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Cancer Australia australiancancerplan@canceraustralia.gov.au

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Re: Submission to Australian Cancer Plan: Building the Future - Public Consultation Draft December 2022

On behalf of the Australian Health Promotion Association (AHPA®), I would like to commend the Government on the draft 10-year Australian Cancer Plan. The Association supports the vision for world-class cancer outcomes and experiences for all Australians.

We applaud the long-term commitment to the prevention, detection, early intervention, treatment and supportive care and strongly support the following elements of the plan:

- Focus on maximising cancer prevention and early detection (strategic objective 1)
- Eliminating inequities in cancer outcomes among priority population groups, particularly for Aboriginal and Torres Strait Islander people
- Focus on cultural and social determinants of health
- Health literacy
- Co-design.

The Australian Health Promotion Association

The Australian Health Promotion Association Ltd (AHPA®) is the peak body for health promotion in Australia. AHPA advocates for the development of healthy living, working and recreational environments for all people. It also supports the participation of communities and groups in decisions that affect their health. Incorporated in 1990, AHPA is the only professional association specifically for people interested or involved in the practice, policy, research and study of health promotion. Our member-driven national Association represents over 1000 members and subscribers. The Association is governed by a Board at the national level with operational branches representing all states and territories. Our vision is for a healthy, equitable Australia. We seek to achieve this via our purpose of leadership, advocacy and workforce development for health promotion practice, research, evaluation and policy.

Membership of AHPA is diverse, and includes designated health promotion practitioners, researchers and students, as well as others involved in promoting physical, mental, social, cultural and environmental health, whose primary profession or area of study may be something different, but whose responsibilities include promoting health. Members represent a broad range of sectors including health, education, welfare, environment, transport, law enforcement, town planning, housing, and politics. They are drawn from government departments and agencies, universities, nongovernment organisations, community-based organisations and groups, private companies, and students.

GENERAL COMMENTS

Many health problems are preventable

Many of the health problems affecting the everyday lives of individuals and their families are associated with a common set of contributing physical and social factors. Much current and future projected burden of disease is preventable through effective health promotion and illness prevention policy and practice. Good health is not evenly distributed across the population. Some demographic



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groups experience disproportionate burden of disease leading to differences in health, wellbeing and longevity. These groups include the following communities: Aboriginal and Torres Strait Islander people, culturally and linguistically diverse communities, LGBTQIA+ groups, people with mental illness, people of low socioeconomic status, people with a disability, and rural, regional and remote communities. Chronic condition rates in Australia also follow an equity gradient, and this gradient is becoming steeper (i.e. more inequitable) over time.

Health promotion and illness prevention are effective

Effective health promotion and illness prevention interventions have been shown to improve health outcomes in both the short and long term. There is clear evidence that many preventive health interventions are cost effective and offer good value for money. Public health interventions are highly cost saving, returning an average of \$14.30 in benefits for every \$1 invested¹. See: AHPA and PHAA's Health Promotion and Illness Prevention Policy Position Statement 2021

Health promotion not only embraces actions directed at strengthening the skills and capabilities of individuals but also actions directed towards changing social, environmental, political and economic determinants or conditions that influence health and wellbeing, in order to improve individual, community and population and health.

AHPA draws the basis of its health promotion action and its definitions from the <u>World Health</u> <u>Organization's Ottawa Charter for Health Promotion (1986)</u> and subsequent global charters and declarations: "Health promotion is the process of enabling people to increase control over the determinants of health and thereby improve their health". AHPA strongly encourages the use of this definition to underpin descriptions of health promotion. We encourage the use of descriptions from the <u>Global Charter for the Public's Health</u> in defining the functions and scope of health promotion and illness/disease prevention and public health more broadly. See: <u>What is health promotion?</u>

COMMENTS SPECIFIC TO THE AUSTRALIAN CANCER PLAN

Cancer prevention focuses on reducing risk factors for the disease, including risk factors such as smoking, as well as ensuring the places where Australians live, work, learn and play both promote and protect good health and wellbeing. A long-term investment in cancer prevention and risk reduction is critical. Health Promotion's role is to support a reduction in risk factors but also to increase the range of protective factors that are available to individuals, their families, communities and the population as a whole (for example supportive environments and policies).

Opportunities to prevent cancer, to reduce the risk of the disease and to prevent its progression exist at every stage of human life, starting with preconception. It is never too late or too early to take action. A substantial proportion of the cancer burden is related to non-genetic causes that are modifiable and, therefore, preventable. Prevention of such avoidable risk factors, through strategies addressing risk factors at all stages of life, including smoking cessation programs and clean air initiatives, is critical to addressing the cancer burden.

Risk factors can be viewed as being present across different 'levels', including individual, family, workplace, environmental, and society. The combined and cumulative effects of different risk factors over a person's life can impact on their chances of developing cancer. Risk factors are influential over

¹ Masters R, Anwar E, Collins B, Cookson R, Capewell S. Return on investment of public health interventions: a systematic review. Journal of Epidemiology and Community Health. 2017;71(8):827-34.



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time and can make a difference throughout a person's life. The plan should focus on risk factors across different levels and across the lifespan.

In relation to culture and sub-populations, we would like to reflect the importance of recognising that the priority populations outlined are not heterogeneous group and have significant intersectionality. As such there is a need for both tailored and universal strategies. For example, for people from CaLD backgrounds interpreters and translated resources is the bare minimum required-we need to go beyond this regarding effective health promotion and health literacy.

Given the significant proportion of cancers that can be prevented, wherever possible we encourage consideration of prevention and early detection as separate to allow primary prevention to receive as much attention and resourcing as secondary and tertiary prevention. In relation to prevention - there still seems to be a focus on lifestyle and not the upstream causes, including those that relate to stigma as systemic - e.g. institutional racism. The Association cautions the use of 'lifestyle factors' and 'lifestyle behaviours'. The use of 'lifestyle' perpetuates the myth that improving public health is a personal responsibility and diverts attention away from upstream action that can bring about equitable, sustained improvements in health (in this case health public policies and environments and the impacts of commercial interests). See a recent paper published in the Health Promotion Journal of Australia: *The lazy language of 'lifestyles'*.

Finally, the Australian Health Promotion workforce has a role to play in strategies aimed at the prevention and early detection of cancer. When considering the workforce, it is important that the consideration is given to resourcing and capacity building to orient the system towards prevention.

We welcome further opportunities to contribute to the ongoing dialogue and vital national efforts to establish Australia's new Cancer Plan. Please do not hesitate to contact us with further questions.

Yours sincerely

Dr Gemma Crawford

President | Australian Health Promotion Association

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