

WA Health's focus

- Motivating and supporting cessation by adults
- Preventing uptake by children and young people
- Reducing the potential for exposure to secondhand smoke

At a glance

- In 2011, 11% of people aged 16 and over are daily smokers, the lowest since WA Health Department surveys began.
- More than three-quarters (77%) of secondary school children have never tried a cigarette.
- Nearly all WA children (98%) live in a smoke free home.
- Lung cancer deaths are declining in men but are yet to peak in women, probably reflecting changing smoking patterns over the past four decades.

Major achievements

- *Make Smoking History's* hard-hitting public education campaigns focus on the effects of secondhand smoke on children, and the impact on family members left behind by people who have died from smoking. More than half (55%) of smokers who are aware of the campaigns either quit, try to quit, or cut down on smoking, and public support for bans on smoking in cars when children are present grows.
- In measures which have strong public support, WA law now protects children from tobacco smoke in cars, tobacco displays in shops are banned, and there is better protection from secondhand smoke in public places.
- Annual calls to the 24-hour Quitline nearly double between 2007 and 2011 and Quitline receives more than 14,000 calls asking for support and advice to quit.
- WA's Quitline Aboriginal Liaison Team develops an innovative and nationally-recognised program to boost the effectiveness of the Quitline for Aboriginal people.

Future directions

Steady progress in tobacco control continues but the battle is not over. Over the next five years WA Health will keep working to drive down smoking rates, and to make more public places smoke free, especially where children are present.



HEALTHY EATING 2007–2011

Aims

- Increased consumption of a diet consistent with the *Australian Dietary Guidelines*

WA Health's focus

- Balancing energy intake with physiological need and physical activity
- Increasing fruit and vegetable intake
- Optimising antenatal, maternal, infant and child nutrition

At a glance

- In 2011, about half of Western Australians aged 16 and over are eating enough fruit, but only one in ten are getting the right amount of vegetables each day. Vegetable consumption has decreased slightly since 2007.
- More children aged 4–15 are eating enough vegetables than in 2007, but only around half are meeting national guidelines.
- About 40% of children and 35% of adults eat fast food at least once a week in 2011.

Major achievements

- WA Health and the Department of Education introduce the *Healthy Food and Drinks Policy* in 2008, to boost healthy foods in WA school canteens. The traffic light system codes foods as green, amber or red, according to their nutritional value. A year later, 84% of public schools are exceeding the minimum standards set in the policy by taking “red” foods off the menu, and by offering a higher proportion of “green” food items than required.
- By 2010, over 300 primary schools are promoting eating fruit and vegetables for snacks and drinking water in the *Crunch&Sip*[®] program, and nearly 400 schools are getting students off to a good start with the *School Breakfast Program*.
- In 2010–2011, more than 1,000 adults participate in *FOODcents* courses to learn how to plan, shop for and cook healthy meals without blowing the budget.
- The community cares about how food should be labelled and promoted. Research in 2009 shows that a majority now want to see stronger controls about nutrition labelling on food packaging (97%) and on how foods are advertised (85%).

Future directions

Over the next five years WA Health will continue to encourage Western Australians to follow the *2013 Australian Dietary Guidelines* and to cut down on foods and drinks which are high in kilojoules but low in nutrients. WA Health will work with government and non-government and industry partners to help make it easier for all Western Australians to have access to a range of healthy and affordable food choices.



PHYSICAL ACTIVITY 2007–2011

Aims

- **Increased population levels of physical activity**

WA Health's focus

- **Promoting physical and social environments that support physical activity**
- **Improving access to affordable, socially and culturally relevant options for physical activity**
- **Increasing participation in physical activity to meet or exceed recommendations**

At a glance

- The percentage of adults aged 16–64 who are getting enough physical activity increases from 49% in 2007 to 55% in 2011.
- Physical activity levels in 5–15 year olds haven't changed much. Less than half (46%) of WA children are getting enough daily exercise in 2011.
- Nearly 40% of WA's workers have mostly sedentary jobs.
- In 2011 about one in five children aged 5–15 spend more than 2 hours a day using electronic media, a significant decline since 2009.

