

SUBMISSION TO THE SENATE COMMUNITY AFFAIRS REFERENCES COMMITTEE

Inquiry into Australia's domestic response to
the World Health Organization's (WHO)
Commission on Social Determinants of Health
report "*Closing the gap within a generation*"

**SOUTH AUSTRALIAN GOVERNMENT
SUBMISSION
October 2012**

Introduction

The Government of South Australia (SA Government) welcomes the opportunity to make the following submission to the Senate Community Affairs References Committee inquiry into Australia's domestic response to the World Health Organization's (WHO) Commission on Social Determinants of Health report "Closing the gap within a generation".

The SA Government supports the view of the Commission that a holistic view of the social determinants of health (SDH) is required to address health inequities. This requires a whole of government approach and the involvement of local communities and non-government organisations.

The SA Government has a strong and proud reputation in acting on the SDH and has committed to implementing a range of approaches and programs to address them at the highest strategic levels, which respond to the overarching recommendations in the WHO *Closing the Gap in a Generation* report such as:

- Investment in leading edge approaches, such as in Health in All Policies (HiAP), which is working across government to enable joined up policy responses to complex, "wicked" policy issues and strengthens the health sector's stewardship role in supporting a social determinants approach across government.
- Committing to implementing a comprehensive approach to early life by establishing as one of our main policy objectives the strategic priority of Every Chance for Every Child which recognises that the nurturing qualities of the environments where children grow up, live and learn, matter. A renewed focus on child development will contribute to reducing inequalities and includes the development of progressive legislative reform in the area of child development and a commitment to the Child Friendly SA reform based on the UNICEF Framework of Child Friendly Cities.

More specifically, in 2010 after extensive consultation, the SA Government introduced new public health legislation which was passed in 2011 with cross-party support. The South Australian *Public Health Act 2011* is legislation for the future. It is designed to address both contemporary public health issues as well as traditional and enduring public health concerns. In his second reading speech the SA Minister for Health and Ageing specifically referred to the WHO Commission on SDH report stating that this legislation was in part South Australia's response to that report and a key driver for action on the SDH (see Appendix Two).

In November 2011, the SA Government hosted the first global HiAP Summer School which was convened with technical support from the WHO – Geneva and Western Pacific Office. The Summer School received a high level of local and international interest. Thirty-two participants from 14 countries attended, representing the European, Western Pacific, Americas, South East Asia and Eastern Mediterranean WHO regions. The Summer School introduced participants to the changing nature of governance for health and the social determinants of health agenda, partnering for health and South Australia's HiAP initiative, and the global SDH and HiAP agenda.

Most recently, and building on our extensive experience, the SA Government has been seen as a critical player in a primary coordination role to build a national collaborative approach to act on SDH with the development of the *Australian SDH Case Study Book*. The Case Study book aims to support Australia's preparation for the 8th Health Promotion Conference on the theme of HiAP, to be held in Helsinki, June 2013.

Key Messages

The SA Government's submission will outline key SA Government approaches and initiatives to addressing the SDH. The key messages that the SA Government would like the Senate Community Affairs References Committee to note are:

- By incorporating a focus on health impacts into the policy development process of all sectors and agencies through the HiAP approach, it has allowed the SA Government to address the key determinants of health in a systematic manner. It ensures that the benefits of improved population health are taken into account within the priorities of all sectors. It enables sectors to work collaboratively and towards the same goals, breaking down the boundaries agencies traditionally face when attempting to work across different policy areas.
- By investing in building the capacity of knowledge and skills of the collective public policy workforce, increasing the capacity for research and evaluation and mandating at the highest strategic level action on achieving improvements in population health and wellbeing, the ability of government to systematically address and respond to the SDH is significantly impacted.
- Advancing innovative legislation which recognises that the SDH are fundamental to improving population health outcomes (such as enshrining principles of sustainability, partnerships, equity and prevention in the South Australian *Public Health Act 2011*) and acknowledging that a comprehensive approach to health needs includes a whole of government approach, are both necessary to improve health status within the community (see Appendix 2).
- The SA Government recently identified seven strategic priority (SSP) areas which, over time, will increasingly inform and drive government actions, decision making and resource allocation. These priorities are; *Creating a vibrant city; safe communities healthy neighbourhoods; an affordable place to live; every chance for every child; growing advanced manufacturing; realising the benefits of the mining boom for all and; premium food and wine from our clean environment*. They all contain strategic elements which advance whole of government responses to the determinants of health. Currently steps are underway to integrate HiAP approaches across the SSP to ensure added value through the explicit incorporation of health considerations in their action planning.
- The "Every Chance for Every Child" strategic priority aims to create a place where all children are safe, healthy and happy, and where they get the best chance to learn and become confident and successful adults. The approach the SA Government is undertaking regarding child development responds to all three overarching recommendations in the WHO Commission's report "Closing the gap within a generation" and is an exemplar of innovative healthy public policy in action.

- The “Safe Communities Healthy Neighbourhoods” strategic priority specifically identifies public health planning undertaken through the provisions of the South Australian *Public Health Act 2011* as a key driver of integrated action across state and local government agencies, and as a dynamic mechanism for ensuring local community participation.

The SA Government would like the Senate Community Affairs References Committee to note the recommendations that are detailed on page 15 at the end of this submission.

Addressing the Terms of Reference

The Senate Community Affairs References Committee Terms of Reference for the inquiry on Australia's domestic response to the World Health Organization's (WHO) Commission on Social Determinants of Health report "Closing the gap within a generation", are:

- (a) Government's response to other relevant WHO reports and declarations;
- (b) impacts of the Government's response;
- (c) extent to which the Commonwealth is adopting a social determinants of health approach through:
 - (i) relevant Commonwealth programs and services,
 - (ii) the structures and activities of national health agencies, and
 - (iii) appropriate Commonwealth data gathering and analysis; and
- (d) scope for improving awareness of social determinants of health:
 - (i) in the community,
 - (ii) within government programs, and
 - (iii) amongst health and community service providers.

