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'Health in All Policies'



Sustaining South Australia's approach to address determinants of health....

Montreal, Canada
21 November, 2016

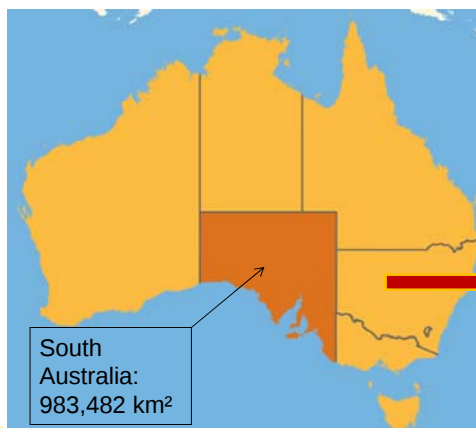
Carmel Williams
Manager



Strategic Partnerships Unit
Public Health
Department for Health & Ageing



South Australia – where are we?



South Australia: 983,482 km²



Adelaide: 1,826.9 km²

Other locations shown: Innamincka, Moomba, Coober Pedy, Roxby Downs, Leigh Creek, Wilpena, Ceduna, Whyalla, Port Augusta, Port Pirie, Wallaroo, Renmark, Port Lincoln, Adelaide, Gawler, Murray Bridge, Kingscote, Victor Harbor, Kingston SE, Mount Gambier.

(Sources: ABS, December 2013; UNData 2013)



South Australia – who are we?

- **Total population: 1.68 million**
 - Majority live in the Greater Adelaide area, about 1.2 million
 - Population density 659/km²
 - 30,400 Aboriginal people (Australia's First Peoples)
 - 353,000 born overseas
 - Median age = 39.2 years



(Sources: ABS, December 2013; UNData 2011)



Government
of South Australia

Government in South Australia

- Liberal democracy
- Westminster system
- Three levels of Government
 1. National level - Federal Government of Australia
 2. State level - Government of South Australia
 3. Local/Regional level – Local Government/Councils (total of 68 in SA)
- All play a role in health system



Premier of South Australia,
Hon. Jay Weatherill M.P.



Government
of South Australia

South Australia's approach



*It is about **working together** to achieve the goals and policies of other sectors in ways that protect or promote health*



Key Strategies

- Central government directive and mandate
- Social determinants of health – as entry point
- Public policy focus – not health priority
- Leveraging existing government decision making structures
- Collaboration and partnership
- Co design process
- Evidence
- Co- benefits



Evolution of South Australia's Health in All Policies approach

- Five phases
 - Proof of concept
 - Establish and apply
 - Consolidate and growth
 - Adapt and renew
 - Strengthen and systematise
- Five elements
 - Authorising environment
 - Policy opportunities
 - Supportive structures
 - Champions
 - Adaptive response



Government of South Australia

Phase 1. Proof of Concept

- Thinker in Residence
 - Initiative of new Premier
- Social progressive history
 - Supportive social policy culture
- Catalyst – Ilona Kickbusch
 - Identify opportunities
 - Access to decision makers
- Engage with Policy makers
 - Workshops
 - Emerging policy champions
 - Inter-sectoral
- Opportunity to test concepts



Government of South Australia

Phase 2. Establish and Apply

- Executive Cabinet Committee
 - Memorandum of Understanding
- South Australia's Strategic Plan
 - Whole of government targets
 - Public policy focus
- Health Lens Analysis model
 - Co-design collaborative approach
- Health in All Policies Unit
 - Small but dedicated
- Share Emerging Practice
 - International meeting
 - Adelaide Statement
 - Developed Resources
 - Links with WHO



Adelaide Statement on Health in All Policies

moving towards a shared governance for health and well-being

Taking account of health
means more effective government

More effective government
means improved health

Report from the International Meeting
on Health in All Policies, Adelaide 2010

The **Adelaide Statement on Health in All Policies** is to engage leaders and policymakers at all levels of government—local, regional, national and international. It emphasizes that government objectives are best achieved when all sectors include health and well-being as a key component of policy development. This is because the causes of health and well-being lie outside the health sector and are socially and economically formed. Although many sectors already contribute to better health, significant gaps still exist.

The Adelaide Statement outlines the need for a new social contract between all sectors to advance human development, sustainability and equity, as well as to improve health outcomes. This requires a new form of governance where there is joined-up leadership within governments, across all sectors and between levels of government. The Statement highlights the contribution of the health sector in resolving complex problems across government.

