VicHealth: The World's First Health Promotion Foundation

The Need for a Health Promotion Foundation

Promoting health was a big challenge in developing countries where resources were scarce. More often than not, the country's health budget had competing priorities set by the government. Health officials needed to be inventive in creating ways to source funds that could help augment the health budget and implement health promotion programs. The concept of a health promotion foundation, pioneered in some developed countries, offered a creative way of funding health promotion programs that could be adapted in developing countries. Health promotion foundations began with the idea of channeling tobacco taxes to fund health promotion programs. This concept has taken hold in some developing countries, as well.

Country X was an island country in the Pacific. The country's health profile showed a high mortality and morbidity rate due to non-communicable diseases (NCD), particularly, heart diseases, stroke, cancer, chronic obstructive pulmonary diseases (COPD), and diabetes. Risk factor surveys showed a high prevalence of smoking, unhealthy diet, and low physical activity among its population. Other priority public health concerns such as malaria, tuberculosis, dengue, and HIV-AIDS were also present.

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Recognizing the harmful effects of tobacco and alcohol to people's health, the country passed a law increasing taxes on alcohol and tobacco products. Furthermore, inspired by the health promotion foundations in developed countries, the revenue from these taxes was channeled to the Department of Health to address the immediate concern of NCD. A Health Promotion Unit was set up under the Department of Health to ensure the implementation of programs related to a healthy lifestyle, prevention of NCD, and other priority public health concerns.

Nori Tehlaru, a health promotion expert, was promoted to be the director of the newly created Health Promotion Unit. She had previously acted as the technical officer for training and advocacy programs on NCD in the Department of Health. Tehlaru had an abundance of technical expertise in her field but possessed little exposure acting as a leader and a manager. However, the Secretary of Health believed in Tehlaru's capacity to lead and manage the new Health Promotion Unit.

Tehlaru had to prepare for a meeting with the Secretary of Health to present the concept of a health promotion foundation funded from tobacco taxes as a way of implementing healthy lifestyle programs. She was expected to discuss the setting up and management of the new Health Promotion Unit. Additionally, she had to present an Action Agenda for the unit's next three years. She needed to discuss the reasoning behind her strategies, but was not sure where to start. Tehlaru sat at her desk and began to consider her strategy for the unit for the next three years.

Victorian Health Promotion Foundation

There were a number of health promotion foundations in the world as of 2014. Each had their own stories on how they were conceptualized, developed, and implemented into practice. Many stories shared similarities in terms of the challenges faced to sustain health promotion activities. The first health promotion foundation in the world, the Victorian Health Promotion Foundation (VicHealth), was an inspiration to many countries in its creativity, innovation, and resilience in meeting the challenges to promote health.

VicHealth began in 1987 with funding from government collected tobacco taxes to promote health in Victoria, Australia. The concept of taxing harmful products to fund health programs was a revolutionary concept to the public health sector. VicHealth was established and organized from tobacco taxation toward building a strategic vision of reducing the impact of smoking.

Fighting the tobacco industry to promote the health of people was a story of both triumphs and trials. VicHealth was able to reinvent itself when revenues from tobacco taxation was capped and abolished. It then continued to build relationships with key partners and strategic alliances to help build and sustain its work and credibility. VicHealth showed how a strong vision, a committed group of people, and strategic partners and alliances created and sustained the world's first health promotion foundation.

In 1987, the Victorian Tobacco Act 1987 was passed in Victoria, Australia, leading to VicHealth's inception.[1] It was the result of an unparalleled public health advocacy effort. VicHealth was established with all-Party support by the State Parliament of Victoria with the statutory objectives mandated by the Tobacco Act 1987:

- To fund activity related to the promotion of good health, safety, or the prevention and early detection of disease.
- To increase the awareness of programs for promoting good health in the community through the sponsorship of sports, the arts and popular culture events.

- To encourage healthy lifestyles within the community and support activities involving the participation in healthy pursuits.
- To fund research and development activities in support of these activities.

Once the Tobacco Act passed into legislation, immediate action was needed to set up VicHealth. Funds from the tobacco tax poured in and the new organization had to prove that it could deliver on its mandates. VicHealth needed a structure to manage the foundation, staff members who were committed to its cause, and partnerships and networks to make its goals happen. VicHealth needed to build and realize its vision to truly be successful.

Building a Shared Vision: The Early Years[2]

Sir Gustav Nossal was appointed as the first to lead the board of VicHealth. This was seen as critical to the credibility of the organization because Nossal was a world leader in fundamental immunology research. "Knighted in 1977, he was made a Companion of the Order of Australia in 1989, was Australian of the Year in 2000 and [was] regarded as one of Australia's National Living Treasures." His charisma, integrity and intellect brought the board together and inspired everyone to work together for the greater good.

