

Health in All Policies: Reality or Aspiration?

Danny Broderick

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A world map is shown in a lighter blue shade against the dark blue background. A thick red line is drawn diagonally across the map, starting from a point in Australia (Adelaide) and ending at a point in Northern Ireland (Belfast).

From Adelaide to Belfast...

there and back again

Health in All Policies: Reality or Aspiration?

Or

Why should something they
do way off in
South Australia have anything
to do with us???

Health in All Policies...The Trojan Horse?

- **Introduction**
- **The context of Health in All Policies**
- **Chart the development of HiAP in South Australia**
- **Identify progress to date and key elements to ensure sustainability**
- **Briefly describe methods used**
- **3-5 year horizon**
- **The three faces of Health in All Policies...thoughts about transferability**
- **Concluding with a warning**
- **Some questions on failure**

Health in All Policies...The Trojan Horse?

- **Your Question....**
- **What does this mean for us?**
- **Do what you do...do well**

Health in All Policies: Reality or Aspiration?

- But first some background about South Australia



South Australia Public Health

- Adelaide



South Australia Public Health



South Australia Public Health

Basic facts

- 1.5 million people with an average age of 37.
- 23,000 indigenous people.
- 75% were Australian-born with the remaining residents hailing from the United Kingdom, Italy and Greece, Germany. ..other European and Asia
- English was the only language spoken at home by 84% of the population, with Italian, Greek and Vietnamese the next most common languages spoken.

South Australia Public Health

Basic facts

- South Australia has a healthy Mediterranean climate with cool wet winters and hot dry summers.
- The average summer temperature is 29 degrees Celsius
- The average winter temperature is a mild 15 degrees Celsius.
- 2,500 hours of sunshine per year...**enjoy!**

South Australia Public Health

Basic facts

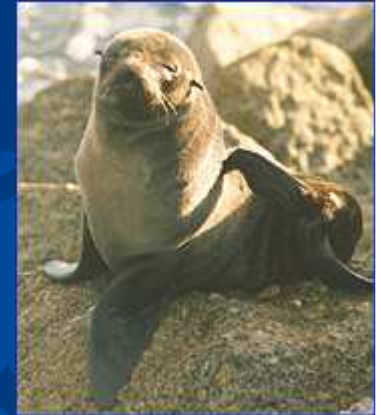
The world's longest east-west coastline runs through South Australia. This coast is a global 'hot spot' for marine biodiversity.



Here are some friends we share the place with...

South Australia Public Health

Some friends we share the place with



South Australia Public Health

Some friends we share the place with
And lets not forget...Bruce!



South Australia Public Health

Some friends we share the place with



South Australia Public Health

Some friends we share the place with



South Australia Public Health

Other things we're known for...wine



South Australia is the wine-making capital of Australia, producing about 50% of Australian wines and 65% of national wine exports.

South Australia Public Health

Other things we're known for...



South Australia Public Health

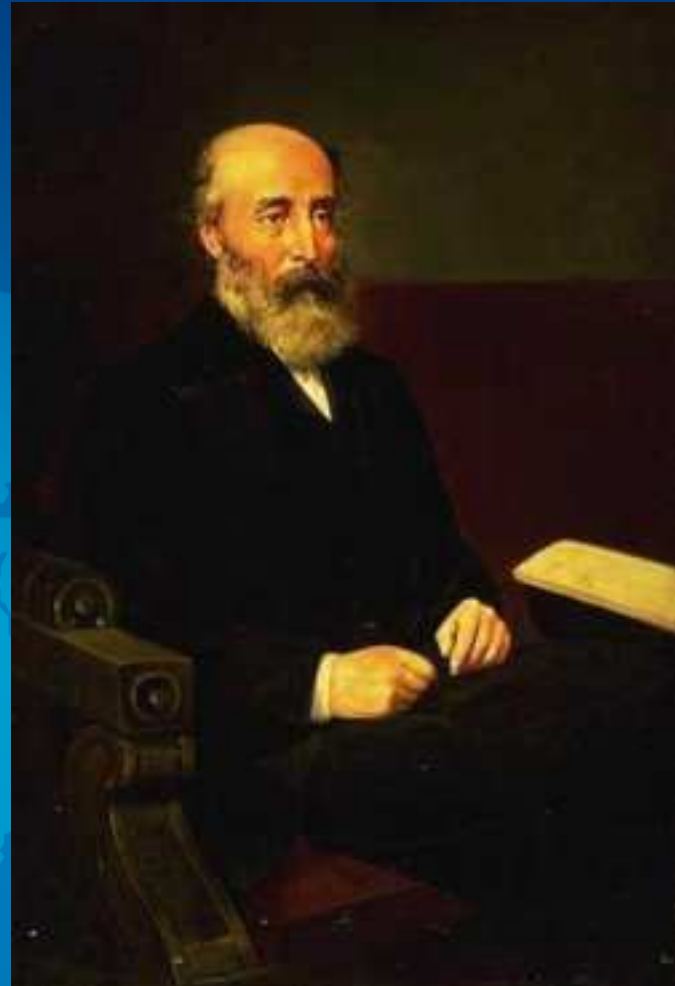
Other things we're known for...I'm sorry did I mention wine before...



South Australia Public Health

Other things we're known for

Sir Robert Torrens invented
the Torrens title system of
land tenure in South Australia
1858



South Australia Public Health

Other things we're known for...



First place in the world to give women the right to vote and stand for parliament...1894



South Australia Public Health

Other things we're known for...



First place in
Australia to give
Aboriginals the
right to vote and
stand for
parliament...1894

South Australia Public Health

Other things we're known for...

Adelaide
city...first local
government in
Australia 1840



South Australia Public Health

Other things we're known for...



South Australia

First government in
the world to establish
a Department for the
Environment



South Australia Public Health

Other things we're known for...

Adelaide...the first city in
Australia to undertake a
deep drainage sewer...
1881

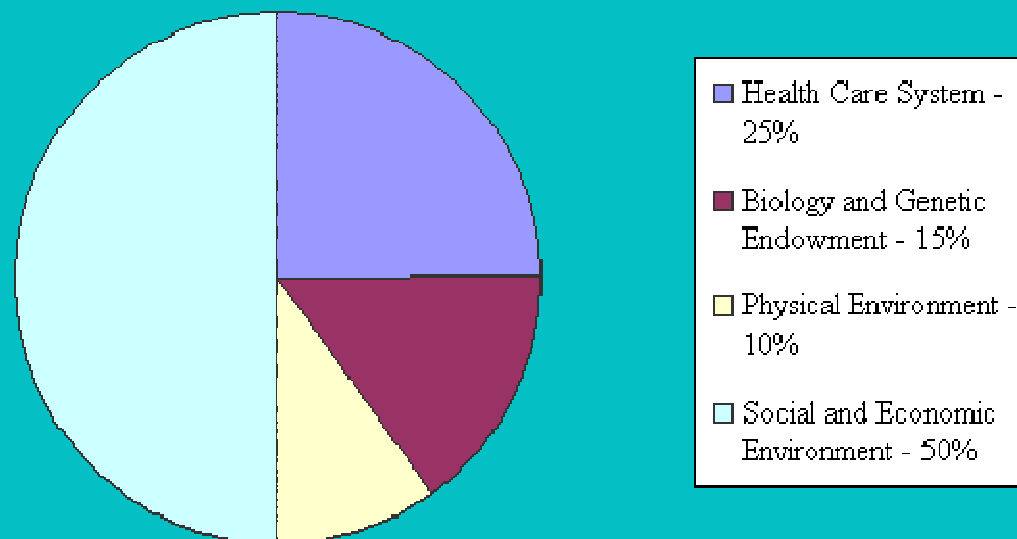


- 
- **But that's enough about us....**
 - **Now what we have in common....**



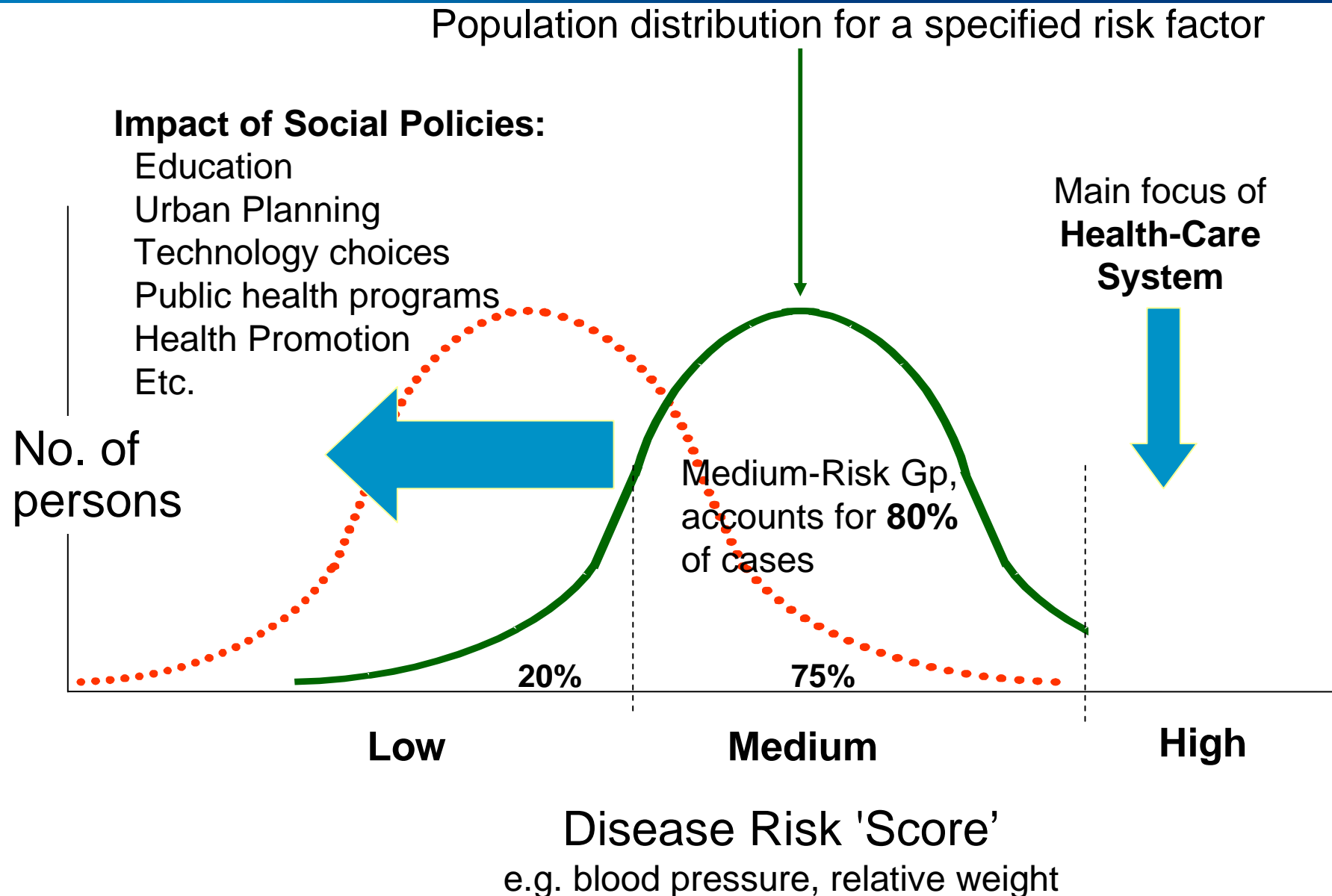
- A focus on the social determinants of health
- An understanding on public/population health measures
- Working as far upstream as possible to get the best buy for prevention and health

**ESTIMATED IMPACT OF DETERMINANTS OF HEALTH ON THE
HEALTH STATUS OF THE POPULATION**



Source: Estimation by the Canadian Institute for Advanced Research, Graph available on Health Canada's Website.