Health in All Policies

Adelaide 2010, 12 to 15 April

- Government objectives are best achieved when all sectors include health and wellbeing as a key component of policy development
- Requires new form of governance.
- Different role for the health sector, one of facilitator and enabler



Phase 3. Consolidate and Growth

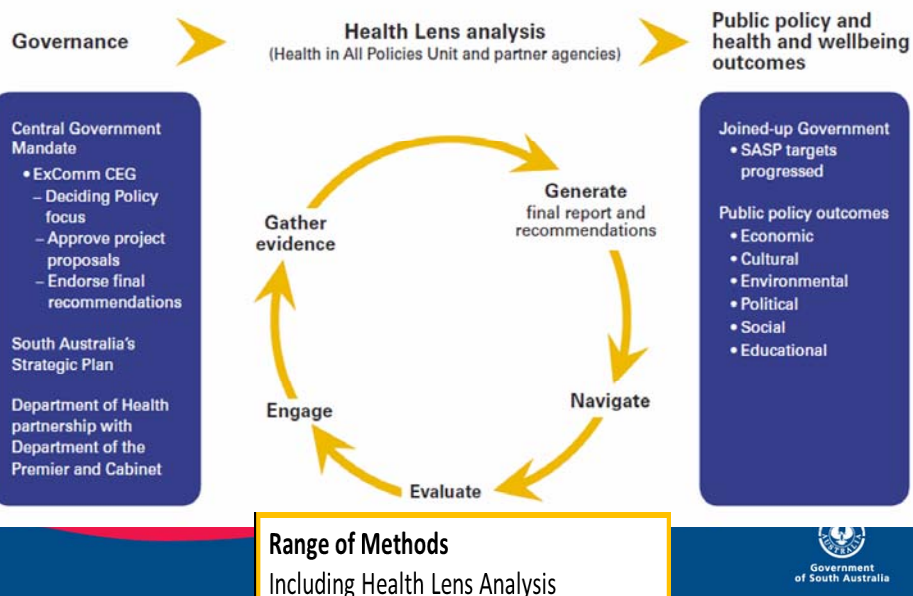
- Central Government Champions
 - Strengthening relationships
- South Australia's Strategic Plan
 - Public policy focus
- Health Lens Analysis model
 - Extend approach
- Research and evidence
 - Academic Sector Support- research methods and evaluation
 - Five year NHMRC grant
- Community of Practice
 - Public policy makers
 - Health professionals



South Australian
Health in
All Policies
Training Manual

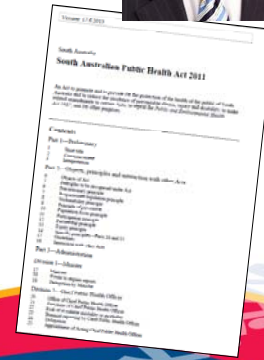
Version 1.0, December 2013

South Australian HiAP Model



Phase 4. Adapt and Renew

- Cabinet Taskforce
 - New Premier
- Seven Strategic Cabinet Priorities
 - Health Lens across Cabinet priorities
- New Public Health Act
 - Strengthen legislative focus on Promotion and prevention
 - Reduced funding prevention
- Changing role for HiAP Unit
 - Reduced capacity
 - Uncertain future
 - Need to adapt and renew



Creating a vibrant city

Safe communities, healthy neighbourhoods

An affordable place to live

Every chance for every child

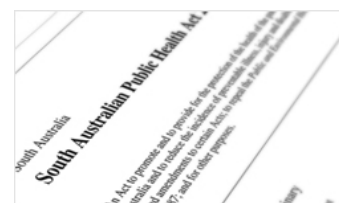
Growing advanced manufacturing

Realising the benefits of the mining boom for all

Premium food and wine from our clean environment

Phase 5. Strengthen and Systematise

- Central Directive and Mandate
 - Renewed Memorandum of Understanding
- Premier's Priorities
 - Expanding policy agenda
 - Joined up policy
- Public Health Act
 - Interagency Agreements: Public Health Partner Authorities
 - Strategic Partnerships Unit
 - Diversify Health Lens Methodology
 - Joined up policy: 90 Day Project
- Community of Practice



Health in All Policies in a changing context

Authorising environment

- Premiers directive
- Memorandum of Understanding

Policy opportunities

- State Strategic Plan
- Cabinet Priorities
- South Australian Public Health Act
- Premier's Priorities

