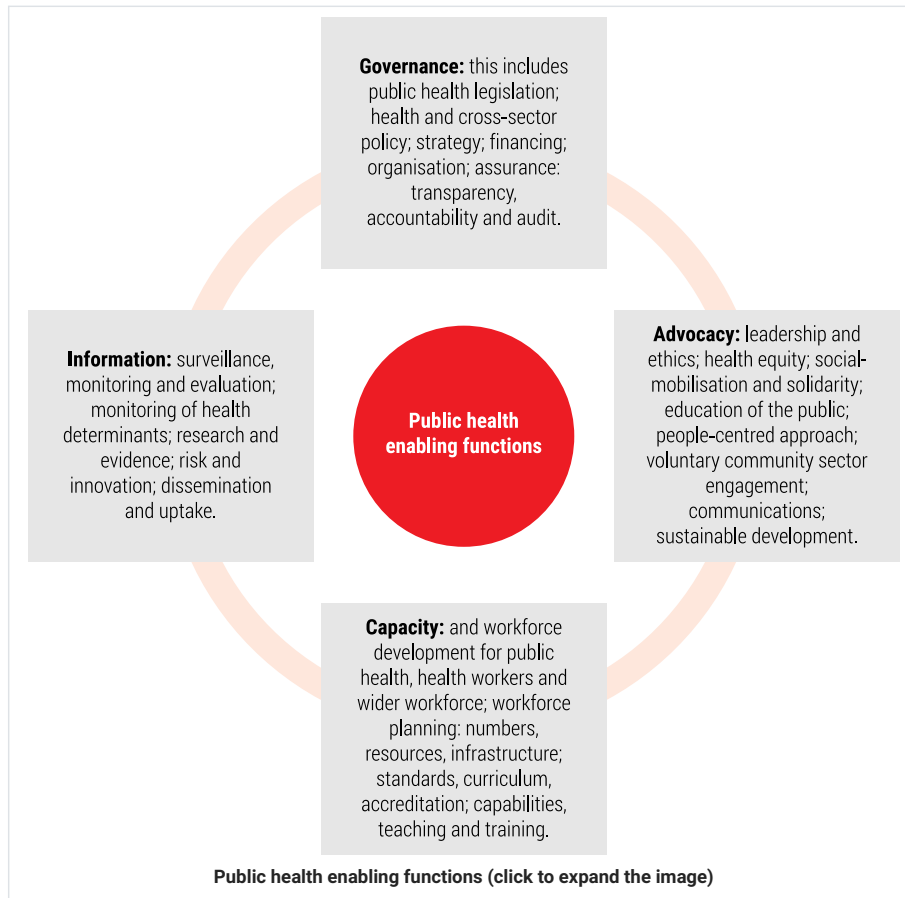


# Topic 4: Enabling functions

## What are enabling functions for public health?

So far this week we have explored the core services of public health – health protection, disease prevention and health promotion. Overlapping with these core services, enabling functions are required to support and enhance the organised efforts of public health. The four enabling functions for public health are: governance, advocacy, capacity and information.



Let's look at these four enabling functions in more detail.

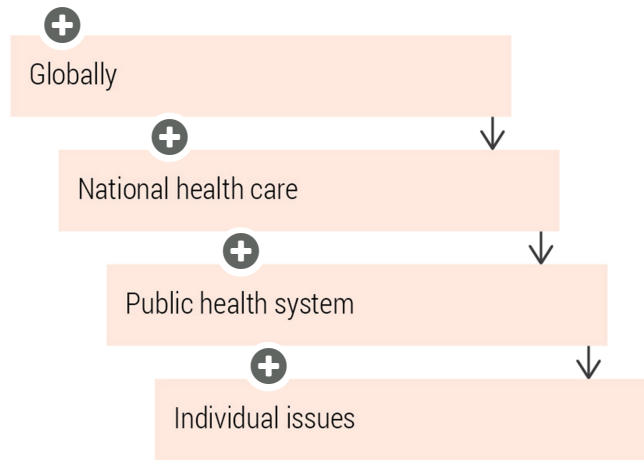
## Governance and policy

Governance is all about the way a country or state undertakes its decision making in public health: setting priorities, deciding how scarce resources should be used, and deciding how to deliver programs and services (Lin et al. 2014). It is also about responsibility and accountability: processes for making sure that decision making is transparent and that resources are used effectively and efficiently (Lin et al. 2014).

When we think about the term 'governance', we often think about government. While government has a very important role to play in decision making, public health programs and activities require the participation of, and resources from, the community and a wide array of stakeholders outside of government (Lin et al. 2014). So governance is also about the framework of rules, relationships, systems and processes within which, and by which, authority is exercised.