Major achievements

- *Find thirty every day*[®] urges adults to build physical activity into their everyday routines. Almost a quarter (24%) of those who are aware of the campaign, say they have taken some simple steps towards boosting their level of daily exercise.
- Parents are asked to help get their kids out their seats and onto their feet in the 2008–2011 *Unplug + Play* campaign. About two thirds (64%) of WA parents are aware of the campaign, and more than one in four parents who have seen the campaign report that they have taken action to reduce the amount of time their child spends sitting in front of the television or computer screen.
- Between 2009–2011, over 5,500 Western Australians make up teams to meet the annual *Get on Track Challenge*, an entertaining 8 week, web-based physical activity and healthy eating program. Activity levels increase significantly over the duration of the challenge, as participants log their exercise and fruit and vegetable intake, and track their team's virtual progress along the Bibbulmun Track.
- The environments in which we live, work and relax have a major influence on how much physical activity people do. WA Health forms vital links with planning authorities and local governments to help influence urban design and planning.

Future directions

Over the next five years WA Health will keep working to increase the percentage of Western Australians who are active enough for good health, to help keep people who are already getting exercise to keep it up, and to reduce sedentary behaviour in people of all ages. Strong focus will continue on shaping our living and working environments to encourage an active lifestyle.



HEALTHY WEIGHT 2007–2011

Aims

- **Slow, halt and eventually reverse the trend of increasing overweight and obesity**

WA Health's focus

- **Preventing weight gain of adults at the population level**
- **Optimising the healthy growth of children and adolescents**
- **Early reversal of unhealthy weight gain**

At a glance

- Western Australians, like other Australians, are putting on too much weight for good health.
- Two-thirds of WA adults aged 16 and over, and almost one in five (19%) children aged 5–15 are either overweight or obese in 2011. These proportions are similar to 2007.
- WA research shows that overweight and obesity is the leading contributing preventable risk factor associated with sickness, disability and death.

Major achievements

- Good habits start young and the *WA Healthy Schools Project* helps primary schools to make healthy eating and physical activity a part of everyday school life. Kids love the kitchen gardens, sports carnivals and healthy food expos. Between 2008 and 2011, 226 schools are involved in the project and working to become health promoting schools.
- Between 2009–2011, WA Health's *Draw the Line* campaign reminds adults how easy it is to put on weight without even noticing, and urges them to draw the line on weight gain. One in three people who are aware of the campaign make healthy changes.
- Combating overweight and obesity is a problem Australia-wide. In 2011 WA Health joins other states and territories to run *Measure Up*, *Healthy Workers* and *Healthy Children* programs which are aimed at helping adults and children in a range of settings to eat a healthy diet, be active and keep to a healthy weight.
- Health experts in Australia and overseas watch with interest as work starts on *LiveLighter*, a ground-breaking campaign designed to inform, motivate and support healthy eating, physical activity and healthy weight under a single banner.

Future directions

With overweight and obesity rates relatively steady, efforts over the next five years will continue to focus on finding effective ways to prevent overweight and obesity, and to help people reach and stay at a healthy weight. Importantly, it will also get people talking about how we need to change the environment to make healthy choices the easy choices. WA Health will join the debate and encourage partnerships between the community, government and other industries and organisations to help make our neighbourhoods, schools and workplaces healthier places to be.



LOW RISK ALCOHOL USE 2007–2011

Aims

- Reduce the prevalence of harmful alcohol consumption
- Reduce alcohol-related harm

WA Health's focus

- Decreasing community acceptance of drunkenness and associated problems
- Motivating and supporting low-risk drinking
- Creating drinking environments that minimise harmful alcohol consumption

At a glance

- Between 2007–2011, the percentage of adults aged 16 and over who drink at levels which put them at risk of long term harm to their health increases from 47% to 50%.
- In 2011, about two in five (43%) teenagers aged 16–17 who drink regularly say that they drink with the aim of getting drunk.
- Between 2009–2011, community support increases for further measures to reduce underage drinking, providing health information on alcohol containers, and using the money from alcohol taxation to replace alcohol sponsorship of sport.

Major achievements

- The statewide media campaign *Rethink Drink* is launched in 2008 to support communities to achieve a safer drinking culture. Over the next year, the campaign achieves a reported reach of 75% awareness in its target audience.
- WA Health supports local governments and communities in taking action to reduce the social acceptability of drunken behaviour, and to create environments that minimise the potential problems from excess alcohol use. Local government alcohol policies are developed with a number of local government areas.
- WA Health works with the Drug and Alcohol Office, local governments and the events industry to encourage alcohol-related harm minimisation strategies to be included in the planning phase for concerts and festivals.
- In early 2010, the *Alcohol. Think Again* campaign raises awareness of, and concern about, the links between alcohol and cancer. Ninety one percent of the primary target audience correctly recalls the link between alcohol and cancer. The campaign continues later in the year with increases in awareness, including the NHMRC guideline of no more than two standard drinks to avoid health risks in the long-term.