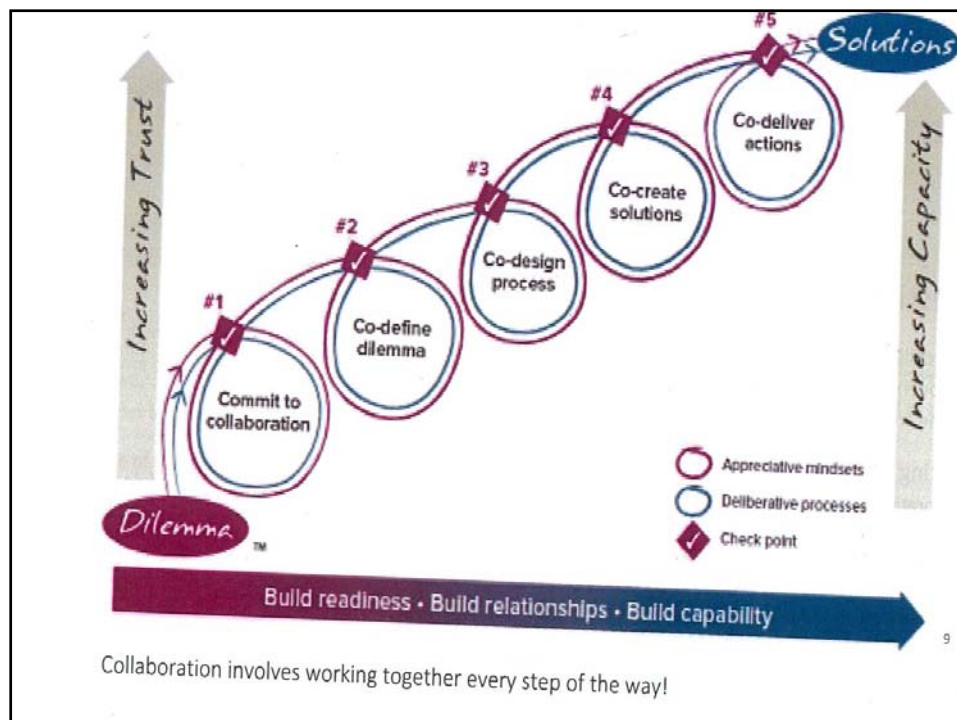
Supportive structure

- Executive Committee of Cabinet
- Seven Strategic Cabinet Taskforce

HIAP Champions

Multiple Methods

Multiple Levels



Systemising Health in All Policies

- Limited and unstable cross cutting government structures
- Expanding public policy agenda requiring collaborative policy approaches
- To realise potential of HiAP MOU PHA health needed to increase Whole of Government Structures.



Complex policy problems

Not only faced by the health sector

- Homelessness
- Domestic violence
- Climate change adaptation

Require innovative approaches

Opportunities for collaboration and innovation



90 Day Change Project:

Working Together for
Joined-Up Policy

Carmel Williams
Manager, Strategic Partnerships
Public Health Partnerships Branch
Department for Health and Ageing





Working Together 90 Day Project

Governance and Process

- Reviewed international and national literature
- Surveyed 160 + senior public servants
- Contextualized to South Australia
- Drew on expert knowledge and experience

Project Findings

- Shared vision
- Leadership from top to bottom
- Resourcing budget and people
- Clear accountability and incentives
- Trust and respect
- Culture and ethos
- Flexible mechanisms



