



Health Promotion

Principle:

1. The Tasmanian Council on AIDS, Hepatitis and Related Diseases (TasCAHRD) is committed to improving the health and welfare of TasCAHRD consumers. Employees, volunteers and Board members are encouraged and supported to develop health promotion activities / programs that are consistent with the Ottawa Charter (1986) on *“Health for All by the year 2000 and beyond”*, and the Jakarta Declaration (1997) on *“Leading Health Promotion into the 21st Century”*.

2. **Health Promotion Projects aim:**
 - a) to improve the health of TasCAHRD consumers;
 - b) to improve the quality and range of primary health care activities;
 - c) to encourage and expand the involvement and contribution of staff in primary health care activities;
 - d) to advocate for and/or to develop new primary health care activities based on identified consumer needs;
 - e) to encourage a multi-disciplinary approach to primary health care; and
 - f) to encourage community participation in the planning, implementation, management and evaluation of primary health care activities.

Desired Criteria for TasCAHRD’s Health Promotion Projects

3. Projects must demonstrate evidence of addressing identified health needs and be able to demonstrate the involvement of the target group in the planning, implementation and evaluation of the project.

4. Health promotion plans should demonstrate evidence of multi-disciplinary / inter-sectoral involvement in the planning, implementation and evaluation of the project.

5. An evaluation report outlining the project's successes, detailing any barriers encountered and making recommendations for future improvements, must be completed at the project's completion.

The Ottawa Charter

6. The first International Conference on Health Promotion in Ottawa developed a charter to achieve Health for All by the year 2000. The conference was primarily a response to growing expectations for a new public health movement. Five action areas were identified and form the basis of the Ottawa Charter.

Building Healthy Public Policy

7. This aims to put health on the agenda of policy makers in all sections of society. This may lead to legislative, financial, taxation and organisational change to society.

Creating Supportive Environments

8. This aims to encourage communities and individuals to care for each other. Changing patterns of life, work and leisure should be a source of health to people. This aims to provide support for healthy decision-making processes.

Strengthen Community Action

9. This includes providing opportunities and encouragement for community action in setting priorities, making decisions, planning strategies and their implementation. At the heart of this process is the empowerment of communities and their ownership and control over these issues.

Developing Personal Skills

10. This encourages personal and social development through providing information, education for health and enhancing life skills. This increases the power of people to exercise more control over their health.

Reorient Health Services

11. This recognises there must be a balance between preventative and curative by increasing the emphasis the health system places upon a greater focus on health promotion. The health sector must also be sensitive to cultural needs, a commitment to education, research and training. The health sector must also operate within a broad sphere encompassing the social, political economic and physical environment.

Approved: 15 July 1995

Amended: 5 November 2003

Policy: PSD-09