



Government of **Western Australia**  
Department of **Health**

# State Public Health Plan for Western Australia

**Summary 2019–2024**







## **This document was prepared by:**

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## **Acknowledgements**

The Department of Health would like to thank the people and organisations who contributed time and expertise to the development of the State Public Health Plan.

## **Feedback**

Any feedback related to this document should be emailed to [publichealthact@health.wa.gov.au](mailto:publichealthact@health.wa.gov.au)





We want the people of WA to experience the best possible health, wellbeing and quality of life.

### **Acknowledgment of Country and People**

WA Health acknowledges the Aboriginal people of the many traditional lands and language groups of Western Australia. It acknowledges the wisdom of Aboriginal Elders both past and present and pays respect to Aboriginal communities of today.

# Message from the Minister for Health and Mental Health

I am proud to present the first State Public Health Plan (the Plan) for Western Australia. The Plan represents an important step towards a coordinated approach to improving the health and wellbeing of Western Australians, be it at the State-wide or local community level.

Our vision is for Western Australians to live well and experience the best possible health, wellbeing and quality of life. Strengthening partnerships, particularly with local governments across WA, is the key to fulfilling this vision, and to the success of the Plan.

The Plan identifies three public health objectives that will help prevent disease, injury and premature deaths in WA. These objectives are to:

1. Empower and enable people to live healthy lives
2. Provide health protection for the community and
3. Improve Aboriginal health and wellbeing.

These objectives are supported by policy priorities that focus attention on the areas of public health where there is potential to make improvements across government.

While we enjoy a high standard of living in WA, it's a sobering thought that, between 2011 and 2015, over half of all deaths of Western Australians aged under 75 years could potentially have been avoided.

Moreover, life expectancy is significantly lower for Aboriginal men and women compared with non-Aboriginal Western Australians. To address this health gap, the Plan recognises that Aboriginal health and wellbeing must be considered the core business of everyone.

Western Australian local governments are vital in protecting and promoting the health and wellbeing of their residents, and can play a huge role in reducing disease, illness and injuries. Local governments will soon be required to have local public health plans. The development of these local plans will ensure local governments can continue to contribute and plan for the health and wellbeing of their communities.

Local governments are not in this alone. Support is available and there are many avenues to partner to complement local government programs and activities.

I encourage all Western Australians to consider what role they can play to facilitate a culture of wellness for the people of our wonderful State.

Roger Cook MLA  
**Deputy Premier; Minister for Health;  
Mental Health**





# Message from the Chief Health Officer of Western Australia

I am pleased to release this State Public Health Plan (the Plan) to guide the direction of public health planning across WA. The Plan establishes high level strategic directions that focus on prevention, health promotion and health protection that aim to prevent disease, injury, disability and premature death in WA.

The Plan has been updated to reflect the extensive feedback received from local government, state government, public health experts and community members during a six month consultation process across WA. From the many ideas raised we have addressed a number of the key public health concerns within this final version.

An important achievement has been the collaboration and partnership with the Mental Health Commission to incorporate mental health and other drug related priorities for the State. There was overwhelming support from stakeholders, particularly local governments, about the importance of recognising and strengthening the role local governments can play in helping to influence the mental health and wellbeing of communities.

I strongly encourage local governments to use this plan to guide the continuation, or commencement, of their local public health plans. I am pleased to see that many local governments have already taken the initiative and produced high quality public health plans that contribute towards supporting the health and wellbeing of their local communities.

I am excited about strengthening our collective effort to create liveable, vibrant places where all Western Australians experience the best possible health, wellbeing and quality of life.



Dr Andrew Robertson  
**Chief Health Officer**  
**Public and Aboriginal Health Division**  
**Department of Health Western Australia**



## Public health objectives and policy priorities summary

### Objective 1: Empowering and enabling people to live healthy lives

Healthy eating  
 A more active WA  
 Curbing the rise in overweight and obesity  
 Making smoking history  
 Reducing harmful alcohol use  
 Reduce use of illicit drugs, misuse of pharmaceuticals and other drugs of concern  
 Optimise mental health and wellbeing  
 Preventing injuries and promoting safer communities

### Objective 2: Providing health protection for the community

Reduce exposure to environmental health risks  
 Administer public health legislation  
 Mitigate the impact of public health emergencies  
 Support immunisation  
 Prevention and control of communicable diseases  
 Promote oral health improvement

### Objective 3: Improving Aboriginal health and wellbeing

Promote culturally secure initiatives and services  
 Enhance partnerships with the Aboriginal community  
 Continue to develop and promote Aboriginal controlled services  
 Ensure programs and services are accessible and equitable  
 Promote Aboriginal health and wellbeing as core business for all stakeholders

# Introduction

This State Public Health Plan establishes high level strategic directions that focus on prevention, health promotion and health protection which aim to prevent disease, illness, injury, disability and premature death in WA.

Public health planning is soon to be a mandatory requirement under Part 5 of the *Public Health Act 2016*. This process strengthens the need to better plan for public health and wellbeing by both the State and local governments.

Part 5 of the *Public Health Act 2016* introduces the requirement for the preparation of a:

1. State public health plan prepared by the Chief Health Officer, and a
2. Local public health plan prepared by each local government.