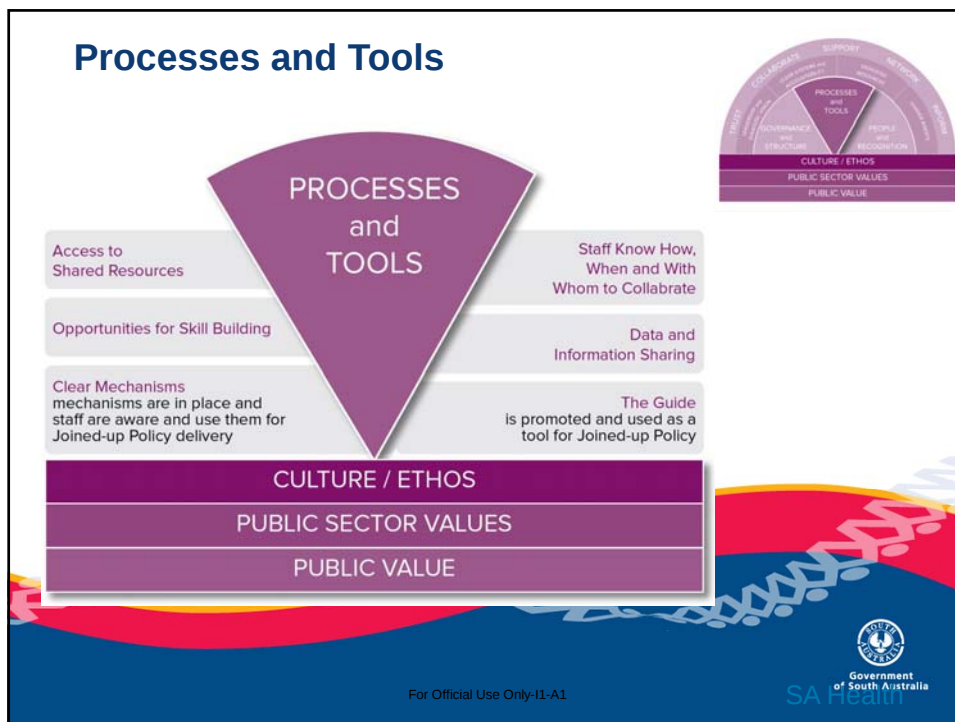
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Governance and Structure

