



FDITORS

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AUSTRALIAN HEALTH PROMOTION ASSOCIATION (WA BRANCH) COMMITTEE

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FROM THE EDITORIAL TEAM

Welcome to the second and last edition of News from the West for 2015. The WA Branch has had a busy year helping to make health promotion a priority in WA. You can read more about our work throughout the year, as well as our plans for 2016, in the President's Report on page 01.

You may notice some changes with this edition of the newsletter. The WA Branch is trialling a new format for the News from the West in order to provide a more valuable and relevant service for our members. It's anticipated that this new format will provide a medium that bridges the gap between a standard newsletter article and a published journal article. This means that health promotion practitioners will have the opportunity to submit articles that provide more than just a general project update and instead provide greater insight into their projects, including interventions that were unsuccessful and what they learnt from it in a style similar to an abstract.

General project information and updates are most welcome as additions to our monthly e-news so please continue to keep us updated with your activity. Look out for the opportunity to provide feedback on these changes in the 2016 WA Branch Member Survey. A revised newsletter template will be circulated in early 2016 for the May newsletter edition as we return to a general call for articles from all members.

This first new-look edition features articles and activity from WA Branch committee members, student representatives and ex-officios. It explores the value of utilising online programs to facilitate healthy lifestyle behaviours ('Putting theory into practice for online programs', page 07) and the role of healthy public policy in workplaces ('Hospital dispenses fruit as medicine for good health', page 09). Articles on programs providing a fresh start for prisoners ('Voices behind bars: A fresh start for prisoners', page 11) and a culturally secure approach to type 2 diabetes prevention ('Strong Culture: A Road to Good Health', page 13) are also included.

On behalf of the WA Branch, we wish all our members and their families a safe, healthy and happy festive season. We look forward to working with you again in 2016. Happy reading!

Amber, Lorena and Courtney

PRESIDENT'S REPORT

Melinda Edmunds

President, AHPA (WA Branch)

The WA Branch is hosting the 23rd National AHPA Conference 19-22 June 2016 in Scarborough and we want you to be there! The conference theme is 'Connecting the Dots: Tradition to Innovation, Making it Matter'. The conference will offer a range of learnings and experiential opportunities through different presentation styles, integrated health and wellbeing activities, and fun filled social events. I am pleased to let you all know that the planning is progressing well with three keynotes already locked in! Colin Tukuitonga, Director-General, Secretariat of the Pacific Community; Kathy Burns, Artistic Director at Barkly Arts in Tennant Creek; and 2016 Healthway Visiting Fellow Gary Fooks, Senior Lecturer in Sociology and Public Policy from Aston University. Abstracts are now open and you can keep up to date with all conference activities by signing up to the mailing list at www. ahpa2016.com.au.

Whilst all the conference planning has been happening, the WA Branch has still been very active in order to continue to support our members. This year we have been particularly busy in the area of advocacy and partnerships. We have had a number of great opportunities to inform people of the importance of health promotion, the role of health promotion and how health promotion can be integrated into a number of non-health sectors. Recently I attended the National Chronic Conditions Framework consultation and I was really pleased to see many people pushing for prevention to be a stronger focus in the document.

The WA Branch has also been tirelessly working on our Reconciliation Action Plan (RAP). The Branch feels this document will highlight our commitment to reconciliation and will be a reference point for all the work we do in the future. The WA Branch will host a workshop early in 2016 to engage further stakeholders in the consultation process. If you are interested in assisting the Branch with this key document please do not hesitate to contact us.

I was fortunate enough to attend the Population Health Congress 6-9 September this year as a recipient of the National AHPA scholarships. A particular highlight for me was Ruth Hussey, Chief Medical Officer, Welsh Government Assembly (UK) who highlighted how we are moving away from an illness model in health to a wellness model. Ruth had a number of take home messages that resonated with me, however the key one was, "If you want to go fast, go alone, if you want to go far, go together". This reflects the work we are trying to achieve in health promotion in WA. We need to continue to work together within our sector and with other sectors and industries to make a difference – let's all come together and sing one song.

Melinda Edmunds President

POSTCARDS FROM HOBART: MY LEARNINGS FROM THE POPULATION HEALTH CONGRESSS

Lauren Zappa

Diabetes WA

First of all, I'd like to extend a huge thank you to the AHPA (WA Branch) for awarding me a scholarship for me to attend the Population Health Congress 2015! It was a great opportunity to hear about some of the new challenges facing health in the 21st Century, such as the social, economic, political, environmental, and cultural determinants of health. I would highly encourage everyone to keep an eye out for AHPA scholarships that enable members to attend these events and put your hat in the ring. You might get to attend an event that you otherwise would have missed.