This SA Government submission will address item (d) (ii) in the Terms of Reference as follows (d) scope for improving awareness of social determinants of health (ii) within government programs. Within this context, this submission focuses on three key SA Government approaches which are committed to addressing the SDH:

1. Health in All Policies
2. Early Childhood Development Reforms
3. Aboriginal health and wellbeing: *Closing The Gap* in Indigenous Health Outcomes and Indigenous Early Childhood Development

1. HEALTH IN ALL POLICIES (HIAP)

The introduction of HiAP

- The SA Government's HiAP is a practical policy oriented response to addressing the SDH. HiAP has been successfully implemented across government agencies in South Australia for the past five years and is recognised internationally as leading the way in cross government action on the SDH.
- HiAP is 'joined up government' in action and provides a method of addressing complex public policy issues. By incorporating a focus on population health into the policy development processes of all sectors and agencies, it allows the SA Government to address the SDH in a systematic manner. By considering health impacts across all policy domains such as agriculture, education, the environment, fiscal policies, housing and transport, the overall population health can be improved. HiAP seeks to highlight the connections and interactions between positive health outcomes and policies within other sectors, and in so doing, identify the gains for both policy agendas.

HiAP Partner Reflection - Department of Planning, Transport and Infrastructure (DPTI)

There is a very clear connection between DPTI's Road Safety strategies and the social determinates of health. The over representation of Aboriginal people involved in motor vehicle crashes at a rate 3.5 times that of non-Aboriginal people has identified Aboriginal people as an at risk group. The collaboration with HiAP approach has drawn together multiple government agencies which impact on this agenda area. It has provided detailed literature analysis identifying the gaps that exist and will provide recommendations for changes in policy to address these gaps and create the opportunity for more positive road safety outcomes for Aboriginal people. The HiAP collaborative approach has agreed on both the need for change in policy across government, and in principle, the nature of that change. The support that exists across government agencies for the changes will only lead to more equitable outcomes for Aboriginal people.

Aboriginal Road Safety Health Lens Project (See Appendix One)

- The SA Government began to explore the idea of HiAP in 2007 when Professor Ilona Kickbusch was Adelaide's 'Thinker in Residence'. HiAP was the principal recommendation arising out of Professor Kickbusch's residency and this proved to be an important catalyst for action. Other government agencies started to consider the health implications of their work and the SA Department for Health and Ageing (DHA) began to consider its role in supporting these agencies to apply the HiAP approach.

HiAP Partner Reflection - Department of Further Education, Employment, Science and Technology

The digital technology health lens analysed existing policy and funding priorities. Under HiAP, digital inclusion focused on the capacity of people to use technology to support their own lifestyle and life choices. The research confirmed that the increasing pervasiveness of digital technology today means that engagement with the digital environment can be considered a significant social determinant of health. The value of the health lens was the opportunity for diverse agencies to work together to achieve outcomes on a broader scale than could be achieved individually. It resulted in the endorsement of digital inclusion projects and policy at a high level, and provided a mandate for future activity. There was also an opportunity for the health sector to identify health and wellbeing outcomes from more diverse policy areas.

Digital Technology Health Lens Project (See Appendix One)

HiAP and the South Australian Strategic Plan (SASP)

- At the same time, South Australia was in an ideal position to adopt Professor Kickbusch's recommendation, as the SASP – an existing broad intersectorial policy framework - was in place to guide and track the State's progress. The SASP objectives and targets are aligned to the factors commonly described as the SDH factors, such as work, employment, education, food, transport, housing, environment, early life and social support. The interdependence and interconnections of the SASP targets and objectives are recognised, as is the need for concerted action across multiple sectors of SA society.
- The SASP is evidence of the SA Government's acknowledgement of and response to the links between economic development, productivity and the health and wellbeing of its citizens and is therefore an ideal basis for applying the HiAP model. Linking HiAP with the SASP provided the opportunity to establish HiAP as a whole of government concern, which has been a missing link in previous attempts at joined-up policy approaches.

HiAP Partner Reflection – Department of Manufacturing Innovation Trade Resources and Energy, Policy and Economics Division

The HiAP approach is all about bridge building and trust building. A fundamental starting point to HiAP is its process of engagement; from the onset it aims to build relationships and partnerships. HiAP works in a transparent multisectorial way across the policy 'white spaces' to bring about evidenced based change. This joint space is a complex place to operate and requires practitioners to operate with a particular set of skills, including capacity for public policy empathy and an ability to negotiate the win/wins for everyone involved.

Upper Spencer Gulf Health Lens Project (See Appendix One)

HiAP and the Seven Strategic Policies (SSP)

- In 2012, the SA Government announced *Seven Strategic Priorities* (SSP) as areas of significant SA Government attention and priority over the next years. They provide a sharpened, short term focus that complement and support progress towards the longer term goals outlined in the SASP. Cabinet Taskforces are leading the work on each priority area and will establish key targets against which progress will be monitored. The SSPs are:
 - An affordable place to live
 - Creating a vibrant city
 - Safe communities, Healthy neighbourhoods
 - Every chance for every child
 - Growing advanced manufacturing
 - Realising the benefits of the mining boom for all
 - Premium food and wine from our clean environment
- The SA Government recognises that the SSP are implicitly interrelated and are about integrating the effort across government. All of the priority areas have underpinning determinants to be addressed. The HiAP initiative, in policy partnership with the SA Department of the Premier and Cabinet (DPC), has been tasked with undertaking an analysis of the SPP from a health and wellbeing perspective. This will involve an examination of the impact of these priority areas and how they contribute to improved SDH and other public policy outcomes.

HiAP Partner Reflection – Department of Planning, Transport and Infrastructure

The HiAP approach has been an integrating force within the DPTI. It required a collaborative, cross functional approach across multiple divisions of the department and with other government agencies, the community sector and local government. Our understanding has widened about the different types of social determinants of health that the built environment and the planning system can potentially impact. The Health Lens process has been invaluable in assisting the development of shared understanding of contentious policy issues and potential solutions. Accordingly, DPTI recommends HIAP as a useful approach to increase joined up policy making and for increasing action on the social determinants of health.

