



From the President

A Cautionary Tale for Health Promotion in Australia

This is an abridged version of a 'tale'* about the rise and fall of an occupational group in England, called health promotion specialists. The occupation flourished between 1980–2000 and was making moves to become a profession. In fact by the mid 1990s they numbered about 1000 and then POOF! By the end of the 1990s they were no more – 'a steep and disastrous fall' according to one academic's analysis.

How could this happen? In a post analysis, several interlocking themes contributing to the decline emerged. One concerned the moving of health promotion from local authorities to the National Health Service (NHS) – primarily a treatment service. Then came numerous reorganisations and reshaping of the treatment services – health promotion, prevention and population health were marginalized and seen as difficult to place [do I hear a warning bell ringing in Australia?]. It was argued that because health promotion straddled the boundaries between planning and provision

it simply didn't fit the treatment services model. The result of the reorganisations in England, it is claimed, was dislocation and fragmentation of the health promotion service and the occupation – resulting, it is said, in a significant impact on the national capacity to address issues of equity and the 'upstream' agenda.

What else happened? In addition to service fragmentation, there was the failure of a professionalisation project, as well as an insidious change in terminology. The explicit mention of health promotion specialists and the health promotion discourse in NHS policy papers, government white papers, public health and social policy papers... disappeared. 'Health promotion' and 'health education' were substituted with the more ill-defined terms 'prevention', 'health development', 'health advancement', 'public health' – all seen to contribute to the downfall of health promotion [do I hear the sound of those warning bells again in Australia!].

Was this purposeful and why was it so? Important questions that cannot be dealt with adequately in this brief newsletter item. Suffice it to say that a report in England that started off to redeem health promotion, initially called *Shaping the Future of Health Promotion* was changed at the very last minute to *Shaping the Future of Public Health*. Perhaps the answer is there somewhere... a cautionary tale for Australia indeed...

Back in Australia – the Australian National Preventive Health Agency Bill 2010 is soon to go before Parliament again. In a recent Memo (accessed at www.health.gov.au) I saw that health promotion and the World Health Organization's definition of health promotion have made it into the Bill – and that the Director will be directly responsible to the Minister not to the Director of the Department of Health and Ageing – this bodes well for the visibility of health promotion. The fact that health promotion has been added to the Bill is encouraging – but the rise and fall of the health promotion discourse and occupation in England remains a cautionary tale for Australia.

Suzanne Gleeson

President
Australian Health Promotion Association

* *The information on England is from the works of Dr Peter Duncan and Dr Alex Scott-Samuel. References can be supplied upon request.*

Health Promotion Journal of Australia – reflections on the year past

Ben Smith & Craig Fry,

Health Promotion Journal of Australia co-Editors

The Health Promotion Journal of Australia (HPJA) made the leap into cyberspace in July with the adoption of the ScholarOne online manuscript system. In case you missed the announcements, submissions and revisions of manuscripts are now handled through our online portal: <http://mc.manuscriptcentral.com/hpja>

Progress has also been made during the year in the development of Submission Guidelines for authors. Visit www.healthpromotion.org.au/journal/submit-an-article/271 for guidance on

the need for ethical approval of research and evaluation projects written up for submission to the Journal.

Another highlight of 2010 was the inauguration of the Ray James Award, which was conferred for the first time at this year's National Conference in Melbourne. Along with commemorating the contribution that Ray James made to the Association, we hope that this will be an incentive for authors to submit manuscripts and a way of recognising excellence in writing for a peer-reviewed publication.

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Health Promotion Journal of Australia – reflections on the year past

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A significant recent change is that one of our co-Editors, Helen Keleher, has finished up in her role with the HPJA. Helen's contributions and standing in public health in Australia have been recognised in her election to the position of President of the Public Health Association of Australia, and the demands of this position will mean that she won't be able to continue to be involved with the HPJA. We are grateful for the work that Helen has done for the Journal over the past 3 years, and are in the process of seeking a replacement for her.