This State Public Health Plan is intended to guide local governments commencing or continuing the public health planning process. The Plan provides a framework for local governments to consider and adapt as necessary to reflect the particular risks prevailing in their local district.

This document summarises the key public health objectives and policy priorities for WA. The detailed version of the WA State Public Health Plan can be viewed on the Department of Health website [www.health.wa.gov.au](http://www.health.wa.gov.au)

## What is public health?

The *Public Health Act 2016* defines public health as:

- a) the wider health and wellbeing of the community and
- b) the combination of safeguards, policies and programs designed to protect, maintain, promote and improve the health of individuals and their communities and to prevent and reduce the incidence of illness and disability.

## Public health is...



Safe and nutritious food



The way our communities are designed



Safe drinking water



Walking trails and cycle routes



Smoke and alcohol free environments



Waste management



Recreational facilities, sports grounds and parks



Events, places and activities that bring the community together



Health information and education programs



Safe housing



Maintaining high levels of immunisation



Optimal mental health and wellbeing

# Snapshot of the health of Western Australians

## Population overview



As of 2018 the population of WA was **2.6 million**<sup>a</sup>

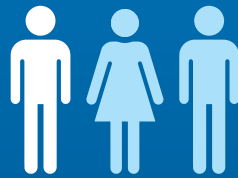
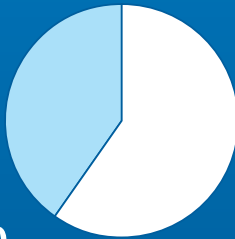


By 2066 it is estimated that 1 in 5 Western Australians will be over 65 years of age<sup>c</sup>

In 2016 Aboriginal people comprised of 3.9% of the State's population, with approximately half of the Aboriginal population aged under the age of 25<sup>e</sup>

In 2016, **59.8%**

of Aboriginal people lived outside metropolitan Perth<sup>b</sup>



In 2016, almost 1 in 3 people in WA were born overseas<sup>d</sup>

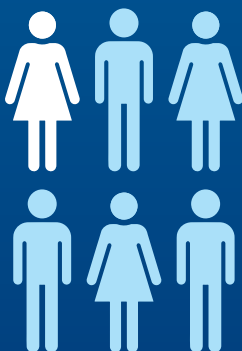
In 2015, approximately **362,000**

Western Australians reported having a disability<sup>f</sup>



## Mental health and wellbeing

In 2017-18, more than 1 in 6 (17.8%) Western Australian adults had a mental or behavioural condition<sup>g</sup>



WA's suicide rate was more than 20% higher than the national average in 2017 and has been consistently higher than the national average since 2008<sup>h</sup>

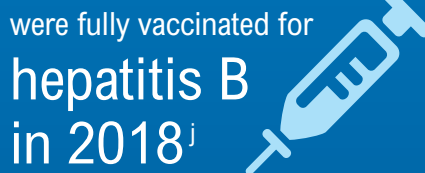
## Health protection for the community

Heatwaves are responsible for more deaths in Australia than any other natural disaster and will likely worsen with climate change<sup>i</sup>



**96%** of children aged 24 to <27 months in WA

were fully vaccinated for hepatitis B in 2018<sup>j</sup>



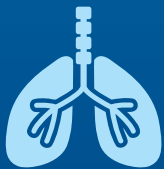
**499**

The number and rate of Ross River virus recorded in 2018-19<sup>k</sup>

Numbers of sexual transmittable infections remains high in WA with notifications of **11,524** Chlamydia in 2018<sup>l</sup>



## Lifestyle risk factors



In 2015, chronic disease and injury were responsible for approximately

65% of the total disease burden in Australia<sup>m</sup>



**69%** of WA adults aged 16 years and over were classified as **overweight or obese** in 2017<sup>o</sup>



In 2011-12 WA adults

**obtained 36%** of their daily total energy intake from unhealthy foods<sup>q</sup>

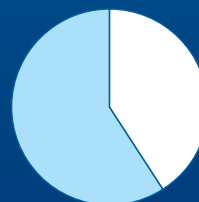


**One in four children** in WA were classified as **overweight or obese** in 2017<sup>p</sup>



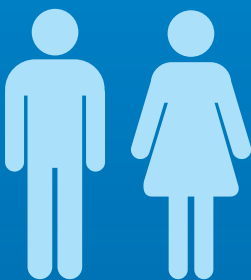
In WA in 2017 approx 1/3 of people aged 16-44 years (**35.7%**)

drink at levels considered to be high risk for long-term harm<sup>n</sup>



**41%** of Aboriginal people aged 15 years and over in WA were **daily smokers** in 2014-15<sup>r</sup>

## Aboriginal health



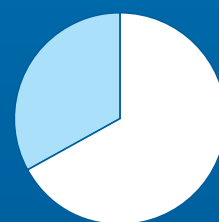
**Aboriginal Western Australians** experience a significant gap in life expectancy; a gap of 13.4 years for males and 12 years for females compared with non-Aboriginal people<sup>s</sup>

Between 2013 and 2015, potentially preventable hospitalisation rates for Aboriginal people in WA were **4.1 times greater** than for non-Aboriginal people<sup>t</sup>

**4.1x**



In 2012-13, 67% of Aboriginal people in WA aged 15 and over were **overweight (28%) or obese (39%)**<sup>u</sup>



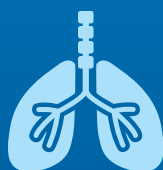
## Costs of inaction

There is good evidence that prevention offers cost-effective ways to improve health outcomes in Australia. Prevention makes good sense.