Setting up and managing VicHealth was guided by a clear focus to substantially reduce the impact of smoking. In its first year, VicHealth sought to buyout tobacco company sponsorship of sporting events and the arts. *Quit*, *Heart Health*, and other health promotion programs replaced the tobacco campaigns. This first initiative encouraged the events to be funded by agencies promoting healthy lifestyle messages. Any remaining revenue from the sponsorships was in turn invested toward the promotion of good health, safety, preventative measures, early disease detection mechanisms, research campaigns, and sporting and arts related programs. VicHealth strove to make it easier for the sporting and arts community to replace tobacco sponsorships. These funding buyouts have been considered one of VicHealth's greatest achievements (see **Appendix A**).

In order to develop and manage its projects, VicHealth had to devise grant schemes, disseminate information about them, and inspire community involvement in the health promotion programs. A grant governance system was set up for the oversight of program funding, which became a critical component of the success of VicHealth in its infancy. Committees composed of community representatives and others with specialist skills in regard to health promotion in sports, arts, and research handled decision making with VicHealth's grants. The additional separation between its board and its staff in regard to project assessment proved beneficial for VicHealth throughout the years.

Health promotion needed champions and advocators who understood the benefits of investing a portion of funds from the health budget toward long-term initiatives. Achieving substantial health gains necessitated investing in long-term programs in the five key action areas in Health Promotion: (1) building healthy public policy, (2) creating supportive environments for health, (3) strengthening community action for health, (4) developing personal skills, and (5) reorienting health services.[3] Changes in the form and composition of government should not have undermined the potential gains of long-term commitments to these health initiatives. VicHealth's board included elected representatives from each of the parliamentary parties, which included the Australian Labor Party, the Liberal Party, and the National Party. This was one of its greatest strengths because it ensured the sustainability of VicHealth's projects and campaigns across changing governmental policies. Hard working members with expertise in varied areas were also critical to the credibility and success of the organization.

The dedication of revenue from tobacco taxes for positive health reform was a revolutionary concept. This dedicated tax was a fruitful method for the government to raise adequate funding that enabled VicHealth to ultimately replace the tobacco industry's sponsorship of various events. However, the dedicated tobacco tax was capped in 1992 and later abolished in August of 1997 (see **Exhibit 1**). This challenged VicHealth to look for a more sustainable model for financing its health promotion programs.

Exhibit 1
VicHealth Funding

How VicHealth has been funded						
	1988	1989	1990	1993	1995	1997+
Total Victorian tobacco licence fees (as a percentage of value of wholesale sales)	30%	35%	50%	75%	100%	Nil
Proportion hypothecated to health promotion fund	1/6	1/7	1/10	1/15 (max)	1/15 (max)	Nil
Percentage of wholesale sales for health promotion	5%	5%	5%	5% (max)	6.66% (max)	Nil

Source: The Story of VicHealth: A World First in Health Promotion. Melbourne: Victorian Health Promotion Foundation, 2005. Web. 4 Sept. 2014. <http://www.vichealth.vic.gov.au/Publications/VicHealth-General-Publications/The-Story-of-VH-A-world-first-in-health-promotion.aspx>.

Establishing Partnerships and Strategic Alliances[4]

In its early years, VicHealth worked as a funding agency, using other health promotion organizations to deliver key health messages, where necessary training on how to maximize an investment was provided as needed. VicHealth worked across many sectors, developing several partnerships within the community. These partnerships generated opportunities for citizens to become better informed, hone newly developed skillsets, and have greater access to activities, in addition to creating new environments that propagated the idea of enjoying a healthier lifestyle. A significant partnership between VicHealth and the Cancer Council Victoria was initiated, which sparked the successful *Quit* campaign that significantly reduced tobacco use. In addition, the *SunSmart* campaign proliferated ideals regarding sun protection to prevent and mitigate skin cancer.

VicHealth supported many other causes, too. It led the movement to promote mental health and wellbeing and increased its participation in physical activity initiatives. VicHealth was an active voice in debates discussing alcoholic behaviors and illicit drug activity as well. It helped set up research centers to expand its knowledge of sexual health, maternity health, adolescent health, and Indigenous health. Furthermore, VicHealth aided in the funding of precautions for preventative sports injury and used its social marketing toolkit to educate the community about the risks associated with diabetes, asthma, and heart disease. VicHealth also investigated the social factors that influenced personal health, including poverty, low income housing, unemployment, and lower education.