Looking towards 2011, our focus will be on improving communication to a range of audiences about the Journal and the opportunity it presents as a forum for ideas and a means of disseminating research and evaluation evidence. We hope the HPJA will continue to publish commentary papers and letters that foster critical reflection and debate about different areas of practice.



CLIMATE AND
HEALTH
ALLIANCE

Climate and Health Alliance

Fiona Armstrong, Convenor, Climate and Health Alliance; Fellow, Centre for Policy Development

The recently established Climate and Health Alliance (CAHA) – of which the Australian Health Promotion Association is a member – is already having an influence with meetings being sought with the Alliance by parliamentary advisors.

CAHA Convenor Fiona Armstrong met in October with the office of the Minister for Sustainable Population, Tony Burke, who has asked the Alliance to contribute to the process for developing the federal Sustainable Population Strategy, the draft of which is due for release in April 2011. The Minister's office is particularly interested in hearing about the health issues associated with population growth.

The CAHA was established in August 2010 and is a coalition of health care stakeholders who wish to see the threat to human health from climate change and ecological degradation addressed through prompt policy action. This commitment is based on the understanding that further global warming poses grave risks to human health and biodiversity, and if left unchecked, threatens the future of human civilisation.

For more information visit <http://climateandhealthalliance.blogspot.com>

International Climate Change Adaptation Conference Report

James Smith, Vice President, Australian Health Promotion Association; Adaptation College Fellow, National Climate Change Adaptation Research Facility

The National Climate Change Adaptation Research Facility and the CSIRO Climate Change Flagship co-hosted the world's first International Climate Change Adaptation Conference, 29 June – 1 July 2010, titled *Climate adaptation futures: Preparing for the unavoidable impacts of climate change*. It was multidisciplinary in scope, yet largely dominated with delegates concerned with 'biophysical aspects of climate change science'. There was much discussion relating to the science-policy interface, but little attention to what practitioners (from a range of backgrounds) could offer in relation to implementing adaptation strategies.

I found the conference challenging, frustrating and insightful. *Challenging* because this is such a new field and there is so much room for action; *frustrating* because there was lots of rhetorical discussion, and a lack of understanding, about what social scientific perspectives can offer (while there were

repeated calls to learn from, and join forces with, the 'social scientists' – there were just too few in the room); and *insightful* because climate change adaptation remains a relatively uncharted terrain for many people working in the health sector. There was a conference thread on 'public health adaptation to variability and change', with oral presentations primarily focused on extreme weather events, environmental health indicators and state-based adaptation strategies to climate change and human health; and poster presentations tackling issues such as how to embed a climate change focus into primary health care frameworks, and tailoring mental health promotion in rural and remote areas in the context of climate change. In addition to these presentations, the most interesting aspects of the program were those that either recognised or addressed social determinants of health. Some presentations explicitly looked at issues relating to climate change and equity. For example, climate change adaptation on human

security on the Solomon Islands; homelessness and increasing climate variability in Canada; and social resilience to climate variability in primary enterprises and industries. There was also a keynote presentation by Neil Adger from the Tyndall Centre for Climate Change at the University of East Anglia, UK in relation to equity and the economic impacts of climate change adaptation. In summary, the conference provided a compelling account for greater action to support climate change adaptation, including those relating to human health, at local and global levels. It appears that the health promotion community is well positioned to take such action!!!

For those interested in the relationship between climate change and human health you may be interested in joining the Human Health Network of the National Climate Change Adaptation Research Facility.

For more information visit www.nccarf.edu.au/humanhealth/

The National Prevention Agency: A pyrrhic victory for preventive health?

Heather Gilbert,

Master of Public Health student

The Australian National Preventive Health Agency Bill 2010, despite its delayed passage through the House of Representatives in October 2010, raises questions about the perils of haste.

In the June 2010 edition of *Update*, the President of AHPA, Suzanne Gleeson, expressed concern that the proposed National Prevention Agency (NPA) is not founded on a sufficiently broad vision of health promotion. Indeed, \$102 million of the NPA's proposed \$133.2 million budget is allocated to marketing campaigns to target obesity, tobacco and other substance abuse and alcohol. Yet two years after it was agreed to by the Council of Australian Governments, the priority of some key players leading up to and beyond the Election was to urge for the Bill's quick acceptance rather than to amend its core functions.

