

2011-2012 Target Delivery Plan

Target: Cut by one-third obesity, smoking, heavy drinking and unsafe sun exposure

Definition of target:

Reduction in the number of Queenslanders who are overweight or obese from 60 per cent to 40 per cent of men; from 41 per cent to 27 per cent for women; and from 21 per cent to 14 per cent of children.

Decrease the number of Queenslanders who smoke from 19 per cent to 12.5 per cent of men, and 15 per cent to 10 per cent of women.

Reduce the number of Queensland men and women who drink at unsafe levels from 12 per cent to eight per cent.

Decrease the percentage of adults sunburnt on summer weekends from 15 per cent to 10 per cent.

Measurement:

Proportion of Queenslanders who are overweight/obese, high risk/risky drinkers, daily smokers and get sunburnt.

Overweight or obese

- Men—60.3 per cent Women—41.3 per cent (2005);
- Men—63.6 per cent Women—47.6 per cent (2010).

Daily smokers

- Men—20.0 per cent Women—15.8 per cent (2007);
- Men—17.2 per cent Women—13.9 per cent (2010¹).

Heavy drinkers

- Men—11.5 per cent Women—12.1 per cent (2007);
- Men—13.2 per cent Women—9.6 per cent (2010²).

Sun damage

- 15 per cent of Queensland adults were sunburnt on summer weekends (equal second highest with Western Australia and Northern Territory) (2006);
- 9.2 per cent of Queensland adults reported being sunburnt on the weekend (2010).

Sources: Baseline Australian Bureau of Statistics, Australian Social Trends (ABS Cat. No. 4102.0, based on self report from NHS 2004/05), Baseline 2007 Australian Institute of Health and Welfare (AIHW), National Drug Strategy Household Survey: State and Territory Supplement, Baseline 2006-07 National Sun Protection Survey, Queensland Health's Computer Assisted Telephone Interview (CATI) surveys.³

1 Based on Queensland Health Self Reported Health Status Surveillance System Due to slightly different methodology these figures are slightly lower than those presented in the 2010 National Drug Strategy Household Survey.

2 Based on Queensland Health Self Reported Health Status Surveillance System. Due to different methodology the figures for males are slightly higher and the figures for females slightly lower than those presented in the 2010 National Drug Strategy Household Survey.

3 Indicators are currently under review.

Reporting:

All measures will be reported annually.

Lead department: Queensland Health

Contributing department/s: Department of Communities (DOC); Department of Education and Training (DET); Department of Employment, Economic Development and Innovation (DEEDI); Department of Local Government and Planning (DLGP); Department of Justice and Attorney-General (DJAG); Department of Transport and Main Roads (DTMR); Department of Public Works (DPW); Public Service Commission (PSC); and Department of Community Safety (DCS).

Governance arrangements

The CEO Committee for Preventive Health oversees the development and implementation of Queensland Government actions to achieve the Q2 Chronic Disease Target. The committee, representing seven Queensland Government departments, is chaired by the Director-General of Queensland Health.

The CEO Committee is supported by a standing committee of senior officers from all contributing departments. The standing committee focus is on development and implementation of the Target Delivery Plan, including cross promotion of programs, tracking progress and identifying policy and service delivery gaps.

Part 1: The 2020 vision

About the target

The *Toward Q2: Tomorrow's Queensland* Healthy ambition is to make Queenslanders Australia's healthiest people. To achieve this, the Queensland Government is working with all levels of government, health sector organisations and local communities to help Queenslanders become healthy and stay healthy. In Queensland, about three million people are living with a long-term chronic disease which impacts on their quality of life.

Chronic 'lifestyle' diseases are preventable. Many common lifestyle diseases such as diabetes, cardiovascular disease and some cancers, can largely be prevented by adopting healthy behaviours such as maintaining a healthy weight, being physically active, eating healthy foods, avoiding smoking, limiting alcohol consumption and avoiding unsafe sun exposure. Evidence shows that a small shift in the average population levels of several risk factors can lead to a large reduction of the burden of chronic diseases.

Current performance and progress

The Queensland Government is tackling the burden of chronic disease by targeting lifestyle risk factors. The Queensland Government works in partnership with the Australian Government, Local Government Association of Queensland and individual local

councils, non-government organisations (e.g. Heart Foundation, National Stroke Foundation and Cancer Council) and the private sector. These partnerships are important to ensure we reach all Queenslanders, to help people prevent disease and manage their health. No single agency can address this alone, which is why we are taking this collaborative approach.

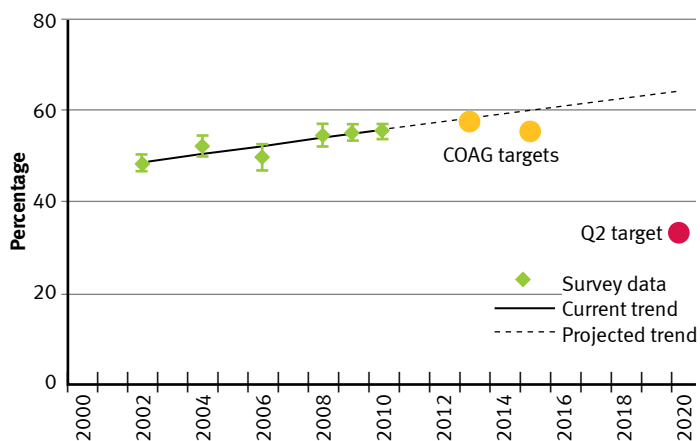
Data from The Health of Queenslanders 2010: Third Report of the Chief Health Officer Queensland highlights that while there is still room for improvement, there are also positive results from current chronic disease prevention strategies and initiatives. The Chief Health Officer’s report also included those performance targets included in the Council of Australian Governments (COAG) National Partnership Agreement on Preventive Health, and these are included in each of the relevant trend graphs below.

Overweight and obesity

To reach the Q2 target by 2020, overweight and obesity rates will need to be at 33.1 per cent (40.2 per cent male and 27.5 per cent female). The Q2 baseline uses 2005 data that showed 49.7 per cent of Queensland adults reported being overweight or obese — 60.3 per cent males and 41.3 per cent females.