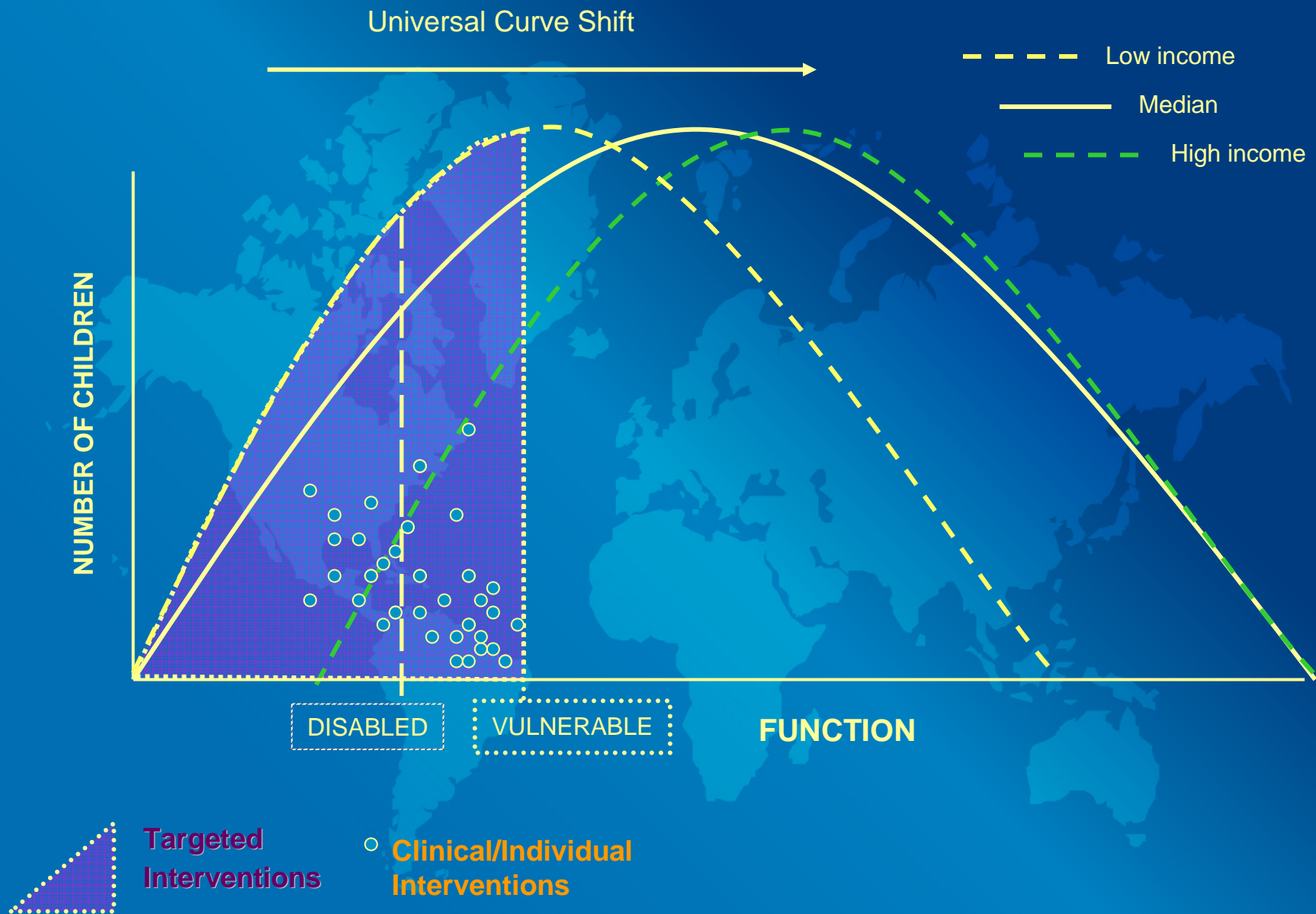
Population Strategy to Improve Health

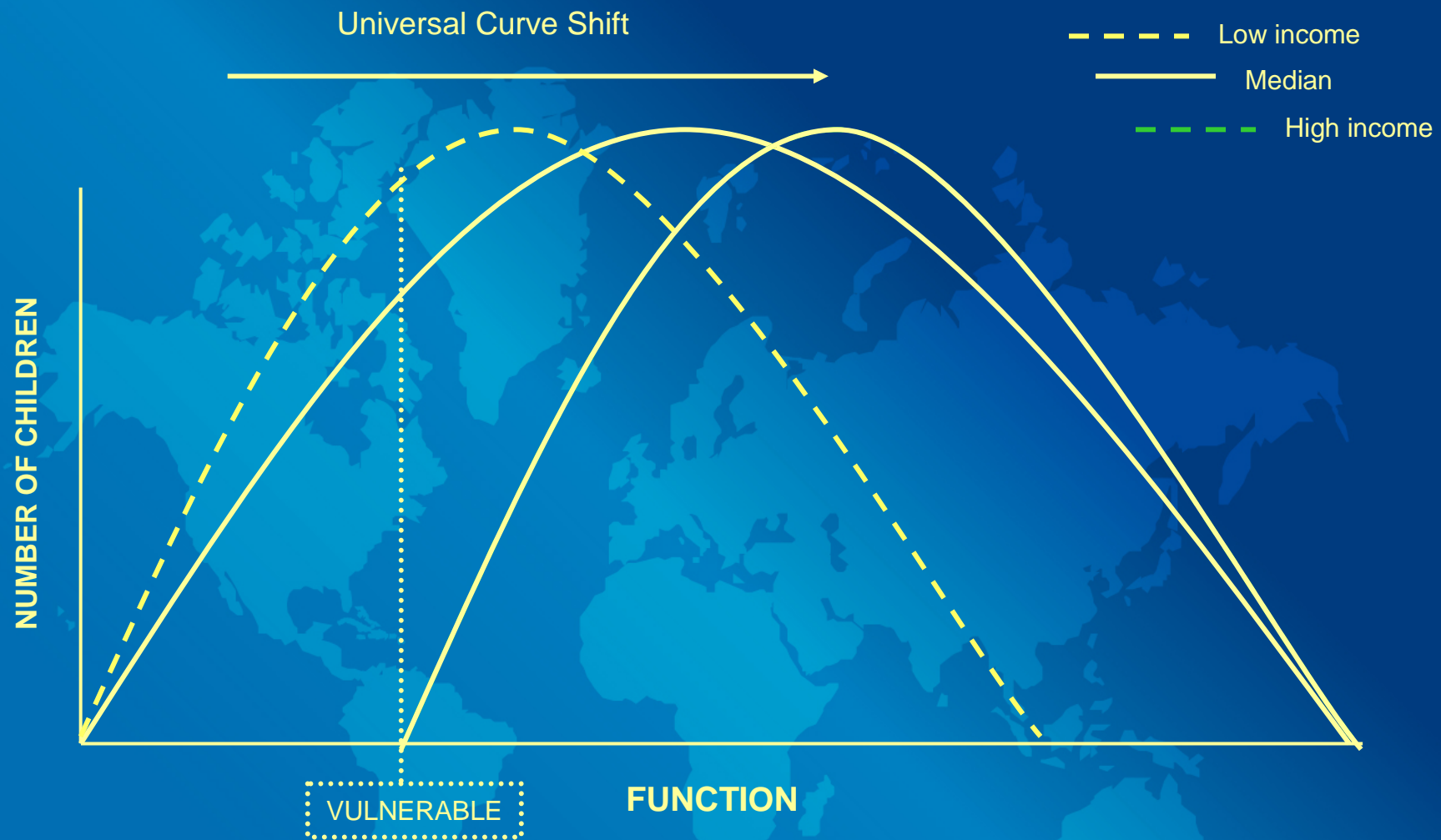


Individual & Population Strategies



- Individual
 - Diagnosis, treatment, rehabilitation
 - Prevention
 - Health Promotion
- Population
 - Prevention
 - Health Promotion
 - Developmental Optimization

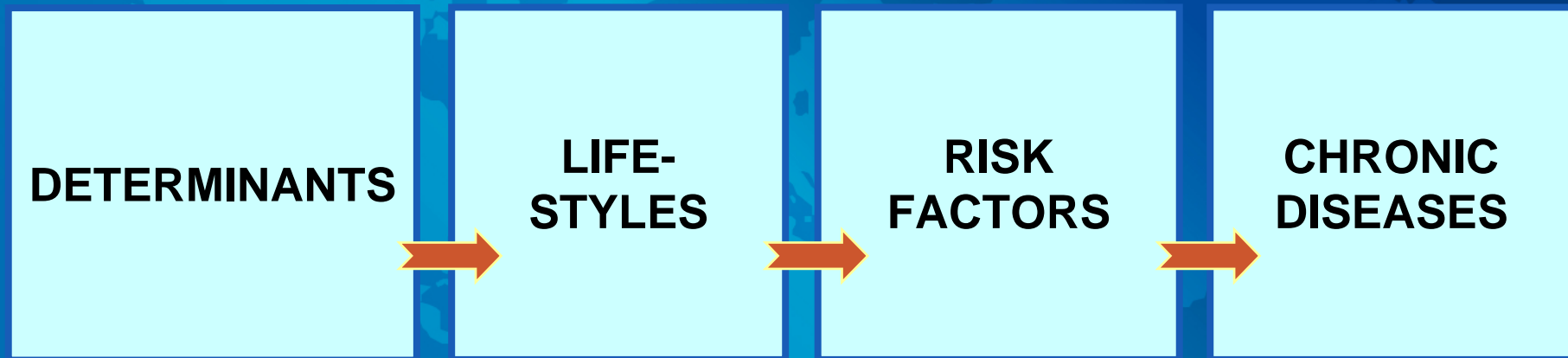




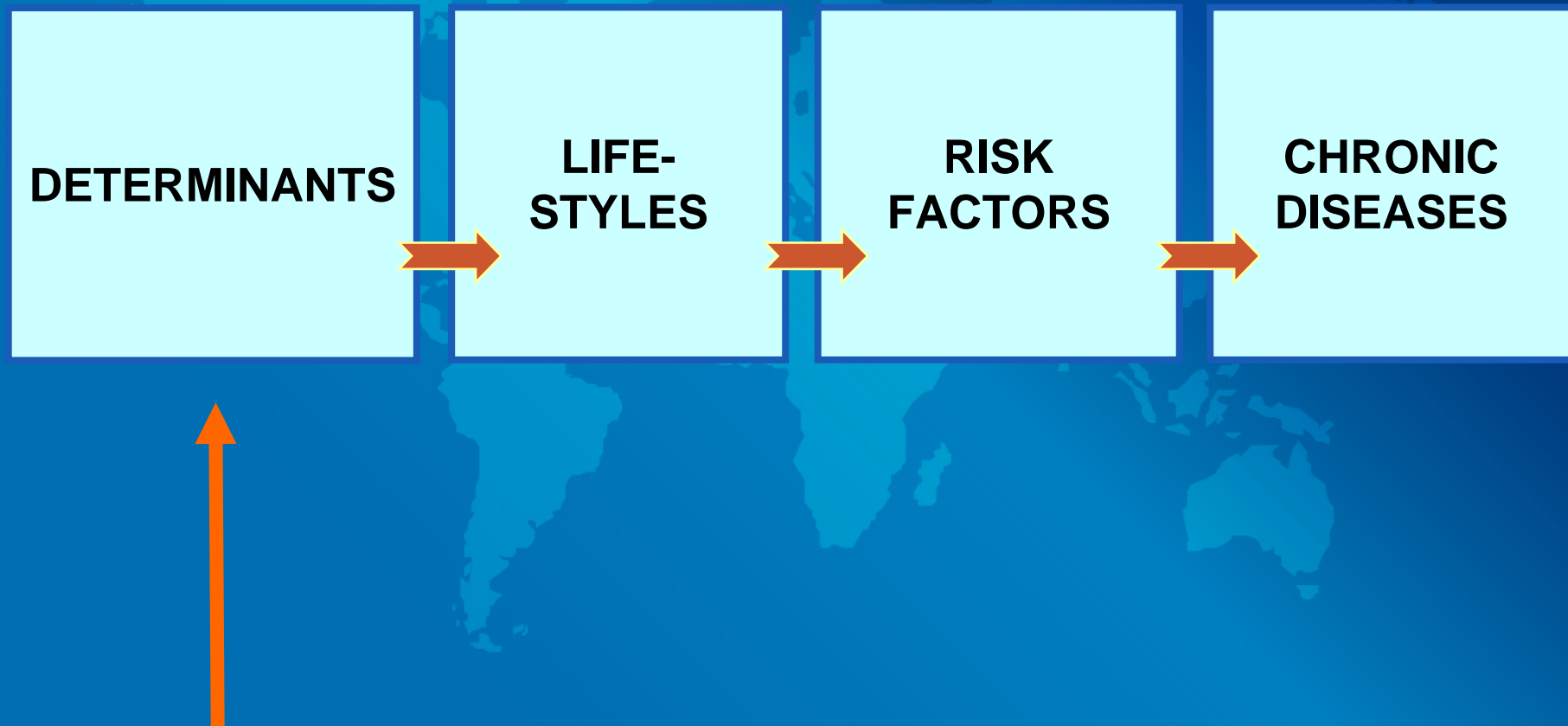
A stylized world map in a lighter blue shade, centered on a dark blue background. The map shows the outlines of the continents. Overlaid on the map is the text "How ?" in a bold, orange font.

How ?

"Upstream Prevention"



"Upstream Prevention"



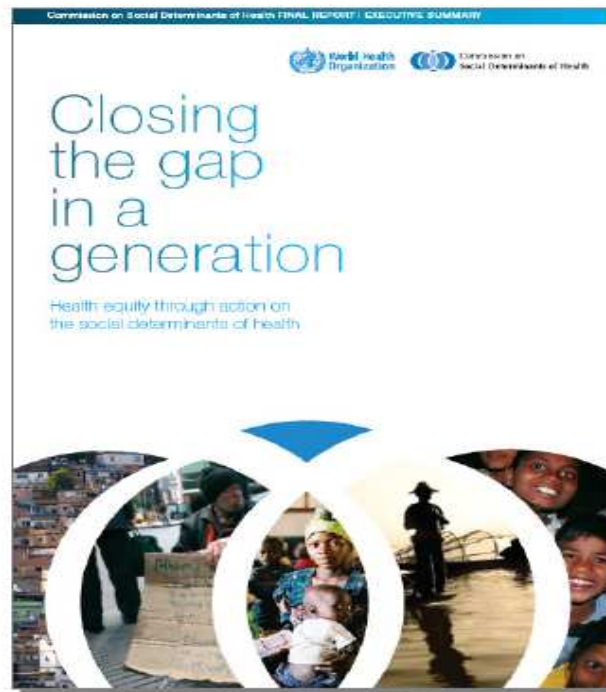
A stylized world map in a light blue color, centered on the Atlantic Ocean, set against a darker blue gradient background. The map shows the outlines of the continents.

How ?



Social Determinants of Health

Three Broad recommendations



- Improve daily living conditions
- Tackle inequitable distribution of power and resources
- Monitor inequalities and assess response

A stylized world map in a lighter blue shade, centered on a dark blue background. The map shows the outlines of the continents. Overlaid on the map is the text "How ?" in a bold, orange font.

