



# POSITION STATEMENT

Victorian Healthcare Association

VHA 2010 Board Endorsed Position Statement



## *Definitions*

*"Optimising health outcomes for all Victorians"*

## Executive Summary

Population health, as an approach to planning, aims to improve the health and wellbeing of whole populations and to reduce inequities within and between specific population groups. Best practice population health planning is grounded in effective and meaningful community, inter-sectoral and whole-of-government engagement.

Health services, local government and social services all have vital roles to play in taking responsibility and being held accountable for population health outcomes. Population health planning takes into account the environmental, economic, political, social, cultural and behavioural factors that explain the health and wellbeing of communities and populations.

Potential exists to improve health outcomes by addressing the root causes of poor health. This will necessitate comprehensive and integrated population health planning, with implications for policy, funding, service planning, service arrangements, service access, workforce development and advocacy.

Population health is also commonly understood as health planning or planning for health and wellbeing. While there are various ways to understand the term 'population health', it does encompass some common features and approaches to planning. These common features have been collated into a section titled the core components of population health planning.

Currently, population health practices are influenced by the planner's professional discipline and background, as well as both individual and organisational philosophies.

## The Victorian Healthcare Association

The Victorian Healthcare Association (VHA) is the major peak body representing the interests of the public healthcare sector in Victoria. The VHA promotes the improvement of health outcomes for all Victorians from the perspective of its members that include public hospitals, rural and regional health services, community health services and aged care facilities.



## Introduction

This position statement offers clear and detailed working definitions of population health and population health planning.

These definitions will continue to develop as approaches to population health and population health planning evolve. They are based on international best practice, a substantive literature review conducted by Monash University's Department of Health Social Science and consultation with the Victorian health and government sectors.

By providing these definitions, the VHA aims to create a shared understanding and clarity of purpose regarding a population health approach in Victoria. These definitions may be used by health and social policy planners at the highest levels of government, for collaborative regional and subregional planning, and by individual healthcare agencies.

The health of populations is largely determined by factors and conditions that lie outside the domains of the health system. Despite significant advancements in healthcare, rates of poor health and chronic disease continue to escalate alongside socioeconomic inequalities and disadvantage, often clustered in communities. To see real improvement in the health of populations more comprehensive approaches to planning are required.

Health improvement is the responsibility of all levels of government; all sectors and industries; communities and individuals. Contemporary views of population health move beyond the simple concept of 'the health of a population' to also encompass multifaceted approaches that actively address the determinants of health. The VHA has developed this position statement to achieve clarity of population health terminology to drive equitable change throughout the health system and society. It shifts the focus of planning from single-agency service planning to integrated and intersectoral planning through shared goals and actions to address population needs.

Activities undertaken as part of a population health approach focus on the determinants of health and their interaction. These determinants represent the environmental, economic, political, social, cultural and behavioural factors which explain the health and wellbeing of communities and populations. Evidence from the study of the determinants of health and their interactions has demonstrated clear links between social disadvantage and poor health, with these links consistently found across different groups and postcode areas<sup>1</sup>. Population health is grounded in a social model of health and takes an equity-based approach to planning that recognises the relationship between health and social outcomes. It does so by addressing the determinants of health in an integrated and considered manner.

Interest in population health has grown out of concerns with how to improve the health status of specific populations or sub-populations at a community level, rather than just addressing personal risk factors<sup>2</sup>. For example, to focus on physical activity only for those in high-risk weight categories is not as effective in achieving optimal health outcomes for whole populations, as focusing on creating environments in cities and

neighbourhoods which are conducive to physical activity for everyone.

At another level, population health seeks to reduce health inequities among and between specific population groups by recognising that everyone is exposed to different types of environmental, economic, cultural and social factors. Some exposures are health-enhancing, such as attending a quality school or having local quality parks and reserves. Other exposures are detrimental to health, such as poor availability of fruit and vegetables or inaccessible transport options within a community. These exposures accumulate over time to determine an individual's health status. Interventions to reduce and prevent harm from smoking or to improve the school readiness of children living in low income families are both examples of population health approaches that improve the health of people experiencing higher exposures to health damaging conditions.

## VHA Context

The VHA advocates for the adoption of government policy that recognises the physical, social, environmental and political aspects of individual and community health status through a “whole of health” model. Fundamental to this approach is the adoption of planning derived from a population health approach. The VHA is therefore committed to building the capacity of the Victorian health sector to implement population health approaches to planning. A shared understanding of the language and concepts implicit within population health is vital to encourage shared purpose and goals across all stakeholders. Development of such an understanding will lead to integrated and collective action that can achieve real health improvements for populations. Since 2006, the VHA has developed its organisational knowledge and capacity in the area of population health. This process has identified that a range of assumptions exist within health policy frameworks that do not align with the actual skill mix and understanding within the health sector as a whole.