Health in Planning (See Appendix One)

The Adelaide Statement on Health in All Policies

- The SA Government recognises that a new form of governance is needed where there is joined-up leadership within governments, across all sectors and between levels of government. The *Adelaide Statement on Health in All Policies*¹ highlights the changing role of the health sector; recognising that it needs to be a contributor and facilitator in resolving complex problems across government, rather than the leader. The principles of HiAP in South Australia are informed by key drivers described in this *Statement*, which are context specific and include:
 - creating strong alliances and partnerships that recognise mutual interests, and share targets;
 - building a whole of government commitment by engaging the head of government, cabinet and/or parliament, as well as the administrative leadership;
 - developing strong high level policy processes;
 - embedding responsibilities into governments' overall strategies, goals and targets
 - ensuring joint decision making and accountability for outcomes;
 - enabling openness and full consultative approaches to encourage stakeholder endorsement and advocacy;
 - encouraging experimentation and innovation to find new models that integrate social, economic and environmental goals;
 - pooling intellectual resources, integrating research and sharing wisdom from the field.

HiAP Partner Reflection – City of Marion

Council business is very diverse as Council has a role in much of the built and natural environments that can incorporate development, redevelopment, and maintenance, as well as working closely with communities, and there is growing interest in finding and discussing links between council business activities and the social determinants of health.

The HiAP approach has assisted collaboration between State and Local Government, as well as facilitating the development of meaningful partnerships, which the City of Marion values highly. Collaboration assists the City of Marion to understand broader state objectives and assists us in aligning our efforts to these objectives (where possible), whilst simultaneously raising State Government agency awareness of the challenges councils' face in diverse operations and service delivery.

¹ The Adelaide Statement draws on the experience of those countries that have been attempting to implement a HiAP approach to address the social determinants of health. It identifies the conditions that best support such collaborative across-government work, as well as the drivers of such work. The Adelaide Statement is part of a global process to develop and strengthen a HiAP approach. It contributes to a critical debate in which Member States and Regions of the WHO are now engaged. The statement provided valuable input into the World Conference on Social Determinants of Health in Brazil 2011, the 8th Global Conference on Health Promotion in Finland 2013, and preparations for the Millennium Development Goals post-2015. The Adelaide Statement can be found on the WHO site at: http://www.who.int/social_determinants/hiap_statement_who_sa_final.pdf

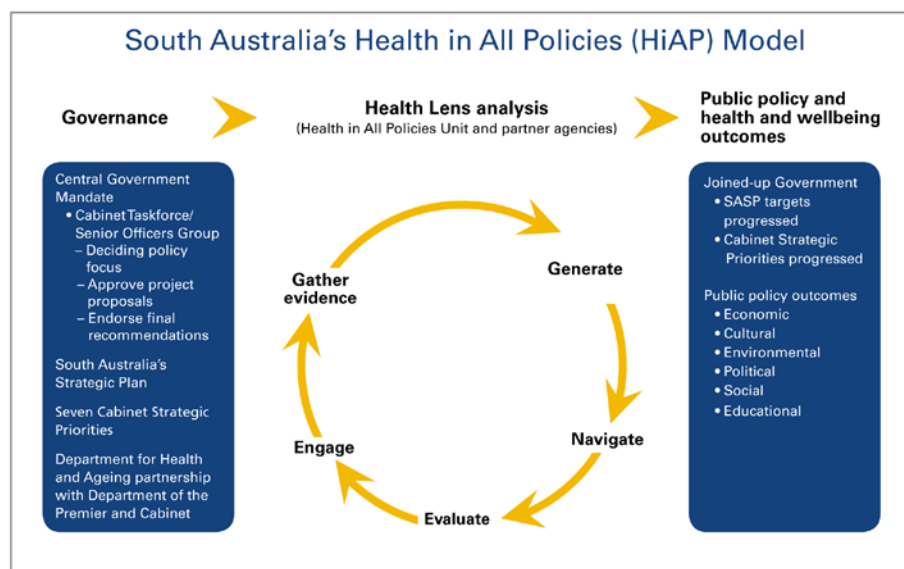
Applying the Health Lens Analysis to the Development Plan Amendment for the proposed Castle Plaza mixed use development is highly valued by many across our organisation as for the first time; it introduced a health focus to a development policy using a tool and process developed for the purpose that could be replicated in other projects. This work brought a diversity of stakeholders together and facilitated development of cross sector relationships and resulted in a Social Needs Analysis being undertaken, an approach that has since been replicated at State Government level for another major development projects e.g. Tonsley Park Redevelopment

Castle Plaza Transit-Oriented Development Health Lens Project (See Appendix One)

HiAP critical success factors

- A number of critical elements have contributed to South Australia's early success in adopting a HiAP approach as well as the continual evolution of the SA Government's HiAP Model (See Diagram One). These include:
 - central governance, commitment and accountability
 - application to public policy in the internal government process with a Health Lens Analysis methodology
 - a dedicated strategic HiAP team within SA Health comprising a combination of technical and strategic relationship and negotiation skills.

Diagram One – the SA Government's HiAP Model



- From the onset of establishing the HiAP approach in South Australia, there was strong support for the leadership of this initiative to come from central government and not from the health sector. This demonstrated the high level of support that existed for HiAP across all of government, not just the health sector, and provided partner agencies the impetus and motivation to engage in HiAP. It also addressed possible perceptions that the HiAP initiative was an opportunity for health to “shift their business and responsibilities” on to other sectors.

The Health in All Policies (HiAP) approach has assisted the Department of Planning, Transport and Infrastructure (DPTI) to recognise the value of the benefits that increased cycling and walking delivers in meeting Government and broader community objectives for improving health, social and economic outcomes. Working through the HiAP process resulted in wider exposure about how other Departments/sectors rely on and value the cycling and walking outcomes that DPTI delivers. HiAP's work raised awareness of the importance of evaluating the economic benefits of cycling and walking – an effort that is now moving forward at the national level with the support of DPTI.