How ?



- Marmot Review (England focus)
- *“Reducing health inequalities is a matter of fairness and social justice”*
- *“The starting point for this Review is that health inequalities that are preventable. Putting them right is a matter of social justice”*
- *“Our case for action is principally a moral one”*



- *“Our case for action is principally a moral one”*



A stylized world map in a lighter blue shade, centered on the Atlantic Ocean, set against a darker blue gradient background.

How ?

**Morality
Versus
Utility**

A stylized world map in a lighter shade of blue, centered on the Atlantic Ocean, serves as the background for the slide. The map shows the outlines of the continents.

Morality Versus Utility

Commission on Macroeconomics and Health

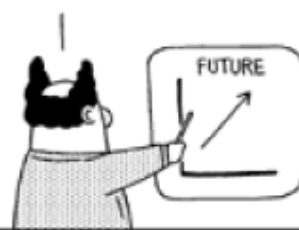
**Commission on the Social Determinants of
Health**

SALES ARE
DROPPING
LIKE A ROCK.



www.dilbert.com scottadams@aol.com

OUR PLAN IS TO
INVENT SOME SORT
OF DOOHICKEY THAT
EVERYONE WANTS
TO BUY.



4-17-04 © 2004 Scott Adams, Inc./Dist. by UFS, Inc.

THE VISIONARY
LEADERSHIP WORK
IS DONE. HOW LONG
WILL YOUR PART
TAKE?





**“It is far more important to communicate
that something can be done,
than it is to communicate
what's going wrong”**

- Makani Themba

- 
- So...
 - What can be done

- A fundamental question...
- How do we work with other sectors to improve the determinants of health?



Health in All Policies: the South Australian Experience

- Ways of working...
- Command and control
- Advocate (cajole)
- Pressure
- Pay (bribe)
- Convince/educate/inform
- Seek cooperation (including beg)
- Appeal to a higher morality (another form of begging)
- Appeal to self interest
- Others....



Health in All Policies: the South Australian Experience

- Ways of working...
- Command and control
- Advocate
- Pressure
- Pay(bribe)
- Convince/educate/inform
- Seek cooperation (beg)
- Appeal to a higher morality
- Appeal to self interest...Health in All Policies
- Others....



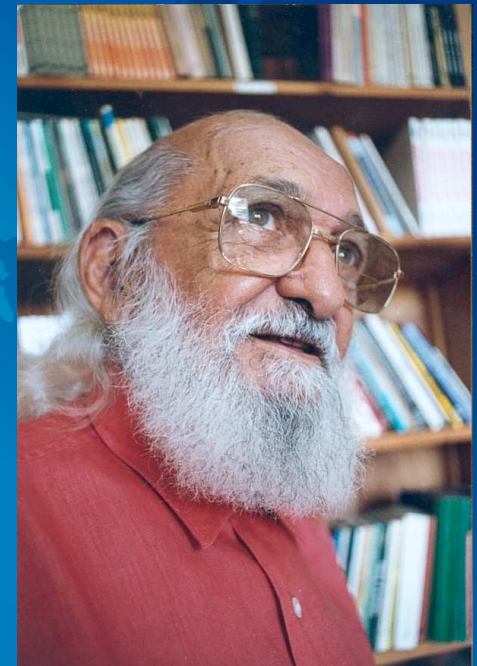
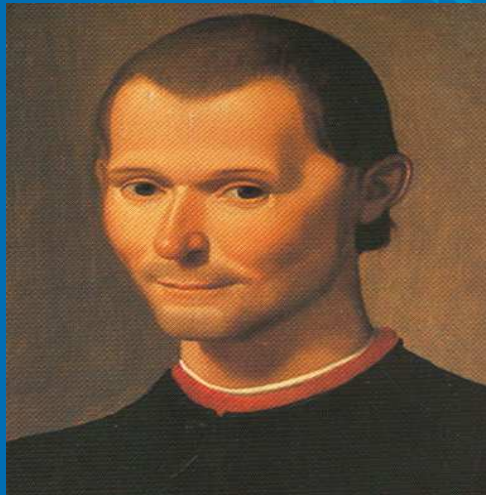
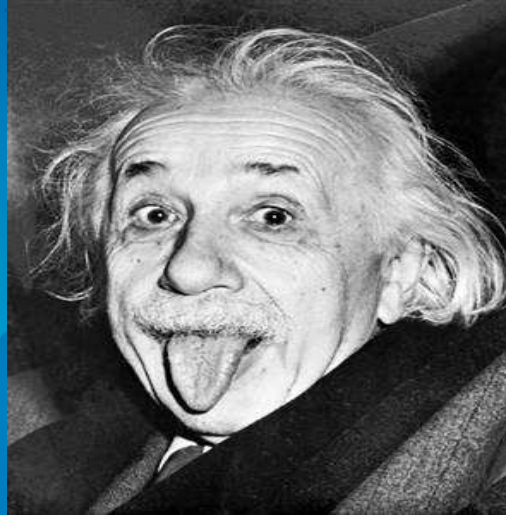
- Appeal to self interest...Health in All Policies
- A distinctive feature of HiAP....it works on other sectors' territories ...it doesn't seek to bring other sectors onto health's territory
- All approaches are valid and may work depending on circumstances...but we shouldn't mix them up
- Its not a case of “instead of” but “as well as...”



HiAP- the South Australian Approach

- Our debt...
- Intersectoral action
- HIA
- Public Policy and Public Administration
- Popular education and community development
- SDOH
- Einstien
- Machiavelli
- Voltaire
- Indiana Jones

HiAP- the South Australian Approach



- 
- **Health is largely created developed maintained (and destroyed) by activities outside of the health care sector**
 - **THE PARADOX FOR AN AGENCY RESPONSIBLE FOR HEALTH!**

- 
- A faint, light blue world map is visible in the background of the slide, centered behind the text.
- Quick test
 - Q) How do you get other agencies interested in health and equity?
 - A) By not talking about it.

- 
- A faint, light blue world map is centered in the background of the slide, showing the continents of North America, South America, Europe, Africa, Asia, and Australia. The map is slightly darker in the center and fades towards the edges.
- Quick test
 - Q) How do you get other agencies interested in doing something about health and equity?
 - A) By them finding out that there's something in it for them

- 
- **So**
 - **How can we help other sectors discover that there's something in it for them??**

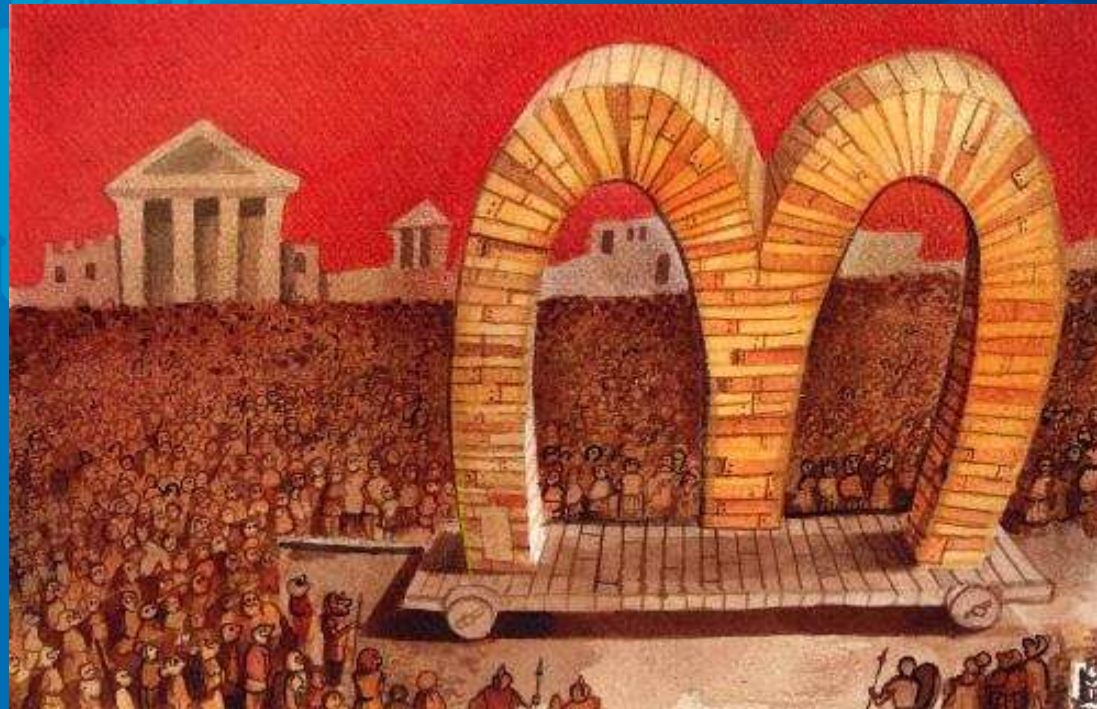


Health in All Policies...The Trojan Horse

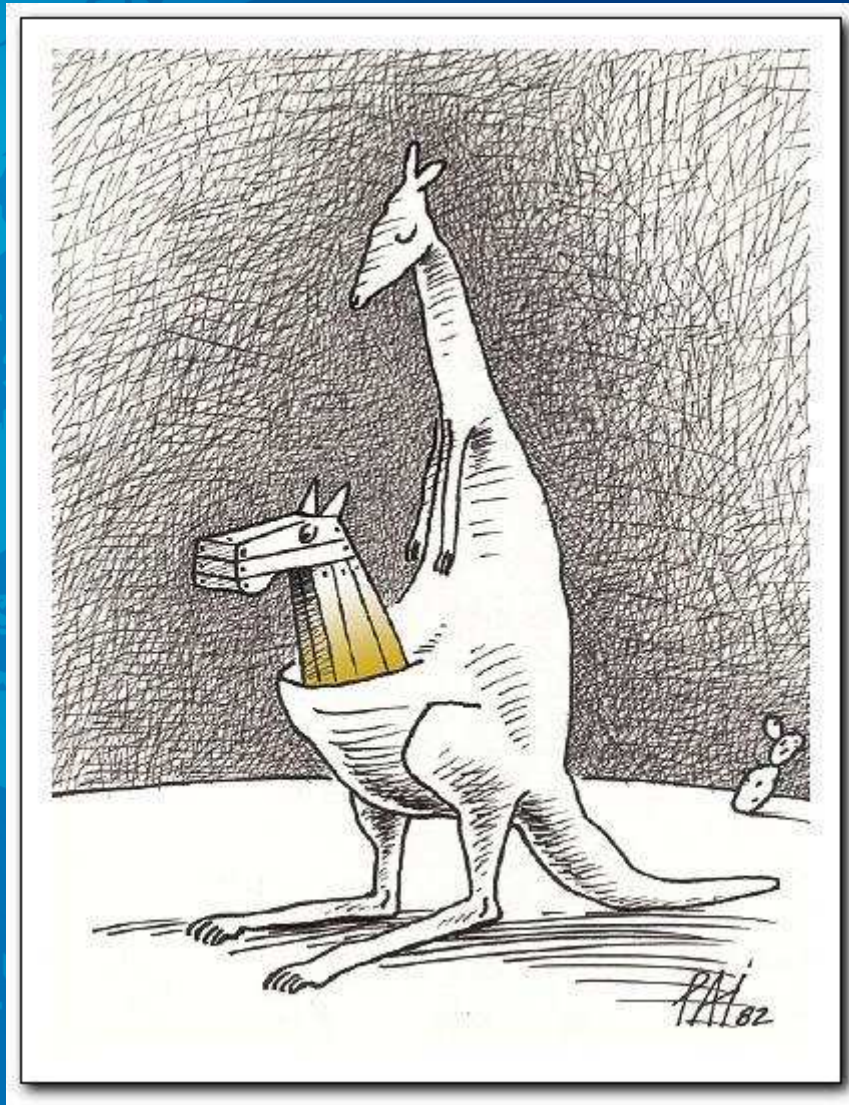
But this time we really are bringing gifts

Health in All Policies...The Trojan Horse?





Health in All Policies...The Trojan Horse?



Health in All Policies...The Trojan Horse?



Health in All Policies...The Trojan Horse?

- Are we all clear on what Health in All Policies is?

eu2006.fi

Health in all policies

EU Finnish Presidency 2006

Health in All Policies...The Trojan Horse?

- Are we all clear on what Health in All Policies is?

Health in All Policies...The Trojan Horse?

- Are we all clear on what Health in All Policies is?
- I don't think so...

- Finding common ground and common language...
- Do words matter?
- They do if they are labels for different types of action



- Do words matter?
- Healthy public policy
- Intersectoral action for health
- Health impact assessment
- Health equity impact assessment
- Multi-sectoral action for health
- Health in All Policies

????????????????



Health in All Policies...The Trojan Horse?