The VHA found vast divergence of understanding and meanings of population health across the literature, within government and the health sector.

This discovery led the VHA to undertake a collaborative project with Monash University, including an initial literature review funded by a VicHealth Discovery Grant in 2008. A key outcome of this collaborative project is this position statement which provides a set of rigorous, industry endorsed definitions of population health and population health planning.

## International and Policy Context

Internationally, health policies have made clear the importance of integrated policy responses to poor health, and highlighted the critical role that economies and social life play in health in 21st century societies and vice versa. Better health and the closing of health gaps are put forward as shared goals of governments at all levels and across portfolio boundaries. International approaches to sharing the responsibility for health across portfolios include Healthy Cities<sup>3</sup> and Health in All Policies<sup>4</sup> strategies. These approaches both argue for sustainable mechanisms that support government agencies to work together across sectors to develop integrated solutions to current and future policy challenges. These set the scene for integrated population health planning that is based on values of equity and justice as well as health and social wellbeing.

The Public Health Agency of Canada is one of the international leaders in population health approaches. In 1994, the Canadian federal, provincial and territorial Ministers of Health officially endorsed a population health approach to planning. In addition, the World Health Organization has published seminal documents that review the key social, psychological and environmental factors that impact on health. More recently, the WHO Commission on the Social Determinants of Health<sup>5</sup> published its final report, which makes the point that the:

***“...determinants and conditions of daily life constitute the social determinants of health and are responsible for a major part of health inequities. The unequal distribution of health-damaging experiences is not in any sense a ‘natural’ phenomenon but is the result of a toxic combination of poor social policies and programmes, unfair economic arrangements, and bad politics” (p. 1).***

Poverty, social exclusion, poor housing and poor health systems are among the main causes of poor health. A crucial factor in population health planning is to focus on the conditions that are amenable to change and that can have the greatest impact on those most in need.

In Victoria, the social policy statement, *A Fairer Victoria*<sup>6</sup> is directional in its intentions to address social disadvantage and inequalities through targeted approaches and universal provision of essential social and health services. Other Victorian government policies profess to taking a population health approach, including strategies to tackle socially-driven health issues. Some policies focus on a location (e.g. Community Building or Neighbourhood Renewal<sup>7</sup>), whereas other policies aim to improve the health of specific sub-populations (e.g. maternal and child health<sup>8</sup>).

Most Victorian policies do not reference or draw directly on *A Fairer Victoria*, nor do they approach health from a population health perspective. Consequently, much Victorian healthcare and associated policy is either narrow in scope and applicability; does not readily support an integrated perspective; or is inconsistent in its consideration of the health and wellbeing of the population as a whole, or of specific sub-populations.

# Definitions

Understanding the values and purposes underpinning population health is critical in order to understand the potential outcomes, impact and reach of population-health focused work. It is important that agencies using a population health approach clearly define the constituent elements of population health being addressed so that any interventions implemented are meaningful to their communities and/or populations of interest. Furthermore, any population health approach must also be culturally appropriate and meaningfully engage the populations involved.



## Population Health

The VHA recommends the use of the following working definition of population health. This working definition represents current best-practice, but also recognises that population health thinking and planning is still evolving. Consequently, as population health approaches are implemented and evaluated this definition may require further refinement.

### The VHA working definition of population health

Population health aims to improve the health and wellbeing of whole populations, reduce inequities among and between specific population groups and address the needs of the most disadvantaged. Effective population health requires community, inter-sectoral and whole-of-government engagement and collaboration to address the broad range of determinants that shape health and wellbeing.

## Population Health Planning

To achieve optimum population health outcomes, comprehensive and integrated population health planning is required. The VHA recommends the use of the following working definition of population health planning. This definition will evolve as population health planning approaches are implemented and evaluated.

Population health planning is necessarily based on the following four core elements and eight best-practice elements that represent the activities required to implement a best-practice approach.

### The VHA working definition of population health planning

Population health planning is integrated and collaborative planning that demands that health and non-health sectors, government departments, and service delivery agencies work together to address the issues faced by their communities and populations. It focuses on achieving real and sustainable health improvements and is committed to reducing health and social inequities. This offers opportunities for innovation by seeking and applying evidence about new and changing needs of populations, and how these are influenced by the determinants of health.

# Population Health Approaches

## Core Components

The following four core components are essential in establishing any population health approach to planning.