There has been a steady upward trend in rates of overweight and obesity amongst Queensland adults with rates increasing by 0.9 percentage points per year since 2002. If this trend continues then approximately 65 per cent of adult Queenslanders will be overweight or obese by 2020, which is almost twice the Q2 target of 33 per cent. In 2010, 55.6 per cent of Queenslanders were overweight or obese (63.6 per cent males, 47.6 per cent females).

Overweight and obesity



If current trends continue **Q2 target (2020): not met**

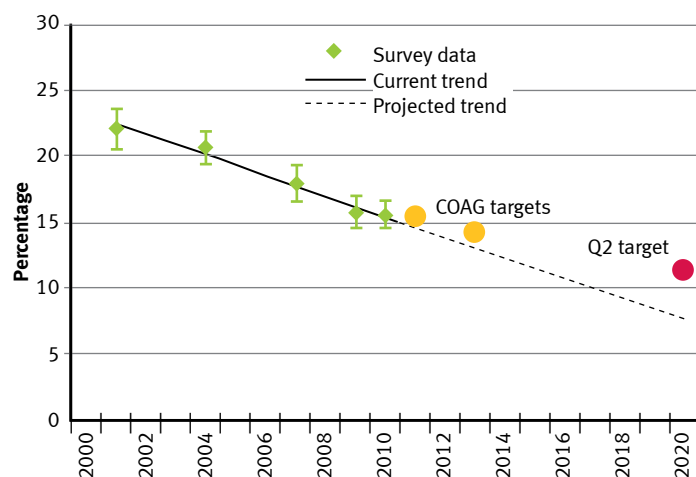
Daily smoking

There has been a steady downward trend of about one percentage point per year since 2001. This trend is apparent amongst both advantaged and disadvantaged populations, suggesting that the current suite of intervention programs is effectively targeting populations across the socioeconomic spectrum. If this trend continues, the daily smoking rate in Queensland by 2020 will be eight per cent.

In 2010, 15.5 per cent of adults reported smoking on a daily basis (17.2 per cent males, 13.9 per cent females).

If the downward trend continues the Q2 target will be met by approximately 2015. To reach the Q2 target by 2020, smoking rates would need to be at 11.9 per cent (13.3 per cent for males and 10.5 per cent females). The Q2 baseline uses 2007 data that demonstrated 17.9 per cent of Queensland adults smoked on a daily basis (20 per cent males and 15.8 per cent females).

Daily smoking (adults)



If current trends continue **Q2 target (2020): met⁴**

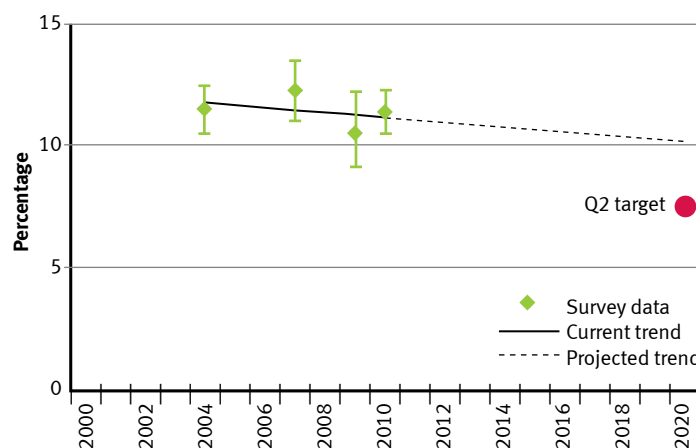
Risky alcohol consumption

To reach the Q2 target by 2020 the rates of high risk drinking that cause long-term harm would need to be at 8.1 per cent (7.9 per cent for males and 8.3 per cent for females). The Q2 baseline uses 2007 data that shows 12.2 per cent of adult Queenslanders were drinking at these risky levels (11.9 per cent of males, 12.4 per cent of females).

There are limited data to accurately assess current trends. However using all available data, risky/high risk drinking has declined by 1.2 per cent a year since 2004. Based on the current trend the rate of risky/high risk drinking will be 10 per cent in 2020 and the Q2 target of 8.1 per cent will not be met until 2050.

In 2010 11.4 per cent of Queensland adults were drinking at risky/high risk levels.

Risky alcohol consumption (adults)



If current trends continue **Q2 target (2020): not met⁵**

4 2010 National Drug Strategy Household Survey figures were not included in this time series due to concerns about comparability.

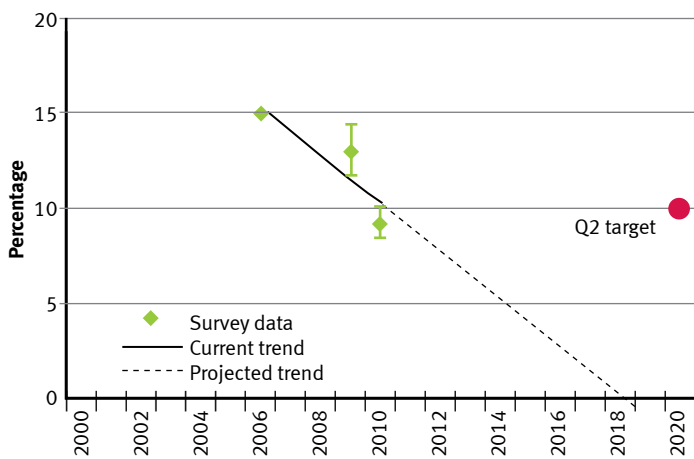
5 2010 National Drug Strategy Household Survey figures were not included in this time series due to concerns about comparability.

Unsafe sun exposure

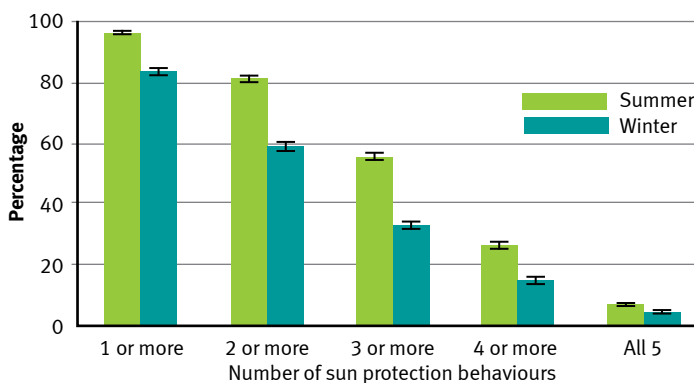
This indicator is the percentage of adults who were sunburnt on the previous weekend. It depends on weather patterns, the season and the UV index, and there are currently insufficient data to assess trends in sun safety behaviour. An alternate measure is sunburn in the past 12 months. In 2010, 50.9 per cent of Queenslanders reported being sunburnt in the past 12 months (57.1 per cent of males and 44.8 per cent of females). Using this as the baseline, the 2020 target will be to reduce sunburn in the previous 12 months to 33.9 per cent of Queenslanders. These rates are already achieved by people aged 55 and older but not in the younger age groups; particularly teenagers and people aged 20-30 years.

