SOCIAL DETERMINANTS
OF HEALTH ALLIANCE

Strategy Workshop February 2015

Workshop Outputs

INTRODUCTION

This document transcribes the outputs from the SDOHA workshop in Sydney on 19th February.

- Each activity question is summarised in a text box
- Notes from the working groups' flipcharts follow
- Comments in blue were verbal comments from group members recorded by CSI's Research Assistant, Axelle Marjolin

For each activity, participants elected which topic (and therefore table) to work on. Tables then presented back to the workshop group, with group discussion following.

ACTIVITY 1 – EXPLORE SYSTEM

Table 1: Government

A group of citizens is approaching you for a meeting about an SDOH agenda.
- What will get your attention/make you want to act on the evidence they present?
- What do you think your key drivers are? (What things will you think about when they are telling you their story?)
- What information/evidence do you need?
- What else influences your thinking/your decision?

Notes
- The discussion took into account the current political climate (e.g. elections coming up…)
- It was acknowledged that answers to the above questions would differ when considered from a political and a bureaucratic view; the discussion thus considered both perspectives

Government/political view
- *Vote winner:* Government is about winning votes – they will do things that are popular/increase their profile
- Key drivers:
  - Risk
    - Is it in their favour to take a chance or are they better off not doing anything?
    - Perception as a hippie type of organization – can we be ignored?
  - Support from the right stakeholders
    - Is there community support and/or support from a broad section of industry?
    - Is there support from different government members (HoR/Senate/Ministers/Cross-benchers)?
    - Are the main players on board?
    - How powerful/credible/influential are the stakeholders?
  - Cost (and savings)
    - Is there evidence that the project will generate savings?
  - Alignment to the current agenda/language/values
    - Can the message be tied in with the current agenda? (budget and costs)
    - E.g. disability work support with reforms

Bureaucratic view
- *Middle man point of view*: Essentially seen in the middle of civil society and the decision makers; implementers
    - More open to a wider range of evidence
- Key drivers:
    - Explain the value added
        - Show how SDoHA can improve existing government programs and outcomes
        - How can you package the existing initiatives in a way that can deliver better outcomes?
        - Not a blanket request for extra $
        - Don't ask for extra money, ask for feedback
    - Rigorous evidence based/outcomes focused recommendations
        - How can you improve existing programs – input by experts/people on the ground
    - Publicity
        - Is there amplification beyond the immediate problem?
        - Explain to me possible feedback loops, how small tweaks can have flow on effects
    - Government legislative priorities
        - Does it need new legislation?
        - Is the issue a hot topic? Is your timing right?
    - Whole of government perspective
        - How can we coordinate across departments/silos?
        - Achieving maximum efficiency by creating linkages between existing portfolios
    - Accountability
        - Senate estimates

Table 2: Alliance members

> You are going to present tomorrow to a group of ministers/advisers/ bureaucrats. Prepare your presentation (short!):
> - What is SDOH?
> - Why should the Government group care?
> - What (three things) do you want Government to do?

Current context:
- Conservative government
- Concepts of equity/fairness
- Intergenerational report themes
- Federation

What is SDOH:
- Having a fair go! – Everyone benefits if you give them a chance to have a fair go
- Frame within the intergenerational discussion
- SDOH – causes of inequity
- Giving people the *ability* to make personal choices that lean to better productivity

Why should the government care?

- Increased productivity – i.e. people are living longer
- Votes: if you're not fair, you'll lose votes
- Unintended consequences of policy decision
- Short term wins within a broader vision
- Long term strategies re merging knowledge /trends
  - Highlight long term strategies that come from their commissioned report

What do we want government to do?