FIRSTLY: THE PROBLEM

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

Health is largely created developed maintained (and destroyed) by activities outside of the health care sector

The more money there is for health care sector the less capacity there is for other agencies (WHO HAVE THEIR HANDS ON THE RIGHT POLICY LEVERS) to take action on the determinants of health

The agencies who are able to take action on the determinants of health don't (always) know how to

In the Health sector we know we need to work intersectorally but we are not always that good at it

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

In the Health sector we know we need to work intersectorally but we are not always that good at it

At least 30 years plus of WHO statements and WHA resolutions calling for intersectoral action and the development of capacity for intersectoral action

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

In the Health sector we know we need to work intersectorally
but we are not always that good at it

*“ A formal commitment to intersectoral action became part of
many countries official health policy framework in the
1980s.*

*However the track record of actual results from national
implementation was feeble...the weakest component of the
strategies associated with Health for All”*

WHO 2005

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

In the Health sector we know we need to work intersectorally but we are not always that good at it

“ The history of intersectoral action for health is not indifferent: as a key component of Alma-Ata Declaration, it was judged to be among the least successful aspects of the Health for All process in the 1980s and 1990s”

WHO. Medium Term Strategic Plan 2008-2013

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

In the Health sector we know we need to work intersectorally but we are not always that good at it

“ Intersectoral action was a fundamental principle of the Alma Ata Declaration. However ministries for health...have struggled to coordinate with other sectors...A major obstacle to reaping the rewards of intersectoral action has been the tendency, within the health sector, to see such collaboration as mostly symbolic in trying to get other sectors to help (health) services”

WHR 2008

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

In the Health sector we know we need to work intersectorally but we are not always that good at it

“Intersectoral action has often not concentrated on improving the policies of other sectors, but on instrumentalizing their resources”

WHR 2008

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

In the Health sector we know we need to work intersectorally but we are not always that good at it

We are not alone...

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

In the Health sector we know we need to work intersectorally but we are not always that good at it

We are not alone...

Review of PRSPs identified limitations on social participation, intersectoral action on social determinants
(Mohindra 2007)

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

In the Health sector we know we need to work intersectorally but we are not always that good at it

We are not alone...

Commonwealth survey on action on climate change...90% of countries reported taking intersectoral action most reported poor intersectoral collaboration as a major challenge

(Commonwealth Update 2009)

Health in All Policies...The Trojan Horse?

FIRSTLY: THE PROBLEM

In the Health sector we know we need to work intersectorally but we are not always that good at it

So what's wrong with our approach to intersectoral action?

Framework: Working together

Working together: Intersectoral Action for Health.

Six preconditions:

- **necessity** for the parties to work together on this issue
- That the proposed action builds on existing policy initiatives – **opportunities**
- That the sectors/organisations involved have the **capacity** to undertake the proposed action
- Strong **relationships** between those involved
- That the **planned** action is well conceived, and can be implemented and evaluated; and
- That provision has been made to **sustain** outcomes.

Health in All Policies...The Trojan Horse?

An Epidemic of Meddling

**The totalitarian implications
of public health**

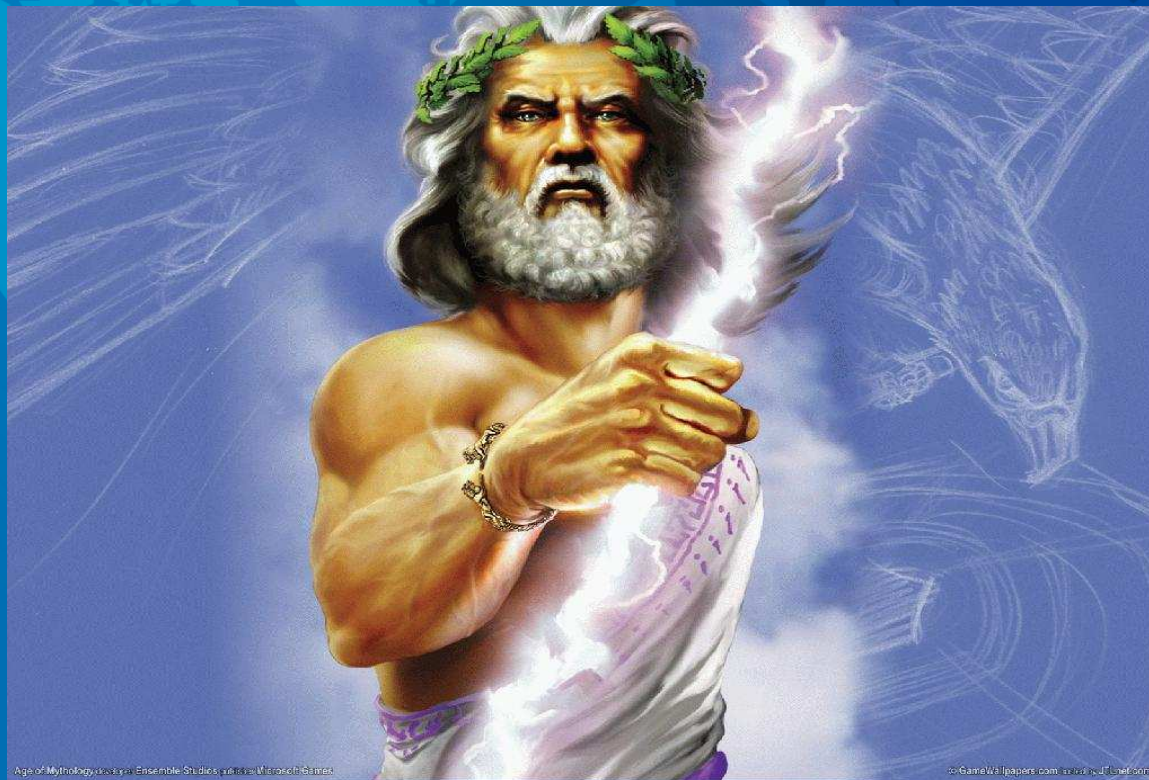


Health in All Policies...The Trojan Horse?





Health in All Policies...The Trojan Horse?



Health in All Policies...The Trojan Horse?



Health in All Policies...The Trojan Horse?



Health in All Policies...The Trojan Horse?



Health in All Policies...The Trojan Horse?

- “(While) many countries try to strengthen the collaboration between health and other sectors... the practices and practicalities of how this should be done are not yet well established.”

Stahl, T and Lahtinen, E. HIAP Policies and Perspectives, 2006

Health in All Policies...The Trojan Horse?

- Health in All Policies the Mandate for development...
- WHA62.14
- *Requests the Director General...*
- *(6) to provide support to Member States in implementing a health-in-all-policies approach to tackling inequities in health.*
- WHA 62 .12
- *Requests the Director General...*
- (6) to prepare implementation plans for...multisectoral action and health in all policies



Health in All Policies...The Trojan Horse?

- Health in All Policies the Mandate for development...

“Identifying win-win policy solutions

Finding policy solutions that both meet the needs of the different sectors and lead towards shared vision will help create political and administrative buy-in. The Health in All Policies Initiative in the state of South Australia provides an example...”

CSDOH: Closing the Gap
2008



Health in All Policies...The Trojan Horse?

- Health in All Policies the Mandate for development...
- *“...Health in All Policies... does not start from a specific health problem and look at how other sectors can contribute to solving them.*
- *It (HiAP) starts by looking at the effects of (other sectors) policies on health. It then seeks to work with these other sectors to ensure that, while contributing to well-being and wealth, these policies also contribute to health”*

WHR 2008:PHC Now More Than Ever



Health in All Policies...The Trojan Horse?

- Health in All Policies the Mandate for development...

“...intersectoral action was a fundamental principle of the Alma Ata Declaration...”

Intersectoral action has often not concentrated on improving the policies of other sectors, but on instrumentalizing their resources (for health)...

*health in all policies follows **a different logic...**”*

WHR 2008:PHC Now More Than Ever



Intersectoral action for health can seem like a tug of war



The *different logic* of Health in All Policies...



The *different logic* of Health in All Policies...

Let go of the rope

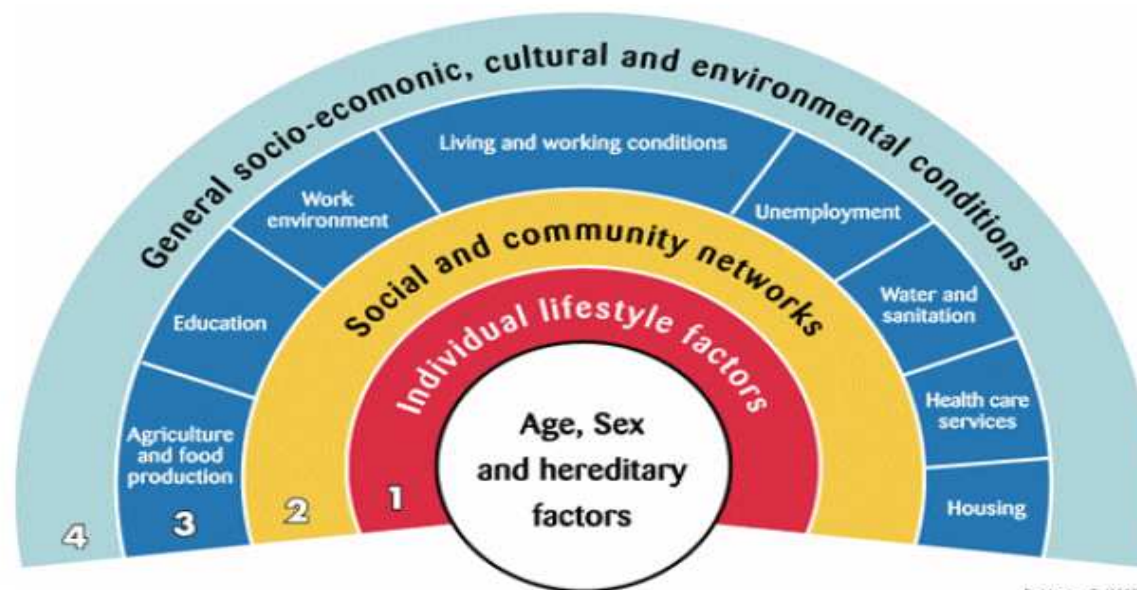


Health in All Policies...The Trojan Horse?

OTTAWA CHARTER
FOR HEALTH PROMOTION
1986

Health is a resource for daily living not an end in itself

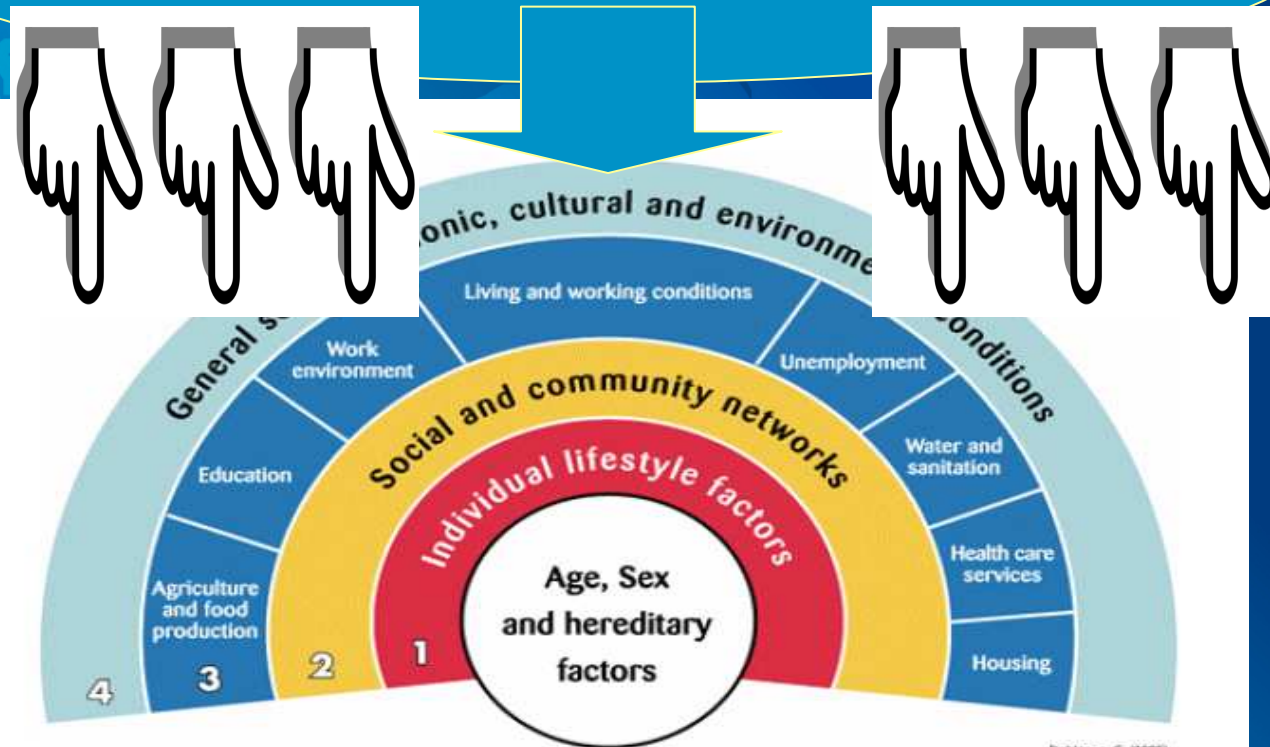




Bahlgren, G. (1995)
European Health Policy Conference:
Opportunities for the Future, Vol. 11 - Intersectoral Action for Health,
Copenhagen: WHO Regional Office for Europe

Figure 1.1: Determinants of Health.