To reach the Q2 target by 2020, the rates of unsafe sun exposure will need to be at 10 per cent. The Q2 baseline uses 2006-07 data that showed 15 per cent of adult Queenslanders were sunburnt on the previous weekend.

Unsafe sun exposure (adults)



Sun protection behaviours (adults)⁶



⁶ Sun safety behaviours are seeking shade, wearing a broad brimmed hat and long sleeved shirt, wearing wrap around sun glasses and using SPF30+ sunscreen. The national skin cancer awareness campaign encompasses these behaviours in the Protect Yourself in 5 Ways message.

The role of the Smart State Council

The Smart State Council was established in June 2005 and provides high level independent advice to the Queensland Government.

At the 7 December 2010 Smart State Council meeting, the Premier asked the Council’s Standing Committee to undertake a review of the strategies to achieve the Q2 targets. The Standing Committee presented its report: *Review of Q2: Tomorrow’s Queensland* to the Smart State Council on 31 May 2011.

The Premier requested that Directors-General with responsibility for each of the Q2 targets respond formally to the recommendations. In the interim, the Standing Committee’s recommendations and expressed views have informed the development of the 2011-2012 Target Delivery Plan.

National chronic disease prevention initiatives

At the Council of Australian Governments meeting on 29 November 2008, a package of reforms aimed at improving the quality and effectiveness of government services across Australia was agreed. Preventive health was identified as an area requiring reform, with the National Partnership Agreement on Preventive Health funded to facilitate the reform process.

The National Partnership Agreement on Preventive Health (NPA PH) includes all jurisdictions as signatories and aims to address the increase in chronic disease, through prevention focusing on healthy children, healthy workers, healthy communities and national social marketing campaigns. The agreement provides \$68.62 million over six years to Queensland. An additional \$63 million in reward payments is also available, if agreed performance targets are met. Each state and territory will provide reports outlining performance against benchmarks as at 30 June 2013 and 31 December 2014.

Implementation plans for both the healthy children and healthy worker initiatives were approved by the Australian Government Minister for Health in December 2010 and include a range of actions undertaken in partnership between government and non-government agencies. Several of these are included in this Target Delivery Plan.

The National Preventive Health Agency was established on 1 January 2011 and is responsible for providing evidence-based advice to the Australian Health Minister’s Conference (AHMC) and supporting the development of evidence and data on the state of preventive health in Australia. The agency will take responsibility for a number of programs outlined in the NPA PH including:

- two national social marketing programs –tobacco use and obesity
- managing a preventive health research fund focusing on translational research
- managing an audit and strategy of the preventive health workforce.

The Australian Government has committed \$872.1 million over six years from 2009 to 2020 for the National Preventive Health Agency.

There are also existing national projects being progressed under the auspice of COAG in relation to food labelling, junk food advertising and alcohol advertising. These existing cross-jurisdictional processes provide the opportunity for Queensland to advocate nationally on these important public health issues.

Actions and strategies to achieve the target

This Target Delivery Plan contains a selection of activity being undertaken across government to address the prevention of chronic disease. These activities are consistent with an evidence-based, multi-strategy intervention approach to the prevention of chronic disease and the actions are again grouped under the following

headings—healthy children, healthy communities and healthy workers. A number of the actions and strategies are being funded through the NPA PH, others through existing programs and others by 2011-2012 state budget commitments.

The increasing rates of overweight and obesity and risky alcohol consumption are key challenges and a number of the actions included in the Target Delivery Plan specifically respond to these challenges.

Examples include:

Holiday Cooking program for High School Students

This program targets high school students who do not currently study school subjects that involve cooking or food preparation. The focus will be on improving students' basic cooking skills, food literacy and in promoting healthy eating. The courses will be facilitated by qualified home economics teachers using state high school facilities.

The scientific literature demonstrates a link between cooking skills, improved nutrition knowledge and healthier eating habits. This program has been developed to address the need for better food literacy programs in this age group. The number of children meeting fruit and vegetable consumption requirements reduces with age. In addition, rates of overweight and obesity generally increase with age.

This program is funded through the National Partnership Agreement for Preventative Health (NPA PH) \$0.7M over the four-year period. In 2011–2012 at least 10 programs will be delivered and each program will involve up to 15 participants.

Jamie's Ministry of Food

Jamie's Ministry of Food program provides an opportunity to develop healthy eating and food literacy. This is achieved through teaching basic healthy cooking skills, nutrition and budgeting to adults and children with limited cooking skills; particularly those in low socioeconomic and at-risk groups. The project presents a unique opportunity to leverage the popularity of Jamie's Ministry of Food to promote healthy eating. The Good Foundation, in partnership with Queensland Health, is operating a Ministry of Food Centre in Ipswich and a mobile outreach truck will visit regional communities.

The Ministry of Food opened in April 2011. Ipswich residents will be able to join up for 10-week cooking classes and receive information on ingredients, shopping, budgeting, meal planning, food preparation and basic cooking as part of their overall Ministry of Food package. About 2000 Ipswich residents can learn the joys of cooking at the Ministry of Food every year. Funding of \$2.5 million was announced in the State Budget to fund this initiative.⁷

Good sports

The Good Sports Program is an initiative of the Australian Drug Foundation and is a structured health promotion intervention with a primary focus on responsible management of alcohol, with the longer term goal of reducing alcohol-related harm. The program aims to assist clubs to manage alcohol responsibly and to provide safe environments for players, members, families and supporters.

The program is currently operational in 21 Regional Councils and 54 local communities with major state sporting associations (e.g. Polo Crosse, Bowls, Rugby League, Australian Football League, Surf Life Saving, etc.) actively engaged in the dissemination of the program's *healthy people, strong communities* intent across remote; regional and metropolitan centres. It is anticipated that 611 sports clubs across Queensland will be involved in the program by December 2012.