Active Transport – Cycling (See Appendix One)

- In South Australia, the partnership between the DHA and DPC provides a central government mandate for HiAP, which operates through the SSP Cabinet Taskforce/Senior Officer's groups. These groups consider and decide on the appropriate policy focus for HiAP, approve project proposals and endorse final project recommendations.
- The South Australian HiAP *Health Lens Analysis* (HLA) is a key feature of the SA Government's HiAP approach. The HLA aims to identify key interactions and synergies between SASP targets, the recent SSP, government policies and strategies, and the health and wellbeing of the population.

HiAP Partner Reflection - Department of Premier and Cabinet

The HiAP approach has been effective in supporting the across government approach to progressing the seven strategic priority areas. The approach has been used to examine where these priority areas impact and contribute to improved social determinants of health and other public policy outcomes. HiAP encourages government agencies to reflect on and identify how legislation, policies and programs can contribute to outcomes from a health and wellbeing perspective. This has proved particularly effective in areas not traditionally working in the health space such as employment, industry, transport and corrections. It encourages agencies to work collaboratively to investigate how they can provide services to implement change in ways that foster broader community outcomes.

HiAP informs decision making at a broad level. Greater alignment of Government objectives can be achieved when all sectors include health and well-being as a component of policy development since many factors of health and well-being lie outside the health sector and are socially and economically formed. HiAP can facilitate the application of shared values across sectors and assist leaders and policy-makers to integrate considerations of health, well-being and equity during the development, implementation and evaluation of policies and services.

- The HLA is essentially a project methodology which aims to develop systemic change through evidence-based recommendations and informed decision making. Of critical importance is the emphasis placed on both achieving the goals and objectives of the partner agencies and on improving health and wellbeing outcomes and reducing inequities. The HLA seeks to develop sound policy outcomes for all agencies involved, in particular the lead agency. To this end, a win-win outcome is sought in all cases.

HiAP Partner Reflection - Department of Planning, Transport and Infrastructure

The process itself has been valued. It gave partners the opportunity to establish a good network of colleagues and agencies to come to shared understandings. It gave agencies direct exposure to determinants of health and wellbeing, drawing on health expertise to interpret the partners' various policy responsibilities.

The resultant guide (Transit-oriented Developments, through a Health Lens) is a resource allowing agencies to reflect on the role of transport and the urban environment in influencing areas, such as, health related behaviours (for example, walkability, increasing physical activity) or exposure to traffic pollution (for example, air emission). Structure planning work can factor in the transport pointers in the guide, for example, for a more connected grid street network and greater access to the public transport network. This will make best use of the current transport investment underway.

Transit-oriented Development Health Lens Project (Appendix1)

- Evaluation is built into the HiAP model with commitment to undertake joint evaluation by both the DHA and the partner agencies. Process and impact evaluation is undertaken by Southgate Institute, Flinders University of South Australia.
- The South Australian Community Health Research Unit, Flinders University of South Australia in collaboration with the DHA and other South Australian, interstate and international investigators, is undertaking research to examine HiAP as a policy initiative that is intended to stimulate inter-sectoral action to address the SDH. This research will examine the adoption and implementation of the HiAP initiative to determine its effectiveness in motivating action across sectors to improve population health and health equity. This project is funded by the National Health and Medical Research Council (NHMRC) until 2016.

HiAP Partner Reflection – The previous SA Department of Trade and Economic Development

The HiAP approach helped deepen the understanding of migrant settlement experiences in regional areas of South Australia. This understanding related to all aspects of migrant health and wellbeing: economic (labour force, financial independence, access to services); social (community participation and engagement); and cultural (common understanding of different values and customs amongst the local and migrant communities). This is important in determining the important factors for successful retention of migrants that come to the state.

HiAP is a useful approach to policy making as it considers implications or aspects of policies that might not otherwise be considered. Often policy changes have unintended effects because they have been appraised in a narrow frame of reference. The policy approach doesn't impose or onerously drive projects in pre conceived directions; rather it provides guidance, coordination and valuable research and policy-making resources. This allows autonomy of partner or lead agencies and does not impose a health view on particular projects.

Regional Migration Settlement Health Lens Analysis Project (See Appendix One)

- The SA Government's implementation of HiAP is a significant new development in the applied use of research evidence on determinants of health; and a first for Australia.

HiAP Partner Reflection – Department of Further Education, Employment Science and Technology

One the key features and benefits of the HiAP approach has been the ability to work in partnership with several agencies in the development, leadership and implementation of key policies to support international students. In the international education sector in particular, where there are a number of government, non-government and community stakeholders, Health in All Policies has provided a framework which enables us to work collaboratively, drawing on the skills, knowledge and expertise of individuals and agencies as and when

needed. The HiAP approach also provides a framework and a model which promotes shared responsibility for implementation and recognition.

International Student's Health and Wellbeing Health Lens Analysis Project (See Appendix One)

2. SOUTH AUSTRALIAN EARLY CHILDHOOD DEVELOPMENT REFORM

- The SA Government has recognised that the early childhood period is the most important developmental phase of life and arguably the most important determinant of population health outcomes. Healthy early childhood development, which includes physical, social, emotional, and cognitive development, strongly influences wellbeing, obesity, mental health, heart disease, literacy, criminality and economic participation throughout life. The nurturing qualities of the environments where children grow up, live and learn matter. Not all families have the same opportunities, capacity or resources to provide nurturing environments.
- It is a priority of the SA Government to work together with children of all ages and their families to lead and deliver high quality support and services for every South Australian child. Our approach includes the establishment of a department and Ministerial portfolio for education and child development which offers a full range of supports from early in pregnancy, through early and middle childhood and into adolescence. This is a ground-breaking realignment of key services for South Australian children and families and has been designed to ensure that children's life chances are at the centre of policy making.
- The approach, being taken in South Australia has been heralded by Professor Sir Michael Marmot, who advised the UK Government that giving every child the best start in life must be its main policy objective to reducing inequalities in health outcomes. He also advised that this can be achieved through increased spending on the early years; giving priority to pre- and post-natal interventions; further support through parenting programmes; paid parental leave in the first year of life; and providing early years education and quality childcare proportionately across the social gradient.
- The establishment of the SA Department for Education and Child Development (DECD) has resulted in integration of the core services for children. The SA Government recognises that there will also need to be stronger partnerships with other departments and not for profit and private sector agencies. This will build on the strong partnerships with communities established through our state's flagship children's centres and regional cross-sector planning around children being undertaken through this Government's commitment to the Child Friendly SA reform based on the UNICEF Framework of Child Friendly Cities.
- The Child Friendly SA reform has already resulted in greater planning for and with children at the local level with a strong partnership with local government, not for profit organisations and even the private sector. New legislation introduced across other portfolio areas such as the new South Australian *Public Health Act 2011* will also ensure future planning by local government includes a strong focus on public health for all ages, including children.
- Through the *Every Chance for Every Child* priority, children and families will be