Among the hundreds of learnings I gained from this event, here are three key learnings that stuck out for me:

Learning 1: Policy and environmental change as well as addressing the determinants are integral to health improvement. Increasing knowledge and skills and self-responsibility is not enough.

One theme that carried though the three day event was the need to address more than just the development of skills and knowledge. "Duh…we know that!" I hear you say. However whilst I think we 'know' this, I'm not sure that many of us consider this too deeply when we're developing new programs and initiatives. We need to spend time thinking about the factors that really effect health – this is more than just the social determinants, but also the political, economic and environmental influences.

The following quote, by Dr Allesandro Demaio of NCD Free (USA) summed it up well;

"We have unhealthy environments, policies and economics, yet we blame individuals for their health outcomes."

Learning 2: We are in the Anthropocene

"What is the Anthropocene?" I hear you ask. Well, it's the era that began when human activities started to have a significant global impact, for example the climate change era.

A whole plenary session was devoted to the issue of 'planetary health' – the health of human civilisation and the state of the environment. In fact it was suggested that this term should replace 'population health' as it provided a most holistic view of where we are at today.

Climate change is having a significant impact on health already and this is likely to increase into the future. As health professionals, our role is to help the population adapt to climate change and therefore lessen the impact.

To read more about this issue I would suggest reading the following report by the Climate Council https://www.climatecouncil.org.au/commission-climate-change-and-health.

Learning 3: We need to be effective advocates

"The worst thing we can do as public health professionals is not participate in advocacy."

This statement by Todd Harper from Cancer Council Victoria really hit home. Am I participating in as much advocacy as I could be? Is that advocacy effective?

Here some tips to help you be an effective advocate:

- Use credible, scientific evidence to support you simplify it so it's not overlooked.
- Bring solutions to the table.
- Justify the economic benefits politicians are interested in the financial implications.
- Find out what the public think and use it to your advantage.
- Form partnerships and collaborations and speak to the same tune.
- Get creative with your advocacy.
- Don't give up!



CONGRATULATIONS TO OUR WA BRANCH VICE PRESIDENT

Congratulations to our AHPA (WA Branch) Vice President Courtney Mickan, on the award-winning Smarter than Smoking project she coordinated with South Metropolitan Population Health Unit and the Heart Foundation WA.

Courtney presented the project at the Oceania Tobacco Control Conference 2015, and then went on to accept a WA Health Excellence Award that same evening in the category of 'Promoting healthy habits and preventing illness and injury'.

AHPA member Megan Milligan was acknowledged for her work to establish the project at the South Metropolitan Population Health Unit under the guidance of Ann Barblett, a member of the AHPA WA Branch Strategic Advisory Group. Healthway were also acknowledged as contributors to the project. Well done to all involved!



The winning team accept their WA Health award: (from L-R) Ann Barblett, Courtney Mickan, Natalie Quinn (Heart Foundation) and Megan Milligan (courtesy Department of Health Western Australia).



HEALTH PROMOTION INSIGHTS FROM THE GREAT SOUTHERN

Scarlett Duncan

AHPA (WA Branch) Student Subcommittee

A new component of the revamped News from the West is an interview with a health promotion practitioner, conducted by an AHPA (WA Branch) Student Subcommittee member. Thank you to our subcommittee member Scarlett Duncan and AHPA member Libby Foster, Regional Education Officer - Great Southern from Cancer Council WA for taking part in the first interview.

Stepping out of the Denmark River, Libby Foster has just returned from paddling with her local Dragon Boating club. Wearing a hat and sunnies, she definitely looked the part for a Cancer Council Regional Education Officer. With enthusiasm and a smile to match, Libby was more than happy to sit by the river and share her experiences, in order to provide others with an insight into her work.

Originally, Libby was a Registered Nurse but had always been interested in community health. Gaining certificates in palliative care, community health and a Graduate Certificate in diabetes education led Libby to study health promotion at Curtin University, a relatively 'new' concept back in 1991. "I've always been much more comfortable working in the community" Libby said.

