ARC Healthy Public Policy Project
Policy Translation Forum

Maximising the value of public policy for population well-being: How the urban planning, energy, natural environment and justice sectors can contribute

26 June 2019 – Adelaide

#healthypolicy

SESSION 1
Introduction and Overview

Session Chair:
Professor John Spoehr
Pro-Vice Chancellor, Research Impact

Welcome to Country

Uncle Lewis Yerloburka O'Brien, AO

Opening address

The Honourable Chris Picton MP

Shadow Minister for Health & Wellbeing

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ARC Healthy Public Policy Project Overview and methods

Fran Baum AO, Southgate Institute for Health, Society and Equity and ARC project team

@baumfran

#healthypolicy

Outline

- What is healthy public policy?
- ARC project aims
- ARC Methods
- Overview of Forum program

What is Healthy Public Policy?

"Healthy public policy is characterized by an explicit concern for health and equity in all areas of policy and by an accountability for health impact".

WHO (1988) Adelaide Recommendations

Aim of healthy public policy

At the Second International Health Promotion Conference in Adelaide in 1988 the Director-General of the World Health Organization explained the aim of healthy public policy as creating preconditions for healthy living through:

- closing health gaps between social groups and nations
- broadening the choices of people to make the healthier choices the easier and most possible
- ensuring supportive social environments.

Healthy public policy was described by Nancy Milio as "ecological in perspective, multi-sectoral in scope and collaborative and participatory in strategy".

From MacDougall, C & de Leeuw, E
Healthy Public Policy in Keleher, H, MacDougall, C & Murphy, B
(2007) *Understanding Health Promotion*. Melbourne: Oxford University Press

Health in All Policies

Health in All Policies is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts, in order to improve population health and health equity.

WHO (2013) Health in All Policies – Framework for Country Action

- The South Australian Health in All Policies initiative is an approach to working across government to better achieve public policy outcomes and deliver co-benefits for agencies involved including to improve population health and wellbeing.

- Actions to address complex, multi-faceted 'wicked problems' such as preventable chronic disease and health care expenditure require joined-up policy responses.

Implementing
**Health in
All Policies**
Adelaide 2010

Edited by
Professor Ilona Kickbusch and Dr Kevin Buckett

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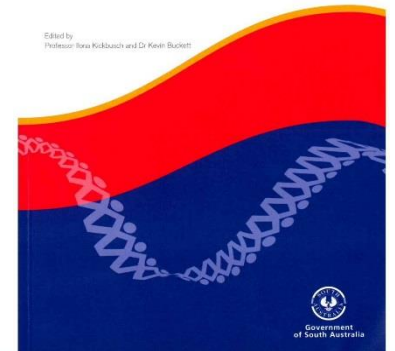
Government
of South Australia

The main determinants of health

* Dalgren and Whitehead (1991)*

The sustainable development goals (SDGs)

1 No poverty
2 Zero hunger
3 Good health and well-being
4 Quality education
5 Gender equality

6 Clean water and sanitation
7 Affordable and clean energy
8 Decent work and economic growth
9 Industry, innovation and infrastructure
10 Reduced inequality
11 Sustainable cities and communities

12 Responsible consumption and production
13 Climate action
14 Life below water
15 Life on land
16 Peace and justice strong institutions
17 Partnerships to achieve the goal

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Governing for health

"Governing for health is about designing, crafting, drafting, and implementing policies that will result in healthy, equitable, and sustainable societies in which well-being is enhanced. These policies need to be present in every sector. They need to both direct government actions toward well-being and provide a regulatory framework for the private sector" (p.13).