engaged and consulted about the way services are delivered to ensure that their needs, aspirations, concerns and ideas form the very foundation of new models for education, care and child protection. These collective views will be used to create new ways to help children grow, learn and thrive by building upon what we already know works well and using creativity and innovation to explore new approaches.

- The *Every Chance for Every Child* Cabinet Taskforce was established in February 2012 and comprises:
 - Chair – The Premier
 - Deputy Chair – Minister for Education and Child Development
 - Member - Minister for Health and Ageing
 - Member – Minister for State/Local Government Relations
 - Member – Minister for Communities and Social Inclusion.
- The role of the Taskforce is to drive the Cabinet's strategic directions. It will take responsibility for leading the coordination and implementation of this priority area to deliver measurable outcomes and sustainable plans for the future benefit of the State. It will work across government, developing innovative ways of working, implementing reform, and reallocating resources to enable change through government agencies, partner organisations and individual South Australians.
- The Taskforce has identified four broad evidence based outcome areas that will directly support positive outcomes for children and their families. These are:
 - Children are born healthy
 - Confident and engaged parents and families
 - Healthy child development and wellbeing
 - Quality early learning.
- An early initiative of this Taskforce has been signalling the SA Government's intention to introduce new child development legislation. At the time of writing this submission, public consultation² is still occurring. The purpose of this new legislation will be to support and embed child development principles to inform state government, local government and non- government agencies; promote integrated planning and coordination; support the development of child friendly environments through collaborative approaches and ensure that child development outcomes are considered in all relevant policies with general duties of cooperation and care by all to be enshrined toward the development of children young people and their families.
- The approach South Australia is undertaking regarding child development responds to all three overarching recommendations in the WHO Commission's report "Closing the gap within a generation" and is an exemplar of innovative healthy public policy in action.

3. ABORIGINAL HEALTH AND WELLBEING – CLOSING THE GAP

² www.edlawreform.sa.gov.au

- The SA Government recognises that overcoming Aboriginal and Torres Strait Islander disadvantage will require a long term, generational commitment that sees major effort directed across a range of strategic platforms which are informed by the SDH. These platforms or *building blocks*, endorsed by COAG, underpin reforms developed to achieve the six specific targets aimed at *Closing the Gap* and are Early Childhood; Schooling; Health; Economic Participation; Healthy Homes; Safe Communities; and Governance and Leadership.
- In the recent discussion paper: “*Legally Invisible —How Australian Laws Impede Stewardship and Governance for Aboriginal and Torres Strait Islander Health*” by the Lowitja Institute³, the SA Government was recognised as the only State or Territory having Acts specifically mentioning the particular needs of Aboriginal and Torres Strait Islander peoples and enabling stewardship and governance for Aboriginal and Torres Strait Islander health. The South Australian *Public Health Act 2011* and *Health Care Act 2008* are to be applied and interpreted based on principles that include consideration of the needs of Aboriginal and Torres Strait Islander people.
- Addressing the SDH is implicit in all SA Government programs that are directed at *Closing the Gap* for all Aboriginal South Australian children. South Australia has committed to closing the gap on Indigenous early childhood and schooling outcomes through the National Education Agreement (NEA) and the series of education and early childhood National Partnerships as well as through National Partnership Agreement on Closing the Gap in Indigenous Health Outcomes and the National Partnership Agreement on Preventive Health.
- South Australia is the domain lead for ‘School Readiness’ under the Aboriginal and Torres Strait Islander Education Action Plan 2010-2014 (ATSIEAP). Under the ATSIEAP, 82 Focus Schools have been identified to undertake specific action to improve the education outcomes of Aboriginal students. All schools in the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands are Focus Schools.
- There is commitment at the highest levels of SA Government to a new approach that serves the needs of the Aboriginal people in the APY Lands. DECD is working in close partnership with the Pitjantjatjara and Yankunytjatjara Education Committee (PYEC) and APY Lands communities on the development of a “blueprint” to transform education and child development services and delivery. The blueprint has as a focus on community engagement using a whole region approach to issues, and the use of a coordinated interagency approach to service delivery. Consultation about the blueprint is continuing.
- Existing initiatives include:
 - The Anangu Pitjantjatjara Yankunytjatjara Trade Training Centre (APYTTC) is a purpose built education and training facility due to open at Umuwa in late 2012. The facility will provide vocational training to Certificate III level in industry areas ranging from automotive, metal fabrication, horticulture and commercial cookery.
 - The APY Lands Community Programs operates the family centres situated in Amata, Fregon, Mimili and Pipalyatjara. The Family Centres play a crucial role in providing a safe informal learning environment for families, their children, the aged, and people with a disability.

