

Interim Report: Feedback Survey

The Sustainable Health Review Interim Report feedback survey consisted of 14 questions. The responses to the open feedback questions are detailed below. Responses to questions 9-12 have been published in a summarised report on the SHR website.

Your Personal Details	
1. Title	Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/>
2. First Name(s)	
3. Surname	
4. Contact Details	
5. Organisation	Australian Health Promotion Association (WA Branch)
6. Location	<input checked="" type="checkbox"/> Metropolitan <input checked="" type="checkbox"/> Regional WA <input checked="" type="checkbox"/> Outside WA
7. Are you providing a response on behalf of your group/organisation or as an individual? (Required)	<input checked="" type="checkbox"/> Group/organisation <input type="checkbox"/> Individual <input type="checkbox"/> Other, please specify _____
Q8. Do you consent to your feedback being published, in summaries or in the Final Report? (Required)	
<input checked="" type="checkbox"/> I consent to my feedback being published <input type="checkbox"/> I consent to my feedback being published anonymously <input type="checkbox"/> I do not consent to my feedback being published	

The next two questions will allow you to provide more detailed feedback on how to maximise improvements in each of the Directions or suggest other areas or actions for the Sustainable Health Review Panel to consider to develop a more sustainable health system.

13. In regards to the 12 Directions, please provide detailed comments on how to maximise improvements in each of the Directions. Where possible, please indicate which Direction your comments relate to.

In relation to Direction 1: Keep people healthy and get serious about prevention and health promotion, the AHPA (WA Branch) are pleased to see the focus given to preventive health. Investment in health and prevention initiatives not only reduces costs overall because of the reduced need to treat expensive diseases, it also allows Western Australians to live longer and better quality lives at a reasonable cost to the health system. The immediate focus on childhood obesity and future areas of reducing harm from alcohol and tobacco use will have a significant impact to reduce chronic disease and keep people out of hospital. An important aspect of these initiatives must be evaluation; research and evaluation must be a priority for that is how we are able to better inform practice.

Maintaining and growing a knowledgeable and skilled workforce to address prevention and health promotion initiatives will be imperative to ensure the success of this solution. Health promotion practitioners possess transferable skills that are well suited to addressing a number of the determinants of health, tackling health inequalities and whole-of-government challenges in providing an equitable, sustainable and economically efficient system makes an investment in the health promotion workforce a smart investment.

It is pleasing to see that the Social Determinants of Health are also a key area mentioned in this direction and there is mention of the Department of Health taking a lead role in a whole of government approach to health. The AHPA (WA Branch) is very supportive of these approaches, with an intergovernmental approach to health seen across all portfolios essential to reduce the risk factors that lead to preventable diseases in the population.

Health in All Policies (HiAP) provides a strategic mechanism to achieve health and wellbeing outcomes as well as the outcomes of other sectors such as housing, transport and economic development. It is based on the understanding that health outcomes are influenced by a wide range of social, cultural, political, educational, economic and environmental determinants (collectively the social determinants of health) and improving health outcomes requires these determinants to be addressed. The health sector cannot carry this responsibility alone. By using the HiAP approach to work collaboratively across the whole-of government with sectors that have the policy levers and programs to address these determinants, there is an opportunity to both achieve population health and wellbeing outcomes and also achieve targets of importance to other sectors.

South Australia provides an example of HiAP in practice. Their approach involves two key elements:

1. Governance with a central government mandate to work across the whole-of-government on identified policy priorities, with joint leadership from the Departments of Health and Premier and Cabinet.
2. Implementation of Health Lens analysis, which is a methodology that uses robust assessment methods and analysis to clarify the links between the policy area and the health and wellbeing of the population.

A small HiAP unit provides content and process expertise, technical support and active facilitation of the process. More information is available at:

<http://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/health+reform/health+in+all+policies>

14. Is there anything else that the Panel has missed so far that is important in developing a more sustainable health system for Western Australia?

The AHPA (WA Branch) are pleased to see the progress that has been made in terms of a commitment to focusing on preventive health and health promotion as part of the interim report. The work now needs to address how this commitment will be funded and implemented, ensuring a focus on strong evaluation. As the peak body for health promotion in Australia and is the only dedicated professional association in Australia for people interested or involved in the practice, research and study of health promotion, an open dialogue with the SHR team and government would be welcomed by the AHPA (WA Branch) to ensure evidence based and effective health promotion practice remains a strong focus of this direction.