In high-income countries with universal healthcare, it has been estimated that for every £1 invested in public health, there will be a £14 return on this investment<sup>v</sup>



\$176 million invested in tobacco prevention in Australia between 1971 and 2010 averted approximately \$8.6 billion in health costs over that period<sup>x</sup>



\$715m

\$715 million of hospital costs in WA were attributed to chronic conditions in 2013<sup>w</sup>



\$350m

In 2013, hospital costs in WA for injury were just short of \$350 million<sup>y</sup>

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- y Epidemiology Branch. Costs and cost projections for injury and chronic disease hospitalisations, HMDS. Department of Health WA. Perth; 2016.



# Vision

We want the people of WA to experience the best possible health, wellbeing and quality of life.

It is important that Western Australians are supported to actively participate in community life and that the places and spaces where they live, learn, work and play are safe, clean, green and accessible.

## Determinants of health

There are many factors that influence a person's health and wellbeing. Aspects of the surrounding environment in which people live, income, genetics, features of community life, and social connections and relationships all influence an individual's health<sup>1</sup>.

Improving health outcomes starts with giving people more opportunities to make choices that support them to lead healthier, more active lives, regardless of their income, education or cultural background.

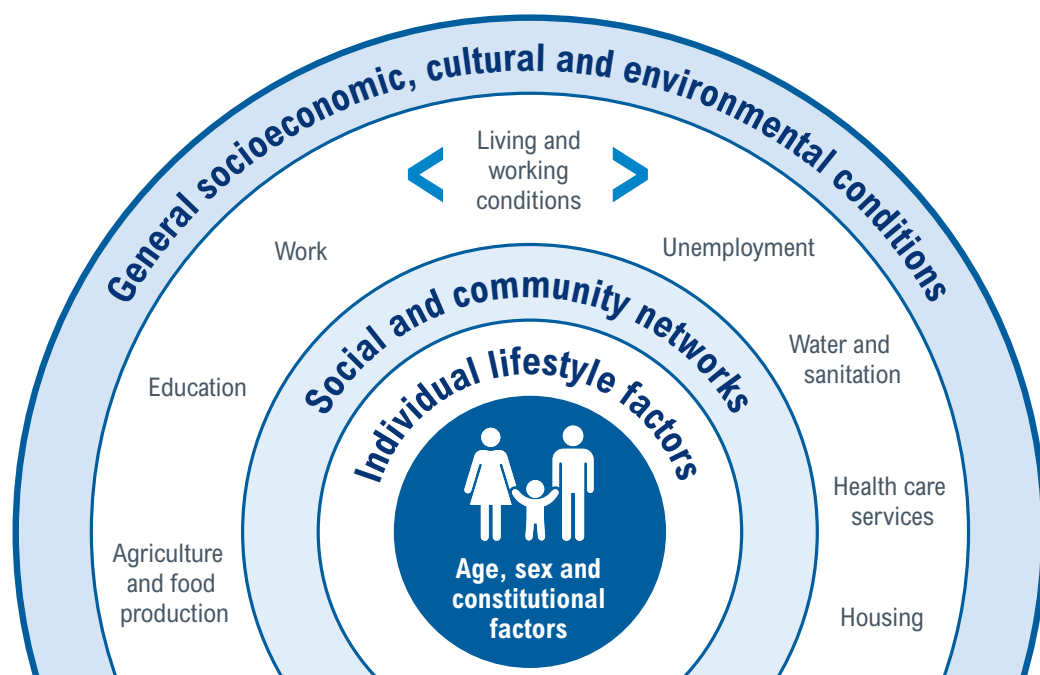


Diagram 1: A framework for the determinants of health. Source: the Australian Institute of Health and Welfare<sup>2</sup>

## Priority populations

Targeted interventions to reduce health inequities and to assist those in the community who have a higher risk of exposure to health risk factors are essential. The main priority populations in WA include Aboriginal people, those living in low socioeconomic circumstances, people with mental illness or disabilities, carers and families of people with sickness, populations living in rural and remote areas and Culturally and Linguistically Diverse (CALD) populations, particularly those people who have recently arrived in Australia.

<sup>1</sup> World Health Organization, Social Determinants of Health. 2017 Available from [www.who.int/social\\_determinants/en](http://www.who.int/social_determinants/en)

<sup>2</sup> Australian Institute of Health and Welfare, National Health Performance Framework (2nd edition), 2009 [www.aihw.gov.au/reports/australias-health/australias-health-2016/contents/chapter-7-indicators-of-australias-health](http://www.aihw.gov.au/reports/australias-health/australias-health-2016/contents/chapter-7-indicators-of-australias-health)

# Our vision for a healthier WA

We want the people of WA to experience the best possible health, wellbeing and quality of life. It is important that Western Australians are supported to actively participate in community life and that the places and spaces where they live, learn, work and play are safe, clean, green and accessible.