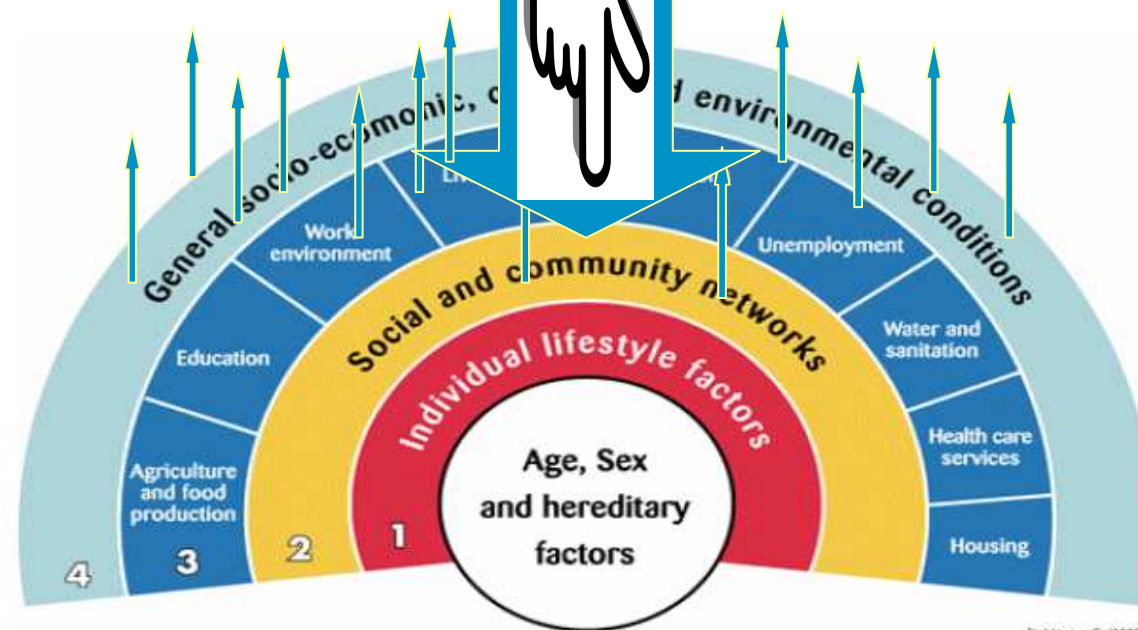
Health OVER All Policies



Dahlgren, G. (1995)
European Health Policy Conference:
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Copenhagen: WHO Regional Office for Europe

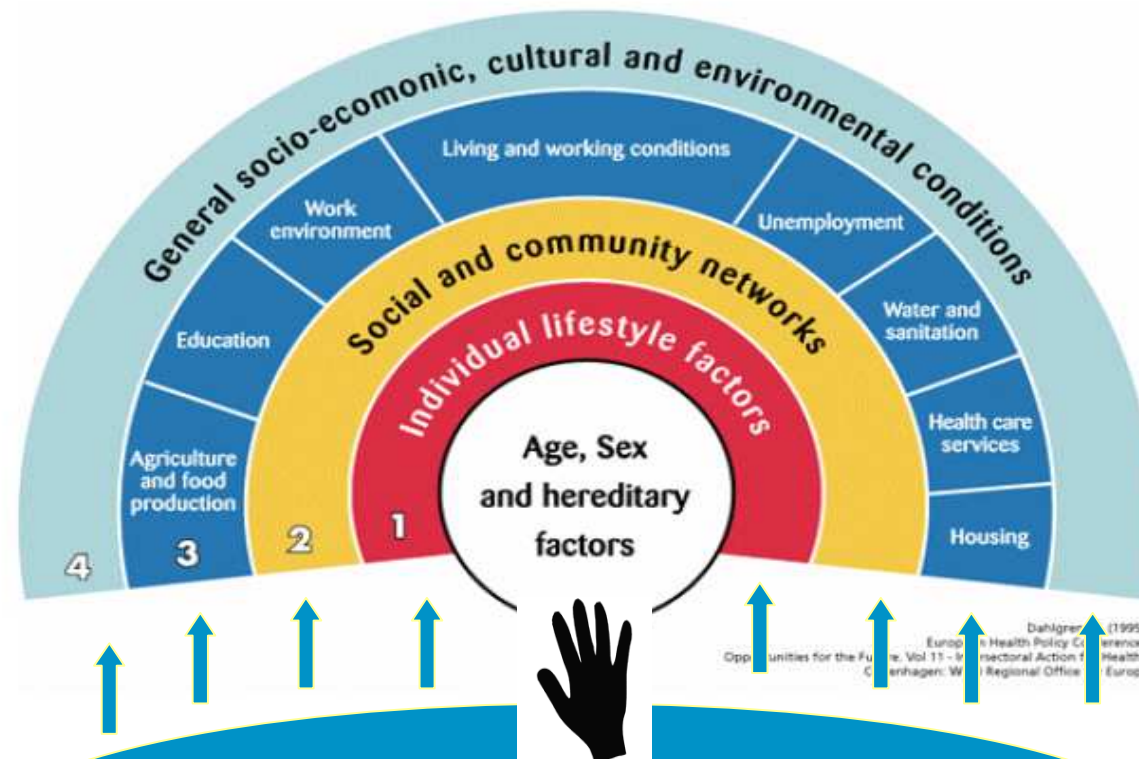
Figure 1.1: Determinants of Health.

All Policies in Health



Dahlgren, G. (1995)
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Figure 1.1: Determinants of Health.



Health in All Policies

A stylized world map in a lighter shade of blue, centered on the Atlantic Ocean, serves as the background for the slide. The map shows the outlines of the continents.

The climate for health and Health in All Policies



Studies

--

Canada

--

New Zealand

--

A faint, light blue world map is visible in the background of the slide, centered behind the text.

Canada

- **>50% aware of determinants of health**
- **>50% aware of research relating to specific impacts of determinants on health**
- **5% knowledge about determinants had little practical application to their work**
- **85% Determinants of health should be considered in all government initiatives**
- **83% needed more practical information about effective interventions (what they could do)**

A faint, light blue world map is visible in the background of the slide, centered behind the text.

Canada

- **<50% responsibility for government action to improve health should rest solely with health department**
- **2/3 Knowledge of determinants has influenced program or policy development in their area**
- **2/3 saw their role as trying to improve the health of populations***
- **38% more important considerations than policy impact on pop health**

New Zealand

- **>50% aware of determinants of health**
- **>50% aware of research relating to specific impacts of determinants on health**
- **6% knowledge about determinants had little practical application to their work**
- **80% Determinants of health should be considered in all government initiatives...but needed more practical information about effective interventions (what they could do)**
- **<50% responsibility for government action to improve health should rest solely with health department**

A faint, light blue world map is visible in the background of the slide, centered behind the text.

New Zealand

- **2/3 Knowledge of determinants has influenced program or policy development in their area**
- **69% saw their role as trying to improve the health of populations***
- **20% the economy more important considerations than reducing health inequalities**
- **74% Knowledge of Maori health inequalities influenced policy decisions**

A world map is visible in the background, rendered in a lighter blue shade against the darker blue background of the slide. The map shows the continents and major landmasses.

Small scale qualitative study

- **58% direct link between their work & impact on health**
- **33% Depts strategic objectives and actions do not directly influence health issues or determinants.**
- **8% Improving health outcomes is not a primary objective of their department**

<i>Level 1: Individual lifestyle factors</i>
<ul style="list-style-type: none"> • Promoting energy efficiency • Promoting healthy eating
<i>Level 2: Social and community networks</i>
<ul style="list-style-type: none"> • Building an inclusive society • Rural development • Community development • Addressing issues for women, prisoners, asylum seekers, travellers
<i>Level 3: Living and working conditions</i>
<ul style="list-style-type: none"> • Addressing the demographics of where people live and work • Labour force up-skilling • Improving workplace conditions • Provision of affordable, social housing • Maintenance of building standards • Funding of health services • Maintenance of natural and built environment • Provision of social security payments
<i>Level 4: General socio-economic, cultural and environmental conditions</i>
<ul style="list-style-type: none"> • Improving access to sporting facilities • Creating an environment for enterprise development • Providing a stable and secure environment • Improving probation services • Implementing the drugs strategy • Reducing emissions • Sanitation • Monitoring water quality • Improving air quality • Consumer protection • Providing sustainable employment opportunities • Planning and spatial policy • Waste disposal • Provision of emergency planning and services • Nuclear safety • Promoting sustainable development

Table 4.1: Examples of government activities categorised by the level at which they influence the determinants of health

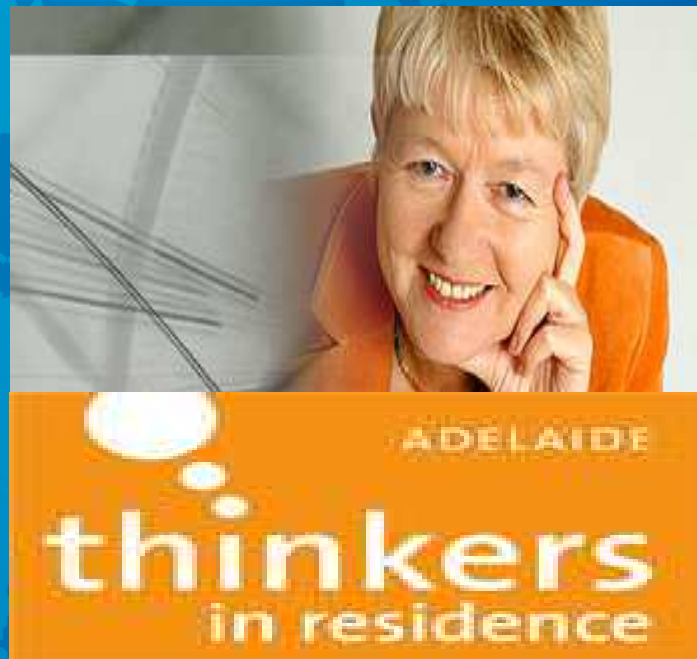
A faint, light blue world map is visible in the background of the slide, centered behind the text.

Suggested Improvements

- **Increase knowledge re determinants of health**
- **Communicate the role of public/population health**
- **Demonstrate effectiveness of interventions**
- **Demonstrate value for money**
- **Develop easy...user friendly methodology (toolkit) for departments to incorporate health factors in their planning and decision making**
- **Disseminate more relevant health information**
- **More research on health impacts.**

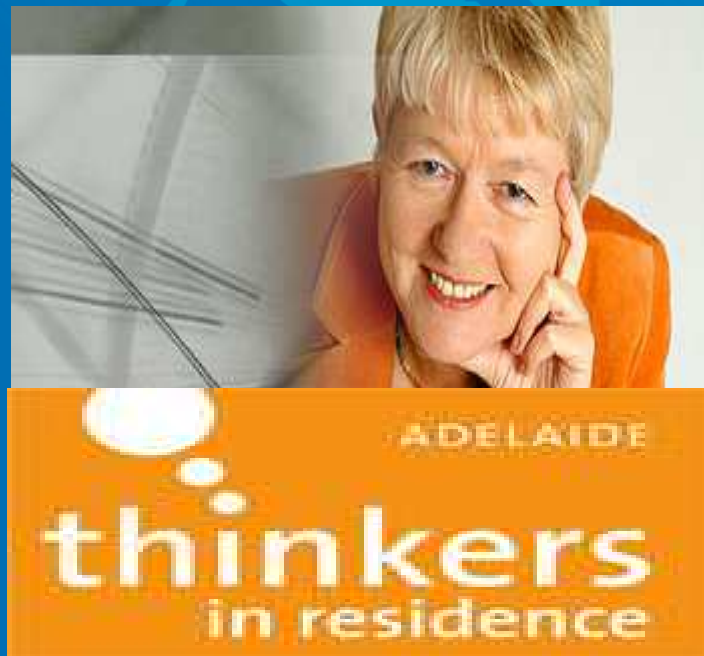
Health in All Policies...The Trojan Horse?

Health in All Policies in South Australia...how it happened...



Health in All Policies...The Trojan Horse?

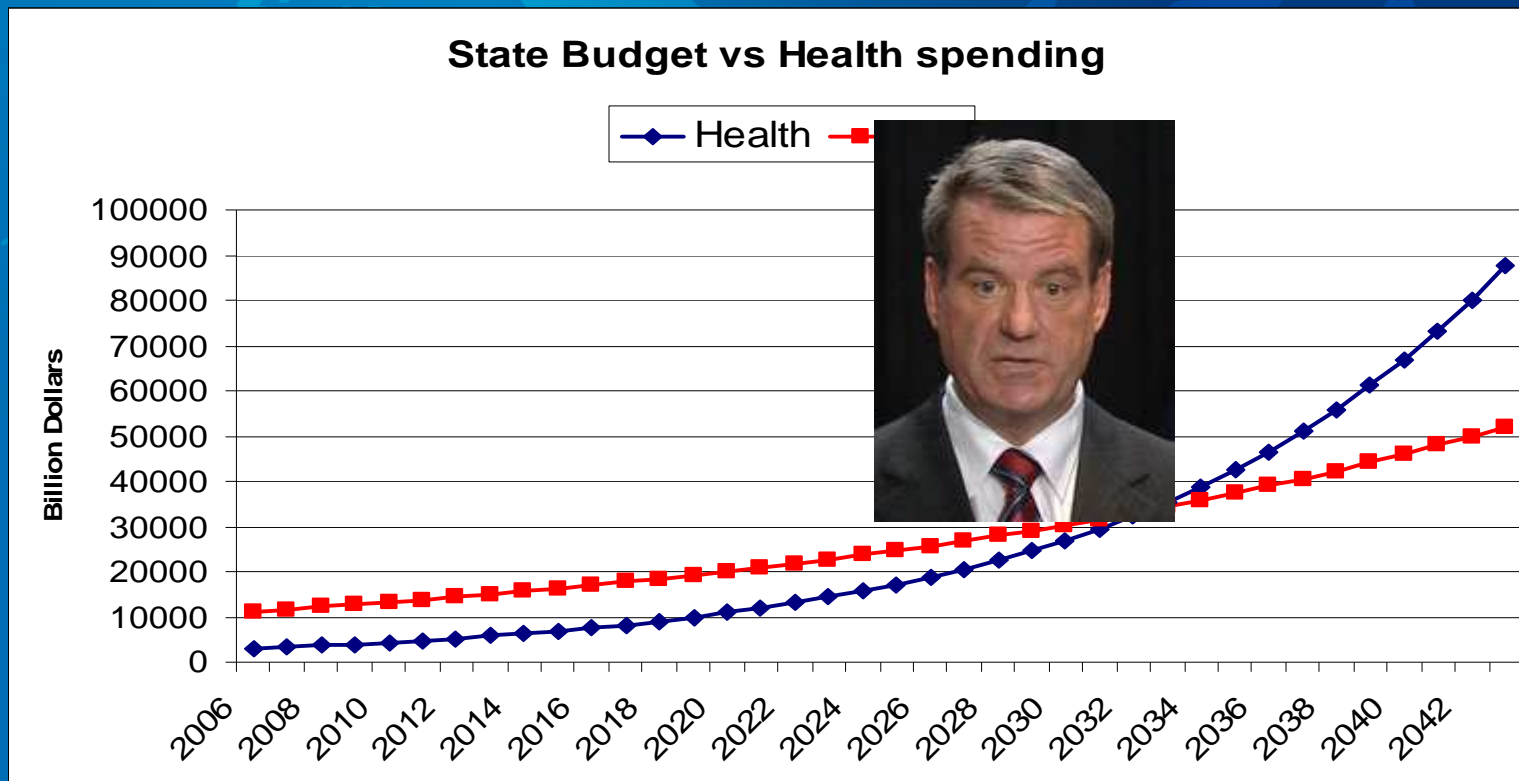
- Bullet Health in All Policies in South Australia...how it happened...