Get Healthy

Get Healthy Information and Coaching Service is a free telephone and website-based service, staffed by qualified coaches, aimed at supporting adults at risk of developing chronic disease. It will help these people to make healthy lifestyle changes regarding physical activity and healthy eating. Get Healthy was developed by NSW Department of Health, and is delivered by Medibank Health Solutions. The development of the service has been modelled on the highly successful Quitline model for smokers.

Get Healthy has been identified as a key investment under the Queensland Healthy Workers Implementation Plan, part of the National Partnership Agreement on Preventive Health. Get Healthy will be a key service delivery option for referral following workplace interventions as part of the implementation plan.

Please note updated information provided by The Good Foundation, October 2011.

⁷ Jamie's Ministry of Food Australia provides an opportunity to develop healthy eating practices and better food literacy. This is achieved through teaching people how to cook simple, healthy and affordable meals; particularly those in low socioeconomic and at-risk groups. The program presents a unique opportunity to leverage the popularity of Jamie's Ministry of Food to promote healthy eating.

The Good Foundation, in partnership with Queensland Health, is delivering Jamie's Ministry of Food Ipswich and soon, Jamie's Ministry of Food Truck will deliver cooking classes to regional communities across Queensland.

Jamie's Ministry of Food Ipswich opened in April 2011. Ipswich residents are able to sign up to a 10-week cooking course. Throughout the course participants receive recipes, information on sourcing fresh seasonal produce, tips on budgeting, hints on meal planning, knowledge of food preparation and basic cooking skills. More than 1,000 Ipswich residents each year will take part in the 10-week cooking course and learn the joys of cooking at Jamie's Ministry of Food. Funding of \$2.5 million was announced in the State Budget to fund this initiative.

Explanatory notes from Queensland Health

This year we have organised key initiatives in the Preventable Chronic Diseases Target Delivery Plan 2011-2012 under the headings of healthy children, healthy workplaces and healthy communities. This is similar to last year's TDP and works well as many initiatives address several targets under this particular Q2 TDP. The themes are also consistent with the National Partnership Agreement on Preventive Health. It should be noted that this year's plan is not an extensive audit of all activity undertaken to address the targets, but rather focuses on key initiatives with significant funding or population reach. Many of the initiatives are implemented in partnership, across different Queensland Government departments.

Part 1: Outline of the target

Target: Preventable chronic diseases

<p>Definition of target</p> <ul style="list-style-type: none"> • Decrease the proportion of Queenslanders who are overweight or obese from 60 per cent to 40 percent of men; 41 percent to 27 per cent for women, and 21 percent to 14 per cent of children. • Decrease the proportion of Queenslanders who smoke from 19 per cent to 12.5 per cent of men, and 15 per cent to 10 per cent of women. • Decrease the proportion of Queensland men and women who drink at unsafe levels from 12 per cent to eight per cent. • Decrease the percentage of adults sunburnt on summer weekends from 15 per cent to 10 per cent. <p>Measurement</p> <ul style="list-style-type: none"> • Proportion of Queenslanders who are overweight/obese, high risk/risky drinkers, daily smokers and get sunburnt. <p>Baseline</p> <ul style="list-style-type: none"> • Overweight or obese (2005) Men: 60.3 per cent (second highest in Australia), women 41.3 per cent (second lowest in Australia). • Daily smokers (2007) Men: 20.0 per cent (third highest in Australia), women 15.8 per cent (fourth highest in Australia) • Heavy drinkers (2007) Men: 11.5 per cent (third highest in Australia), women 12.1 per cent (third highest in Australia) • Sun damage 15 per cent of Queensland adults were sunburnt on summer weekends (equal second highest with Western Australia and Northern Territory) 	<p>Reporting</p> <ul style="list-style-type: none"> • All measures will be reported annually. <p>Complementary indicators</p> <ul style="list-style-type: none"> • Increase the proportion of Queensland adults who are physically active from 53 per cent to 71 per cent • Increase the proportion of adults who eat the recommended serve of fruit from 55 per cent to 73 per cent, and vegetables from 32 per cent to 43 per cent. <p>Lead agency</p> <p>Queensland Health</p> <p>Contributing agencies</p> <p>Department of Education and Training (DET) Department of Communities (DOC) Department of Justice and Attorney General (DJAG) Department of Transport and Main Roads (DTMR) Department of Employment, Economic Development and Innovation (DEEDI) Department of Local Government and Planning (DLGP) Department of Public Works (DPW) Public Service Commission (PSC) Department of Community Safety (DCS)</p>
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Part 2: Annual Action Plan for 2011-2012

