

## CELEBRATING THE PAST; AWAKENING THE FUTURE: THE NSW PUBLIC HEALTH FORUM HIGHLIGHTS PUBLIC HEALTH SUCCESSSES IN NSW

### GUEST EDITORIAL

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Public health in New South Wales has much to celebrate. As we seek to determine the best path forward, we can use past successes to both inform and inspire us. This issue of the *NSW Public Health Bulletin* contains several success stories for this purpose.

Public health has many forms of expression. Public health applies knowledge derived from fields of enquiry that includes epidemiology, sociology, anthropology, medicine, economics, and environmental science. Public health seeks to make healthy lifestyles, healthy policy, and a healthy economy, practical and applied ideals. Beside the natural environment and air and water quality, ozone levels and global warming, the topics of concern to public health also include the built environment—the world of work, housing, education, and employment. Public health engages with the power play of politics, private enterprise, education, race, gender, and social status. It is prodigious in its avaricious appetite; it is frequently critical; it attends to things that should be done that are not being done; it is impudent in wanting to have so many fingers in so many pies; and it is intrusive and it won't stay still!

NSW has a history of 150 years of effective public health practice. This has enjoyed bipartisan political support. A strong public health community with an increasing capacity has been established. Funding for public health infrastructure over the past 15 years has been used to build a public health capability both centrally within the NSW Department of Health and within the area health services. This strength has been mirrored by the growth of public health in other government sectors in NSW, especially in tertiary education, local government, and in many non-government organisations.

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*Healthy People 2005—New Directions for Public Health in New South Wales* enunciated a vision for better health for people in NSW through continuing and stronger public health.<sup>1</sup> It spelt out the next steps for public health to take. It proposed a forum of leading public health professionals to provide a broad perspective and to contribute their energy and technical knowledge to fulfilling this vision.

The NSW Public Health Forum is comprised of members appointed by the NSW Minister for Health to advise him or her, through the Director-General, about public health. By its terms of reference, the Forum is to prepare advice on strategies in which health professionals and citizens can work together to improve health opportunities in NSW; to stimulate the formulation of public health plans at the state, area health service, and regional level (the latter in partnership with local government); to advise ways to maintain a well trained public health workforce; to oversee a public health research plan; to recommend strategies for the equitable allocation of public health resources throughout NSW; and to recommend ways to improve the monitoring of public health activity and health outcomes in NSW.

The inaugural meeting of the NSW Public Health Forum was opened by the Hon. Craig Knowles on 3 June 2002. He spoke of his personal concern about childhood obesity in NSW, and the Forum immediately responded by supporting the planning for the Childhood Obesity Summit. The Forum then set about to define the remainder of its agenda. Members identified public health topics and processes where the Forum could make an added contribution to an often already successful enterprise.

The second meeting of the NSW Public Health Forum was held on 14 August 2002. The Director-General of Health, Ms Robyn Kruk, attended and expressed her interest in and strong support for the work of the Forum, and for public health more generally. At that meeting, members of the Forum tabled action proposals for consideration. These proposals included the prevention of obesity, tobacco control, falls prevention, the strengthening of public health infrastructure, addressing equity, strengthening public health programs in the early years of life, health care-associated infection control, the synthesis of the evidence base for public health action, intersectoral action for health, addressing interpersonal violence, ecological public health, colorectal cancer screening, alcohol taxation, and the public health aspects of mass events.

From this long list of topics a shorter one is being developed for practical action throughout 2003. An action plan for 2003 is emerging. Professor Tony Adams, an outstanding public health practitioner with a wealth of experience, both in Australia and internationally, will chair the Forum while I am in New York throughout 2003.

Beyond the development of an action list, the Forum commissioned public health professionals from within its ranks and beyond, to document public health success stories from NSW. The first of these success stories was presented in the January–February issue of the *Bulletin*, which describes

the control of vaccine-preventable diseases (this success story will be continued in the April–May issue). This issue presents the remaining of the success stories.

An untold story of success in public health—a gold medal winner one might say—was the handling of public health aspects of the Sydney Olympic Games in 2000. There were no public health disasters during the Games and this was a quiet and wonderful win. This extraordinary story of detailed planning and diligence is told by Louisa Jorm and Maria Visotina.

Simon Chapman, whose outstanding advocacy in tobacco control has been recognised by international agencies such as the World Health Organization, tells of the many steps that have been taken to achieve the amazing reductions in the prevalence of smoking that have occurred in Australia. Much remains to be done, especially among pockets of high prevalence of smoking, often associated with social disadvantage, but we are really doing well by international comparison.

In another vignette, Simon takes us behind the scenes to view encouraging statistics that document a decline in gun-related deaths since the ‘post-Port Arthur’ reforms of gun ownership laws were enacted in 1996.

Sue Morey and Lynne Madden describe the measures taken at the end of the 1980s to strengthen the organisation and delivery of public health in NSW. Included is the early history of the NSW Public Health Officer Training Program begun in 1990. Many leading public health professionals in NSW owe much to this program.