- Health impact – all policies and sectors
  - SDOH – mechanism to work within the existing system
- Include a SDOH template – SDOHA impact statement:
  - How does it promote wellness or improve productivity?
  - How does it facilitate social mobility?
- Consistently consider policy against existing platforms
  - E.g. intergenerational report
  - Look at Global burden disease reports
- Change language/rhetoric
- Modelling impact long term strategies/interventions
  - E.g. evaluate tobacco use
  - Encourage government to carry out modelling and evaluation – cycle of quality
- Create an environment where people have the ability to make personal choices that lead to better productivity

Group discussion:

- What about accountability? Is that something government wants? [relating to the point raised by the Government table]
  - Needs to come from the community/voters
  - Yes government cares – can SDoHA get behind some of those accountability reports that are already being published?
  - SDoHA can use a carrot and stick approach – yes we want to support you but we wouldn't shy away from shaming government

Table 3: Actions

Brainstorm a list of decisions/actions you want Government to make/take based on SDOH evidence/concept. If time, for 1-2 examples explore what government's motivations might be (positive or negative) around the decision you want.
- Big-picture policy decisions?
- Practical "program" decisions?

NB Group 3 did not capture their discussion on paper; the CSI Research Assistant noted the following.

1. State/local government: good planning so that people can live etc… better

2. Support the continuation/expansion of good programs

3. More progressive tax system

Group discussion

- Are we really trying to improve health? Or are we trying to change social conditions, and are using a health lens because that is the sector in which we work?
    a) Work with governments to reduce health inequalities in Australia?
    b) Improve social outcomes, which then has flow on effects on health?
- It is not health change v/s social change – what this group is trying to achieve is health outcomes but we acknowledge the external factors that impact on our ability to achieve health outcomes
- If we take a focus other than health, then not everyone's view is being represented by the Alliance
- Some of the people that come to health providers may not have done so if the other parts of the sector worked better – it is a dialogue, it is about education, it is about swapping ideas. We need to extend the dialogue beyond health
- Concerns about using SD framing – to what extent is this a 'hard left' agenda?
- We are talking about health and wellbeing – health in the broader sense. This is why it matters to organisations outside of health
- Health and wellbeing as encompassing all aspects – primary care, prevention – everything that is necessary to maintain a healthy environment
- How do we create a message that resonates with policy makers when they are making decisions (funding decisions) around programs we know contribute to a healthy society?
- Health is a driving factor in a well-functioning society

ACTIVITY 2 – DEVELOP PROJECTS

Table 1: Research/evidence

> Develop 3-4 priority research projects for potential action; summarise the purpose/research outcomes and project plan
> - What evidence is most needed to influence (government and/or other) decision-makers to increase focus on SDOH? How could this be developed?
> - What research might be needed to demonstrate how to use SD to improve health outcomes?
> - What research could improve the economic arguments?

Notes:

- There was an assumption that the mission of SDOHA is advocacy

Discussion:

- If the mission is advocacy:
  - SDoHA needs evidence not anecdotes
  - It would not be the role of SDoHA to conduct primary research , but rather to collate what already exists
- Collect member research, survey members on priority, tie them in
  - Collect from members their priorities about context and their research data
  - Tie-in members into the concept of SD
- Forward looking questions framed to shift government
  - Research would be forward looking, not retrospective
  - Screening tools
  - Health assessments
  - Modelling
  - Evaluation of programs
  - IGR - Use the IGR to define research question
- Resourced by:
  - ARC grants
  - Members
  - Universities – tying the SD agenda to existing research
  - Foundations
  - Government
  - Private health insurance providers
- Translation to community
  - SDoHA needs to consider how research is translated into information for the community
- AHHA Scholar x 4

Potential projects

1. **Develop a forward thinking research agenda**
   - With clarified purpose
   - Meta-analysis of existing data
   - Collate what exists (e.g. survey of members)
2. **Establish a process through which this research agenda can be articulated and implemented**
   - Establish a process for determining/resourcing/commissioning research (raise money)

Table 2: Advocacy

Prepare a plan for the Alliance and its members to effectively advocate for government action
• What preparation is needed (e.g. understanding how SD might fit with current government policy priorities)?
• What are the keys to your plan (e.g. common language, three clear goals)?
• How will SDoHA and its members organize around this plan
• If appropriate, list 2-3 advocacy "projects" that could be allocated to different groups for work