³http://www.lowitja.org.au/sites/default/files/docs/Legally_Invisible_report.pdf

- A new Children and Family Centre at Indulkana opened in April 2012. Indulkana School employs a part time early childhood teacher to support the educational programs and to support Anangu workers.
- A Children and Family Centre will be established at Pukatja/Ernabella under the National Partnership Agreement on Indigenous Early Childhood Development and will provide early childhood development programs and services for Aboriginal children from pre-natal to five years and their families. Services will include:
 - child and maternal health
 - high quality early learning programs for young children
 - parenting and family support
 - community development activities.
- DECD is facilitating the establishment of a Family Wellbeing Centre at Pukatja/Ernabella. The project is currently undergoing consultation, with the APY Lands Executive and Pukatja Community Council endorsing the proposal for a Centre. Negotiations have commenced with the Far North and Aboriginal Lands Regional Office, Key Service Providers and Community around the service provision that will be provided from the Centre.
- Playgroup / Family Support Programs are now operating in Amata and Mimili. A fully qualified Early Childhood teacher manages the Amata Playgroup with Anangu staff running the program independently. Both playgroups employ local Anangu playgroup workers. The Anangu staff are completing a Certificate III in Children's Services with TAFE SA Regional.
- The DHA also provide a comprehensive array of programs addressing the SDH as part of the Closing the Gap initiative and include:
 - *Aboriginal Environmental Health Worker Program* – which provides vocational training to Aboriginal community members and concomitantly improves the community environment to provide for a healthy living space. The program has been particularly successful in the areas of water safety and quality and dog control in a number of target communities. There are many important benefits for the trainees including improved education outcomes, future employment options and improved economic status. All of which contribute to an improvement in the factors which determine their health and the health and wellbeing of their families.
 - *Journey Home* – providing a comprehensive support to young people who interact with the justice system and their families within secure care facilities
 - *Aboriginal Family Birthing Program* – providing health service access through the expansion of the program to Murray Bridge, Ceduna, Cooper Pedy, Far West Coast, Metropolitan Adelaide and the Gawler / Barossa regions. The program addresses general socioeconomic, cultural and environmental conditions through the provision as a program that is culturally appropriate, holistic and targeted to high risk socially disadvantaged Aboriginal women. Address individual lifestyle factors through staff working to reduce smoking rates, drug and alcohol consumption and improving the families understanding of the importance of good nutrition and sexual health during pregnancy
 - *CAMHS in APY Lands* – Child and Adolescent Mental Health Services provide health care service access through the provision of clinician and coordinator positions that provide visiting services to the APY Lands covering mental health services to children and adolescents. Furthermore, this

program utilises social and community networks through developing a strong partnership with other services such as the APY Lands Schools, Families SA and Nganampa Health.

- *Vulnerable Infants Support Service* - provides for a culturally appropriate and comprehensive model of service to highly vulnerable infants and parents of Aboriginal and Torres Strait Islander descent experiencing active adversity. Utilising social and community networks by improving health outcomes through intervening early where childhood developmental, health or safety issues are identified, thus maximising access to parenting and community support and child protection services where necessary.

Recommendations

The South Australian Government recommends to the Senate Community Affairs References Committee to consider:

That the Commonwealth Government continues to work with all States and Territories in developing a coordinated national partnership approach in addressing the SDH by:

- Tackling the increasingly complex challenges associated with preventing chronic disease. The Australian National Preventative Health Agency systematically addresses the need to take action on the SDH in each of their priority areas, recognising that the health of individuals and populations is shaped by broad societal factors that lie outside the policy mandate of the health sector.
- The adoption of Health in All Policies approach across the mechanisms of national health partnership agreements to improve health and wellbeing outcomes and address the inequity of health outcomes for all Australians and future Australians.
- Promoting the continued adoption of consistent legislation at the Commonwealth, State and Territory levels which supports whole of government action on the SDH.
- Building on the National Health and Medical Research Council's emerging research engagement around the SDH by further strengthening and encouraging investment in research and evaluation across public policy to stimulate inter-sectoral action on the SDH.
- Following the 8th Global Conference on Health Promotion, further develop the *Australian SDH Case Study Book* as a means to progress understanding and build capacity to act on SDH within the Australian context.

Appendix 1 – Summary of HiAP Health Lens Analysis Projects and complementary programs

FAMILY ENGAGEMENT IN LITERACY - *Raising parental engagement with learning to improve literacy outcomes for children in the early years of schooling.*

Partner Agencies - Department of Education and Children's Services; SA Health

Strategic Cabinet Priority

- Every Chance for Every Child

South Australian Strategic Plan Target

- T87. Reading, writing and numeracy: By 2020, for reading, writing and numeracy, increase by 5 percentage points the proportion of South Australian students who achieve: - above the National Minimum Standard - higher proficiency bands.

Description

The core intent of the project is to investigate how to better engage parents and carers from disadvantaged backgrounds in creating a literacy rich environment for children at home and school. These insights will then inform schools' strategic actions in this field and inform policy recommendations. The project is being undertaken in four low SES schools in the Western Adelaide Region (Hendon PS, Kilkenny PS, Pennington JPS, Allenby Gardens PS). The project has undertaken a comprehensive review of the literature, and consultations with parents and teachers to identify best practice in approaches to support parental engagement, and develop quality information and support tools as resources for use across all schools.

ABORIGINAL ROAD SAFETY - *Improving the mobility, safety and wellbeing of Aboriginal people in South Australia through increasing the number of Aboriginal people who obtain and retain their driver's license*

Partner Agencies - SA Health; SA Police; Department for Planning, Transport and Infrastructure; Attorney-General's Department; Department of Correctional Services; Department of Further Education, Employment Science and Technology

Strategic Cabinet Priority

- Safe Communities and Healthy Neighbourhoods

South Australian Strategic Plan Target

- T79. Aboriginal healthy life expectancy: Increase the average healthy life expectancy of Aboriginal males to 67.5 years (22%) and Aboriginal females to 72.3 years (19%) by 2020.

Description

The intention of this project is to collaboratively identify ways of increasing Aboriginal healthy life expectancy by improving road safety through increasing safe mobility options. The project focuses on drivers' licensing and diversionary programs that support Aboriginal people to obtain and retain their drivers' licences. Recommendations are currently being developed for the project, which will focus on opportunities to address legislative and administrative barriers to licensing, as well as develop innovative strategies to support Aboriginal people to progress along the driver licence pathway.