Future directions

In the next five years, WA Health will continue to work towards changing community attitudes towards alcohol use; influencing the supply of alcohol in ways which will reduce risk; and reducing demand for alcohol to help create lower risk patterns of drinking behaviour or avoiding alcohol altogether for populations groups for whom this is considered to be safest, such as pregnant women.



PREVENTING INJURY 2007–2011

Aims

- Reduce the incidence of injury
- Reduce the harm associated with injuries

WA Health's focus

- Reduce falls in older people
- Reduce falls, poisoning, and burns and scalds in children
- Reduce road trauma, particularly among young males
- Reduce drowning and near drowning
- Contribute to reducing the harm from violence and assault

At a glance

- Injuries are still the leading cause of premature death in WA, but deaths from injuries decline slightly between 2007–2011.
- In 2011 the rate of road deaths is the lowest since 1950, but road deaths and other land transport injuries are still a leading cause of injury or death for people of all ages.
- Deaths from drowning fall between 2007–2011, but more people are hospitalised for near drowning.
- Falls are an important cause of injury and death for people of all ages, especially in people aged 65 and over.
- Injury is the leading cause of death for children, accounting for more deaths per year than from cancer, asthma and infectious diseases combined.

Major achievements

- *Stay on Your Feet WA*[®] continues to support active ageing and independent living in WA's growing ageing population. Between 2007–2011, the Injury Control Council of WA delivers around 500 community presentations to nearly 14,000 WA seniors, promoting the 9 steps to staying on your feet. Many more are reached through events, displays and media work.
- *Don't Drink and Drown* alerts young adults to the dangers of mixing alcohol with water activities. The message is taken to schools and youth community events. Between July 2007–October 2009, more than 16,500 resources are distributed statewide, and 25 presentations are conducted at schools. Over the summer of 2010–2011 *Don't Drink and Drown* messages are promoted through nine waterside pubs and clubs.
- WA Health works with Kidsafe WA and the Office of Road Safety to increase community awareness about changes to child car restraint laws in 2010. Almost 90% of surveyed community members are aware of the new laws and subsequently able to better protect children from injury when travelling in cars.

Future directions

Over the next five years WA Health will continue work with its partners in focusing on injury prevention issues across the life-span including reducing road crashes and road trauma; preventing falls in older people; protecting children from injury; improving water safety; and working with other sectors to help reduce violence in the community.



WA Health's partnerships

The HPSF emphasised the importance of integrating health issues, particularly concerning the social determinants of health, into government policy at all levels, and working with key partners to achieve the goal of a healthier community. Between 2007 and 2011, WA Health worked with a wide range of partners in the government and non-government sectors to support the development and delivery of health promotion initiatives, or influence policy and practices. They include:

Aboriginal Health Council of WA	Kidsafe WA
Alcohol and Drug Information Service	Local Governments
Asthma Foundation WA	Men's Advisory Network
Australian Red Cross	Mental Health Commission
Cancer Council WA	Mentally Healthy WA
Centre for the Built Environment and Health (University of WA)	Midwest Men's Health
Child and Adolescent Community Health	Multicultural Services Centre of WA
Child Health Promotion Research Centre (Edith Cowan University)	National Drug Research Institute (Curtin University)
Council on the Ageing WA	North Metropolitan Area Health Service
Department for Communities	Office for Aboriginal Health
Department of Education and Training	Office of Road Safety
Department of Health and Ageing (Commonwealth)	Premier's Physical Activity Taskforce
Department of Planning and Infrastructure	Public Health Advocacy Institute of Western Australia
Department of Sport and Recreation	Public Sector Commission
Department of Transport	Royal Life Saving Society of WA
Departments of Health in other States and Territories	Royal Perth Hospital Trauma Unit
Diabetes WA	South Metropolitan Area Health Service
Drug and Alcohol Office	Unions WA
Farmsafe WA	WA Country Health Service
Foodbank WA	WA Falls Prevention Health Network
Health Consumers' Council	WA GP Network
Healthway	WA Injury and Trauma Health Network
Heart Foundation WA	WA Local Government Association
Injury Control Council of WA	WA School Canteens Association
	Women's Health Care Association

Where to from here?

The *Health Promotion Strategic Framework 2012–2016* builds on the earlier Framework, and sets out WA Health's strategic directions and priorities for the prevention of avoidable chronic disease and injury over the next five years. It is available from http://www.public.health.wa.gov.au/1/1573/2/healthy_lifestyles.

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