# State Public Health Plan Framework

Vision				
We want the people of WA to experience the best possible health, wellbeing and quality of life.				
Objectives				
Objective 1:	Objective 2:	Objective 3:		
Empowering and enabling people to live healthy lives	Providing health protection for the community	Improving Aboriginal health and wellbeing		
Priority risk factors for WA				
Poor diet Insufficient physical activity Overweight and obesity Smoking	Harmful use of alcohol Illicit drug use and misuse of pharmaceuticals Mental health issues	Environmental health risks Communicable disease risks Unprotected sex with infected persons Low immunisation rates		
Outcomes				
Improved public health and wellbeing of communities and vulnerable groups Reduced incidence of preventable illness, injury, disability and premature death				
Actions				
Existing programs and activities	New and emerging work priorities	Focus on priority populations		
Monitoring and reporting				
Annual review by individual program areas Individual program areas report through existing systems Five year review of the State Public Health Plan to support enactment of Part 5 of the <i>Public Health Act 2016</i>				
Guiding principles of the <i>Public Health Act 2016</i>				
Sustainability	Precautionary	Proportionality	Intergenerational equity	Local government



State Public  
Health Plan  
Objectives



# Public health objectives for WA

The following objectives represent the areas of public health priority for WA. By focusing action on these priority areas, we can aim to achieve the biggest gains in minimising deaths, burden of disease, reducing injury, and improving the quality of life for people living in WA.

The objectives and policy priorities identify high level strategic directions that focus on the promotion, improvement and protection of public health, and support the delivery of preventive public health services. It is important that these objectives and priorities are not viewed as separate and discrete, but rather that they each interrelate. By addressing improvements in one area; such as encouraging physical activity, improvements may occur in other areas; such as improving the mental health and wellbeing of individuals.

It is important that Aboriginal health and wellbeing is viewed as core business across all public health policy priorities. While Objective 3 details how initiatives are likely to maximise their effectiveness in improving Aboriginal health and wellbeing, the unique needs of this population must be considered within all policy priorities within Objectives 1 and 2.

The three objectives of the Plan include:

**Objective 1 – Empowering and enabling people to live healthy lives**

**Objective 2 – Providing health protection for the community**

**Objective 3 – Improving Aboriginal health and wellbeing**



# Objective 1: Empowering and enabling people to live healthy lives

Western Australians need to feel empowered and enabled to live healthy lives, such as eating more nutritious foods, taking action to keep active and making the time to focus on their overall health and wellbeing.

There are significant opportunities to improve the health and wellbeing of the WA population by improving the surrounding environment to create vibrant, liveable neighbourhoods that offer a sense of belonging, culture and spirit, and by facilitating behaviour change to support people to lead healthier lifestyles.

Consideration can be given to:

- designing neighbourhoods that make it easier for people to walk or cycle
- making it easier to access affordable fruit and vegetables
- decreasing unhealthy food and drink sold in publicly-owned facilities such as schools, hospitals, and sport and recreation centres
- creating green streetscapes by planting street trees along footpaths to encourage people to walk around the local neighbourhood
- making sure the community is safe and injuries are prevented by providing lighting for streets and public spaces, designing safe footpaths, roads and intersections and making sure playgrounds have seating and lots of shade
- supporting community services and events that encourage social connectedness and inclusion
- creating activated community spaces for people to meet and interact
- acknowledging heritage and cultural features in design and highlighting neighbourhood stories and history and
- developing local policies to address key public health issues including a:
  - whole organisation approach to alcohol and drug management
  - smoke free outdoor policy
  - shade policy for public open spaces and a
  - built environment policy to incorporate healthy urban design principles to the local environment.

Policy priorities	Priority activities
1.1 Healthy eating	<ol style="list-style-type: none"> <li>1. Foster environments that promote and support healthy eating patterns</li> <li>2. Increase availability and accessibility of quality, affordable, nutritious food</li> <li>3. Increase the knowledge and skills necessary to choose a healthy diet</li> </ol>
1.2 A more active WA	<ol style="list-style-type: none"> <li>1. Promote environments that support physical activity and reduced sedentary behaviour</li> <li>2. Reduce barriers and increase opportunities for physical activity across all populations</li> <li>3. Increase understanding of the benefits of physical activity and encourage increased activity at all stages of life</li> <li>4. Motivate lifestyle changes to reduce sedentary behaviour</li> </ol>



