# Twenty years of your national health promotion association

Trevor Shilton, Lily O'Hara, Michael Sparks, Ian White, June Redman and Jan Ritchie

Australia is internationally regarded as both a leader and a pioneer in health promotion. Instrumental in achieving this recognition has been the creation and strengthening of Australia's own association for the promotion of health – the Australian Health Promotion Association. This year the Association is celebrating its first twenty years, having been established as a national entity in 1990. This editorial traces the Association's evolution through four eras of development, from the point of view of the various presidents (see Table 1) and the national executive officer during this period.

#### Era 1: Breaking new ground (1990-1997)

The beginnings of the Association can be traced back to the 1983 Australian and New Zealand Association for the Advancement of Science Congress in Western Australia. The organising committee for the Health Education Section of the Congress recognised the need for an organisation that could unify the growing number of people involved in health education throughout Western Australia and promote liaison between them. This led to the creation of the Western Australian Professional Health Educators' Association (WAPHEA) in August 1985. The dominant discourse within WAPHEA was the need to further invest in the infrastructure of health promotion and support and mobilise its emerging workforce.

The second half of the 1980s was a critical formative period for health promotion globally. In Australia there was movement for change from traditional notions of health education towards the inclusion of the policy, ecological and community development dimensions of health promotion, embracing the new principles espoused by the Ottawa Charter. In response to growing national interest in health promotion, and after considerable stakeholder consultation, on 26 June 1990 WAPHEA changed its name and was nationally constituted as the Australian Association of Health Promotion Professionals (AAHPP) with 175 members.

The early priorities of this new national association included a focus on the needs of practitioners, emphasis on research/

Table 1: AHPA's presidents, past to present.

<b>National Presidents, Australian Health Promotion Association</b>	
Trevor Shilton	1990-1997
Lily O'Hara	1997-2001
Janet Currie	2001-2002
Jan Ritchie	2002-2004
Michael Sparks	2004-2006
Ian White	2006-2009
Suzanne Gleeson	2009 to present

practice partnership and translation, support for crosssectoral collaboration, and support and mentorship for young members. Major strategic priorities were to establish an annual health promotion conference and an Australian journal for health promotion. Other priorities were membership growth, establishment of branches in all states and territories and a national newsletter. Within a few months of its creation, membership numbers doubled. The first health promotion conference was actually a conference workshop held prior to the annual conference of the Public Health Association of Australia (PHAA) in 1988. The enthusiasm from health promotion practitioners for a conference separate from the annual public health meeting and focused more clearly on health promotion issues resulted in the 1992 conference when, for the first time, the conference was run as an equal partnership between AAHPP and PHAA's Health Promotion Special Interest Group. This partnership continued until, in 1998, the Association hosted the national conference in its own name. These conferences have offered much more than a professional development program; they are also a catalyst for action, a melting pot for ideas and networking, and a setting for the building of collegiate spirit and social capital in the health promotion field. The conferences also helped to build the credibility and profile of the Association and provided a direct catalyst for branch formation.

While Australia in many ways had provided international leadership in health promotion throughout the 1980s, it did not have a specific avenue for publishing its excellent health promotion research and programs until 1991, when a Western Australian editorial team gave birth to the first issue of the *Health Promotion Journal of Australia*.

In the late 1990s the Association began to engage internationally when a representative of the Association attended the 4th Global Conference on Health Promotion in Jakarta. The Association also began working with the newly formed South West Pacific Regional Office of the International Union for Health Promotion and Education (IUHPE), and IUHPE began using the occasion of the National Conferences to host satellite meetings.

#### **Era 2: Revolution (1997-2001)**

The second major era in the development of the Association began in 1997 with the transition from the inaugural president and the relocation of the Association's part-time office from Curtin University, Western Australia, to the University of the Sunshine Coast, Queensland, in 1998. According to Aristotle, a revolution can involve the change of an organisation's constitution in part or in whole. The changes undertaken by the Association in its second phase of development may therefore be regarded as revolutionary. The next five years saw the implementation of a major reform agenda at all levels of the Association, from the development of administration

processes and systems, which resulted in the establishment of a full-time Secretariat, through to higher level changes.