There is an acute need for a national approach to health promotion and additions to the public health infrastructure are supported with an understandable sense of urgency. But the limits of the risk factor epidemiology that underpins the lifestyle approach have been identified by biologists, health promotion practitioners and libertarians alike. Thirty years on from the Ottawa Charter, the lifestyle model of health promotion still dominates federal Australian health policy. This raises two questions: Are lifestyle campaigns effective? If they are of modest or uncertain benefit, are they a defensible lesser evil in the choice between something and nothing? In this article I explore the perspective that this approach may involve more risks than previously acknowledged.

Mass media interventions can be an affordable form of prevention but their effect may be limited unless used within a suite of interventions that target the regulatory, physical and social environment in which behaviour occurs. A strength of the National Preventative Health Strategy (NPHS) is the priority it gives to these fundamental strategies, such as pricing and packaging controls on tobacco and settings-based

interventions. Obesity is an example of an area in which structural action is needed to complement the NPA's lifestyle campaigns, yet under Action Area 1 of the NPHS – environmental measures to promote physical activity – the Government rejected most recommendations. Similarly, the \$13 million allocated to a preventive health research fund is helpful yet small in relation to the investment on social marketing.

The "does it work?" debate has persisted for thirty years, yet whether lifestyle campaigns may be harmful is less often examined. Indeed, the risks are denied on the basis that *anything* is better than nothing. Evans (1997), for instance, characterised lifestyle prevention as an innocuous strategy that "probably ... [does] no harm, may do some good, and offer[s] the psychological rewards of the celebration of wellness".

In a recent debate over risk factors versus social determinants, the taskforce's Deputy Chair, Professor Daube, reiterated this stance when – after acknowledging the role of social determinants – he concluded "advocates for prevention are few enough. We have ... opposition ... wherever we look, so we can't afford the distraction of arguments over philosophies".

Yet if arguments over philosophies are not had, an incomplete model of prevention may arise and this carries five risks. Firstly, it may compound health inequalities by encouraging change in those who are better positioned to make those changes. Secondly, it supports a role for state intervention in private life without clear evidence that it will be accompanied by a compensatory public good. Thirdly, future funding may be curtailed if mass media programs are ineffective. Fourthly, a publicly funded social advertising agency is not the independent bureau envisaged by advocates and may lack the strategic focus and resourcing to support a broader health promotion agenda. Finally, it could be considered inefficient to create a new agency to perform functions that were already handled within existing government agencies.

The NPA raises the status of prevention at the expense of promoting an incomplete

model of prevention. The proposal for the NPA and its widespread acceptance in the health community illustrates the trades inherent in the health policy "market". Trades are inevitable, given health policy's political nature, but if too substantial may hurt the credibility of the prevention enterprise, in regards to its efficacy, its efficiency, its ethical basis and consequently its long term potential for popular support. Thus, the rhetoric-reality gap in prevention in part perpetuates itself: scarcity of success makes advocates willing to accept even the appearance of improvement.

References can be supplied upon request.



PhD Opportunities in Workplace Health – commencing 2011

The Menzie's Research Institute is offering three Elite University of Tasmania Research Scholarships to undertake PhD research on creating healthy workplaces.

Applicants should have an Honours degree (or equivalent) in health, social sciences, economics or other relevant field.

The successful candidates will join a team of experienced public health researchers and policy makers funded by a National Health & Medical Research Council Partnership Grant. They will undertake research in lifestyle, mental health or economics with fantastic opportunities to influence the policy and practice of future workplace health promotion.