South Australia's Strategic Plan



HiAP- the South Australian Approach



29 percent for 12 percent

- 12% of the population require public hospital services
- 29% of the Government's budget is for public hospitals

Options?

- Tax
- Reallocation from other government services
- Reallocation from other health services
- Reduce impact through policies to deliver a healthier society

Health in All Policies...The Trojan Horse?

- Bullet Health in All Policies in South Australia...how it happened...



South Australia's Strategic Plan



Secure a good quality of life for South Australians of all ages and backgrounds





Health in All Policies...The Trojan Horse?



Health in All Policies

- Growing Prosperity
- Improving Well Being
- Attaining Sustainability
- Fostering Creativity
- Building Communities
- Expanding Opportunity

The health lens

health lens



Ensuring that a health lens is put on South Australia's strategic plan provides guidance for innovative policies that ensure quality of life and economic growth in the state

Health in All Policies...The Trojan Horse?

THE TASTE TEST: 7 Case Studies

- **Economic Growth** - Exceed the national economic growth rate by 2014
- **Healthy Weight** - Increase the proportion of south Australians 18 and over with healthy weight by 10 percentage points by 2014
- **Work Life Balance** - Improve the quality of life of all South Australians through maintenance of healthy work life balance
- **Ecological footprint** - Reduce South Australia's ecological footprint by 30% by 2050
- **Broad band usage** - Broadband usage in SA to exceed the national average by 2010 and be maintained thereafter
- **Regional Population levels** - Maintain regional South Australia's share of the states population (18%)
- **Economic disadvantage** - Reduce the percentage of SA's receiving government benefits (excluding age pensions) as their major income source to below the Australian average by 2014

Health in All Policies...The Trojan Horse?

Current Health Lens Analysis Projects

- Water Sustainability
- Broadband Usage
- Overseas Migration
- Transit Orientated Developments
- Education – Low SES schools
- Aboriginal Road Fatalities
- Healthy Weight
- Geographic Region

Health in All Policies...The Trojan Horse?

Sustaining effort

A Mandate

- By Health
- By Government
- Across Government
- Within agencies
- Making the mandate stronger

A Method

A Message

And some madness

Health in All Policies...The Trojan Horse?

Things that helped...

- Use a catalyst (Ilona)
- Start a policy dialogue
- Give it a higher and higher profile...build expectations...create momentum
- Look for early adopters and connect
- Think on your feet...use every opportunity
- Think big start small...but know the connections
- Be your own best critic
- Assume a mandate...but build it as you go

Health in All Policies...The Trojan Horse?

Resources?



Health in All Policies...The Trojan Horse?

Resources?



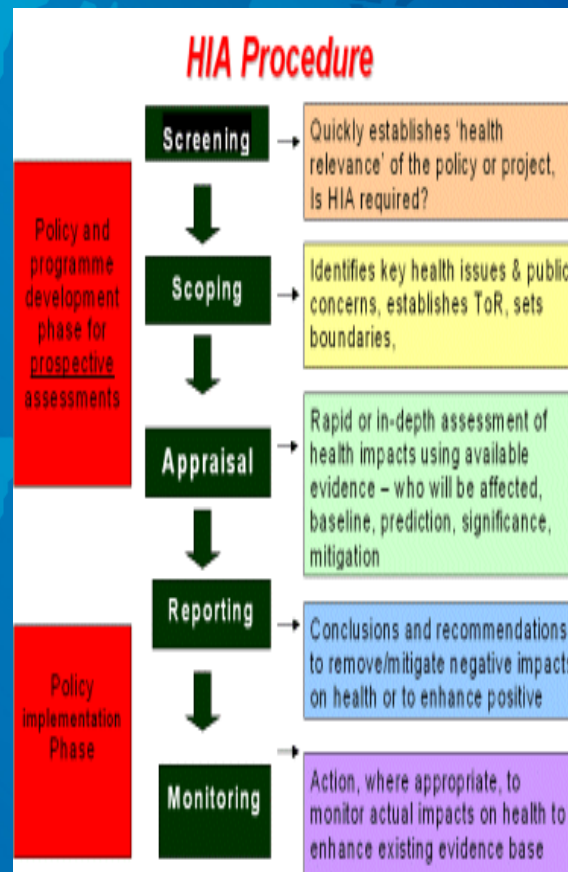
Health in All Policies...The Trojan Horse?

How we do it?

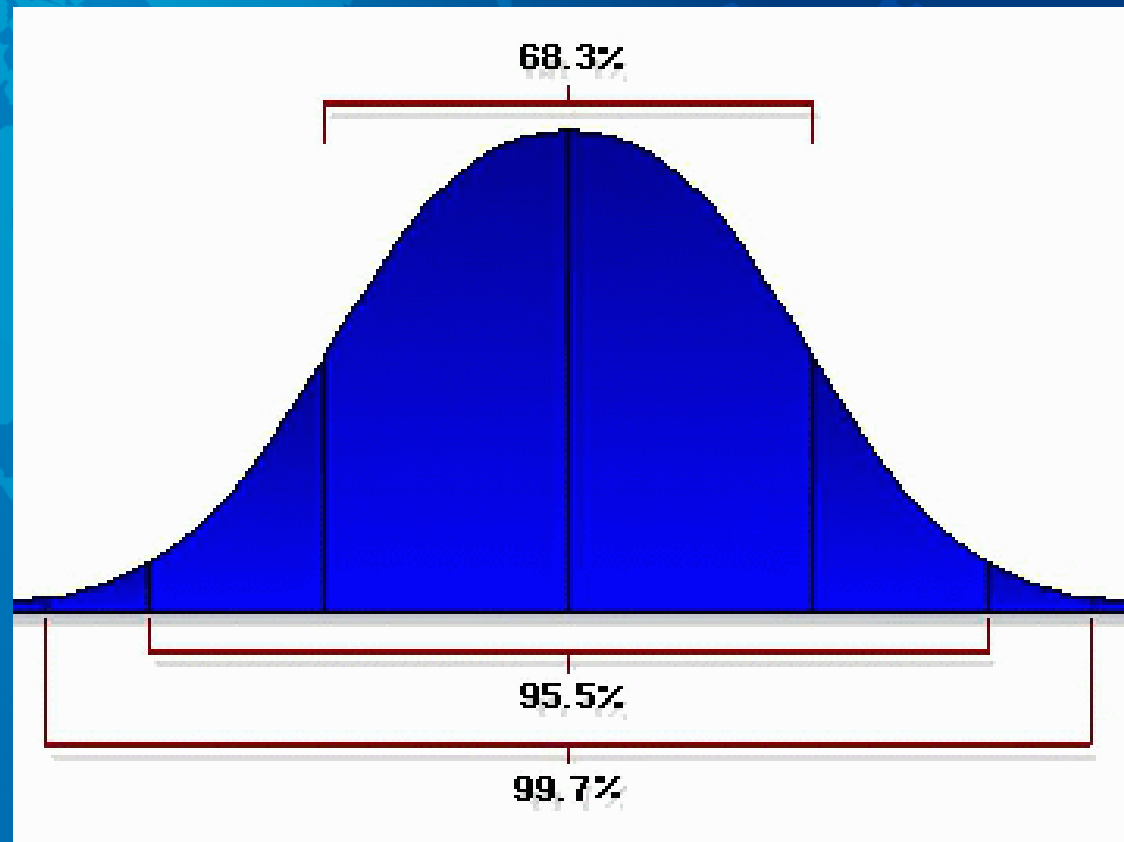


Health in All Policies...The Trojan Horse?

How we do it?

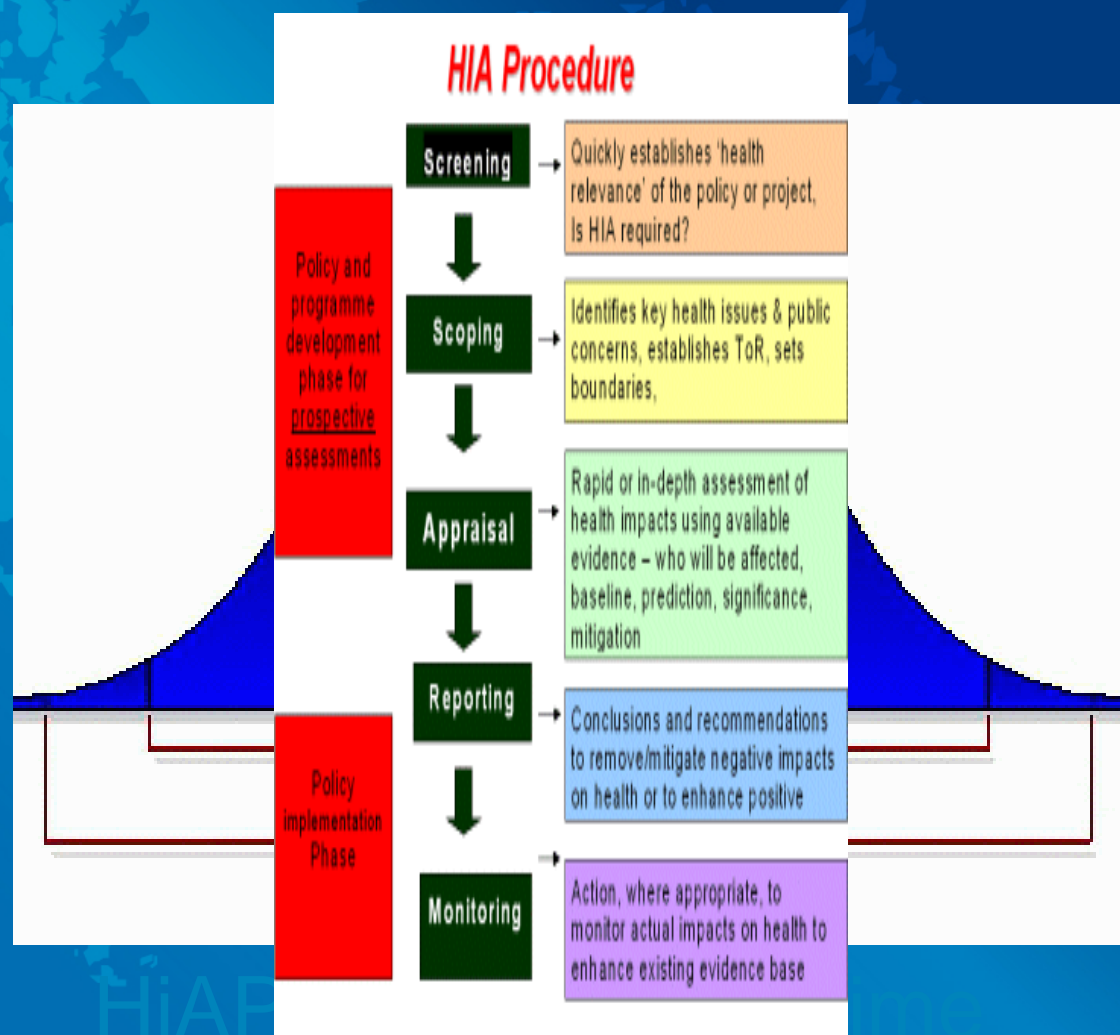


Health in All Policies...The Trojan Horse?