Click on the plus signs in the interactivity below to explore governance at a number of different levels:





'Policy' is not easy to define, but the term is generally used to refer to 'decisions taken by those with responsibility for a given policy area – it may be in health or the environment, in education or in trade' (Buse, Mays & Walt 2012). Policies can be public or private, but in this subject we are primarily concerned with public policy – the decisions (and sometimes non-decisions) made by governments and government agencies and the actions they take to address them (Buse, Mays & Walt 2012; Nutbeam 2013). Policies can take the form of documents outlining a decision or plan, legislation that gives effect to a decision, allocation of money and resources, or a pattern of decisions over a period of time (Lin et al. 2014).

In public health practice it is useful to distinguish between two different types of policy:

Click on the below headings to reveal further information.

> **Health policy**

> **Healthy public policy and health in all policies**

Policy making is a complex and fraught social process, and there are a number of different theories that can be useful for understanding it. Some theories perceive policy making as a series of steps, from identifying issues and analysing options through to making a decision, implementing and evaluating it. However, because there are many different interests and stakeholders involved in policy making, the process is often much messier and less linear than these types of models suggest.

Public health evidence – about the nature and extent of problems, and about the relative effectiveness of different solutions – is an important input to policy decision making; however, it is never the sole concern, as policy making is a political process rather than solely a technical one.

## Advocacy

*Public health policy directions are determined by advocacy as well as by research. Changes in policy might be advocated by many stakeholders, including groups of citizens, professional and community groups, and industry lobbies. Advocacy also comes in many forms – letters and petitions, stories and comments transmitted through mass media and delegations to ministers and officials.*

(Source: Lin, V, Chaplin, S, Robinson, PM, Fawkes, SA & Smith, J 2007, *Public health practice in Australia: the organised effort*, Routledge, p. 162)

Explore the advocacy activities undertaken by the Public Health Advocacy Institute of Western Australia that are influencing public health policy and regulation in Australia. <https://www.phaiwa.org.au/>

## Capacity

Capacity is often referred to as the invisible work of public health. Investing in a strong public health workforce enables all other public health functions to achieve their goals.



Capacity is an approach to the development of sustainable skills, organisational structures, resources and commitment to health improvement in health of other sectors, to prolong and maintain multiple health gains made many times over. Capacity building has 5 action areas:

1. Organisational development
2. Workforce development
3. Resource allocation
4. Partnerships
5. Leadership

In PHE5PSP we will explore specific strategies for building public health workforce capacity in more depth. To learn more about capacity building explore the New South Wales Health Department 2001, [A framework for building capacity to improve health](#). New South Wales Health Department, Sydney.

## Information

Information, health data and surveillance are essential for planning for, responding to, and evaluating public efforts. Through strong information services such as infectious disease reporting systems, and robust public health evidence and research, all other core services and enabling functions for public health are enhanced. Most recently, we can observe the differing responses to COVID-19 based on the variations in available information on the transmission rates and epidemiological data on the virus. The use of digital technologies to support public health efforts is being increasingly recognised. You can learn more about these technologies in the Digital Health subjects offered at La Trobe. Read more about the importance of digital epidemiological surveillance for COVID-19 responses [here](#).



### Required reading

These two readings discuss the importance of governance, advocacy, capacity and information in public health practice.

- pp. 231–246 in: Talbot, L & Verrinder, G 2018, [Promoting health: The primary health care approach](#), Elsevier, Chatswood.
- Public Health Advocacy Institute of Western Australia 2020, [Sponsorship in Sport](#).



### Reflection

#### Task 1: Class Padlet

Using the same public health intervention you shared for the Topic 1 activity, identify and reflect on the enabling functions included in your chosen intervention.



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• Share • 


## 2023 PHE5PUH T2 Week 2, Topic 4: Enabling functions

Using the same public health intervention you shared for the Topic 1 activity, identify and reflect on the enabling functions included in your chosen intervention.



Cervical Cancer

Enablers


 Anonymous 12d  
Cervical Cancer Enablers

### Governance:

The Australian Government has established a national cervical screening program and incorporated the Gardasil vaccine into the National Vaccination Program.

### Advocacy:

80% of diagnosed cases

Made with 

### Task 2: Reflection

Read the prescribed readings and reflect on the role of advocacy in supporting public health efforts. Write 3–5 short sentences that explain the role of advocacy activities in addressing unhealthy product sponsorship in sport as an enabling function of public health effort. You can share these on the following padlet.

### Guidelines

This activity is not graded but is an essential part of your learning. Your submission will be reviewed by your tutor, though you may not receive specific feedback.



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## 2023 PHE5PUH T2 Week 2, Topic 4: The role of advocacy in supporting public health efforts

Read the prescribed readings and reflect on the role of advocacy in supporting public health efforts. Write 3–5 short sentences that explain the role of advocacy activities in addressing unhealthy product sponsorship in sport as an enabling function of public health effort.



Unhealthy product sp

Anonymous 12d

Unhealthy product sponsorship is the promotion of junk food, alcohol and gambling products or services. The Public Health Advocacy Institute of Western Australia (PHAIWA) has developed a campaign to highlight which sporting organisations accept sponsorship arrangements

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Last modified: Wednesday, 25 January 2023, 7:01 AM