For more details visit
www.menzies.utas.edu.au/partneringHatW
or contact Prof. Alison Venn
(03) 6226 7706

Alison.Venn@utas.edu.au



AHPA's Aboriginal and Torres Strait Islander Working Group

Jenni Judd, AHPA National Management Committee Member; AHPA Aboriginal and Torres Strait Islander Working Group Chair

Many of our members would not be aware that under the AHPA National Management Committee there is a number of working groups. Importantly, the Aboriginal and Torres Strait Islander Working Group is a standing sub-committee. Its purpose is to provide coordination and leadership of AHPA initiatives to assist in advocacy and improvement in the health of Aboriginal and Torres Strait Islander people, particularly in relation to the Closing the Gap initiatives. Our work to date has focussed on the following:

- Given that AHPA was not sure how many Aboriginal and Torres Strait Islander members it had, we have made some changes to the membership form to capture this information, which will also mean that we can then follow up with members through their state/territory branches to ensure that we meet the needs of this group. We are also exploring the possibility of a discounted membership.
- During the National Conference in Melbourne, members would have noticed the missing Indigenous Health workshop that usually occurs on the Sunday before the conference. This working group has taken some responsibility to ensure that the pre-conference Indigenous workshop occurs and that there is an Indigenous Stream within the main program for the conference. The QLD Branch has an active Indigenous conference working group who are coordinating that process for Cairns in 2011, chaired by Patrice Herald.
- Finally, we have also been involved in the International Network of Indigenous Health Promotion Professionals (INNIHPP). At the recent IUHPE conference in Geneva, we successfully ran 4 Indigenous Success Stories in Health Promotion workshops with our colleagues from the US, Canada, New Zealand and Australia.

If you are interested in contributing to this working group contact Jenni Judd at jenni.judd@jcu.edu.au

AHPA's 20th National Conference

Kirsty Pickering, Conference Convenor; AHPA QLD Branch President

The Queensland Branch takes great pleasure in hosting AHPA's 20th National Conference at the Cairns Convention Centre, 10–13 April 2011. The conference theme is 'Health Promotion and Determinants of Health: Strengthening Action'. The conference sub themes focus on the upstream, midstream and downstream factors that contribute to socioeconomic health inequalities. There are also sub themes focusing on actions to close the gap on Aboriginal and Torres Strait Islander determinants of health, and international work to address the determinants of health.

The report of the Commission on Social Determinants of Health stressed the need to tackle the leading causes of ill-health at their roots, going beyond encouraging individuals to change their behaviour. The Conference will contribute to this challenge by bringing together people from many disciplines and sectors working in health promotion, population health and related sectors.

Join us in Cairns to celebrate successful and innovative approaches to addressing the determinants of health and prepare to further strengthen action in this arena to improve the health of Australians. Don't miss out on this opportunity to share your work with colleagues, learn about new approaches to addressing the determinants, as well as hear the latest evidence from keynote presenters. For more information visit www.healthpromotion.org.au



10 point plan for Victorian Women's Health

Jenny Jackson, Chief Executive Officer, Women's Health East

Victorian women's health services have recently developed and released a new *10 point plan for Victorian Women's Health 2010–2014*. To date over 90 organisations – including the Australian Health Promotion Association – have formally endorsed the plan.

The plan seeks to highlight the key issues facing women in Victoria while also identifying strategies to change and improve their health and wellbeing. It builds on the 2006 document, *Women's Health Matters: From Policy to Practice – Setting an Agenda for Victorian Women's Health 2006–2010*, and reiterates the call for a whole of government strategy and action plan for improving women's health. It calls for initiatives to be developed in close collaboration with the women's health sector, with a strong emphasis on outcomes that can be measured, monitored and reported on in a transparent manner.

For more information visit www.whv.org.au and www.whe.org.au

Was that 2010? I wouldn't have known...

A GEN Y'S LAMENT ON THE ABSENCE OF SOCIAL MEDIA IN HEALTH PROMOTION

Kristy Schirmer, Senior Health Promotion Officer

This year I turned 29 which makes me a straddler between a gen x and a gen y. Put it this way, I can answer questions directed at both categories on a popular channel 10 entertainment program.

In my private life I use Twitter and Facebook. I have apps for both on my iPhone which was my favourite purchase of 2010. I check Facebook everyday. I sync my Outlook calendar for work with my iPhone calendar, and privately tsk those who arrive at meetings with paper diaries.

By now I should have demonstrated to you that I tick the box of several gen y stereotypes.