Worldwide, exposure to lead remains a public health problem, especially for children. Huge quantities of lead are released into the atmosphere from old-style petrol. But there are other sources of lead pollution, and the work done in reducing exposure to lead from the mines in Broken Hill, as told by Hugh Burke, Bill Balding, and David Lyle, makes great reading as they ventured into homes, schools and the community to deal with lead in dust and in flaking lead-based paint.

Another global problem is cancer of the cervix. The possibility of a vaccine to prevent this condition is exciting. In the meantime, as Richard Taylor argues in his account of screening for cervical cancer in this state, early detection through Pap smears offers hope and has saved about 2,000 lives in NSW between 1972 and 2000. As Richard says, this is a real public health success story.

On a global scale, there are few public health problems as grim as HIV and AIDS. Kim Stewart and Ron Penny provide a vivid account of the NSW response to HIV, which is a story of containment and control. Community participation, education, case management, policy, and legislation have all played a role in this success. While HIV infection rates have stabilised, the long-term effect of new treatments remains unclear. The social and biological complexity of HIV and AIDS means that it remains in the ‘continuing challenge’ basket for public health.

The first summit to consider health and life matters in NSW was the NSW Drug Summit held in May 1999. The cosmopolitan composition of the summiters was notable. There were 172 resolutions as a result and an action plan followed with, on average, a million dollars for each resolution! More people with drug problems are now receiving due care. Much remains to be done but a coherent, connected set of services has resulted, with measurable benefit.

A second summit, the NSW Childhood Obesity Summit, held in September 2002, was a similar success. Its aim was to build community consensus about future directions in childhood overweight and obesity prevention policy, and to recommend a future course of action. One immediate outcome has been the creation of the NSW Centre for Overweight and Obesity, funded by the NSW Department of Health. The Centre is initially focusing on reducing obesity in children and adolescents, however its long-term aim is the reduction of obesity in the whole NSW population.

The Forum hopes that you will be inspired by these accounts of where public health effort has made a solid contribution to the health of the people of NSW. These success stories augur well for similar continuing contributions to our state of health. The Forum, through its work plan, seeks to be involved with you, the public health professional out in the

field. The Forum intends to keep you informed about our thinking, to involve you in forthcoming planning workshops, and to staying close to you and your concerns.

All good wishes for the remainder of 2003!

Regular updates about the Forum will be available through the *NSW Public Health Bulletin* and communiqués from the Forum. Full and summary versions of *Healthy People 2005* can be found at the NSW Department of Health website at [www.health.nsw.gov.au/health-public-affairs/publications/healthyppl/index.html](http://www.health.nsw.gov.au/health-public-affairs/publications/healthyppl/index.html).

Comments about the work of the Forum are warmly welcomed and can be made by emailing [pvita@doh.health.nsw.gov.au](mailto:pvita@doh.health.nsw.gov.au).

#### REFERENCE

1. Public Health Division. *Healthy People 2005—New Directions for Public Health in NSW*. Sydney: NSW Department of Health, 2000. ☒

## THE SYDNEY OLYMPICS: A WIN FOR PUBLIC HEALTH

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The Games of the XXVI Olympiad, held in Sydney in September 2000, were the largest mass sporting event ever held in Australia. The local public health system had considerable experience in providing services for mass events, such as the annual City to Surf fun run and the Sydney Gay and Lesbian Mardi Gras. However, the challenge presented by the Olympic Games far outstripped these events in terms of the expected numbers of local and international visitors, the extended duration of the event (two weeks) and its high profile, which was accompanied by an intense level of public, political and media interest.

NSW Health was responsible for providing public health services for the Sydney 2000 Olympic Games, as well as hospital care, health care interpreters and ambulance services. This article reports how the public health services were developed; describes the services and the issues and incidents that they managed; and discusses the public health legacy of the Games.

### THE CHALLENGE

The major public health issues managed in the three summer Olympic Games held prior to the Sydney Games were heat-related illness,<sup>1,3</sup> food safety,<sup>2,3</sup> and bombing-related injuries resulting from terrorist attack.<sup>3</sup> In 1997, as part of its planning processes, NSW Health conducted a risk assessment to prioritise public health issues for the Sydney Games. This assessment identified the major risks as: food-borne illness, terrorism (from conventional means), measles, rubella, pertussis, meningococcal and viral meningitis, tuberculosis, sexually transmissible infections, viral haemorrhagic fevers, blood-borne pathogens, water-borne illness, and Legionnaires' Disease. Heat-related illness was considered unlikely to be a major problem in Sydney in September.

Additional risks that were added to this high priority list over the following three years as a result of local and international events included cryptosporidiosis and acts of biological terrorism (bioterrorism).<sup>4</sup>

### THE RESPONSE

Planning for the public health aspects of the Games commenced in late 1994. An expert public health committee (formed in 1996) oversaw the development of a public health action plan. The major components of the