When Libby moved to Denmark she started working with Cancer Council WA, which was based in Albany but serviced the Great Southern region. Libby describes her role as "keeping people well, to the point of early detection and diagnosis". From that point the Cancer Support Coordinator steps in and supports cancer patients and their families by attending multidisciplinary team meetings and helping to create a smooth pathway through the system. Cancer Council's approach to healthcare is unique and holistic, embodying the multiple mental, physical and other factors that contribute to health and wellbeing.

Libby has a strong focus on 'capacity building' within community groups, recognising the benefits of providing members with the knowledge and resources about a relevant health topic so that they can continue to spread the message. One of Libby's initiatives was the 'influential women's breakfast', where she asked women within the community to identify other women who they viewed as leaders. Libby then approached these leaders and asked them to speak on women's health issues at the breakfast. Libby has used similar models for other health programs.

Cancer Council holds many great events such as Daffodil Day, Relay for Life and Libby's personal favourite, Australia's Biggest Morning Tea. During the months of May and June she travels to and from numerous morning teas to give thanks, as well as the occasional spiel on health. Libby is proud of Denmark's enthusiasm and involvement in the event. "One local group managed to raise the equivalent of more than \$1.50 per head of all the people in the shire of Denmark." The money

raised is vital in enabling Cancer Council the ability to help empower people and their health, as at least one third of all cancers can be prevented with a healthy lifestyle.

Working in regional areas has its challenges and benefits. Libby can easily identify the benefits, such as been able to interact with the community. She also realises the advantage of working for a well-recognised charity, one that many people can also relate to on a personal level as "everyone knows someone with cancer". She also finds that getting a clear picture of a target group is easier, and can often be accomplished by observing and visiting groups within communities.

Taking more time to think of the challenges, Libby eventually stated "so much to do, so little time", which I would say is a reflection on her proactive attitude and passion. For more information about Cancer Council WA or to donate, visit www.cancerwa.asn.au.

PEOPLE'S CLIMATE MARCH: AHPA MEMBERS WERE IN



PUTTING THEORY INTO PRACTICE FOR ONLINE PROGRAMS REPORT

Melinda Edmunds, Emma Adams, Lauren Zappa, Helen Mitchell

Diabetes WA

The 2013 Health and Wellbeing of Adults in Western Australia report found 66.6% of adults were overweight or obese and only 53.3% were sufficiently active. Funded by the Department of Health, the Get on Track Challenge and My Healthy Balance are two online healthy lifestyle programs, developed to increase fruit and vegetable intake, increase moderate physical activity minutes and increase the number of people in the healthy weight range.

Get on Track Challenge and My Healthy Balance were established in 2008 and revised (Phase 2) in 2014. Diabetes WA spent time reviewing evaluation results and qualitative user feedback to determine the changes needed to improve participation, satisfaction and participant behavioural outcomes for these online programs. A key focus of the evaluation involved examining a number of behaviour change and learning theories to determine how they could be successfully applied to these programs, given their online nature. The online programs were redeveloped with new websites, branding, content and online engagement technologies in line with Social Cognitive Theory and Diffusion of Innovation. Diabetes WA mapped strategies to each theory construct to ensure that the programs would address all elements of the theory when put into practice.

There was an increase in the completion rates for both programs from Phase 1 to Phase 2. The Get on Track Challenge completion rose from 59.2% in Phase 1 to 70.6% in Phase 2 and the My Healthy Balance completion rose from 12.2% to 22.8% respectively. The new and engaging websites guide participants to change their behaviour change by setting a goal and actions. Participants increased their knowledge and self-efficacy by working through a range of practical activities such as 'This-That' which asks users to guess how many kilojoules are in a variety of foods and drinks. Motivational text messaging and social media discussions spaces were added to the list of additional support available to My Healthy Balance and Get on Track Challenge users. The redeveloped websites are now more user-focused, allowing people choice and flexibility on their path to a healthier life.









These programs are a component of the WA Healthy Workers initiative which is jointly funded by the Western Australian and Australian Governments

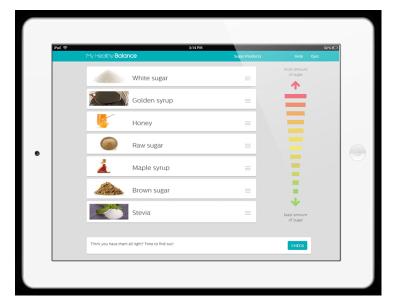
Between February 2015 and June 2015, the Get on Track Challenge has seen positive behavioural outcomes including significant increases in the proportion of participants meeting fruit (53.5% to 73.9%; p<.001), vegetable (19.6% to 38.5%; p<.001) and physical activity (66.7% to 78.9%; p=.014) recommendations. The Phase 1 website saw positive, but non-significant, increases in these outcomes (p=.184, p=.214, p=.064 respectively).