- Call on government to implement Senate/Marmot report
  – Be opportunistic about our messaging/timing
  – Identifying priority areas and timeline
- Political advocacy with backbenchers; labour; crossbenchers → Sowing seeds for the future
- Advocacy plans with journalists and media
  – Having case studies/information ready to go
- Develop SDOHA story
  – What is our story?
  – Common language
- Be a fair go government
  – Use the idea/messaging of a fair go for all to make the concept more understandable
  – Medicare as a tool for advancing the argument
  – Dot points to share "be the government that gives a fair go" → appeal to both parties
  – HIA for policies
    o Assessment tool for each project that is pitched to government (health assessments)

What we might need to achieve the above:
- Productivity commission – economics
- Champion – on the rise, here for the long haul
- Focusing our energy on longer term view – targeting permanent/long term people
- Get out of our comfort zone – should we just think about health? What about treasury?

Potential projects
3. **Create SDoHA's advocacy toolkit**
   – Common messaging
   – Case studies, data
   – Processes
   – Key asks → government
4. **Create campaign/s**
   – E.g Fair go
5. **Create advocacy plan**
   – Productivity Commission – economics underpinning (e.g. link with review of health funding)
   – APS/State bureaucracy plan
   – Champion

Table 3: SDOHA purpose/mission

What is SDOHA purpose/mission? This topic arose from the workshop discussion after Activity 1.

- Vision: what does the world look like if we are successful?
  - Equitable health and wellbeing outcomes for the whole society
- Alternative SDOH terminology:
  - Health inequities; equitable health outcomes
  - Productivity – getting away from the health paradigm that people don't understand
  - People have the ability to
    o Make personal choices
    o Reach/attain their potential
  - Equality of opportunity or outcome?
  - Micro: individual empowerment
  - Macro: systems that enable people to…
  - Talk about health and wellbeing, rather than health → broader definition
- Outcomes
  - What are the health and wellbeing indicators we care about?
  - What is the timeframe?
  - What population/cohorts?
  - What SDOH measures (e.g. housing, education, employment)?
    o C + G measures?
    o Australian National Development Index (ANDI)?
    o MDG?
    o Australian Early Development Index (AEDI)?
- Mission: what is the role of SDOHA?
  - Advocacy v/s implementing themselves?
  - Possible areas:
    o Scanning the existing outcome measures
    o Report on SDOH (annually)
    o Nationally consistent SDOH measures

Potential projects

6. **Capture revised SDOHA 's vision/mission/purpose/manifesto**

   - Including roles, principles, facilitators, etc…

7. **Assemble Health and Wellbeing Index**

   - Annual report

ACTIVITY 3 – PRIORITISE/NEXT STEPS

Vote: You have three post-it notes; green, orange and pink. Allocate these to the three projects you think are top priority for SDOHA to commence/raise funds for/facilitate:

- Green = three votes
- orange = two votes
- Pink = one vote

If you/your organisation might be materially interested in leading/participating in/helping to resource a project, write this on a BLUE post-it and add it to the project.

In the final activity, the facilitator summarised the projects from Activity 2 into seven overall projects for potential SDOHA focus in 2015-2016. The projects (numbered 1-7) are summarised in the text above at the end of the notes for each Table discussion and the projects are numbered in the table below to match.

Project	"Votes"	Organisation possibly materially interested in leading/participating in/helping to resource a project:
5. Create advocacy plan	33	CHA RFDS
1. Develop a forward thinking research agenda	20	CHETRE (Health impact assessment)
3. Create SDOHA's advocacy toolkit	20	RACP (collaborate)
6. Capture revised SDOHA 's vision/mission/purpose/manifesto	20	COTA Aust
7. Assemble Health and Wellbeing Index	11	CSI
4. Create campaign/s	2	Australian Psychological Society (collaborate)
2. Establish a process through which this research agenda can be articulated and implemented	1	