Target component	Action	Why	Impact
healthy children			
Overweight/Obesity	<p>Holiday Cooking program for high school students</p> <p>This program targets young people at high school who do not study school subjects that involve cooking or food preparation. The focus will be on improving participants' basic cooking skills, food literacy and in promoting healthy eating.</p> <p>The scientific literature demonstrates a link between cooking skills, improved nutrition knowledge and healthier eating habits.</p> <p>The courses will be taught by registered home economics teachers using state high school facilities.</p> <p>AGENCY RESPONSIBLE: Queensland Health. The program will be delivered by an external agency contracted by Queensland Health</p>	<p>This program has been developed to address an identified need for enhanced food literacy programs among this age group.</p> <p>The number of children meeting fruit and vegetable consumption requirements reduces with age. In addition, rates of overweight and obesity generally increase with age.</p> <p>The Healthy Kids Queensland Survey 2006 found that few children had diets consistent with the National Health and Medical Research Council dietary guidelines for children and adolescents. Intake of fruit, vegetables and milk products was generally less than recommended, especially among older children.</p>	<p>At least 10 programs will be delivered in 2011-2012, with each program involving up to 15 students.</p> <p>Anticipated results for participants, measured through pre-post questionnaires, are:</p> <ul style="list-style-type: none"> increased number of high school students taking part in cooking activities improved skills, food preparation and cooking skills improved nutrition knowledge improved confidence to prepare healthy food positive changes in attitudes toward cooking and eating healthy food increased number and quality of healthy dishes/meals prepared and consumed increased consumption of fruit and vegetables.
Overweight/Obesity	<p>Increase the access and participation of vulnerable children in kindergarten programs in their local areas, which in turn contributes to improved healthy eating and physical activity. Services delivered across the Early Years Centres (EYC) catchment areas include:</p> <ul style="list-style-type: none"> mobile playgroups in locations accessible to Indigenous children and children from a culturally and linguistically diverse background a sessional pre-kindergarten and families program for vulnerable children and their families a Community Champions program with leaders and elders including from the local Indigenous, Pacific Islander and Sudanese communities promoting the importance of kindergarten. <p>AGENCY RESPONSIBLE: Department of Education and Training in partnership with Queensland Health</p>	<p>A large body of research demonstrates links between early childhood programs and positive health outcomes, including less morbidity, mortality, malnutrition and health care.</p>	<p>Increased access to and participation of children living in EYC catchment areas in a range of early childhood development services</p> <p>National Partnership Agreement on Early Childhood Education target: universal access to an early childhood education program.</p>
Overweight/Obesity	<p>Promote healthy eating and drinking behaviours in Queensland state schools through:</p> <ul style="list-style-type: none"> <i>Smart Choice—Healthy Food and Drink Supply Strategy for Queensland schools:</i> National Partnership Agreement Preventive Health (NPA PH) funding will provide project-specific resources to strengthen the program Healthy Queensland Awards (HQA)—Healthiest School Category aims to promote food and nutritional educational programs and resources within Queensland schools. <p>AGENCY RESPONSIBLE: Department of Education and Training in partnership with Queensland Health</p>	<p>These initiatives aim to support the health and wellbeing of students. Smart Choices specifically aims to supply healthy food and drink choices to students within all situations in the school environment, while the HQA promotes health and wellbeing initiatives of Queensland schools.</p>	<p>Smart Choices:</p> <ul style="list-style-type: none"> All schools, including rural and remote, take part in workshops and have access to Smart Choices resources (2011-2012) Increased access to healthy food and drink options by children in Queensland state schools (2012-2015). <p>HQA:</p> <p>Increased number of applications for the Healthiest School Award category compared to the previous year (2011-2012).</p>

Target component	Action	Why	Impact
Overweight/Obesity	<p>From 1 January 2012, implement the National Quality Framework for Early Childhood Education and Care (ECEC). This framework includes a new National Quality Standard (NQS) for ECEC and School Aged Care. The NQS focuses on improving the quality of ECEC services through seven key quality areas including the promotion of healthy eating and physical activity.</p> <p>AGENCY RESPONSIBLE: Department of Education and Training</p>	<p>Research demonstrates the first five years of a child's life shapes their future – their health, learning and social development.</p> <p>The National Quality Framework for ECEC services is an important reform which will deliver a higher standard of care for children in the critical areas of education, health, and safety and will provide clearer and comprehensive information for families so they can choose the best services for their child.</p>	<p>This component of the NQS will promote healthy eating and physical activity in ECEC settings by requiring early education services to:</p> <ul style="list-style-type: none"> • promote healthy eating (and where food and drinks are provided by the service ensure these are nutritious and appropriate for each child) • promote physical activity through planned and spontaneous experiences that are appropriate for each child.
Overweight/Obesity	<p>Promote awareness of healthy eating and drinking behaviours in Queensland sport and recreation clubs through:</p> <ul style="list-style-type: none"> • Food for Sport: A guide to healthy food and drink supply in sporting clubs—development and review of a range of resources including teaching and learning materials, implementation of regional workshops for stakeholders, and evaluation of the strategy. <p>AGENCY RESPONSIBLE: Department of Communities (Sport and Recreation Services) in partnership with Queensland Health</p>	<p>The development of resources and implementation of workshops will increase the awareness of staff in Queensland sport and recreation clubs to provide healthy food and drinks to children.</p>	<p>The program aims to:</p> <ul style="list-style-type: none"> • increase supply and promotion of healthy food and drink in Queensland sporting clubs that provide sporting activities for children • increased access for sporting clubs to nutrition resources and nutrition-related training. <p>A survey has been conducted from June 2011 to establish current sales and promotion of healthy foods in sporting clubs that provide sporting activities for juniors to establish a baseline to measure the impact of Food for Sport over time.</p>
Overweight/Obesity	<p>Increase the physical activity levels of students through the TravelSmart Schools Program by promoting active transport options when travelling to and from school.</p> <p>Schools will have School Travel Plans that offer a range of fun activities including the creation of Park and Walk Maps, Walk to School days, Cycle to School days, class challenges and bicycle skills sessions.</p> <p>AGENCY RESPONSIBLE: Department of Transport and Main Roads</p>	<p>The link has been recognised between active transport and increased physical activity levels.</p> <p>Some recent results have shown that people who use public transport walk or cycle 31 minutes a day compared to non-public transport users who average five minutes a day.</p>	<p>TravelSmart Schools Project will measure the impact of TravelSmart intervention by surveying students and parents on their travel behaviour at the beginning, during and at the end of the school year. The School Travel Plan concludes with a final student travel behaviour survey enabling schools to track their own change toward sustainable transport.</p>
Overweight/Obesity	<p>Promote and support the participation of Aboriginal and Torres Strait Islander children and young people in physical activity, through programs such as the Deadly Sports school-based program.</p> <p>AGENCY RESPONSIBLE: Department of Communities (Sport and Recreation Services)</p>	<p>The Deadly Sports program aims to encourage active participation and healthy lifestyles by Indigenous people. This is achieved by promoting the benefits of sport through interaction with high profile sporting identities and working with State Sporting Organisation development officers.</p>	<p>Increased awareness of benefits of living an active and healthy lifestyle by Indigenous children and young people through the Deadly Sports program. In 2011-2012 it is anticipated more than 7000 students will take part in a Deadly Sports program.</p> <p>Formal evaluations will be completed by a sample of Deadly Sports program participants at each event. It is hoped participants will report a better understanding of why an active and healthy lifestyle is important.</p>