Between November 2014 and June 2015, My Healthy Balance saw a significant increase in people meeting vegetable recommendations, from 15.0% to 27.5% (p=.027), compared to 23.8% at pre and post on the Phase 1 website. Meeting fruit and physical activity recommendations also increased on the Phase 2 website, but non-significantly (p=.525 and p=.075 respectively).

With a well aligned theoretical founding in Social Cognitive Theory and Diffusion of Innovation, the My Healthy Balance and Get on Track Challenge websites have been significantly improved. A focus on how people learn, what enables them to participate and how confident they are to achieve behaviour change has increased both program completion and satisfaction. In the absence of face-to-face time with program users, Diabetes WA found that flexible, interactive and multi-medium delivery methods have resulted in improved behavioural outcomes for the users.

Behavioural and learning theories have an important role in guiding online prevention programs and ensuring programs result in behaviour change. Being able to address specific strategies for each theory construct is critical to seeing the success of putting behavioural theories into practice. Allowing choice and flexibility in how people learn is also likely to significantly increase the likelihood of a successful behaviour change.

For more information, contact the Prevention Unit on 08 9436 6278 or info@myhealthybalance.com. au.



Left: My Healthy Balance interactive activity

Below: Get on Track branding photo



HOSPITAL DISPENSES FRUIT AS MEDICINE FOR GOOD HEALTH

Liz Bradshaw

South Metropolitan Population Health Unit

Health promotion strategies within the workplace food environment are effective in influencing healthy behavioural changes in employees. This project investigated the impact of product, placement, promotion, and pricing as strategies to improve the nutritional profile of vending machines in a hospital setting. The support of hospital staff for healthier options was also explored.

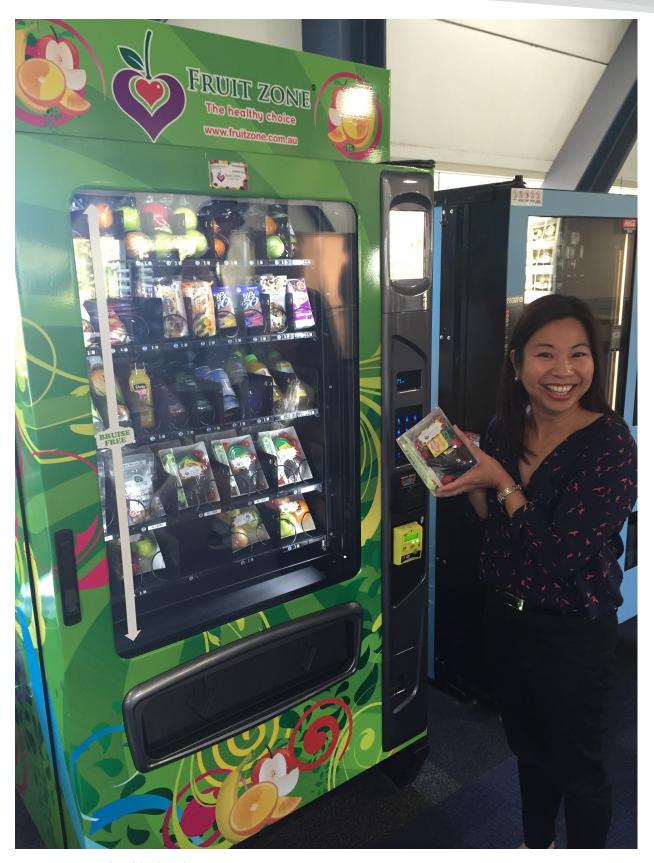
An audit of the vending machines (n=13) in a metropolitan tertiary hospital was completed to categorise products based on the coding criteria of the Healthy Options WA Food and Nutrition Policy for WA Health Services and Facilities. All products were classified as 'green', 'amber' or 'red' according to their fat, salt and sugar content. A survey was administered to staff (n=131) to ascertain the desire for healthier options in vending machines and to invite suggestions for new product lines. The hospital Wellness Committee selected two vending machines in high traffic areas to trial changes relating to product, price, placement and promotion over a three month period.