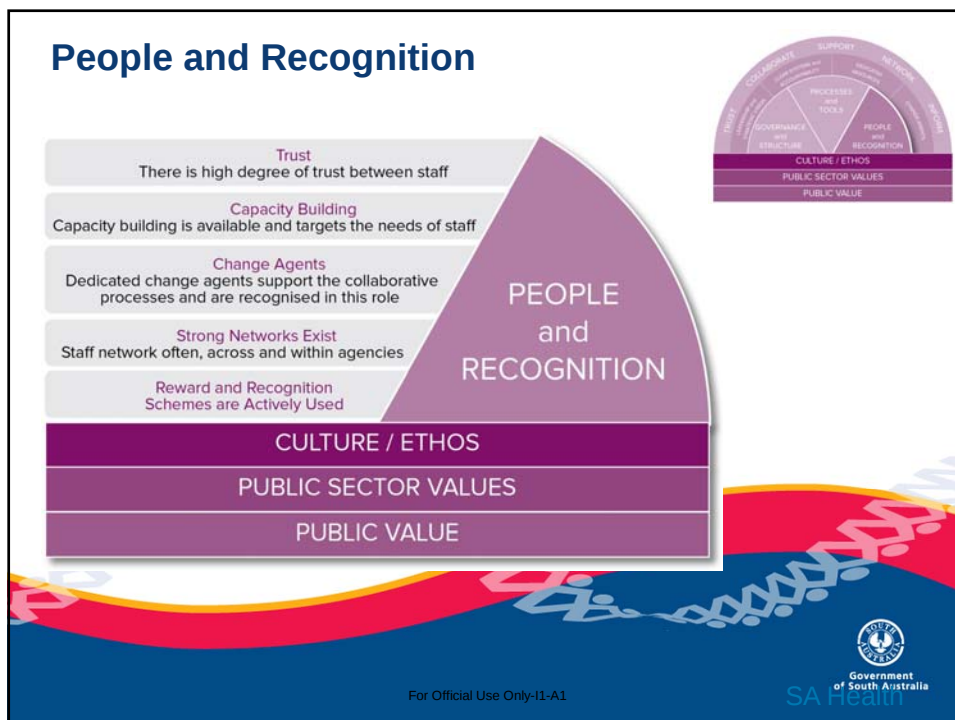


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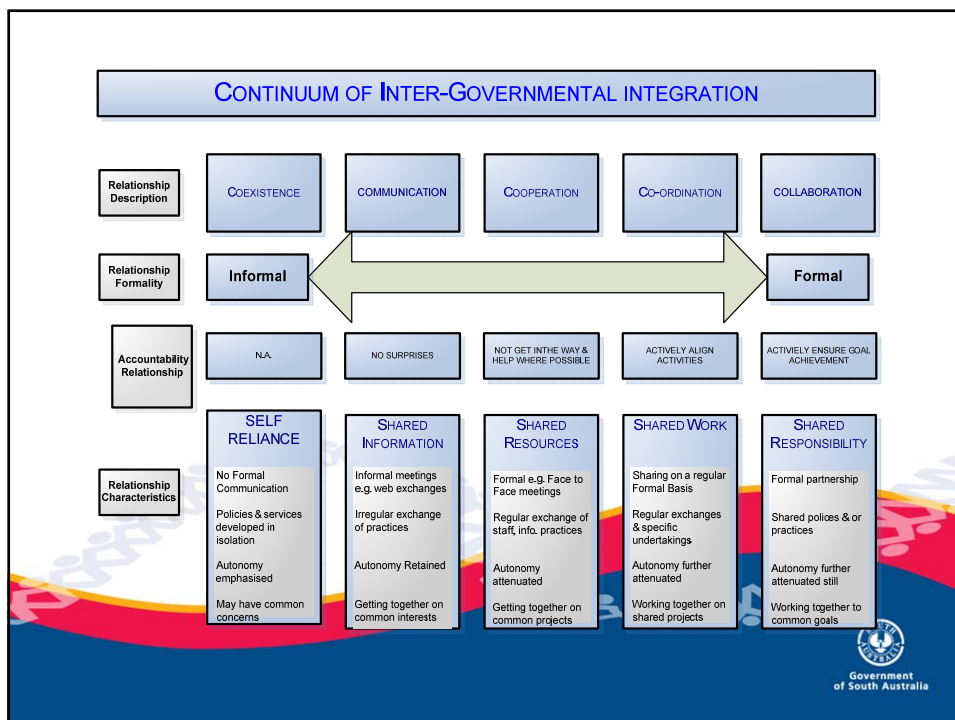
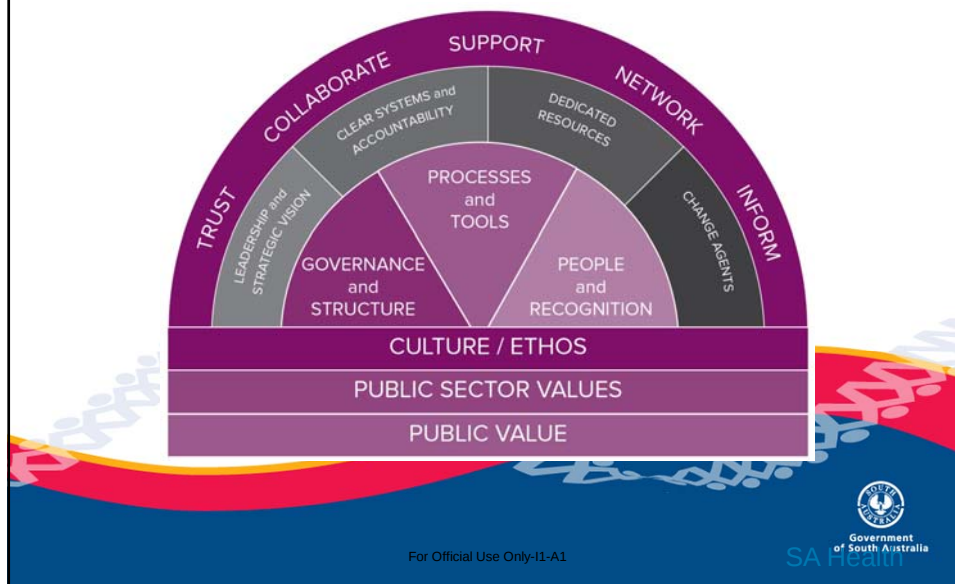
Processes and Tools



People and Recognition



Joined-Up Policy Delivery in Action



Critical success factors – why HiAP works?

- **Political and strategic relevance** – adaptive and responsive to change
 - South Australia's Strategic Plan
 - Seven Strategic Priorities
 - 10 Economic Priorities
 - South Australian Public Health Act 2011
- Central government mandate
 - MOU between DPC and DHA
- Co design process - co-benefits / mutual gains
- Flexible tools; working with limited but dedicated resources
- **Focus on People and Relationships**



Conclusions

- Key Challenges
 - Continuing and emerging complex policy issues
 - Constricted economic climate
- SDH approach to policy
 - Health cannot do it alone
 - Joined-up action required
 - Co-benefits for all agencies
- Innovation
 - Stop telling, start understanding
 - Systematising HiAP principles, practices and processes