Target component	Action	Why	Impact
Alcohol/Smoking	<p>Further assist Queensland state schools to provide students with ongoing, comprehensive and effective drug and alcohol education through the curriculum framework.</p> <p>AGENCY RESPONSIBLE: Department of Education and Training</p>	<p>It is anticipated proactive school policies and enhanced links with support services and the wider school community will contribute to reduced alcohol and drug use and related harm.</p>	<p>The initiative will measure:</p> <ul style="list-style-type: none"> number and proportion of state schools delivering drug education programs with a focus on tobacco, alcohol education and/or harm minimisation case studies of at least one primary and secondary state school, demonstrating review process, evaluation, evidence and scope of drug education programs, published on the Department of Education and Training website (2011).
Skin Cancer Prevention	<p>Promote supportive environments that enable sun safety for children through the state-wide roll out of the SunSmart Grant Scheme.</p> <p>AGENCY RESPONSIBLE: Cancer Council Queensland in partnership with Queensland Health</p>	<p>Roll out of the program will provide financial incentive for early childcare centres, primary schools and local community organisations to employ multi-strategic approaches to sun safety in these settings.</p>	<p>Annual report from Cancer Council Queensland will outline:</p> <ul style="list-style-type: none"> number and type of sun safety interventions supported amount of funding leveraged for these. <p>The initiative will also consider:</p> <ul style="list-style-type: none"> demonstrated equitable distribution of funding opportunities across Queensland increased/enhanced sun protection policies and quality practices across Queensland where children are cared for.
Skin Cancer Prevention	<p>Increase awareness of sun safety behaviours in children and young people through:</p> <ul style="list-style-type: none"> Youth sun safety communication campaign – promoting recently developed sun safety key messages and branding. Development of a web-based version of the sun safety 'app' accessed through the whole-of-government sun safety website (www.sunsafety.qld.gov.au). <p>AGENCY RESPONSIBLE: Queensland Health</p>	<p>Young people aged 12-24 are known to be at high risk for unsafe sun exposure because they are less likely to use sun protective measures.</p> <p>A significant amount of research has been undertaken into the barriers to use of sun protective measures by this age group to guide the current creative approach to promote sun safety.</p> <p>Evaluation results to date demonstrate an increased number of young people aged 12-24 years using three or more methods of sun protection.</p>	<p>The Youth sun safety communication campaign will measure the reduction in the number of young people aged 12-24 who report being sunburnt in the past 12 months in the Queensland Health Adult Self Report Survey.</p> <p>The web-based sun safety 'app' strategy will consider uptake of the 'app' and website hits.</p>
Skin Cancer Prevention	<p>Support schools to provide sun safe environments for children, through activities such as:</p> <ul style="list-style-type: none"> Implementing a sun protection pilot intervention program for primary schools in north Queensland. <p>AGENCY RESPONSIBLE: Queensland Health and James Cook University</p> <ul style="list-style-type: none"> showcase good practice sun safety strategies to support schools to develop their own localised sun protection strategy. <p>AGENCY RESPONSIBLE: Department of Education and Training</p>	<p>Children are at high risk of unsafe sun exposure. Research suggests that early unsafe exposure to ultraviolet radiation can lead to skin cancer in later life. Schools can be an effective setting to promote and share lifelong sun safe practices.</p>	<p>Six-monthly reports provided by James Cook University evaluating sun safe school policies, practices and supportive environments.</p> <p>Case studies of at least one Queensland primary and secondary school published on DET website.</p>

Target component	Action	Why	Impact
healthy workers			
Overweight/Obesity Smoking	<p>Support workplaces to embed best practice and provide targeted workplace health promotion. This can be achieved through the National Partnership Agreement On Preventive Health - Queensland Healthy Workers Initiative:</p> <ul style="list-style-type: none"> • <i>Workplace for Wellness</i> web portal and recognition scheme • <i>Workplace for Wellness</i> funding scheme— incentive scheme to support workplaces to implement health promotion activities • Get Healthy—telephone coaching service to assist with setting healthy eating and physical activity goals • Workplace Quit Smoking Program—targeting high-risk industry or occupational groups with a high proportion of blue collar workers, including manufacturing, hospitality, agriculture and construction industries. <p>AGENCY RESPONSIBLE: Queensland Health</p>	<p>The objective of this program is to engage and support Queensland workers to make positive and sustainable behaviour changes that reduce lifestyle-related health risk factors and improve their health.</p> <p>Focusing on workplaces as a key setting for chronic disease prevention, the initiative is aiming to contribute to a decrease in adult tobacco smoking rates and increases in prevalence of adults at healthy weight, consuming adequate fruit and vegetables and achieving sufficient physical activity for health benefits.</p>	<p>This will be measured by computer-assisted telephone surveys with agreed national methodology.</p>
Overweight/Obesity Smoking	<p>Under the National Partnership Agreement On Preventive Health (NPA PH)—Queensland Healthy Workers Initiative, embed best practice workplace wellness through targeted initiatives for high-risk industries and hard-to-reach workers.</p> <p>Support healthy choices and behaviours by Queensland workers through the Work Life Balance Strategy.</p> <p>AGENCY RESPONSIBLE: Department of Justice and Attorney-General</p>	<p>The objective of the program is to engage and support Queensland workers to make positive and sustainable behaviour changes that reduce lifestyle-related health risk factors and improve their health.</p> <p>At the same time the program will help to build the capacity of employers to improve workplace wellness.</p>	<p>This will be measured by computer-assisted telephone surveys with agreed national methodology. It will look specifically at decreases in adult tobacco smoking rates and increases in prevalence of adults at healthy weight, consumption of adequate fruit and vegetables and sufficient physical activity levels.</p>
Skin Cancer Prevention	<p>Increase sun safety awareness in working adults through a whole-of-government workforce approach, focusing on sun safe images/communications; sun safe apparel; and sun safe events.</p> <p>AGENCY RESPONSIBLE: Queensland Health</p>	<p>A state-wide, whole-of-government approach across all these areas will provide consistent sun protection messages and supportive environments for sun protection initiatives for staff.</p>	<p>Measurement will include marked increases in:</p> <ul style="list-style-type: none"> • Queensland Government staged outdoor events complying with the sun safety components of the new Queensland Government Events Policy • Queensland Government agencies implementing and monitoring a sun safe policy for all outdoor workers.
Overweight/Obesity	<p>Support workplaces to promote active transport to their employees as part of commuting to and from work, through the TravelSmart Workplaces program.</p> <p>TravelSmart provides workplaces with materials and information to encourage workers to consider the range of commuter transport options available.</p> <p>AGENCY RESPONSIBLE: Department of Transport and Main Roads</p>	<p>This program promotes physical activity by increasing the ability of staff to build exercise into daily commuting. Some recent results have shown that people who use public transport walk or cycle 31 minutes a day compared to non-public transport users who average five minutes a day.</p>	<p>TravelSmart Workplaces underwent a base line survey to determine current travel behaviours of Transport and Main Roads staff. Workplaces will continue to measure the impact TravelSmart has on behaviour change through conducting surveys during the projects delivery.</p>