The survey indicated that 80% of respondents would like to see healthier product lines in vending machines and 79% agreed they would use vending machines with healthier options. Working with the vending machine supplier, 23% of red category products (n=8) were replaced with green and amber items. The price of eight red category products was increased by 15% to subsidise five green items. Four red category products that had previously taken prime position in the machine at eye level were replaced with green or amber products. Healthier products were promoted using green and amber coloured stickers guided by a key with green (healthy choice), amber (OK choice) and red (less healthy choice).

Staff showed strong support for healthier items in vending machines and suggested new products they would like made available. Small changes to the product, price, placement and promotion can have a significant impact on the availability of healthy products in a vending machine. An unexpected win for the hospital was the addition of a new fruit vending machine with bananas and salad packs refilled daily, a first for Western Australia.

The project demonstrated how hospitals are an ideal setting to improve the food environment for staff and visitors. Low cost options that are healthy, prominently displayed and well promoted make healthy foods more accessible. There is a great opportunity to work with existing food suppliers to increase the availability of healthier products in hospital vending machines, with potential for project strategies to be replicated in similar settings.

For more information, contact (Liz Bradshaw) on 08 9416 3119 or Liz.Bradshaw@health.wa.gov.au



Ana enjoying a healthy lunch from the vending machine.

VOICES BEHIND BARS: A FRESH START FOR PRISONERS

Libby Foster

Cancer Council Western Australia

Amber Giblett

Great Southern Population Health, WA Country Health Service

In 2014, Cancer Council Western Australia (CCWA) and Great Southern Population Health, WA Country Health Service (WACHS) identified a need to offer smoking cessation services to Pardelup Prison Farm. This was primarily in response to CCWA's delivery of health promotion initiatives in the prison and subsequent communication with Pardelup staff regarding the prisoners' expressed need for smoking cessation support. In October 2013, the Australian Institute of Health and Welfare noted that in 2012, 84% of prison entrants were current smokers; which is around five times higher than the general population.

Before the delivery of the course, an informal audit of the course materials was completed to assess their suitability for the setting and participants. It was determined that aspects of the materials and method of delivery were inappropriate, including a lack of visual, illustrative material. The dependence on a workbook in particular was deemed to be a potential barrier for participants with literacy issues, different learning styles and/or cultural differences.

The objectives of the program and resource adaptation were to provide appropriate smoking cessation support while trialling Fresh Start Short Course materials, in order to reflect the unique learning environment of the prison setting. Resources were adapted in order to better suit the limited time available for course implementation, the literacy levels of participants, current smoker profiles and the working prison-farm setting. The challenges of prison life on smoking habits, including that the cost of purchasing nicotine replacement therapy patches exceeds that of tobacco, the minimal restrictions on smoking, and the impact of boredom were also considered.

After auditing the smoking cessation course materials and conventional method of delivery, the Fresh Start course facilitators determined that some features were inappropriate for the setting and participants, potentially forming barriers for anyone with literacy issues, different learning styles or from CaLD backgrounds. Adaptations were made prior to and during implementation in response to feedback from participating prisoners. Free nicotine replacement therapy patches were provided to course participants and dispensed by prison medical staff.

In 2014, two short courses were held, with an additional course implemented in 2015. Each course was comprised of two three-hour sessions (two weeks apart) and a focus group at five weeks post-program. In total, 25 males participated.

Five prisoners had ceased smoking and others had engaged in smoking cessation behaviours (attempted quitting or delaying smoking) by the end of the courses. Verbal and written feedback from participants indicated that as a result of attending the course, they had gained new skills to assist them in their quitting journey, discovered their strengths and weaknesses, and supported one another.

Listening to feedback from the course participants, remaining flexible and incorporating delivery suggestions from participants and Pardelup Prison Farm staff (Education and Nursing) were the keys to effectively testing the adapted Fresh Start Short Course materials. Using focus group-style evaluation methods, visual presentations, discussion-based activities and minimal bookwork enabled participants with differing literacy levels and cultural backgrounds to fully engage in the program.

The Fresh Start Short Course materials, the method of delivery and support strategies are amenable to adaption to the unique setting, time constraints and literacy levels of minimum-security prisoners preparing to re-integrate into the community. Feedback from course participants also indicated that many of them support prisons becoming smoke-free environments. A comprehensive evaluation report is available by contacting the article authors.