The original focus of the Association on health promotion professionals had been very important in helping to establish health promotion as a profession, and providing a sense of professional identity to people working in health promotion. Once this identity had been securely established, it was possible to broaden the reach of the Association to include those people not necessarily identifying as health promotion professionals, but nonetheless working in the field of health promotion.

To reflect this expanded vision, the Association embarked on a raft of developments that included changing the name to the Australian Health Promotion Association, modifying the constitution and the mission to reflect the broader focus, developing a new corporate logo and image, and then applying these to the Association's communication mechanisms including the Health Promotion Journal of Australia, the Australian Health Promotion Update quarterly newsletter, all printed materials, and eventually the Association's website in 2001.

Behind the scenes other administrative changes were taking place that were less visible to regular members, but just as important. Our paid staffing increased from one day per week administration assistance to a full-time position. During this era, the Association became a relevant professional body for people working in health promotion from a broad range of sectors. This, combined with the new corporate category resulted in membership numbers doubling in this era, providing an even stronger platform from which to advocate for health promotion in Australia.

Consistent with the revolutionary nature of this era, the Eberhard Wenzel Memorial Oration was established. The late Eberhard Wenzel (1950-2001) was well known in health promotion circles for his fearless and razor sharp critique of health promotion. The memorial oration established in Eberhard's honour, which is delivered at the Australian Health Promotion Conference each year, is intended to stimulate and challenge health promotion practitioners to reflect on their practice and its contribution to creating health for all. The Oration has been delivered by a range of high-quality international presenters who have responded admirably to the essence of this brief.

Revolution and political advocacy go hand in hand, and in this second era the Association stepped up its advocacy efforts. We implemented major advocacy campaigns on gun ownership and native title legislation, lobbying all members of federal parliament directly.

With the broadened outlook of the Association, came a desire to play a greater role on the international health promotion stage. The Association became an institutional member of IUHPE, was represented at the 5th Global Conference on Health Promotion in Mexico in 2000, and in 2001 made a successful bid to host the 18th World Health Promotion Conference in Melbourne in 2004.

#### **Era 3: Consolidation (2001-2006)**

Following the initiatives established in the terms of the two previous presidents, the Association continued to build under the next three presidents. It was a time where membership numbers strengthened and the Association could boast of having a branch in every state and territory. To meet these increasing administrative demands, it was determined the position of National Executive Officer should be confirmed as a permanent position with the organisation. Eleven applicants responded to our advertisement in late 2005, but none could topple the then incumbent, and still serving, National Executive Officer. This position is now supported by two part-time staff members. In 2002 we agreed our Association could be known by its abbreviation 'AHPA'. We also developed guidelines for the role of journal editors and advertised for a fourth editorial team. In 2004, the US National Library of Medicine approved our application for indexing of the Health Promotion Journal of Australia by Index Medicus/ Medline. This meant that our journal was further established in academia, more widely searchable and our articles more broadly circulated. These developments greatly strengthened the prestige of our journal.

During this period debate continued among health promotion workers regarding issues of credentialing, professionalisation and competency development. Significant work was undertaken by AHPA members, particularly in the Western Australian branch, to develop a set of nationally endorsed and systematically updated Core Competencies for Health Promotion Practitioners. It was also in this phase that AHPA joined the Australian Health Reform Alliance, advocated for change at the Health Summits in 2004, worked on the Steering Committee for the development of a National Chronic Disease Prevention and Management Strategy and commented on many draft national health plans and policies. In 2004, the Association also considered the priorities of its members through a series of consultations that called for, among other things, the development of a national health promotion agency. It seems we were only slightly ahead of our time.

The Association again featured prominently in international events when three representatives were present at the 6th Global Conference on Health Promotion in Bangkok, Thailand, in 2005, and participated in the development of the Bangkok Charter. This inclusion in Bangkok demonstrated that we were now recognised as leaders in our field not only in Australia, but also regionally and globally.