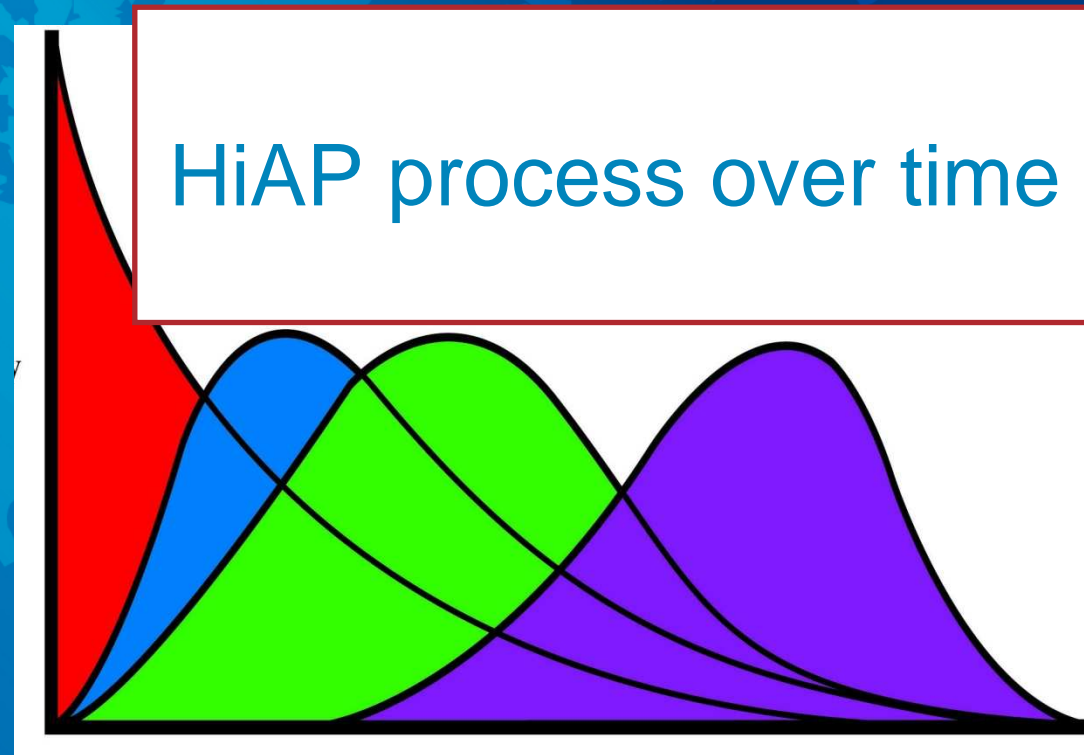


HiAP process over time

Health in All Policies...The Trojan Horse?



Health in All Policies...The Trojan Horse?



engage



Produce



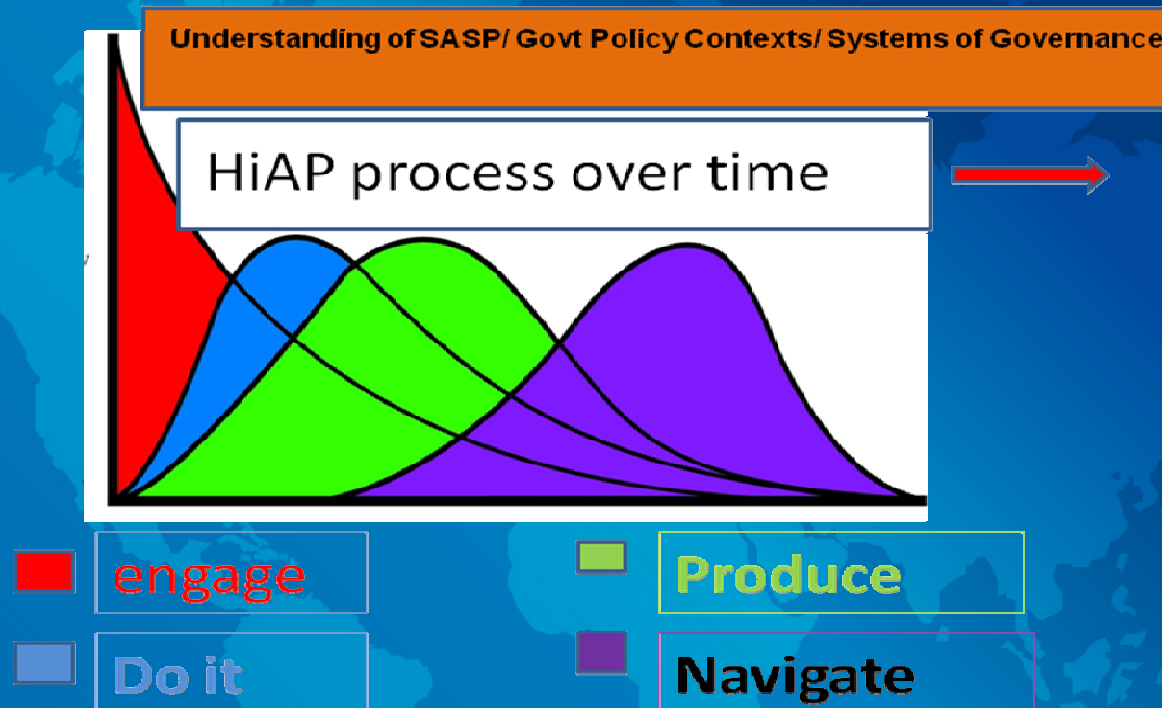
Do it



Navigate

Processes used in South Australia's HiAP approach

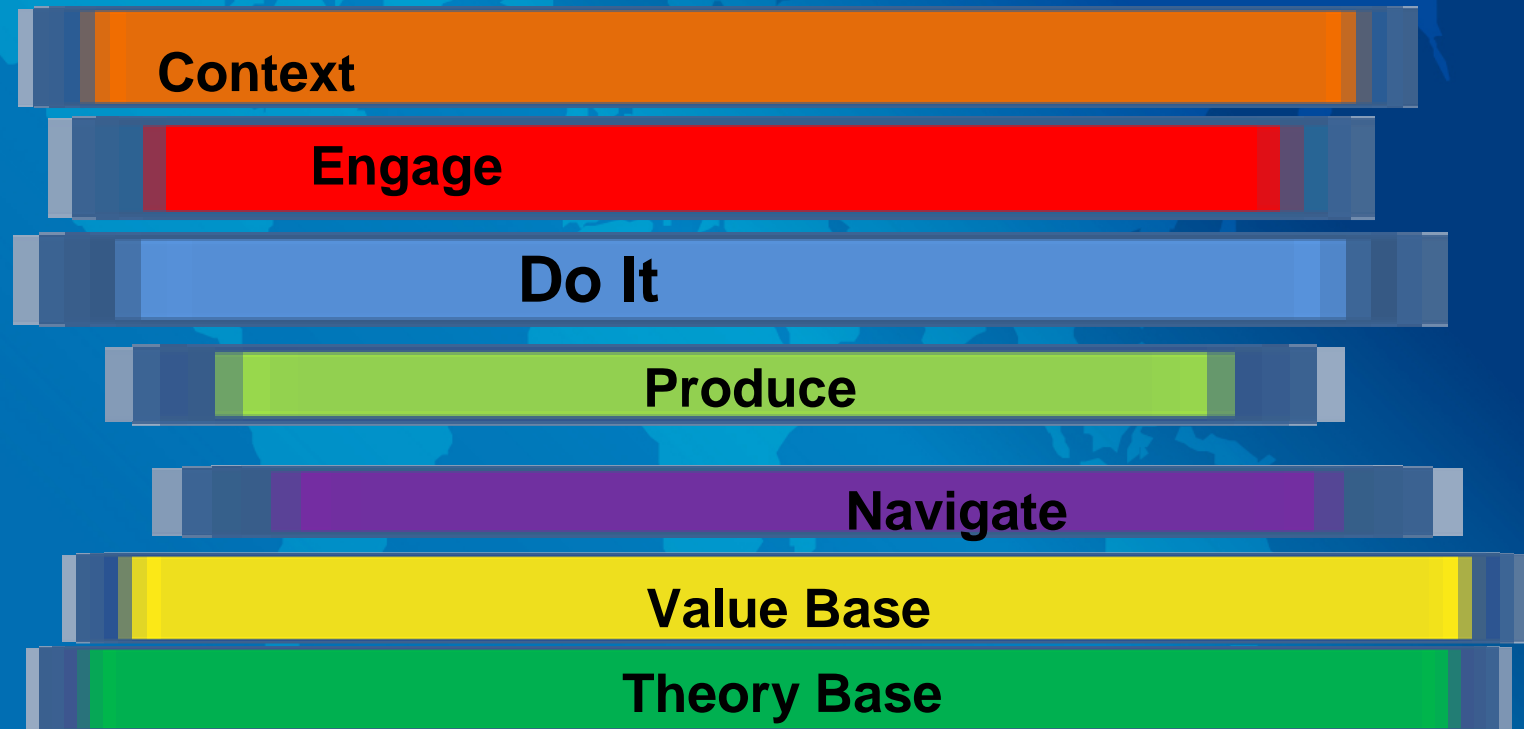
Health in All Policies- The South Australian Model: Elements



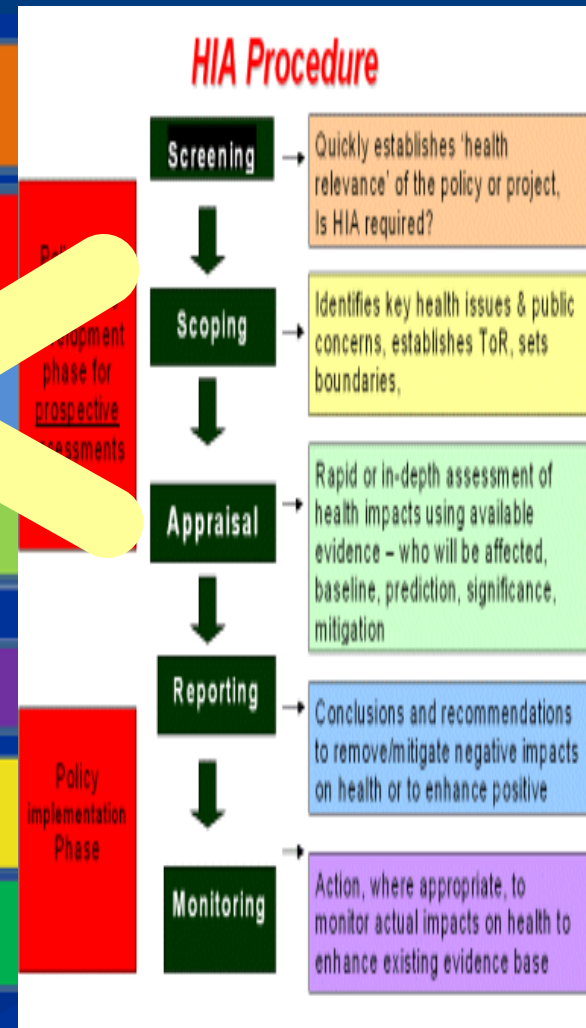
HiAP value base incorporating elements of partnership, collaboration, “win-win” humility...

Theory base incorporating an understanding of the determinants of health and the causes of health inequities

Processes used in South Australia's HiAP approach

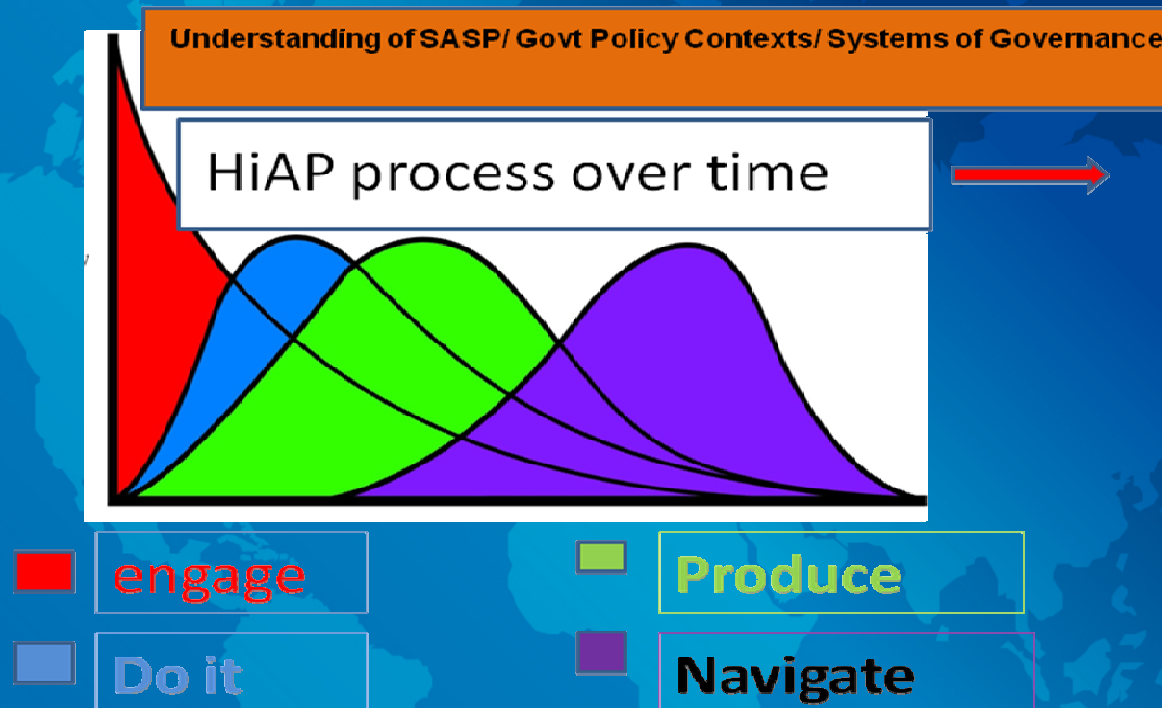


Processes used in South Australia's HiAP approach



Processes used in South Australia's HiAP approach

Health in All Policies- The South Australian Model: Elements



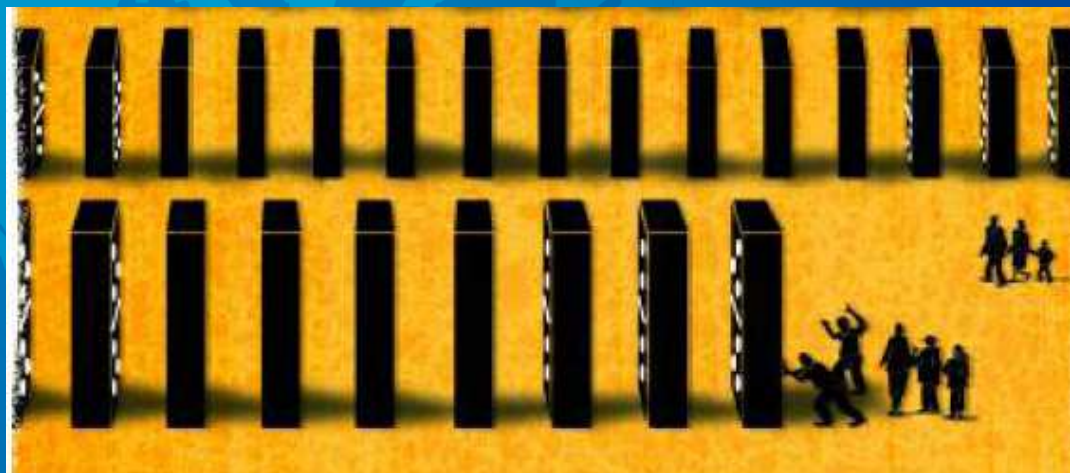
HiAP value base incorporating elements of partnership, collaboration, “win-win” humility...