For more information, contact Libby Foster on 08 9842 7513 lfoster@cancerwa.asn.au or Amber Giblett on 08 9842 7504 or amber.giblett@health.wa.gov.au



STRONG CULTURE: A ROAD TO GOOD HEALTH

Sally Gilchrist, Emma Douglas, Asha Singh

Diabetes WA

Not so long ago, type 2 diabetes was referred to as 'adult onset diabetes' as it was very rarely seen in children and adolescents. However, over the past 2 decades a rise in the prevalence of type 2 diabetes in children and adolescents has been reported. As with Aboriginal Australian adults, Aboriginal Australian children have a higher rate of type 2 diabetes than non-Aboriginal children. It is estimated that the rate of type 2 diabetes among Aboriginal children and youth is more than six times higher than in non-Aboriginal children and youth.

Traditionally, type 2 diabetes prevention messages have been aimed at adults, but given the increasing prevalence of type 2 diabetes in children and adolescents, need to implement prevention and education strategies for younger age groups is being increasingly recognised.

In 2010, Diabetes WA met two Aboriginal grandmothers who attended a diabetes program in the town of Northam in Western Australia. The women expressed a desire to transfer their traditional knowledge and practices, with an emphasis on bush tucker, to the younger generation and to use this as a foundation for discussing healthy eating and diabetes prevention with Aboriginal children. Diabetes WA was able to support the women to develop a program to run within the local primary school.

The program promoted the adoption of healthy lifestyle behaviours and encouraged traditional activities (e.g. hunting, bush tucker, art, walking on country) to prevent chronic conditions such as diabetes. Both Aboriginal and non-Aboriginal people came together contributing their knowledge, skills and experience over the course of the program.

The program was not without its challenges, with many learnings for all stakeholders in the development of the initial six week program. Challenges included:

- Difficulty experienced in maintaining a balance between the ideal of community ownership, flexibility in implementation processes and Diabetes WA management of the project.
- Staff turn-over at Diabetes WA.
- Relationship between stakeholders became strained over issues of operational control and communication of key messages.

However despite these challenges program evaluation demonstrated success in communicating diabetes prevention messages to the children and meeting the expectations of the Aboriginal women who initiated and lead the program. Following the completion of the program in Northam, a curriculum linked resource manual and DVD were developed, detailing the activities undertaken.

The resource was titled Strong Culture: A Road to Good Health. Following piloting of the resources, the resource manual was revised, the curriculum links updated and a small grants scheme was developed to support schools to implement the program.

Through the small grant program schools and community groups are given flexibility to apply to run activities that were not included in the resource manual, provided the activities address key diabetes prevention messages. As such each Strong Culture program is unique, tapping in to local resources and adapting activities to suit the student group, school environment and program partners. This flexibility has been noted as one of the keys of success of this program. Since the implementation of the Strong Culture: A Road to Good Health Small Grants Program in early 2014, 17 grants have been awarded to schools and community groups. The majority of these grants were awarded to rural and remote schools.

Evaluation from the individual grant funded programs has been positive, with schools reporting a greater awareness of diabetes and its risk factors and complications amongst participating students. Evaluation has also demonstrated numerous critical success factors which increase the success of the program, these factors include:

- Involvement of Elders and respected community members.
- Strong partnerships with local health and community services.
- Empowerment of local Aboriginal people and investing time in local capacity building.
- Engaging activities and excursions.
- Enthusiastic project lead.

Additionally, a strong cultural identity has been shown to contribute to strengthening Aboriginal health and wellbeing, with research showing that Aboriginal people who participate in cultural activities have significantly better physical and mental health. The importance of culture should also be considered, and different aspects of Aboriginal culture embedded into health promotion programs targeting Aboriginal communities, where possible.

For more information, contact Sally Gilchrist on 08 9436 6246



Students participating in Strong Culture program activities in Warrlong community.

AHPA (WA BRANCH) ANNUAL GENERAL MEETING

WITH THE 6TH ANNNUAL RAY JAMES MEMORIAL LECTURE

4pm arrival for a 4:30pm start - Tuesday 23rd February 2016

"How to be a better health promotion practitioner – the Ray James way!"

Presented by Anne Polley and Leeann Murphy

Dr Ray James was a mentor, a manager, a leader in the field of public health, respected colleague and a friend of many. Passionate about the need to "act, belong and commit" to the world around him, he would freely impart his knowledge and skills with others – either in the boardroom, an AHPA workshop or even down at Cottesloe Beach every Friday morning where he'd welcome those from the public health sector to swim and later break bread together.