1. Clear articulation of **leadership, responsibility and accountability** for collaboration and outcomes including:
  - Governments taking responsibility and accountability for facilitating optimal health outcomes for all and ensuring resources are distributed fairly and sustainably within and among communities based on need.
  - Collaboration between multiple levels of government and industry, health and community agencies whose policies and programs influence health and wellbeing outcomes, as well as active, meaningful involvement and engagement of communities and populations.
  - Boards and senior management of health and community services providing active support to the uptake and implementation of population health approaches in their agencies
2. A **values statement** that includes a commitment by all stakeholders to improve the health and wellbeing of whole populations and reduce inequities among and between specific population groups by addressing the determinants of health, in order to respond to regional, local and household health and wellbeing issues
3. An easy-to-understand description of the **approaches and mechanisms** being used to guide and inform planning, particularly those used to promote interagency collaboration and partnerships with local communities
4. An **evaluation strategy** should include a description and evaluation of the:
  - Data used to guide and inform planning
  - Approach used to evaluate the evidence about intervention effectiveness
  - Community involvement and engagement undertaken
  - Interventions implemented
  - Health and wellbeing outcomes achieved

As population health planning requires the involvement of multiple sectors, and also engagement of communities and populations - active review of resource allocation, funding, service delivery arrangements, access to services, workforce development, advocacy and policy is necessary.

## Best-Practice Principles

The following eight principles are fundamental to achieve a best-practice population health approach to planning.

Population health planning is integrated and comprehensive when all of the four core components and eight best-practice principles are included.

1. A **social model of health** to identify health and wellbeing needs; and as a foundation for policy, programs and models of care
2. Active recognition of the **determinants of health** and the role of the health sector and other stakeholders in addressing those determinants
3. Data and measurement to identify **evidence-informed approaches** that maximise health and wellbeing
4. **Active involvement and meaningful engagement** of populations and communities of interest
5. **Evidence of collaboration and engagement** among all relevant health and non-health sectors and government departments
6. Interrogation of data and asking of questions that reveal **social and health inequities and inequalities**, gaps in knowledge, and opportunities to tackle current and emerging issues to set priorities
7. A **solutions-focused approach** which addresses causal pathways to poor health and social inequities that range from prevention to promotion and is sensitive to the dynamics of change
8. Ongoing **workforce** education, training and development in population health thinking and planning

There is no singular approach to undertaking such planning. Rather, specific approaches adopted will differ depending upon the characteristics of communities and populations being targeted.



## Recommendations

Organisational commitment is fundamental to drive the change needed to plan and work from a population health approach. In order to support the realisation of population health in the Victorian community, the VHA recommends the following actions:

### Recommendation 1

That the VHA working definition of *population health* and the VHA working definition of *population health planning*, including the four core components and eight best-practice principles be adopted by federal, state and local governments, as well as all health and community sector agencies.

### Recommendation 2

That there is investment in ongoing training in 'population health approaches to planning' for the workforce and boards of health and community sectors, and across government agencies.

### Recommendation 3

That health and community sector boards and senior management actively support the uptake of population health approaches across Victoria.

## Conclusions

Population health approaches to planning are in their infancy in Victoria. The State Government's *A Fairer Victoria* document purports to address the determinants of health but this does not flow through other policy documents or to policy implementation on the ground.

While the notion of population health is increasingly discussed by all levels of government and within the health sector, there are disparities in understanding what the concept means both philosophically and in practice. This is hampering moves towards its collective introduction in the health and social service sectors.

The VHA and the Monash University Department of Health Social Science have collaboratively developed a working definition of population health and population health planning, to aid a collective understanding of these approaches. This position statement is intended to guide Victoria's health and social service sectors towards the introduction of comprehensive and integrated population health planning.

Population health approaches to planning offer healthcare and social agencies the potential to benefit constituent populations, specific sub-populations and, in time, Victoria as a whole. The VHA, through this position statement and its future population health project activities is committed to improving the capacity of the Victorian health system to implement population health approaches, and thus optimise the health of the Victorian community.



## References

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## The Logo

The VHA Population Health Approaches to Planning logo represents a structure similar to beehives suggesting multiple strategies, integration, working together and a sense of community. The logo also represents a path, demonstrating that there are many ways to approach and conduct population health planning. The colours represent diversity of populations and unique considerations and strategies required to support each group.



*Produced by the Victorian Healthcare Association (VHA) in collaboration with the Department of Health Social Science at Monash University. This document has been prepared by the VHA with input and feedback from VHA members. While this position statement aims to broadly reflect the views of the health sector in Victoria, it remains the position of the VHA and does not supersede any submission or position stated by any member agency.*

*The VHA would also like to thank the VHA Population Health and Area Based Planning Working Group. This group has contributed generously to the VHA project.*

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