Policy priorities	Priority activities
<b>1.3</b> <b>Curbing the rise in overweight and obesity</b>	<ol style="list-style-type: none"> <li>1. Promote environments that support people to achieve and maintain a healthy weight</li> <li>2. Prevent and reverse childhood overweight and obesity</li> <li>3. Motivate behaviour to achieve and maintain a healthy weight among adults</li> </ol>
<b>1.4</b> <b>Making smoking history</b>	<ol style="list-style-type: none"> <li>1. Continue efforts to lower smoking rates</li> <li>2. Eliminate exposure to second-hand smoke in places where the health of others can be affected</li> <li>3. Reduce smoking in groups with higher smoking rates</li> <li>4. Improve regulation of contents, product disclosure and supply</li> <li>5. Monitor emerging products and trends</li> </ol>
<b>1.5</b> <b>Reducing harmful alcohol use</b>	<ol style="list-style-type: none"> <li>1. Change community attitudes towards alcohol use</li> <li>2. Influence the supply of alcohol in accordance with the <i>Liquor Control Act 1998</i></li> <li>3. Reduce demand for alcohol</li> <li>4. Promote environments that support people not to drink or to drink at low-risk levels</li> </ol>
<b>1.6</b> <b>Reduce use of illicit drugs, misuse of pharmaceuticals and other drugs of concern</b>	<ol style="list-style-type: none"> <li>1. Increase helpseeking behaviour and reduce stigma around illicit drugs and emerging drugs of concern</li> <li>2. Support state-wide evidence-based strategies to prevent and reduce illicit drug use and related harms</li> <li>3. Increase awareness of the harms associated with illicit drug use, while not being stigmatising</li> <li>4. Continue to mobilise communities and other stakeholders to work in partnership on evidence-based prevention activities addressing drug use and related harm</li> <li>5. Develop personal skills, targeted public awareness and engagement regarding misuse of pharmaceuticals and other drugs of concern</li> </ol>
<b>1.7</b> <b>Optimise mental health and wellbeing</b>	<ol style="list-style-type: none"> <li>1. Increase public awareness about mental health and wellbeing, and suicide prevention</li> <li>2. Build community capacity to reduce stigma, increase awareness of where to go for help, and promote strategies to optimise mental health and wellbeing</li> <li>3. Create and maintain supportive environments that increase social connectedness and inclusion, community participation and network</li> </ol>
<b>1.8</b> <b>Preventing injuries and promoting safer communities</b>	<ol style="list-style-type: none"> <li>1. Protect children from injury</li> <li>2. Prevent falls in older people</li> <li>3. Reduce road crashes and road trauma</li> <li>4. Improve safety in, on and around water</li> <li>5. Reduce interpersonal violence</li> <li>6. Develop the injury prevention and safe communities sector</li> <li>7. Monitor emerging issues in injury prevention</li> <li>8. Promote sun protection in the community</li> <li>9. Prevent and reduce alcohol intoxication</li> </ol>

## Objective 2: Providing health protection for the community

The health and safety of the WA community has been maintained to a high standard due to the long standing public and environmental health services managed by State and local governments across WA. The successful implementation of these services has helped to prevent, reduce or even eliminate the prevalence of many diseases, illness and injury.

It is essential that governments continue to invest in and manage these traditional public and environmental health services which play a critical role in preventative health. This includes the enforcement of regulations and guidelines, the management of surveillance and assessment programs and public education which are designed to provide clean air, safe food and water, and a hazard free environment.



Governments must also be capable of planning for and responding to emerging risks, such as the health impacts associated with climate change, diseases that may emerge or increase, or changes to industries that may present health concerns.

Providing health protection for the community requires consideration of:

- Administering and enforcing compliance with public health legislation, such as inspecting food businesses to reduce food-borne disease risks, assessing body piercing and tattoo parlours to reduce blood-borne virus risks, and monitoring swimming pools to reduce water-borne disease risks and injuries
- Supporting safe community events, homes and public buildings
- Responding to community concerns about inappropriate needle and syringe disposal and supporting needle and syringe programs
- Promoting and supporting immunisation of children and high risk groups in the community
- Supporting the investigation and reporting of disease outbreaks and other health risks
- Increasing awareness about common risks such as asbestos, water hazards and food safety practices
- Implementing strategies to minimise mosquito breeding sites and reduce mosquito-borne disease risks
- Assessing development applications for potential health impacts and implementing strategies to address these risks in the early planning phases of projects
- Planning for extreme weather events such as floods, droughts, bushfires and storms to ensure effective responses can take place.

Policy priorities	Priority activities
<b>2.1</b> <b>Reduce exposure to environmental health risks</b>	<ol style="list-style-type: none"> <li>1. Maintain safe food and water</li> <li>2. Maintain healthy built environments</li> <li>3. Manage environmental hazards to protect community health</li> <li>4. Improve the environmental health conditions in remote Aboriginal communities</li> </ol>
<b>2.2</b> <b>Administer public health legislation</b>	<ol style="list-style-type: none"> <li>1. Continue to administer, enhance and provide policy support for public health legislative instruments, including:               <ol style="list-style-type: none"> <li>a) <i>Public Health Act 2016</i></li> <li>b) <i>Health (Miscellaneous Provisions) Act 1911</i> and subsidiary legislation</li> <li>c) <i>Food Act 2008</i></li> <li>d) <i>Medicines and Poisons Act 2014</i></li> <li>e) <i>Tobacco Products Control Act 2006</i></li> <li>f) <i>Liquor Control Act 1988</i></li> </ol> </li> </ol>
<b>2.3</b> <b>Mitigate the impacts of public health emergencies</b>	<ol style="list-style-type: none"> <li>1. Ensure public health emergencies are included in emergency and disaster planning</li> <li>2. Maintain continuous improvement in the response to public health emergencies</li> <li>3. Strengthen the preparedness and resilience of communities against extreme weather events, with a focus on the most vulnerable in the community</li> <li>4. Establish a climate change adaptation plan to protect public health from the harmful health impacts of climate change</li> </ol>
<b>2.4</b> <b>Support immunisation</b>	<ol style="list-style-type: none"> <li>1. Continue efforts to increase vaccination coverage for young children, adolescents and adults</li> <li>2. Improve immunisation education and consent processes</li> <li>3. Sustain mechanisms for the surveillance and follow-up of suspected adverse events following immunisation</li> </ol>
<b>2.5</b> <b>Prevention and control of communicable diseases</b>	<ol style="list-style-type: none"> <li>1. Coordinate state-wide surveillance of notifiable communicable diseases</li> <li>2. Conduct and coordinate outbreak investigations of communicable diseases</li> <li>3. Continue to support and enhance disease control prevention and education programs delivered by stakeholders, including access to hardware and equipment to prevent communicable diseases</li> <li>4. Eliminate stigma and discrimination around sexually transmitted infections and blood-borne viruses</li> <li>5. Maintain and improve partnerships with stakeholders engaged in communicable disease control activities</li> </ol>
<b>2.6</b> <b>Promote oral health improvement</b>	<ol style="list-style-type: none"> <li>1. Support activities that promote oral health</li> </ol>