Target component	Action	Why	Impact
healthy communities			
Overweight/Obesity Smoking	<p>The National Partnership Agreement On Preventive Health—Queensland Social Marketing initiative includes a range of strategies providing reinforcing local level activities that support the national social marketing campaign focussing on healthy lifestyle messages.</p> <p>AGENCY RESPONSIBLE: Queensland Health in partnership with Queensland Aboriginal and Torres Strait Islander Health Council and Ethnic Communities Council Queensland.</p>	<p>This initiative will support Queenslanders to make positive and sustainable lifestyle changes to increase their physical activity and healthy eating and to quit smoking.</p>	<p>This will be measured by the evaluation of the initiative and computer-assisted telephone surveys with agreed national methodology.</p> <p>The evaluation will be completed in 2013, with surveys undertaken regularly.</p> <p>The estimated impacts are:</p> <ul style="list-style-type: none"> • raised appreciation of why lifestyle change should be an urgent priority • increased awareness of the link between chronic disease and lifestyle risk factors • more positive attitudes toward achieving recommended changes • more confidence in achieving the desired changes and appreciation of the significant benefits of achieving these changes • increased physical activity, fruit and vegetable consumption, improvements in healthy weight and reduced smoking.
Overweight/Obesity	<p>Develop healthy eating and food literacy through Jamie's Ministry of Food program to teach basic healthy cooking skills, nutrition and budgeting to adults and children with limited cooking skills, particularly those in low socioeconomic and at-risk groups.</p> <p>The Good Foundation, in partnership with Queensland Health, will operate a Ministry of Food Centre in Ipswich and a mobile outreach truck which will visit regional communities.⁸</p> <p>AGENCY RESPONSIBLE: Queensland Health</p>	<p>The project presents a unique opportunity to leverage the popularity of Jamie's Ministry of Food to promote healthy eating. The project will complement and cross-refer to existing initiatives to promote healthy living and prevent chronic disease such as 13HEALTH, the Go for 2&5 fruit and vegetable campaign, the Measure Up campaign, the Lighten Up and Living Strong healthy lifestyle programs, the 10,000 steps program and the TravelSmart program.⁹</p>	<p>An evaluation of the program including reach, impact and outcomes will be undertaken by a third party.</p> <p>It is anticipated at least 3,200 people will complete the 10-week cooking course through the Ipswich Ministry of Food Centre by June 2014. A further 10,000 people will be assisted through the mobile centre, demonstrations and community events by June 2014.¹⁰</p>
Overweight/Obesity Smoking	<p>Promote healthy lifestyle messages for nutrition, physical activity and smoking cessation through the "Healthier Queensland" social marketing campaign with TV commercials and print media, supported by web based resources.</p> <p>AGENCY RESPONSIBLE: Queensland Health</p>	<p>This initiative will support Queenslanders to make positive and sustainable lifestyle changes to increase their physical activity and healthy eating and to quit smoking.</p>	<p>Program evaluation measures to be provided shortly.</p>

Please note updated information provided by The Good Foundation, October 2011.

- 8 Jamie's Ministry of Food Australia provides an opportunity to develop healthy eating practices and better food literacy. This is achieved through teaching people how to cook simple, healthy and affordable meals; particularly those in low socioeconomic and at-risk groups. The Good Foundation, in partnership with Queensland Health, is delivering Jamie's Ministry of Food Ipswich and soon, Jamie's Ministry of Food Truck will deliver cooking classes to regional communities across Queensland.
- 9 The program presents a unique opportunity to leverage the popularity of Jamie Oliver's Ministry of Food to promote healthy eating. The project will complement and cross-refer to existing initiatives to promote healthy living and prevent chronic disease such as 13HEALTH, the Go for 2&5 fruit and vegetable campaign, the Measure Up campaign, the Lighten Up and Living Strong healthy lifestyle programs, the 10,000 steps program and the TravelSmart program.
- 10 An evaluation of the program including reach, impact and outcomes will be undertaken by a third party. At least 2,400 people will complete the 10-week cooking course at Jamie's Ministry of Food Ipswich. It is anticipated that a further 12,000 people will be assisted through the delivery of the food literacy program via demonstrations and community events held at Jamie's Ministry of Food Ipswich, and in local communities from Jamie's Ministry of Food Truck by June 2014. The first year has been an establishment year and the flood at Ipswich in early 2011 resulted in a delay in commencing the 10 week cooking course. The classes are already proving very popular with good take up.