Anne Polley and Leeann Murphy were two of Ray's mentees and friends. Together, with the support of Ray's wife Sky Dawson, they've reflected on their life and times with Ray. At AHPA's 2016 AGM they would like to share the lessons Ray gave that made a difference in their lives – and with a message for today's health promotion practitioners. They present: How to be a better health promotion practitioner – the Ray James way!

A detailed biography can be found at: www.healthpromotion.org.au/component/content/article/3/266-ray-james-award





Anne Polley

Anne Polley is a public health academic based in regional Western Australia. After completing undergraduate study in Exercise Physiology, Anne completed post graduate study in Health Promotion at Curtin University in 1998.

From there, she went on to work in a range of Health Promotion roles in Public Health Units, the Western Australian Department of Health and Local Government, before embarking on a career as a Lecturer in 2006. Currently based in the School of Exercise and Health Sciences at Edith Cowan University, Anne is passionate about mentoring tertiary undergraduate and postgraduate public health students so they prepared to meet the challenges of an evolving public health space.

Anne was lucky enough to share precious time with Dr Ray James as a travel companion on a study tour to Myanmar, through working with him and also a shared love of yoga and meditation.

You can find Anne in Manjimup, in the South West where she splits her time between lecturing, being a parent, supporting regional athletics and hockey, along with representation on a range of Regional Health Advisory Committees.



Leeann Murphy

From health promotion officer to travel writer, Leeann's journey from working in public health in the old WASON building of Royal Perth Hospital in 1999 to being a freelance writer amongst the cobbled streets of Istanbul - where she now resides - has been a long and eventful one.

And she owes most of that exciting journey to Dr Ray James, her friend and mentor that inspired her to get off the beaten track – both professionally and personally - to explore worlds unknown.

Leeann is a former committee member of the Australian Health Promotion Association who took a lead role in starting the AHPA Aboriginal Scholarship Program, the 2003 LEAP State Conference and was a member of the study tours to Myanmar (2001) and Sri Lanka (2006) organised by Ray. You can find out more about Leeann via her website: www.wiredwrite.com



MEMBERSHIP BENEFITS

Are you a member? What does membership entitle you to?

Individual membership to the WA Branch of the Association can serve you and your profession in a number of ways including access to:

- Professional development workshops and seminars at a reduced fee including reduced registration to the annual National Conference (to be held in Perth in 2016)
- National conference scholarship opportunities
- News From the West, our WA Branch newsletter, produced twice a year
- Monthly WA Branch e-news
- An exclusive mentoring program
- A list serve for members which provides postings of current employment opportunities,
 news of events and developments in the field, and networking news
- Health promotion scholarships (for health promotion graduates and Aboriginal and Torres Strait Islander people)
- Social and networking events with other practitioners in the field.

At a national level you also receive member access to the website, copies of the Health Promotion Journal of Australia published three times per year (a peer reviewed journal that aims to facilitate communication between researchers, practitioners and policymakers involved in health promotion activities) and the quarterly Australian Health Promotion Association *Update* newsletter.

Your continuing support as a member is very valuable to us. Please help the WA Branch to grow by introducing a new member today! Individual memberships support the state branch to provide ongoing high quality services for members. It provides you with an opportunity to participate in health promotion direction in WA.

Find out more about individual memberships or corporate subscriptions by visiting http://www.healthpromotion.org.au/membership

Are your details correct?

- Do you receive emails via the listserve?
- Are you receiving your official copy of the Health Promotion Journal of Australia and the quarterly Australian Health Promotion Association Update newsletter?
- If not, log in to the member section of the AHPA website.

Article submission alert!

News from the West is sent out to more than 200 members twice a year. Short updates can also be emailed through for potential inclusion in the WA Branch e-news, which is disseminated on a six-weekly basis. The AHPA (WA Branch) is seeking articles from its members which share achievement, successes, new programs, research and new resources in the field of health promotion. If you have something you want to write about, article submission templates can be obtained by contacting us at adminwa@healthpromotion.org.au

Please ensure that your article adheres to the AHPA (WA Branch) Article Submission Guidelines for greater chance of getting published. The editors reserve the right to omit, edit or condense any submitted article.

Note: Articles appearing in *News from the West* do not necessarily reflect the views of the Australian Health Promotion Association (WA Branch or National).



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