# Objective 3: Improving Aboriginal health and wellbeing

Recognition that culture is a central determinant of the health and wellbeing of Aboriginal people is critical. The health of the Aboriginal population must be viewed holistically, incorporating physical wellbeing with the social, emotional, and cultural wellbeing of the whole community. Strengthening family systems and preserving and promoting culture results in stronger, healthier, and re-empowered communities.

The very existence of the health gap between the Aboriginal and the non-Aboriginal population highlights the need for the development and implementation of targeted and innovative approaches. These approaches are required both within the modifiable behavioural health risk initiatives (as outlined in Objective 1) and within broader health protection initiatives (as outlined in Objective 2).

Services at the local level should recognise the protective factors of culture and its effect on positive wellbeing. Recognition of, and engagement with cultural strengths will improve Aboriginal people's access to timely and culturally appropriate health care and services.

Similarly, the environments in which Aboriginal people live have a significant impact on their health and wellbeing, and need to be conducive to good health. This includes access to healthy food options, clean water and adequate sanitation. Initiatives in Aboriginal communities, whether remote, regional or suburban, must give attention to healthy environments, healthy policies and support for a skilled and competent Aboriginal health workforce.

Therefore, in addition to Objectives 1 and 2, the priorities for improving the health and wellbeing of the Aboriginal population must be:

- culturally secure
- developed in partnership with the wider Aboriginal community
- led by Aboriginal-controlled agencies where possible
- accessible and equitable; and
- viewed as core business for all stakeholders.

We have a responsibility to work closely with the many organisations across the State to manage a range of projects, programs and other initiatives to address public health issues for Aboriginal people.



Policy priorities	Priority activities
<b>3.1</b> <b>Promote culturally-secure initiatives and services</b>	<ol style="list-style-type: none"> <li>1. Complement population-wide approaches with targeted programs that are culturally-secure and meet the needs of Aboriginal people</li> <li>2. Ensure services, programs, and initiatives work within a holistic framework that recognises the importance of connection to country, culture, spirituality, family and community</li> </ol>
<b>3.2</b> <b>Enhance partnership with the Aboriginal community</b>	<ol style="list-style-type: none"> <li>1. Ensure ongoing collaboration with the Aboriginal community to create a two-way transfer of skills and ensure that Aboriginal people's cultural rights, beliefs and values are respected in the development of health and wellbeing responses</li> <li>2. Ensure a coordinated and collaborative approach to service delivery through knowledge exchange, information sharing and the pooling of resources, where possible</li> </ol>
<b>3.3</b> <b>Continue to develop and promote Aboriginal controlled services</b>	<ol style="list-style-type: none"> <li>1. Work closely and collaboratively with Aboriginal controlled organisations in the development and delivery of culturally secure responses</li> <li>2. Ensure ongoing participation by Aboriginal controlled organisations in decision-making to take back care, control and responsibility of their health and wellbeing</li> </ol>
<b>3.4</b> <b>Ensure programs and services are accessible and equitable</b>	<ol style="list-style-type: none"> <li>1. Ensure programs and services are physically and culturally accessible to Aboriginal people</li> <li>2. Develop programs and services that are inclusive of the needs of Aboriginal people</li> <li>3. Incorporate Aboriginal ways of working that facilitate the engagement of Aboriginal people</li> </ol>
<b>3.5</b> <b>Promote Aboriginal health and wellbeing as core business for all stakeholders</b>	<ol style="list-style-type: none"> <li>1. Ensure all relevant stakeholders consider and respond to the needs of Aboriginal people as part of their core business and not only through specific funded programs</li> <li>2. Ensure services work together to acknowledge and address the impact of the cultural and social determinants of health</li> <li>3. Enhance the capacity of the Aboriginal workforce</li> </ol>

# Action plan

The following actions identify some of the initiatives that will be led by the WA Health system, which includes the Department of Health and the five Health Service Providers (HSPs), North, South and East Metropolitan Health Service, WA Country Health Service and Child and Adolescent Health Service, and the Mental Health Commission, that are central to achieving the objectives of this State Public Health Plan.