This year I attended AHPA's National Conference in Melbourne. I applauded the conference organisers for their efforts in making the conference greener, and loved the video montage that was put together at the end. However I couldn't believe how little technology was used. I optimistically looked for the ability to tweet comments or questions to presenters, to show delegate's reactions and feedback to presenters using hashtags such as #AHPA on a twitter feed that could be later archived, or have delegates posting photos or videos during the conference. These are simple things that many delegates could have done from the technologies already in their pockets. Alas, there was still the ubiquitous roving microphone.

OK, that was in our professional world, what about in our actual core work in health promotion?

My personal experience is that we are still jumping straight to traditional settings and communication as the default solution, and talk about social media as a "too hard basket" option, or something to do only if there is time. There also seems to be a lot of resistance in a risk-averse government about using social networking in our work. I too often hear social media and social networking offered as a solution to "young people's issues", and not for mainstream, or whole of population health issues, and certainly not for something exclusively targeted at the over 35s as many "lifestyle" campaigns are.

This year I stumbled across some fantastic literature from the Inspire Foundation, which very clearly reminds us that information communication technologies (ICT) can be conceptualised as both a *setting* for health promotion and as a *tool* for communication. ICT is a *setting* which is unique from other health promotion settings in that the limitations around geography, access, anonymity, social and physical barriers are completely changed. It is also a *tool* for communication where people can interact, contribute content, and participate.

Social media and social networking should not be considered new; rather it is a new way of doing old things. Participation, community engagement, partnership, advocacy, access...these are at the heart of much of our health promotion work and are highly consistent with what available technologies can provide. I'm certainly not suggesting that we leap straight into social media as a strategy; it has to be relevant and fitting for our objectives. However, I strongly believe that social media should be considered alongside other strategies in health promotion, and indeed, alongside other settings.

Erik Qualman (author of the seminal book 'Socialnomics') reminds us that "We don't have a choice on whether we do social media;

the question is how well we do it". This is true also for health promotion where we must engage with and embrace technology as it emerges.

As the Australian workforce ages (yes, that means the health promotion workforce too) I can't wait to see how the generations to come incorporate current and emerging technologies into our work in health promotion.

So for 2011 I ask all of you...

- If you are hesitant, reluctant or simply a techno-phobe, please engage in these technologies in some way or another. I particularly implore you to do so if you are in a position of influence as it is not easy being a change agent for new technology when you're down the pecking order (as many gen ys probably are).
- If you identify with this article and feel frustrated that health promotion hasn't engaged enough with these technologies, work with others in your organisation to teach and show how it can be done.
- If you are already engaged and doing this work, please consider writing and publishing, or working with a researcher to help build the evidence base for using ICT and particularly social media in health promotion. It's desperately needed.

References can be supplied upon request.



Inspire Healthy Eating

Nutrition Australia - Healthy Children, Healthy Families

Are you looking to promote healthy eating to children and families? Need ideas and inspiration?

Workshops

Nutrition Australia offers a range of interactive workshops including:

- Reclaim the Lunchbox for parents
- Teaching Nutrition - A Whole of School Approach for teachers
- Touch and Taste a Rainbow for younger children
- Boost Your Energy for older children

Resources

Nutrition Australia has some exciting new resources available including:

- Packing a School Lunchbox DVD (in multiple languages)
- Nutrition Newsletter Inserts Series II CD ROM
- Fundraising Ideas for Healthy Kids manual

For further details about Nutrition Australia consultancy services, resources and pricing visit the website www.nutritionaustralia.org or contact your local branch

Australian Health Promotion Association

Branch Updates

SOUTH AUSTRALIA

Eva Forte and Kristy Schirmer

- Student portfolio: four students are being placed with organisations through AHPA SA's volunteer register. This program provides opportunities for students to improve their breadth of experience. Student members on the executive have also been staffing AHPA stalls at university career days.
- Workforce issues: AHPA SA is working with SA Health, Health Promotion Branch to plan and progress conversion of health promotion staff in government to come under the 'Allied Health Professionals' stream. While there is a lot of momentum around this work there is still a long way to go, and we are grateful to the support of Kirsty Pickering (QLD Branch) for her advice. Two sessions have been held with university students on career pathways in health promotion.
- AHPA/PHAA mentoring program: the 2010 mentoring program commenced with an introductory session on 9 September. We have successfully paired 29 mentors and mentees according to their interests and experience. This is the first year that we have formed a partnership with the AHPA NT Branch.