Exhibit 2
VicHealth Partnerships

Source: VicHealth Action Agenda for Health Promotion. Melbourne: Victorian Health Promotion Foundation, 2013. Web. 4 Sept. 2014. <http://www.vichealth.vic.gov.au/Publications/VicHealth-General-Publications/VicHealth-Action-Agenda-for-Health-Promotion.aspx>.

VicHealth had guaranteed funding from the tobacco tax for 10 years before the High Court of Australia negated state and territory business franchise and license fees, which happened to also cover tobacco fees. Thus post-1997, VicHealth's funding became the responsibility of Victoria, Australia's annual budget, with the Department of Human Services taking ownership for the task. The traditional method of partnering changed, as did the ways in which VicHealth advocated change to support health in regard to these campaigns. From once being a funding agency, VicHealth had now become an active partner within different sectors.

VicHealth's approach to working with its partners and alliances from across different sectors was flexible, responsive, imaginative, and evidence-based (see **Exhibit 2**). From sponsoring the *Quit* and *SunSmart* campaigns, VicHealth now had inroads to partner with State Sporting Associations (SSA) to manifest healthy environments. This was achieved through the connections forged with SSA agencies clubs and associations. These partnerships underpinned strategies to heighten physical activity, proliferated the concept that participants received an array of health benefits by engaging in such activities, and further enhanced social connections.

Influencing the Future of Health Promotion[5]

Twenty-seven years after its inception, VicHealth continued scanning the environment for new knowledge and approaches to help lead the health promotion discipline. The organization sought to contribute value to the larger public health system by adding to its knowledge base and disseminating evaluation data and new evidence to practitioners and policy-makers.

While tobacco control continued to be a key focus for VicHealth as of 2014, other key campaigns now spanned into varied areas. Promoting health messages also shifted from sponsorships to a multiple risk factor approach. Anti-tobacco strategies encouraged people to do more physical activity. This also made positive impacts toward other risk areas such as depression and alcohol and drug abuse.

In 2013, VicHealth committed to a three-year strategy within an extended, decade-long horizon focusing on five major issues:

- Promote healthy eating
- Encourage regular physical activity
- Prevent tobacco use
- Prevent harm from alcohol
- Improve mental wellbeing

Addressing these five identified issues through various programs and projects with different sectors, such as: health, sports, research, education, the arts, media, and community, was designed to maximize the health gains for Victoria, Australia's population. VicHealth's success in promoting health to the public was measured by its numerous achievements. VicHealth reported that through its partake in the *Quit* campaign, among other initiatives, it had helped decline habitual smoking among Victorian adults to 13.3%, a decrease from 18.3% that existed in 2005. To its delight, this decrease surpassed the 13.8% goal for 2013 set by the Victorian Government. VicHealth also reported that because of its major support to the *SunSmart* campaign, the program had generated great change in Victorian citizen mindsets toward preventing skin cancer.[6]

Planning Ahead

Tehlaru paced back and forth. Her meeting with the Secretary of State made her think about VicHealth and the ways to promote a healthy lifestyle campaign for her country, explore potential partnerships with sectors other than health, and overall create a strategic plan for the Health Promotion Unit's work. Tehlaru knew the Action Agenda for the next three years needed to be created and that she had to articulate how the dedicated funds from the tobacco and alcohol taxes would be used to support her Agenda. She understood that the dedicated funds from tobacco and alcohol taxes might not be a forever fix for the unit's sustainability and, thus, needed to develop strategies that encouraged the sustainability of the Health Promotion Unit.

Having found inspiration in VicHealth's successes, Tehlaru was confident that she would now be able to better focus her ideas toward the longevity of the Health Promotion Unit, but knew there was a lot of work ahead of her before her ideas came to fruition. Tehlaru began to further research VicHealth's strategies to see if crossover adaptability was conceivable. On her computer, she started drafting the similarities and differences between Country X's needs, resources, and capabilities against VicHealth's, noting as she went along the feasibility of funding and success her unit would have in implementation.