It is important to acknowledge that many of these actions require a collaborative approach across multiple sectors, local government, non-government organisations, businesses and the general community, in order for their successful implementation. Local governments will further contribute towards meeting the objectives of this State Public Health Plan by identifying local actions in their local public health plans that are relevant to the health and wellbeing needs of their local community.

## Objective 1: Empowering and enabling people to live healthy lives

Public health initiatives, projects and programs that support the implementation of Objective 1	Leading agency
1. Implement recommendations of the <a href="#">Sustainable Health Review</a> as they apply to prevention of chronic disease, injury and mental health.	WA Health / MHC
2. Promote and support the WA health system and where appropriate, broader public sector implementation of the <a href="#">Health Promotion Strategic Framework 2017-2021</a> .	WA Health
3. Develop and grow partnerships across government and the not for profit sector to advocate for chronic disease and injury prevention across the State.	WA Health
4. Continue to invest in high-quality, evidence based State-wide comprehensive health promotion programs to support healthy lifestyle behaviours including the <a href="#">LiveLighter</a> and <a href="#">Make Smoking History</a> campaigns.	WA Health
5. Engage with the Health Service Providers to support local government public health planning and further strengthen preventive health synergies with the WA Local Government Association.	WA Health
6. Contribute to discussions and providing advice on State and Commonwealth legislation and regulation to prevent chronic disease and injury and promote healthy living.	WA Health
7. Implement the initiatives outlined in <a href="#">Suicide Prevention 2020: Together we can save lives</a> .	MHC
8. Deliver elements of the <a href="#">Western Australian Mental Health Promotion, Mental Illness, Alcohol and Other Drug Prevention Plan 2018-2025</a> .	MHC
9. Support the placement of Suicide Prevention Coordinators in each region.	MHC
10. Deliver 24 hour counselling and support through the <a href="#">Alcohol Drug Support Service</a> .	MHC



Public health initiatives, projects and programs that support the implementation of Objective 1		Leading agency
11.	Continue to implement State-wide public education campaigns to optimise mental health and wellbeing, and to reduce harmful alcohol and drug use, including the <a href="#">Think Mental Health</a> , <a href="#">Alcohol.Think Again</a> , <a href="#">Drug Aware</a> and <a href="#">Strong Spirit Strong Mind</a> campaigns.	MHC
12.	Provide evidence based information to local governments interested in alcohol management via the Local Government Alcohol Management Project.	MHC
13.	Continue to develop knowledge and skills within the alcohol and other drugs, mental health and broader human services sector to work in culturally secure ways through workforce development initiatives.	MHC
14.	Support development of the Thrive at Work strategy to assist workplaces to mitigate stigma associated with mental health issues and to promote thriving workplaces that support optimal mental health and wellbeing.	MHC
15.	Continue to advocate for and implement strategies to support safer music festivals, night time venues and related events.	MHC
16.	Support implementation of the Alcohol and other Drug Interagency Framework.	MHC

## Objective 2: Providing health protection for the community

Public health initiatives, projects and programs that support the implementation of Objective 2		Leading agency
1.	Support the implementation of the recommendations of the <a href="#">Sustainable Health Review</a> that relate to prevention, community health protection and climate change adaptation	WA Health
2.	Maintain programs, policies and guidelines to support stakeholders to effectively identify and manage environmental health hazards	DOH
3.	Continue to coordinate and fund the delivery of the state-wide <a href="#">Aboriginal Environmental Health program</a> .	DOH
4.	Ensure remote communities managed by service providers have a current <a href="#">Community Environmental Health Action Plan</a> .	WA Health
5.	Implement environmental improvements in trachoma at-risk Aboriginal communities including emergency plumbing repairs and <a href="#">safe bathroom checks</a> .	WA Health
6.	Develop online resources to support local government enforcement agencies to enforce the <i>Public Health Act 2016</i> .	DOH
7.	Work with government, industry and the public on legislation or guidance materials to manage priority environmental health risk activities in accordance with the <i>Public Health Act 2016</i> .	DOH
8.	Support the implementation of the outcomes of the <a href="#">WA Foodborne Illness Reduction Strategy 2018 – 2021+</a> .	DOH