VICTORIA

Emma Bruce

- The committee met in Bendigo in November to discuss the strategic directions of the branch in light of the recently released AHPA National Strategic Directions 2009-2012.
- The annual 'Careers in Health Promotion' evening was held at Latrobe University on 11 October. Emma Dunstan, Corinne Rice and Tiana Felmingham led a team of volunteers from Monash, Latrobe and Deakin Universities to organise this very successful event which attracted over 60 attendees.
- The 2010 conference evaluation report has been completed and is available at www.healthpromotion.org.au under Events. Overall the conference was highly successful. Over 560 people attended which is more delegates from

all States, Territories and overseas than recent AHPA conferences. Feedback from participants indicated good levels of knowledge acquisition was provided and delegates appreciated the focus on low environment impact, the provision of a range of formats for conference sessions and the social program including the conference dinner at the Melbourne Town Hall.

- The AGM will be held on 3 March 2011 so please put this in your diary.
- The report 'Parliament of Victoria – Education and Training Committee: Inquiry into the potential for developing opportunities for schools to become a focus for promoting healthy community living – September 2010' has been completed. The report includes submissions by AHPA (Vic Branch) in conjunction with the Vic Branch of the Australian Health Promoting Schools Association. For more information visit www.parliament.vic.gov.au/etc/inquiry/36

NORTHERN TERRITORY

Emily Raso

The second half of 2010 saw the Executive Committee double in size! A warm welcome to Talia Hoskin (Vice President), Barry White, Rowena Cramp and Jeanette Pastor (General Committee Members).

AHPA NT has delivered four fantastic professional development events this year:

1. Diana Katcherian, Director Health Impact Assessment Unit, WA Department of Health ran a thought-provoking and interactive session on Health Impact Assessments.
2. In September Darwin hosted the "Health Literacy: Opening Doors to Health and Wellbeing" Chronic Disease Network Conference and AHPA NT held a pre-conference PD event which drew over 30 participants. We enjoyed hearing from two fantastic speakers, Dr Anne Johnson and Dr Christine Armit around health promoting programs and services. In support of the conference we provided sponsorship of Ian Anderson, Keynote Speaker for Preventable Chronic Disease Conference.
3. We partnered with Australian Council of Health and Physical Activity to hold a Health Promoting Schools Seminar for teachers and other health professionals; with great presentations from Alawa Primary School about their Stephanie Alexander Kitchen Garden Project and Richard Nicholson from Sports Ability.
4. Finally our "Health Promotion around the World" event was held in conjunction with The Fred Hollows Foundation. This event was absolutely fascinating as we heard about Nepalese Health Promotion work from Kedar Maharjan, dealing with a recent cholera outbreak in PNG from Nic Morgan, and the International Union for Health



AHPA NT mob at the monthly social networking event, 11 August 2010.

Promotion and Education conference from James Smith and Kirsten Green. Additionally, there were active discussions with 18 Cambodian and Lao health professionals from the Ministry of Health in Lao PDR and Cambodia who were hosted by The Fred Hollows Foundation through an AusAID funded Australian Leadership Awards – Fellowship Program.

We have seen the start of the new mentoring program in partnership with the SA Branch (thank you SA for your support!), and the monthly social networking events are growing in popularity.

TASMANIA

Sue Frendin, Miriam Herzfeld and Glen Paley

- Presentation by Prof Fran Baum: on 19 May we were fortunate to have Professor Fran Baum provide a presentation: *Commission on the Social Determinants of Health: gendering health inequities*. She discussed the need for responses to health inequities to focus on structures and settings rather than behaviours; the importance of a Health Equity in all Policies approach; the need to marry a health equity agenda with global warming considerations; and the requirement for social justice values to drive public policy.
- After 6 years on the Tasmanian Branch Committee Sue Frendin has resigned as a committee member. We would like to thank Sue for her hard work over the years. The following professionals now make up the Committee: Jacque Maginnis (President), Glen Paley and

Julie Milnes (Co-Secretaries), Sarina Laidler (Treasurer), Deb Church, Miriam Herzfeld, Graham Lynch, Jackie Slyp and Fiona Watts.