Theory base incorporating an understanding of the determinants of health and the causes of health inequities

Health in All Policies...The Trojan Horse?

Where to from here...

- The 3-5 year agenda



**Where to from
here...**

**The 3-5 year
agenda**

- **Contribute to national and international developments for HiAP**
- **Institutionalise HiAP processes**
 - **Legislation**
 - **Strategic Review of SASP with HiAP integrated into redrafted plan**
- **Built robust evidence base for HiAP methods with high visibility/credibility across government**
- **Document!**
- **Outcome/Impact evaluation publicly reported**
- **Workforce capacity within Health enhanced to support HiAP**
- **Workforce capacity enhanced across state and local government to support HiAP**
- **Roll-out of HiAP across local government sector achieved**



Health in All Policies...The Trojan Horse?

Principles and Values



Health in All Policies...The Trojan Horse?

Principles

- the value of health
- Health is a human right, a vital resource for everyday life and a key factor of sustainability.
- health is an outcome of a wide range of factors ...a shared responsibility
- all government policies can have positive or negative impacts
- impacts of health determinants are not equally distributed among population groups
- health is central to achieving the objectives of other sectors

Health in All Policies...The Trojan Horse?

Principles

- efforts to improve the health of the population will require sustainable mechanisms
- problems of population health require long term policy and budgetary commitment as well as innovative budgetary approaches
- indicators of success... long term, regular monitoring and intermediate measures of progress... reported
- need to regularly consult with citizens
- Recognizes the potential of partnerships

<https://www.library.health.sa.gov.au/Default.aspx?tabid=210>

Health in All Policies...The Trojan Horse?

Values

Our secret weapon



Health in All Policies...The Trojan Horse?

Values...Our secret
weapon

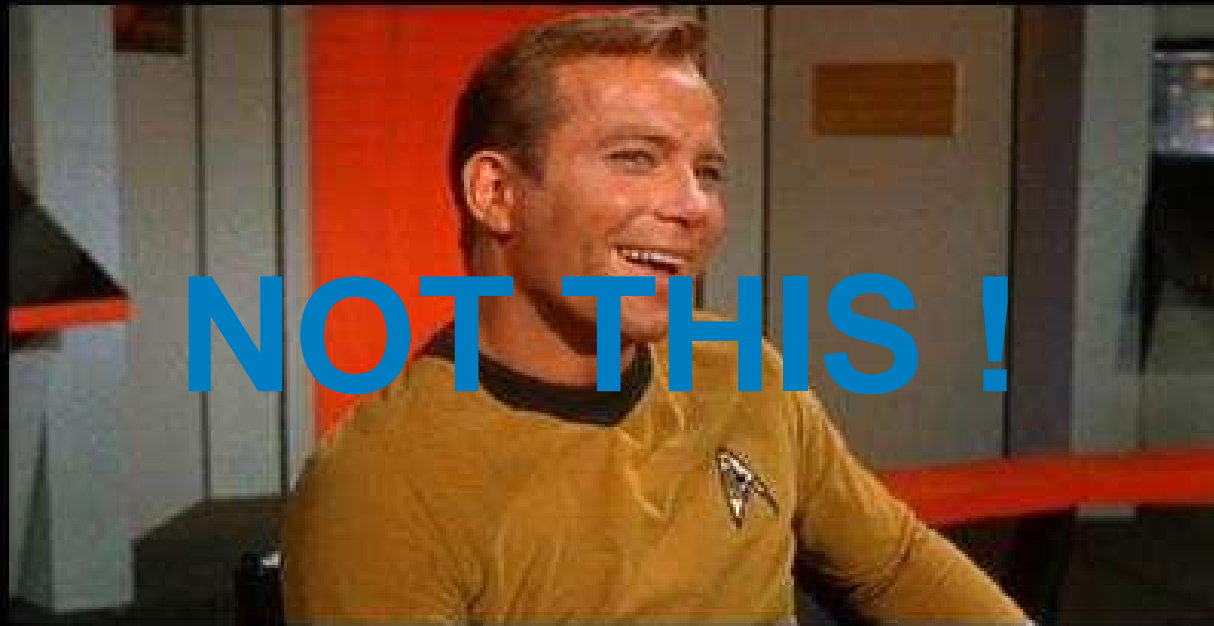


CAPTAIN JAMES T. KIRK

I'M SORRY, I CAN'T HEAR YOU OVER THE
SOUND OF HOW AWESOME I AM.

Health in All Policies...The Trojan Horse?

Values...Our secret
weapon



NOT THIS !

CAPTAIN JAMES T. KIRK

I'M SORRY, I CAN'T HEAR YOU OVER THE
SOUND OF HOW AWESOME I AM.

Health in All Policies...The Trojan Horse?

**Values...Our secret
weapon**

BUT THIS...



Health in All Policies...The Trojan Horse?

**Values...Our secret
weapon**

BUT THIS...

HUMILITY

Health in All Policies...The Trojan Horse?

Values

RESPECT

WILLINGNESS TO LISTEN AND RESPOND

COMMITMENT TO A 2 WAY STREET

HUMILITY

BUILDING

Processes used in South Australia's HiAP approach

- **Recap some points**

- HiAP works on other's territory
- HiAP works within an already accepted overarching strategic framework of government
- HiAP has an across government mandate
- HiAP has central agency leadership and coordination
- HiAP has policy space within Health Department
- HiAP has a focussed team and “brand protection”
- HiAP is working to integrate into ongoing relationships and processes of government decisionmaking
- HiAP gets in early!
- HiAP...persists...persists...persists...

Three Faces of Health in All Policies

- Use a catalyst (Ilona)
- Start a policy dialogue
- Give it a higher and higher profile...build expectations...create momentum
- Look for early adopters and connect
- Think on your feet...use every opportunity
- Think big start small...know the connections
- Be your own best critic

Processes used in South Australia's HiAP approach

- **Message in a bottle from SA**
- It doesn't matter where you start ...just so long as you do.
- You don't need all the answers before you start...they will start coming once you do.
- You (the health actors) have to change first

Processes used in South Australia's HiAP approach

- **Message in a bottle from SA**
- How much evidence is enough?
- Remember how to eat an elephant...don't overreach
- A bias for action
- The Perfect is the Enemy of the Good...

Never forget

OTTAWA CHARTER
FOR HEALTH PROMOTION
1986

Health is a resource for daily living not an end in itself



Never forget

Health in All Policies...The Trojan Horse?



The three faces of HiAP

Three Faces of Health in All Policies

The first face:

Health in All Policies as a Goal of Government

Three Faces of Health in All Policies

The second face:

Health in All Policies as a strategy for change in the health sector and across government

Three Faces of Health in All Policies

The third face:

Health in All Policies as a process for decision support

Three Faces of Health in All Policies



Health in All Policies as a Goal of Government

Health in All Policies as a strategy for change in the health sector and across government

Health in All Policies as a process for decision support

Three Faces of Health in All Policies

Where to Start...

You can't start a journey at its destination...

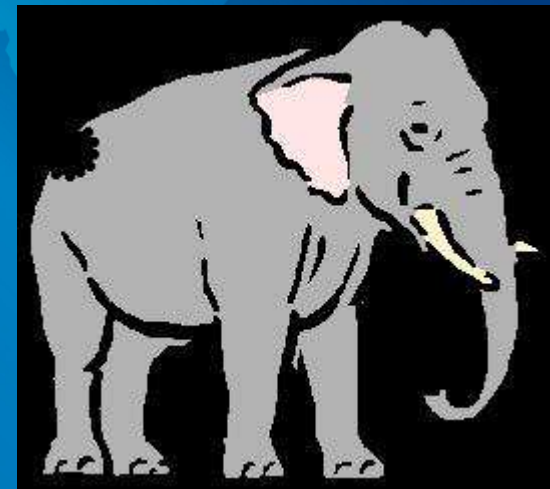
Unless your plan is to go around in circles

Processes used in South Australia's HiAP approach


- Question...
- How do you eat an elephant?

Processes used in South Australia's HiAP approach

- Question...
- How do you eat an elephant?
- One bite at a time...



Three Faces of Health in All Policies



There is
another way
to eat an
elephant...

Three Faces of Health in All Policies

Start with a smaller elephant



Three Faces of Health in All Policies

Start with a smaller elephant



Three Faces of Health in All Policies

TRANSFERABILITY?

- **Processes, techniques and structures will be different**
- **Principles and values...constant**
- **Capacity..."you cant start from here"**

Three Faces of Health in All Policies

TRANSFERABILITY?

- Capacity... "you cant start from here"

Three Faces of Health in All Policies

TRANSFERABILITY?

- Capacity... "you cant start from here"
- Language
- Resources
- Situational factors
- Nation/State building
- International networks of support
- Research agenda
- Repositories of relevant evidence
- EVALUATION

Three Faces of Health in All Policies

**The fourth face of
Health in all Policies**



Three Faces of Health in All Policies

**The fourth face of
Health in all Policies
Health in All Policies...**

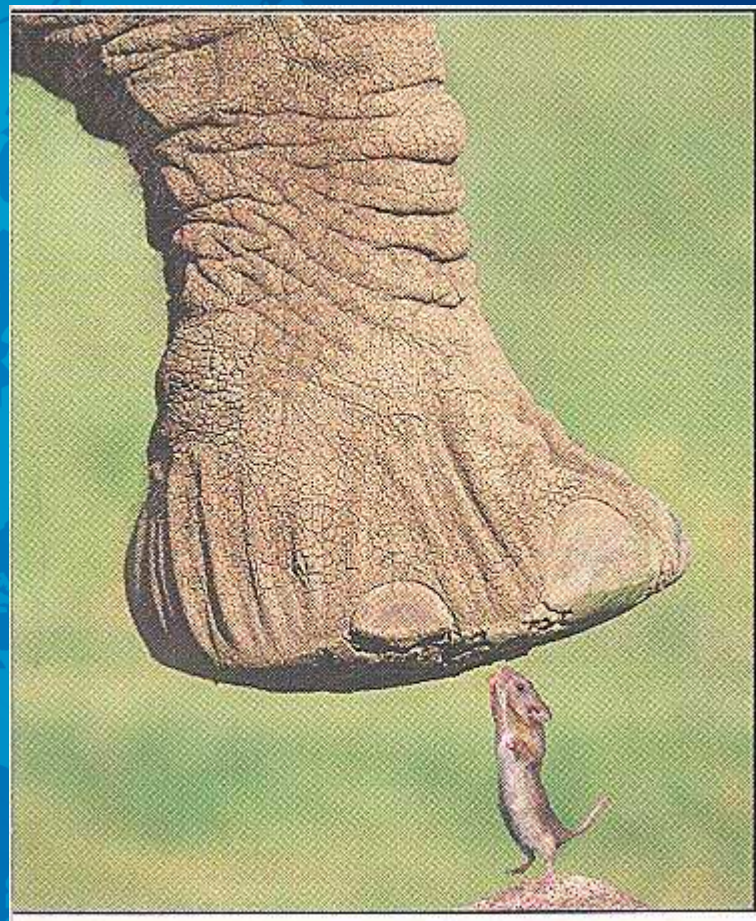
As a slogan

Three Faces of Health in All Policies

The fourth face of Health in all Policies Health in All Policies...

As a slogan





Health in All Policies the SA Approach

- What kind of policy is "Health in All Policies"



The tale of the sun and the north wind





Health in All Policies



Health in All Policies the sunshine policy



- 
- **Where to next.....**

- 
- Where to next.....
 - Flaubert....
 - *“Faire et se Taire”*
 - Or

- 
- Where to next.....
 - Flaubert....
 - *“Faire et se Taire”*
 - Or
 - Shut up and get on with it!



Or

*(if your tastes don't run to
dead French Philosophers)*

A Little Less Conversation a Little More Action



Health in All Policies...The Trojan Horse?

- What would failure look like?
- What are the necessary conditions for failure of HiAP in your context...and what steps may be taken to counter them?