Debate and discussion arose on the topics of increasing the evidence base for health promotion, the social determinants of health, and the use of emerging technologies for health promotion. The Association worked hard to keep up with on-line technologies and maintain its place as the peak health promotion organisation in the country.

## Era 4: Maximising opportunities and minimising tensions (2006-2009)

The consolidation phase had enabled AHPA to reflect on where it had come from, and to consider the opportunities that lay ahead for our peak body to make its mark on population health in Australia. In the period from 2006 onward AHPA has built on these opportunities by focusing on direction, governance and financing.

To strengthen the direction and governance of AHPA, the national management committee established four core working groups - strategic planning, advocacy, workforce development and Indigenous health. The strategic planning group was tasked with developing AHPA's strategic direction for the next three years especially towards providing national leadership and attaining professional excellence in health promotion. The advocacy working group developed plans for highlighting AHPA's position in population health in Australia, particularly in relation to the social determinants of health. The working group wrote several submissions to the Australian Government on national health reform issues including submissions to the Preventative Health Taskforce and the Primary Health Care Strategy. The workforce development group further developed AHPA's national competencybased standards for beginner practitioners, paving the way for future professionalisation and credentialing, although this topic remains an unresolved tension within AHPA today. The working group grew into the Career Structure and Development Working Group, to deal with broader terms of reference that included addressing career pathways for health promotion. The Indigenous working group developed plans for a national focus on Indigenous health promotion, an area that remains an area of tension within AHPA due to difficulties in attracting Indigenous health promotion practitioners to the working group as well to membership of AHPA.

The Association, along with PHAA, the Australasian Epidemiological Association and the Australian Faculty of Public Health Medicine joined together to host the inaugural Population Health Congress convened in Brisbane in 2008. During this time the presence of AHPA on the Population Health Congress management committee enabled it to influence not only the themes and direction of the Congress, but also the need for the Congress to be a financial success for all four of the population health associations involved. Fortunately, the Congress returned an outstanding profit as well as a highly successful and memorable meeting for the 1,300 delegates. The notion of making a profit from the national conference remains a contentious area for a nonprofit organisation such as AHPA and for many within the health promotion field. However, AHPA does not receive any operating funds from any government or other organisation, and operating a national peak body, providing professional development opportunities and advocating for membership issues requires finance well beyond the fees paid by members and journal subscribers.

#### A proud past and bright future

AHPA has travelled a long path from its early creation, through its days of revolution to consolidation and realisation of opportunities. The Association's 1,100 members from branches in every state and territory of Australia have benefited from innovations and achievements made possible by hard-working volunteers along with the Secretariat staff. The National Executive Officer has recently been honoured for her 10 years of service in the role.

With important new government commitments to prevention, including the creation of the proposed National Preventative Health Agency, and significant investments determined by the Council of Australian Governments through the National Partnership Agreement on Preventative Health, AHPA has a decisive role to play. The next chapter of AHPA's history will be vital, as it seeks to contribute to and influence the direction of these important developments, and remain at the forefront in advocating new directions in health promotion. The future looks bright – long live AHPA!

### Announcement

Winners of the Ray James Award, 2010

Congratulations to Marilyn Wise, Patrick Harris, Ben Harris-Roxas and Elizabeth Harris who received the Ray James Award\* for their article in the December 2009 issue of the *HPJA*:

The role of health impact assessment in promoting population health and health equity.

Special commendation was also given to Jillian Adams, Avigdor Zask and Uta Dietrich for their article in the August 2009 issue:

Tooty Fruity Vegie in Preschools: an obesity prevention intervention in preschools targeting children's movement skills and eating behaviours.

\*The Ray James Award was conferred for the first time in 2010. It is a prize of \$1000 awarded for an outstanding article published in the previous year in the HPJA, which has a first author who is an individual member of the Australian Health Promotion Association.

Further details about the selection criteria and process are available in the December 2009 issue of the *HPJA*, and also at:

http://www.healthpromotion.org.au/journal/table-of-contents/266-ray-james-award