Public health initiatives, projects and programs that support the implementation of Objective 2		Leading agency
9.	Support the promotion of the <a href="#">Health Star Rating Toolkit</a> across WA to help the community make healthier food choices for packaged products.	WA Health
10.	Continue to fund and coordinate the <a href="#">Contiguous Local Authority Group (CLAG)</a> funding scheme to support local governments to manage insect-borne disease risks of public health significance across WA.	DOH
11.	Support the promotion of the <a href="#">Fight the Bite</a> campaign across WA and by local governments to reduce mosquito borne disease risks.	WA Health
12.	Implement the <a href="#">WA Immunisation Strategy 2016–2020</a> .	WA Health
13.	Publish guidelines and reports for surveillance and investigations of notifiable communicable diseases and hospital acquired infections in WA.	WA Health
14.	Develop online resources that detail opportunities for local government to engage in communicable disease prevention activities.	WA Health
15.	Provide support to local governments in providing needle and syringe program and outreach services that are accessible to Aboriginal people.	WA Health
16.	Resolve legal barriers to vaccination by Aboriginal health workers and train and empower Aboriginal health workers to vaccinate through expansion of the current Immunisation Competency Training Program.	WA Health
17.	Support the Health Service Providers in improving human papillomavirus (HPV) immunisation rates in Aboriginal adolescents.	WA Health
18.	Support the Health Service Providers and other stakeholders in the response to higher rates of sporadic cases and outbreaks of communicable diseases and develop and implement policies to help reduce disease rates.	WA Health
19.	Support local government in providing a <a href="#">needle and syringe program</a> and outreach services.	WA Health
20.	Build the capacity of local government youth workers in promoting sexual health and in improving accessibility and dispensing safe sex hardware.	WA Health
21.	Support the implementation of the <a href="#">WA Aboriginal Sexual Health and Blood-borne Virus (BBV) Strategy 2019–2023</a> (currently under review) and the <a href="#">National Aboriginal and Torres Strait Islander Blood Borne Viruses and Sexually Transmissible Infections Strategy 2018–2022</a> .	WA Health
22.	Continue to coordinate and improve priority programs such as Regional Immunisation, WA Trachoma Program, and State Rheumatic Heart Disease and Acute Rheumatic Fever.	WA Health
23.	Undertake and interpret state-wide surveillance of notifiable communicable diseases and review behavioural studies to inform communicable disease prevention and control policy and activities.	DOH
24.	Provide communicable disease surveillance data and interpretation to support local government public health planning.	WA Health
25.	Support the implementation of the <a href="#">State Oral Health Plan 2016–2020</a> .	WA Health

## Objective 3: Improving Aboriginal health and wellbeing

Public health initiatives, projects and programs that support the implementation of Objective 3		Leading agency
1.	Promote and support the WA health system and public sector-wide implementation of the <a href="#">WA Aboriginal Health and Wellbeing Framework 2015–2030</a> .	WA Health
2.	Implement recommendations of the <a href="#">Sustainable Health Review</a> as they apply to the health and wellbeing of the WA Aboriginal population.	WA Health
3.	Engage with Aboriginal families using strength-based approaches to effect change in behaviours and health outcomes.	WA Health
4.	Work in partnerships across sectors (eg justice, mental health and drug and alcohol) to strengthen and improve the provision of holistic care and support for Aboriginal people.	WA Health
5.	Work closely with Aboriginal community controlled health services, HSPs, WA Primary Health Alliance (WAPHA) and other stakeholders to deliver culturally secure health promotions to encourage positive health behaviours and informed decision making (eg positive mental health, safe sex practices, alcohol and drug use).	WA Health
6.	Work with Aboriginal communities and stakeholders to develop and implement strategies that maximise Aboriginal participation in prevention and early intervention programs.	WA Health
7.	Engage with health and wellbeing organisations to build organisational capacity in their Aboriginal cultural competency.	WA Health
8.	Promote continued development in Aboriginal cultural learning within health and wellbeing stakeholders across WA.	WA Health
9.	Build the Aboriginal workforce within health and wellbeing stakeholders across WA.	WA Health
10.	Establish a formal clinical referral process between primary and secondary health and environmental health service providers.	WA Health
11.	Ensure access is provided to foundational Certificate II level training and education in environmental health for all Department of Health contracted Aboriginal EH Practitioners.	WA Health



# Monitoring and reporting

To support the implementation of the State Public Health Plan, the individual program areas across the WA Health system and Mental Health Commission are responsible for monitoring and reporting progress for their applicable priorities and actions through their existing reporting processes.

Once Part 5 of the *Public Health Act 2016* is enacted the Chief Health Officer of the Department of Health is required to report annually in accordance with the requirements of the *Financial Management Act 2006*. The State Public Health Plan must be reviewed at least annually or as required in accordance with the *Public Health Act 2016* to ensure it continues to respond to the needs of the community, and that the objectives and policy priorities remain current.

## Partnerships

The implementation of the objectives and policy priorities of the State Public Health Plan are the collective efforts across multiple government sectors, local government, non-government organisations, businesses and the general community, in order for successful implementation.

Key partnerships that will support implementation of this Plan include, but are not limited to, the Mental Health Commission, the Health Service Providers – North, South and East Metropolitan Health Services, the WA Country Health Service and the Child and Adolescent Health Services, PathWest, the Western Australian Local Government Association, local governments across WA, as well as the many not-for-profit organisations with a responsibility for preventative health.

Local governments who initiate the public health planning process are encouraged to partner with their respective Health Service Provider for support with the planning process.

## Local government and public health planning

Resources to support local government officers to develop a public health plan are available on the public health planning page [www.health.wa.gov.au](http://www.health.wa.gov.au).

Although Part 5 of the *Public Health Act 2016* is not yet a legal requirement, it is important that local governments start the process of embedding public health planning as a core function of business. Public health planning has been designed to complement the integrated planning process required under the *Local Government Act 1995*, to support and drive ongoing improvements to the health and wellbeing of local communities.

There are numerous partnerships that can be made and great programs and initiatives to complement the work of local governments.

Local governments are encouraged to partner with the Population Health Unit from the relevant Health Service Provider; North, South or East Metropolitan Health Service, the WA Country Health Services or the Child and Adolescent Health Services, who can provide a level of guidance with the planning process. This includes the provision of specific health data for use in health profile reports.



This document can be made available in alternative formats on request for a person with disability.

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