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Ms Lauren Wells
Parliamentary Officer (Committees)
Select Committee on Personal Choice and Community Safety
Parliament House
4 Harvest Terrace
WEST PERTH WA 6005

Dear Ms Wells,

Introduction

The Public Health Advocacy Institute of WA (PHAIWA) promotes develops and supports public health advocacy in Western Australia.

PHAIWA was established in April 2008 and is an independent public health voice based within Curtin University, with a range of funding partners. The Institute aims to raise the public profile and understanding of public health, develop local networks and create a statewide umbrella organisation capable of influencing public health policy and political agendas.

PHAIWA focuses on a number of areas of public health advocacy activity. These range from providing general advocacy processes for public health, conducting advocacy related research and project, building capacity within the public health workforce for more effective advocacy lobbying and communicating through our partners and the media. Whatever issue we deal with, we always use a prevention focus.

PHAIWA design and implement projects and research to improve public health advocacy practice and strengthen the evidence base for public health and advocacy and policy initiatives.

PHAIWA has a focus on increasing advocacy skills within the health and allied sectors. We plan and facilitate capacity building activities such as media training, we mentor emerging leaders to become the advocates of tomorrow and we run topic specific forums to generate consensus advocacy targets.

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PHAIWA's Position

PHAIWA welcomes the opportunity to provide input into the Inquiry on Personal Choice and Community Safety. We firmly believe that many public health initiatives are more effective when supported by government regulation. There is no doubt that health is a personal responsibility yet this is only part of the story. To say health is totally up to the individual isn't wrong, but it is only half-right.

Our community will only be healthy and safe by advocating for a combination of personal responsibility and societal responsibility.

To suggest that individual behaviour is in large part responsible for the health problems we face as a society is unrealistic. We are not suggesting there is no room for improvement in human health behaviours, but ignoring the social context in which individual decision making and health-related action takes place is imperative. The key premise for this belief is that although person freedom is essential for good health, it is the social, economic, political and environmental forces that make exercising personal choices for health difficult. These social determinants of health are the conditions in which people are born, grow, live, work and age, including the health system and they are shaped by the distribution of money, power and resources at global, national and local levels, which are themselves influenced by policy choices. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries. This is particularly pertinent when considering issues such the relationship between personal and government responsibilities.

PHAIWA believe we need a whole of society approach to our health and wellbeing, and it must be led by public health advocacy focused on prevention — where personal responsibility and the impact that our environment has on our health, are seen as the holistic solution. One without the other is like having Yin without Yen.

The cultural environment in which individuals may be expected to take personal responsibility for their health must also be thoughtfully considered. For example, the average Australian school-age child, watches one hour and 54 minutes of TV each day. Imagine the number of television commercials that includes. The industry knows this. In a single recent year, one company spent more than $30 million advertising a single sugar-coated cereal. Our children are bombarded with advertisements for high-fat, high-kilojoule foods but consistently are provided large servings of such foods when they eat at most restaurants and fast-food establishments. It is a choice to eat at these establishments but the serving size is beyond personal control. Children choose to watch television at child friendly viewing times, but have no control over the unhealthy advertisements that are embedded in those viewing times.

At the same time, our environment through industry tactics and advertising, continues to provide messages and encourage us to get every new labour saving device, and to not even leave our chair to change a TV channel or our computer to send an email. Given this continual reinforcement, is it any wonder that the notion of building in 10 000 steps a day goes against the grain.

When such environmental factors are taken into account, the limitations of an approach to health promotion based on personal responsibility for health are clear.

For some more vulnerable subsets in our population holding the person responsible is particularly problematic, since poverty itself is now widely accepted as among the most significant risk factors for illness and premature death.

The Role of Regulation

There is a long history of governments taking action to protect the community. A healthy and safe community includes public safety, law enforcement, environmental protection, child protection and injury prevention. There is a long history of governments playing a positive and successful role in stewardship of the community. Examples include clean water and sanitation, ensuring the safety of its citizens, dealing with pollution and environmental degradation, mandatory reporting of child abuse and seat belt, car safety and drink-driving laws that have resulted in reducing vehicle related morbidity and mortality to the same levels as in the 1930s despite huge increases in population and in vehicle ownership. Government's role in social determinants is to recognise their responsibilities and act on them to ensure all people have an equitable rather than equal opportunity to a full and healthy life and this may involve the development of legislation or regulation.

In conclusion, PHAIWA is reinforcing the importance of regulation as an important public health intervention and believes that the healthiest society represents a balance between personal responsibility and government responsibility.

PHAIWA appreciates the opportunity to make this submission and the opportunity to contribute to this important discussion.

Please do not hesitate to contact me should you require additional information or have any queries in relation to this submission.

Yours sincerely,

Dr Melissa Stoneham
Director|Public Health Advocacy Institute of WA