- Social Determinants of Health Project: the Branch has secured funding to undertake a project on the Social Determinants of Health (SDoH). We hope to develop a Tasmanian resource and practical tool to assist practitioners to become familiar with the actions that are needed in Tasmania to act on the SDoH. This project is a partnership with TasCOSS and funded by Population Health (Department of Health and Human Services).
- The Tasmanian Branch Newsletter: last month, our branch launched its first member newsletter.
- Tasmanian Branch Members: we're keen to hear from members who would like to become more involved. Please contact Miriam Herzfeld on my_mort@hotmail.com

QUEENSLAND

Kirsty Pickering

- The advocacy and communication sub-committee has been working to update the Branch's webpage to ensure it contains the latest information and images of interest to Queensland members.
- The professional development committee has been very busy offering some great professional development opportunities:
 - the 'Closing the Gap and Culturally and Linguistically Diverse initiatives' event

was held on 27 May. View the event at www.healthpromotion.org.au/qld-events/cat.listevents/2010/08/20/44|73

- 'Highlights from Melbourne and Geneva' was held on 29 July
- 'How to Get that Job in Health Promotion – Interview Skills and Writing Selection Criteria' was held in mid-November.
- The September edition of the Queensland Health Promotion Quarterly which focused on Young People's health has been sent to QLD members. The December edition will focus on Workplace Health Promotion.

WESTERN AUSTRALIA

Gemma Crawford and Tracy Fuhrmann

- Governance: the Branch Operational Plan 2010–2012 has been signed off. This will provide clear direction for Branch activities and represents many months of hard work by committee members. Particular thanks to Vice President Tia Lockwood for driving this process.
- Scholarships: WA has now completed its 2009 Healthway Scholarships. Feedback from recipients has been positive. A Healthway Scholarships Information event was held on September 30, which provided an opportunity to link potential recipients and interested agencies and to hear the experiences of past recipients.
- Professional Development: a 'Get the Job You Want – Writing Selection Criteria and Interview Skills Workshop' was held on September 30 and attracted 15 attendees.



QLD PD event presenters (from left) Gail Hystop, Interpreter Services; Kirsty Pickering, AHPA QLD Branch President; Chelsea Bond, Inala Indigenous Health Service, 27 May 2010.



QLD PD event presenters (from left) Kirsty Pickering, AHPA QLD Branch President; Margo Sendall, Queensland University of Technology; Giselle Pitot, Queensland Health, 5 August 2010.

2011

13–16 March

11th National Rural Health Conference

Perth, WA

<http://11nrhc.ruralhealth.org.au/>

17–19 March

3rd Heart Foundation National Conference: Heart to Heart – from Access to Action

Melbourne, VIC

www.heartfoundation2011.org

10–13 April

Australian Health Promotion Association's 20th National Conference: Health Promotion and Determinants of Health – Strengthening Action

Cairns, QLD

www.healthpromotion.org.au

2–4 May

6th International Conference on Drugs & Young People: Making the Connections

Melbourne, VIC

www.adf.org.au

10–13 May

World Conference on Drowning Prevention

Danang, Vietnam

www.worldconferenceondrowningprevention.org

8–11 June

39th Annual Renal Society of Australasia Conference

Adelaide, SA

www.rsa2011.org

15–18 June

2011 Annual Meeting of the International Society for Behavioural Nutrition and Physical Activity: Promoting Healthy Eating and Physical Activity – the latest international research