Appendices

Appendix A
VicHealth Milestones in Promoting Healthy Lifestyle

1987	• Victorian Tobacco Act 1987 passed in Parliament • VicHealth established with funding from government-collected tobacco taxes
1988	• VicHealth moves to buyout tobacco company sponsorship of sport and arts • VicHealth funds SunSmart, Quit, and breast cancer screening programs
1989	• Tobacco billboard advertising replaced • Food and Nutrition Program established • Healthy Localities project created
1990	• A ban is placed on all tobacco advertising in Victorian print media • Victorian Arts Centre becomes completely smoke-free • First community-based cervical screening program established
1991	• Mother and Child Health Research established • Centre for Adolescent Health established • Prevalence of smoking in Victoria from 1986 to 1991 declines at the rate of 1% per year, from 31.5% to 25.6%
1992	• Federal Government bans tobacco sponsorships and most remaining forms of advertising from 1995
1993	• Launch of the State Government's Cancer and Heart Offensive • Of Australia's top private companies based in Victoria, 75% now totally smoke-free (an increase of 25% in one year). • Launch of Partnerships with Healthy Industry – health promotion in the workplace.
1994	• World Health Organization calls for other countries to adopt the VicHealth model
1995	• New Strategic Plan (Healthy Victoria to the Year 2000) launched • VicHealth launches Healthy Families of the Future, a program to improve mental health and wellbeing within families. • Completion of tobacco sponsorship replacement program.
1996	• Active for Life launched in schools to teach children about making exercise a healthy lifetime habit to prevent heart disease. • VicHealth-sponsored sporting organizations are encouraged to promote smoke-free environments with healthy food options and sun shade.
1997	• Australian High Court invalidates state tobacco fees, which ends tobacco-fee funding for VicHealth; funding from state budget commences. • Federal Government and Quit agencies in the states and territories develop the National Tobacco Campaign
1998	• Removal of sponsorship from Carlton Football Club after continuing breaches of sponsorship agreement by their chairman, John Elliott.
1999	• VicHealth's Strategic Directions 1999–2002 focuses on physical activity, healthy eating, substance misuse, tobacco control and mental health and wellbeing. • VicHealth launches the Mental Health Promotion Plan for Victoria, focusing on social connectedness, freedom from discrimination and violence, and economic participation as major factors impacting on mental health.

Appendix A Continued

2000	• The VicHealth Centre for Tobacco Control opens, focusing on legal, economic and social research to strengthen tobacco control initiatives. • Government of Victoria amends its Tobacco Act to introduce smoke-free dining, bans on point-of-sale advertising, and increased penalties for retailers who sell to minors.
2001	• Shift from sponsorship model to increasing participation in physical activity through the Promoting Health through Sport and Active Recreation Program. • Launch of Together We Do Better campaign promoting mental health and wellbeing.
2002	• Walking School Bus Program commences in four local councils; • VicHealth joins forces with education, adolescent and welfare organizations to highlight bullying behaviour as a significant mental health issue. • Launch of Out of School Hours Sports Program to increase physical activity of primary school aged children.
2003	• VicHealth launches Leading the Way: Councils Creating Healthier Communities, a resource to better equip councils to identify and respond to the built, social, economic and environmental issues that affect health and wellbeing in communities.
2003 onwards	• Focusing on developing strong partnerships and strategic alliances in addressing five big issues: ○ Promote healthy eating ○ Encourage regular physical activity ○ Prevent tobacco use ○ Prevent harm from alcohol ○ Improve mental wellbeing

This appendix was adapted from the source: The Story of VicHealth: A World First in Health Promotion. Melbourne: Victorian Health Promotion Foundation, 2005. Web. 4 Sept. 2014. <http://www.vichealth.vic.gov.au/Publications/VicHealth-General-Publications/The-Story-of-VH-A-world-first-in-health-promotion.aspx>.

Endnotes

[1] Borland, Ron, Margaret Winstanley, and Dorothy Reading. "Legislation to Institutionalize Resources for Tobacco Control: The 1987 Victorian Tobacco Act." Addiction 104.10 (2009): 1623-1629. Web. 4 Sept. 2014. <http://www.ncbi.nlm.nih.gov/pubmed/21265905>.

[2] Information in this section was compiled primarily from the source: The Story of VicHealth: A World First in Health Promotion. Melbourne: Victorian Health Promotion Foundation, 2005. Web. 4 Sept. 2014. <http://www.vichealth.vic.gov.au/Publications/VicHealth-General-Publications/The-Story-of-VH-A-world-first-in-health-promotion.aspx>.

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[4] Information in this section was compiled primarily from the source: The Story of VicHealth: A World First in Health Promotion.

[5] Information in this section was compiled primarily from the source: VicHealth Action Agenda for Health Promotion. Melbourne: Victorian Health Promotion Foundation, 2013. Web. 4 Sept. 2014. <http://www.vichealth.vic.gov.au/Publications/VicHealth-General-Publications/VicHealth-Action-Agenda-for-Health-Promotion.aspx>.

[6] Year in Review 2012-2013. Melbourne: Victorian Health Promotion Foundation, 2013. Web. 4 Sept. 2014.