HEALTHY SUSTAINABLE REGIONAL COMMUNITIES - *Healthy Sustainable Regional Development: Enabling regional communities to respond to the benefits and challenges of the mining expansion in the Far North region through a health lens analysis.*

Partner Agencies - Department of Manufacturing Innovation Trade Resources and Energy and SA Health

Strategic Cabinet Priority

- Realising the benefits of the Mining Boom for all

South Australian Strategic Plan Target

- T41: Minerals exploration: exploration expenditure in South Australia to be maintained in excess of \$200 million per annum until 2015.
- T42: Minerals production and processing: Increase the value of minerals production and processing to \$10 billion by 2020.

Description

The aim of this project is to identify mechanisms and strategies that will enable communities in the Upper Spencer Gulf Region of South Australia to capitalise on emerging regional development opportunities in the mining sector, linking in with other strategic opportunities such as the rollout of the National Broadband Network and the renewed focus on the triple bottom line in federal regional development funding. This will be done by identifying mechanisms and strategies which will improve the health, sustainability and economic positioning of communities in the Upper Spencer Gulf.

INTERNATIONAL STUDENTS HEALTH AND WELLBEING - *Improving the health and wellbeing of overseas students undertaking post-secondary study in South Australia (with a particular focus on those studying in the VET sector)*

Partner Agencies - SA Health; Department of Further Education, Employment Science and Technology; Multicultural SA

Strategic Cabinet Priority

- Crosses multiple Priority areas.

South Australian Strategic Plan Target

- T90: Share of overseas students Increase the number of overseas students across all education and training sectors from 13 737 in 2003 to 45 000 by 2014 (baseline: 2003)

Description

Overseas student health and wellbeing is recognised as a key factor in drawing students to South Australia to study. Overseas students' health and wellbeing is a priority for Department of Further Education, Employment Science and Technology, Study Adelaide and Multicultural SA as well as SA Health's HiAP Unit and the Communicable Disease Control Branch. The project will focus on the health and wellbeing of international VET Sector students (572 visa holders) and their knowledge of and ability to access health-related services in South Australia.

CASTLE PLAZA TRANSIT-ORIENTED DEVELOPMENT – *A Local Government Approach of HiAP with Marion City Council*

Partner Agencies - City of Marion; SA Health

Strategic Cabinet Priority

- Safe Communities and Healthy Neighbourhoods

Description

The City of Marion and SA Health worked in partnership to apply the 'Healthy Transit-Oriented Development (TODs) Principles' (developed through the TODs Health Lens Project) to the Castle Plaza redevelopment. The aims were to increase the potential for an improved urban environment to support health and wellbeing at and around the Castle Plaza site and to test the applicability of the 'Healthy TODs Principles' as a guide in a local government development assessment process. A key focus of the project was the impact of local government decision making on the health and wellbeing of local communities, with a view to encouraging the uptake of HiAP by local governments. The project has also resulted in the key recommendation that the City of Marion, with support from SA Health, undertake a Social Audit of the local community, which is almost complete.

ACTIVE AGEING THROUGH WORKFORCE PARTICIPATION - *Identifying policy opportunities which support employment for older people in regional areas*

Partner Agencies - SA Health (Country Health SA Local Health Network and Health in All Policies Unit)

Strategic Cabinet Priority

- Safe Communities and Healthy Neighbourhoods

South Australian Strategic Plan Target

- T48 Ageing Workforce Participation: Increase the proportion of older South Australians who are engaged in the workforce by 10 percentage points by 2020 (baseline: 2010)

Description

The purpose of the project is to examine the determinants of active ageing with a particular focus on paid employment, and to examine how the policies and practices across sectors impact on the opportunities for older people to participate in meaningful employment in regional areas. The project will apply the HiAP approach to cross-government policy development to identify policy opportunities which support older people in regional SA to remain in the workforce, should they choose to.

ACTIVE TRANSPORT- *A whole-of-government approach to the development of the South Australian Government Cycling Strategy - Facilitating engagement and ownership*

Partner Agencies - Cycling and Walking Section in the Department of Planning, Transport and Infrastructure (DPTI), SA Health

Strategic Cabinet Priority

- Safe Communities and Healthy Neighbourhoods
- Creating a vibrant city

South Australian Strategic Plan Target

- T2 Double the number of people cycling in South Australia by 2020

Description

This project aims to support the development of the new South Australian Government Cycling Strategy and its acceptance, support and adoption across government through a three staged process: (1) Identifying national and international best practice in cycling strategies through a literature search and discussion paper, (2) Identifying the pathways between supporting cycling and other government departments core business and objectives, (3) Conducting consultation across government. The anticipated outcomes of this project are that: The South Australian Government Cycling Strategy will reflect best practice, encourage population wide cultural change, have a high level of ownership and adoption across state government and that the Cycling and Walking Section will have increased capacity to undertake whole-of-government consultation in the future

EARNING AND LEARNING - *Supporting vulnerable young people to successfully transition from education to employment*

Partner Agencies - Department of Further Education Science and Technology

Strategic Cabinet Priority

- Growing Advanced Manufacturing

South Australian Strategic Plan Target

- T54: Learning or earning Increase the proportion of 15-24 year olds engaged full-time in school, post-school education, training or employment (or combination thereof) to 85% by 2020 (baseline: 2003)

Description

The aim of the project is to increase the proportion of young people who successfully transition from education to the workforce and decrease the proportion of young people who

are disengaged, and in doing so, contribute to the achievement of SASP Target 54: Learning or Earning. The project will focus on vulnerable South Australian youth, aged 15-24 years. Within this broader scope, the project will consider two discrete subgroups – those young people at risk of becoming disengaged (mostly within the school system), and those young people already disengaged (mostly outside the school system).

IMPLEMENTING THE HEALTHY WEIGHT COMMITMENTS - *Health in All Policies - Eat Well Be Active 2011 - 2016*

Partner Agencies - SA Health; Department for Communities and Social Inclusion; Department for Planning, Transport and Infrastructure; Primary Industries and Regions SA; Department of Environment and Natural Resources; Department of Further Education, Employment, Science and Technology; Department of Correctional Services; Attorney General's Department

Strategic Cabinet Priority

- Safe Communities and Healthy Neighbourhoods

South Australian Strategic Plan Target

- T82: Increase by five percentage points the proportion of South Australian adults and children at a healthy body weight by 2017.