Target component	Action	Why	Impact
Overweight/Obesity	<p>Improve access to healthy foods through implementation of the Remote Stores and Takeaways Nutrition Project and Policy.</p> <p>AGENCY RESPONSIBLE: Department of Communities (ATSIS) with evaluation by Queensland Health</p>	<p>Government-operated stores in six remote Aboriginal communities and sixteen IBIS stores in Torres Strait Islander communities make a significant contribution to Closing the Gap by providing healthy food and drinks at the lowest possible prices.</p> <p>The Queensland Government funds nutritionists to conduct community programs to work with retail stores and IBIS stores in these communities to assist families to select and prepare healthy foods.</p>	<p>Increased sales of healthy food; reduced sales of less healthy choices. This will be measured through:</p> <ul style="list-style-type: none"> analysis of store sales data baseline and six monthly surveys of staff and project partners. <p>This information will also be supplemented with:</p> <ul style="list-style-type: none"> Healthy Food Access Basket survey information Project evaluation reports.
Overweight/Obesity	<p>Develop and strengthen community capacity to provide sport and recreation opportunities and increase access through:</p> <ul style="list-style-type: none"> Sport and Recreation Active Inclusion Program—for individuals and groups facing barriers to take part. <p>AGENCY RESPONSIBLE: Department of Communities (Sport and Recreation Services)</p>	<p>This initiative aims to increase access to sport and recreation activities for both groups facing barriers to participation and those who may be at risk of social exclusion.</p>	<p>Increase the number of participants in education, training and volunteer initiatives to support the initiative:</p> <ul style="list-style-type: none"> volunteer numbers—established and new—in the above initiatives number of participants in the above initiatives that identify with specific target groups <p>Increase the number of participants in sport and recreational activities who are from at risk groups.</p> <p>Data will be collected through a project acquittal process.</p>
Overweight/Obesity	<p>Encourage Queenslanders to make changes to their travel behaviour through the Communities project. TravelSmart uses individualised journey planning to promote active transport as part of commuting to and from destinations.</p> <p>AGENCY RESPONSIBLE: Department of Transport and Main Roads</p>	<p>This project promotes active transport by increasing the ability of households to include active transport into daily commuting. Some recent results have shown that people who use public transport, walk or cycle 31 minutes a day compared to non-public transport users who average five minutes a day.</p> <p>Interim results from a mid-wave survey undertaken for the Brisbane South Communities project has shown some key positive shifts for those people who have received contact from TravelSmart. Reports show that:</p> <ul style="list-style-type: none"> 10 per cent of people drive less daily the number of people who use the train weekly or more often has doubled 37 per cent are using alternatives to driving as much as possible. 	<p>An assessment of the qualitative and quantitative impacts of the Communities project to assess the effectiveness of whether travel behaviour change is a short term reaction or a long term shift in attitude resulting in a change to travel patterns. The final evaluation will be available in March 2012.</p>
Overweight/Obesity Smoking	<p>Devise a State Planning Policy and relevant instrument to prevent chronic disease.</p> <p>AGENCY RESPONSIBLE: Queensland Health in partnership with the Department of Local Government and Planning</p>	<p>Evidence shows increased rates of obesity are related to contemporary urban living that gives rise to low levels of physical activity and poor diet. The House of Representatives Report on Obesity (2009) concluded that urban planning is a significant contributor to the high levels of obesity in Australia, and planning guidelines and laws must be improved.</p>	<p>The State Planning Policy will be produced by June 2012. This will result in all planning schemes and development applications incorporating consideration of the policy in their local instruments.</p>

Target component	Action	Why	Impact
Alcohol Smoking	Increase smoking cessation by enhancing the capacity of frontline health professionals to routinely deliver alcohol, tobacco and other drug brief interventions. AGENCY RESPONSIBLE: Queensland Health	An online training program will enable Queensland Health staff to deliver quality alcohol, tobacco and other drug brief intervention delivered to patients and clients as part of routine practice, contributing to increased detection and management of risk factors such as tobacco smoking and harmful alcohol consumption.	<ul style="list-style-type: none"> Annual program reporting. Increased number of Queensland Health staff who undertake the training program Number of Queensland Health staff who report increased skills and confidence upon completion of the training program. <p>Note: Phase One program roll out targets the allied health workforce (physiotherapists, occupational therapists, social workers, nutritionists) and nurses.</p>
Smoking	Increase quit promotion and support to Queensland smokers through the implementation of the state-wide social marketing campaign 'My Smoking' with a call-to-action to the Quitline 13 QUIT for smoking cessation information and support. AGENCY RESPONSIBLE: Queensland Health	Reduce tobacco smoking prevalence among Queenslanders by encouraging quit attempts and increasing awareness of, and access to, smoking cessation support services such as the Quitline 13 QUIT.	<ul style="list-style-type: none"> Increased number of people (target market) reporting campaign recall, attitude shift and positive behaviour change post campaign implementation. Increased number of QUIT KIT requests received in response to campaign advertising. Increased number of calls, SMS and online call back requests to the Quitline 13 QUIT during campaign activity.
Smoking	Provide support to prisoners to quit smoking including education, health promotion messages, environmental restrictions, pricing and supply. AGENCY RESPONSIBLE: Queensland Corrective Services	There are high rates of tobacco consumption within the prisoner population. Assisting prisoners to stop smoking will contribute to the Queensland Government's Toward Q2 target to reduce smoking by one third by 2020.	<p>The primary impact of this action is to decrease tobacco smoking in Queensland prisons.</p> <p>The action will be measured by the average consumption (unit quantity of tobacco sold to prisoners) per year.</p> <p>Results are monitored quarterly and reported annually in Department of Corrective Services annual reports.</p>
Alcohol	Support local community action in response to alcohol misuse and harm by increasing the capacity of local community sporting clubs to implement responsible alcohol management practices through participation and accreditation in the state-wide Good Sports Program. AGENCY RESPONSIBLE: Queensland Health	Reduce alcohol-related problems through local sporting clubs adopting responsible alcohol management practices resulting in reduced harmful drinking and risk taking behaviours (drink-driving) and increased viability of community clubs (membership, participation and attendance).	<ul style="list-style-type: none"> Total number of clubs participating in the Good Sports Program. Number of program participants achieving Level 3 accreditation.
Alcohol	Control access to alcohol in Indigenous communities through implementation of the Alcohol Reform project in Discrete Indigenous Communities. AGENCY RESPONSIBLE: Department of Communities (ATSIS) in partnership with Department of Justice and Attorney General (Office of Regulatory Policy)	<p>By addressing alcohol misuse, community health is improved, and discrete Indigenous communities are made safer, especially for women and children.</p> <p>The Alcohol Reform Program has been developed to reduce alcohol supply and demand in communities, as well as to improve alcohol rehabilitation, diversionary and treatment services.</p>	<p>Reduced number and rate of hospital admissions for assault-related conditions (by community) and the number and rate of reported offences against the person (by community).</p> <p>Data will be reported in quarterly data bulletins, and six-monthly and Annual Highlights Reports on Key Indicators in Queensland's Discrete Indigenous Communities.</p>
Skin Cancer Prevention	Promote sun safe outdoor environments in Queensland through development of a comprehensive online resource using a settings and target group approach to shade. AGENCY RESPONSIBLE: Queensland Health	Effective shade is one of the five methods of sun protection. The availability of this resource will support an extensive range of stakeholders including: early childhood and school settings, community facilities (sports grounds, public pools and parks etc.), government planning and approval agencies to plan and establish effective shade and contribute to the reduction of unsafe sun exposure.	<p>This initiative will be measured by the:</p> <ul style="list-style-type: none"> development and online provision of technical shade creation details for a number key settings number of website page hits.