

Development of the National Preventive Health Strategy

Vision and Aims of the Strategy

Please review pages 13 & 14 of the Consultation Paper, which outlines the vision and aims of the Strategy, before completing this question.

4. Are the vision and aims appropriate for the next 10 years? Why or why not?

The Australasian Injury Prevention Network (AIPN) is generally supportive of the vision and aims however we recommend that injury prevention be clearly included throughout the Strategy.

In addition, we recommend:

- Reframing of the wording (this comment is relevant throughout the Strategy) so that there is recognition that people and communities experiencing inequitable burden of injury and disease are a priority (rather than placing the burden on individuals and communities experiencing inequitable disease and injury burden). The intention of reframing the language is to avoid assigning blame to individuals and communities;
- clear articulation of targeting social determinants that impact disease and injury be included in the Vision and Aims;
- Use of language that is consistent with other strategies such as 'all people in Australia'
- Recognition of the Aboriginal and Torres Strait Islander people's conception of health and wellbeing.
- Clear targets or outcome indicators be included for all aims and goals.

Goals of the Strategy

Please review page 15 of the Consultation Paper, which outlines the goals of the Strategy, before completing this question.

5. Are these the right goals to achieve the vision and aims of the Strategy. Why or why not? Is anything missing?

AIPN is generally supportive of the goals, and recommend clear articulation of commitments to infrastructure for both public transport and active transport in addition to other areas relating to social and cultural determinants of health.

- The goals needs to be clear that prevention is for prevention of disease and injury.
- As noted previously, remove all stigmatising and deficit discourse throughout the Strategy and focus on self-determination, building from existing cultural and social strengths, with the goal to ensure equitable access to and availability of best practice initiatives. This includes privileging Aboriginal and Torres Strait Islander peoples' voice and ways of knowing, being and doing.
- Actions need to centre the consumer in planning and service provision.

- Goals (accompanied by clear outcome indicators) should also include action on climate change and reducing the impact of extreme weather events and on reducing inequitable burden and incidence of disease and injury.

Mobilising a Prevention System

Please review page 17 & 18 of the Consultation Paper, which outlines the seven enablers to create a more effective and integrated prevention system, before completing this question.

6. Are these the right actions to mobilise a prevention system?

The AIPN would recommend a dedicated injury prevention body to coordinate, manage and inform injury prevention initiatives.

- On page 17, governance and leadership should clearly include Aboriginal and Torres Strait Islander leadership and governance mechanisms which also relates to supporting and adhering to Indigenous Data Sovereignty
- We recommend including appropriate resourcing of a disease and injury prevention system be included in the Actions.

Boosting Action in Focus Areas

Please review page 19 of the Consultation Paper, which refers to the six focus areas that have been identified to boost prevention action in the first years of the Strategy and to impact health outcomes across all stages of life, before completing this question.

7. Where should efforts be prioritised for the focus areas?

Injury is a major contributor to mortality and morbidity in Australia. Injuries are the leading cause of death for people aged 1-44 years and are responsible for 9% of the total burden of disease in Australia. Given the substantial burden of injury and the negative impact that it has on the health and wellbeing of many Australians, we strongly recommend:

- “Reducing injury” be added to the focus areas listed on page 15.

We also recommend that:

- Social and cultural determinants of health, mental health, climate change and equitable infrastructure (housing, roads and urban planning) be included as focus areas.
- In relation to Injury prevention, we recommend an injury body to coordinate and track injury prevention initiatives, outcomes and disseminate latest injury prevention research. In addition, we recommend commitment to:
 - speed limits that reflect road quality and provision of additional resourcing to improve quality and safety of local roads and infrastructure, particularly in rural and remote areas;
 - increasing infrastructure to support safe active transport;
 - improving management of product safety standards and regulations;

- improving equitable provision of and access to falls prevention programs for older people;
- effective management of concussion and prevention of head injury in all sports;
- clear protocols and adherence to safe work practices particularly regarding heat exposure, falls prevention, prevention of work-related mental ill-health and prevention of lower back injury;
- appropriate resourcing of suicide prevention programs to ensure equitable provision of and access to such programs;
- timely, quality data allowing for granularity of data to contextualise local initiatives;
- resourcing of effective services to families experiencing stress;
- resourcing of research to identify most effective interventions to reduce poisonings, particularly among young adults;
- resourcing of research to establish most effective interventions to prevent domestic and family violence.

Continuing Strong Foundations

Please refer to page 20 of the Consultation Paper which highlights the importance of continuing and building on current prevention activity, before completing this question.

8. How do we enhance current prevention action?

- AIPN recommends a clearinghouse of new research and effective injury & disease prevention interventions and programs be maintained to ensure equitable and timely access to new information.

General comments

Ensure clear alignment and synergy with relevant Strategies. At the very least, for Aboriginal and Torres Strait Islander peoples this would be: the National Aboriginal and Torres Strait Islander Health Plan, and Closing the Gap Refresh; and for injury, this will be the National Injury Prevention Strategy.