Melbourne, VIC

www.isbnpa2011.org

Welcome new members

ACT Health Alcohol and Drug Program	ACT	Sifter, Margaret	QLD	Hall, Amanda	VIC
Bartlett, Joan	ACT	Strachan, Kym	QLD	Hargreaves, Elizabeth	VIC
East, Janine	NSW	Yuke, Kym	QLD	Jewish Care –	
Farrelly, Joanne	NSW	Alford, Daina	SA	Healthy Ageing	VIC
Giles, Luke	NSW	Cook, Narelle	SA	Mason, Vicky	VIC
Ha, Anh	NSW	Coppin, Bridget	SA	Roberts, Sarah	VIC
Harpham, Phoebe	NSW	Cowie, Jenna	SA	Smale, Tiffany	VIC
Hemmati, Boshra	NSW	Elston, Stacey	SA	Sports Focus	VIC
Johnston, Margo	NSW	Fazzalari, Carmela	SA	Water, Melanie	VIC
Kelly, Angela	NSW	Fotheringham, Kylie	SA	Whatmore, Helena	VIC
Khan, Raquiba	NSW	Hodder, Kellie	SA	Bedford, Jessica	WA
Krkac, Marko	NSW	Holmes, Megan	SA	Blackford, Krysten	WA
RaggAhmed	NSW	Laverick, Jeffrey	SA	Bowden, Laura	WA
Raheb, Samantha	NSW	Lloyd, Rebecca	SA	Cocivera, Katie	WA
Roberts, Jayne Veronica	NSW	Luong, Diem	SA	Duggan, Amethyst	WA
Singh, Shashi Kiran	NSW	Murphy, Sian	SA	Farmsafe WA Alliance	WA
Turner, Veronica	NSW	Rahmanian, Hany	SA	Francas, Stephanie	WA
Weber, Danielle	NSW	Rodda, Rachel	SA	Fulton, Sara	WA
Whittaker, Kate	NSW	Sawford, Amy	SA	Graham, Sarah	WA
Bacon, Stephanie	QLD	Schibani, Mathew	SA	Hood, Fiona	WA
Beccaria, Lisa	QLD	Seo, Hana	SA	Hughes, Alicia	WA
Boswell, Nikki	QLD	Sexton, Megan	SA	Knox, Kristen	WA
Casella, Tamara	QLD	Vowles-Black, Samantha	SA	Laurie, Ellen	WA
Duncan, David	QLD	Wilson, Elise	SA	Pannu, Poonam	WA
Feeney, Melanie	QLD	Woolford, Chloe	SA	Phan, Tina	WA
Gimpel, Rhiannen	QLD	Lund, Sabena	TAS	Potts, Sarah	WA
Gorton, Carla	QLD	Newman, Wendy	TAS	Pulham, Sian	WA
Harwood, Georgina	QLD	Aspire – A Pathway to		Rae, Paige	WA
Jackson, Nicole	QLD	Mental Health	VIC	Roche, Angie	WA
Lewis, Rhondda	QLD	Breen, David	VIC	Sheerin, Sarah	WA
Ng, Norman	QLD	Bryan, Danielle	VIC	Stevens-Cutler, James	WA
Perina, Heather	QLD	Cheng, Wai Ho	VIC	Trevenen, Veirty	WA
Rodi, Megan	QLD	Davern, Alyce	VIC	Waite, Heather	WA
Rowan, Chris	QLD	Doyle, Cassy	VIC	White, Daphne	WA
Servos, Elizabeth	QLD	Dwyer, Gemma	VIC	Women's Health Services	WA
		Gephart, Zoe	VIC		



Advertising Price Guide

January 2010 – All prices inclusive of GST
The Australian Health Promotion Update

is the national newsletter of the Australian Health Promotion Association. This publication is distributed to all members of the Association both in Australia and overseas.

Quarter page advertisement

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Members,	\$192.50
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Bookings for advertisements or advertising must be received two weeks prior to the deadline for articles for the required issue of Australian Health Promotion update. Prices for thicker inserts or alternate advertising arrangements can be obtained by contacting the Editor:

ahpa@usc.edu.au or phone 07 5430 2873

(Australian Health Promotion Association Secretariat)

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The Editor – *Update*

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Maroochydore DC, Queensland 4558 Australia or
E-mail: ahpa@usc.edu.au. Guidelines for articles are available on the website.

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