Description

In 2010 -2011 the HiAP approach to cross government policy making was applied to the South Australia's Strategic Plan *Target 2.2 - Healthy Weight* with the view of increasing cross government support for and action on the healthy weight target. Through the development and application of a desktop analysis methodology, a range of policy opportunities for departments outside of health to support the achievement of T2.2 Healthy Weight were identified. The outcome of the HiAP process was a range of cross government department and division specific policy commitments which were included in the South Australian Eat Well Be Active Strategy 2011-2016

COMPLETED HLA PROJECTS

The final reports corresponding to the completed health lens projects are available at our website by following the link: www.sahealth.health.sa.gov.au/healthinallpolicies

Transit-oriented Development Health Lens Project – Partner Agencies - Department of Planning and Local Government; Department for Transport, Energy and Infrastructure; SA Health; Land Management Corporation

Active Transport – A HiAP targeted desktop analysis review – Partner Agencies – Department for Transport, Energy and Infrastructure (Cycling and Walking Section)

Healthy Weight Desktop Analysis - Partner Agencies - SA Health (Health Promotion Branch and Health in All Policies Unit)

Regional Migration Settlement – Partner Agencies - Department of Trade and Economic Development; SA Health; Multicultural SA (Attorney-General's Department) as a key project partner

Digital Technology – Partner Agencies - Department of Further Education, Employment, Science and Technology; SA Health

Water Sustainability – Partner Agencies - Office for Water Security (Department for Water); SA Health

Complementary Program - HEALTH IN PLANNING (HIP)

Partner Agencies - Department of Planning, Transport and Infrastructure (DPTI), SA Health

Strategic Cabinet Priority

- Safe Communities and Healthy Neighbourhoods

Description

Initiated by SA Health in partnership with the then Department for Planning and Local government, the Health in Planning (HIP) Project is one of a suite of public policy strategies that aim to build healthy public policy and develop health promoting environments. Together the agencies determined that integrating the work of the Health in Planning Project (HIP) with the strategic directions of the Department of Planning, Transport and Infrastructure (DPTI) would be the most effective means of embedding health principles in the planning system.

In order to fully integrate our work with the business of the Department, we built a strong alliance with staff responsible for developing strategic policy, sustainability and urban design guidelines. We also built strong collaborative relationships with colleagues from other state government agencies, councils and NGOs. Examples include Renewal SA (formerly Land Management Corporation), Adelaide City Council, Department of Health and Ageing and the Heart Foundation (national and state).

Appendix 2 – Summary of relevant provisions of the South Australian Public Health Act 2011

Working Across Sectors: Taking Action on the Determinants of Health	
<p>The health of the public is largely determined by actions and policies outside the domain of the health system. This requires public health efforts to effectively engage and work with many different agencies and in policy areas across governments and the community. The <i>South Australian Public Health Act 2011</i> contains a range of provisions mechanisms and powers which promote working across sectors. These range from “upstream engagement” working collaboratively on developing positive approaches with other agencies, helping them achieve their goals in ways which incorporate health considerations through to, where necessary, more assertive direct interventions and approaches to ensure that public health is protected. Below is a range of measures contained in the Act designed to assist working across sectors to take action on the determinants of health.</p> <p>http://www.legislation.sa.gov.au/LZ/C/A/SOUTH%20AUSTRALIAN%20PUBLIC%20HEALTH%20ACT%202011.aspx</p>	
Part 2 Principles	Clear principles for participation and partnership guides the actions of those charged with the administration of those Act
Section 17 The Minister	<p>The Minister is the primary source of advice to government on health preservation protection and promotion and will develop procedures across government to ensure that advice is provided.</p> <p>This provision provides the mechanism to systematise <i>Health in All Policies</i> approaches across government decision-making and planning processes as well as a range of other mechanisms and procedures to ensure that government plans, policies and programs are able to consider health factors in their development</p>
Section 21-22 The Chief Public Health Officer	<p>The CPHO functions include a responsibility to establish networks which foster collaboration and coordination to promote public health</p> <p>The CPHO has a specific power to call</p>

	together public authorities to participate in finding solutions where there is an identified increase in the risk of avoidable mortality or morbidity in the community
Section 37 Councils	Councils are the public health authorities for their area, and take action to preserve, protect and promote health. They have specific functions to ensure that activities do not adversely affect public health and have functions to assess activities and development within its area in order to determine and respond to public health impacts or potential impacts
Section 50 State Public Health Plan	The Minister develops a State Public Health Plan which assesses the state of health, identifies risks and opportunities to promote health and develops strategies to respond to these
Section 51 Regional Public Health Plans	Local Councils develop public health plans for their area. Local Councils are encourage to integrate their public health planning across their existing strategic planning functions
Section 51 Regional Public Health Plans: Public Health Partner Authorities	Public Health Partner Authorities will be established by regulation or declaration. These agencies (other state government departments and organisation or non-government organisations) agree to participate in public health planning and take responsibility for objectives or strategies identified in plans that are relevant to their core business.
Section 53-55 Public Health Policies	The Minister develops public health policies which are designed to address complex public health issues and set standards for how these issues can be dealt with, managed or prevented
Section 61-62 Prevention of Non-communicable Conditions	The Minister develops codes of practice for declared non-communicable conditions of public health concern. These codes of practice set standards for

	industry of community sectors in terms of conduct activity or circumstances and can inform business practices, advertising marketing manufacturing sale distribution design or construction
Part 11 Management of Significant Emergencies	Where there is a declared significant public health emergency the CPHO and authorised officers are able to call upon extraordinary powers to manage reduce and eliminate the threat
Section 109 Regulations	Regulation making powers are broadly based and include regulations which prohibit restrict or regulate manufacture, possess transport storage or disposal, sets standards or procedures to protect public health, prescribe information that must be provided that is relevant to the management of public health authorise or require measures to manage non-communicable conditions (including the reduction or prevention of such conditions)