GOVERNING FOR HEALTH

Advancing Health and Equity through Policy and Advocacy

FRAN BAUM

OXFORD
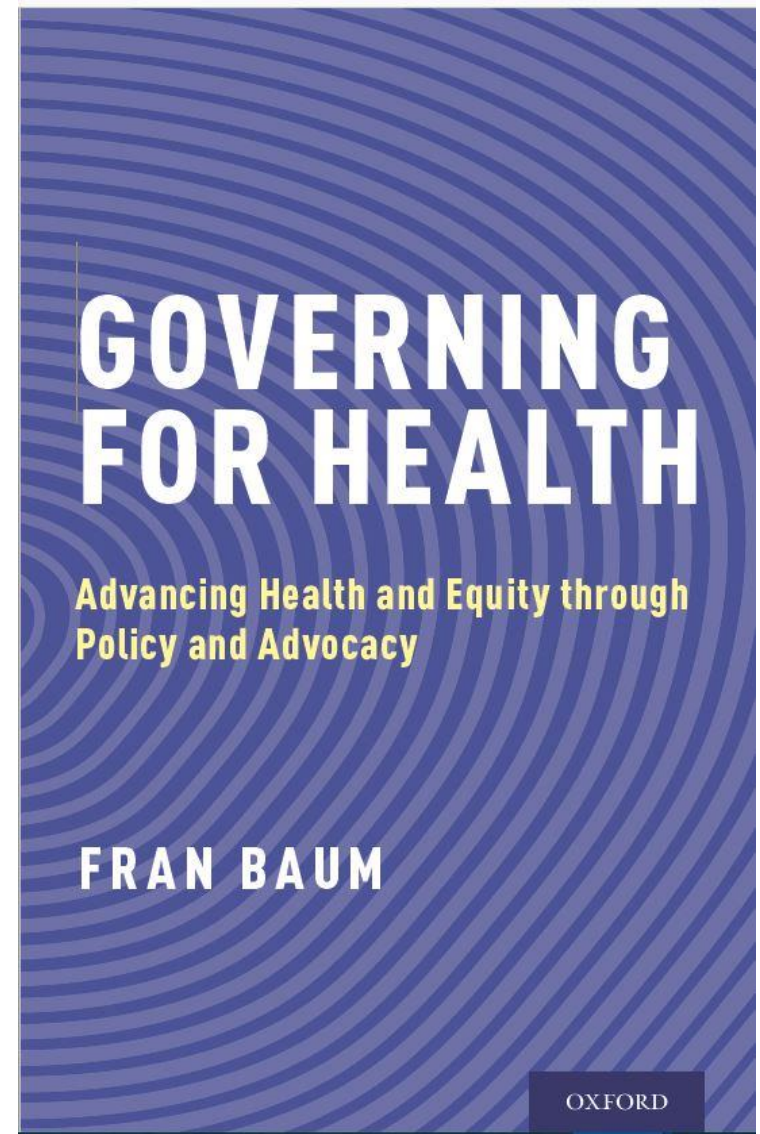
Overview of the ARC project

Our Research Team

Fran Baum

Colin MacDougall

Dora Marinova

Patrick Harris

Dennis McDermott

Matthew Fisher

Margaret Whitehead

Peter Sainsbury

Carmel Williams

Lester Wright

Anthea Krieg

Tim Mares (Chair of PAG)

Toni Delany-Crowe

Michael McGreevy

Emily Riley

Project Policy Advisory Group members

- Tim Mares [Chair] (formerly South Australian Department for Industry and Skills)
- Ian Lowe (Griffith University)
- John Rawnsley (North Australian Aboriginal Justice Agency)
- Alex Gaut (Nature Wellbeing Australia)
- Amanda Bray (Fairfield City Council)
- Carmel Williams (SA Health)
- Peter Burn (Australian Industry Group)
- Mark Henley (Uniting Communities)
- Luke Grant (Corrective Services NSW)
- Lyndall Johnson (NSW Department of Transport)
- Juliet Grant (City Plan Strategy & Development)
- Leigh Garrett (OARS Community Transitions)
- Jennie Fluin (SA Dept Environment and Water)
- Sue Crafter (prev. Common Ground Adelaide)
- Heather Smith (Energy consultant)
- ARC Research Team

Overview of ARC project

What: Examining policy making in Justice, Energy, Environment and Urban Planning sectors

Why: In order to understand how policies contribute to health and health equity

Why is it important?

- To improve population well-being and sustainability in all sectors
- To increase understanding of how to govern for health
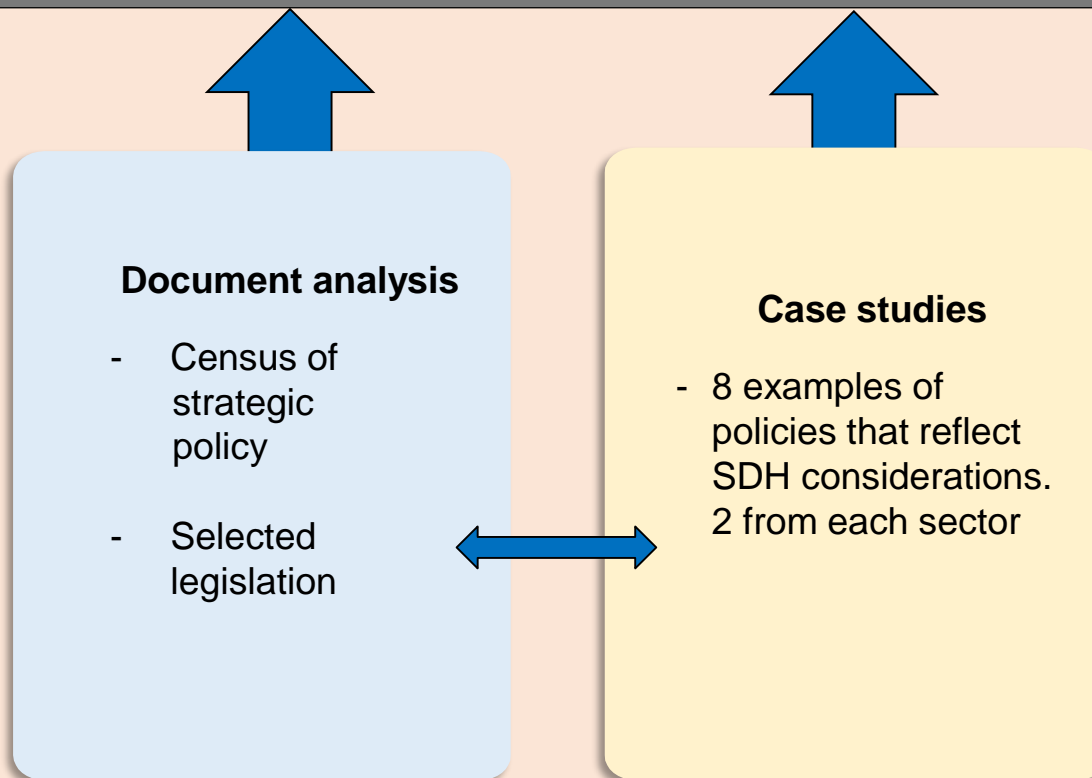
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Sectors

1. **Justice** – policy, legislation and annual reports on Attorney General functions, courts, policing and corrections
2. **Energy** – policy and legislation on energy generation, distribution and retailing
3. **Environment** – policy and legislation on environmental protection, natural resources, fishing, waste, and land management
4. **Urban Planning** – policy and legislation on planning, infrastructure, transport and essential services

Overview of research methods

Australian Research Council funded project 2016-2019

Understanding how the policies of Australian governments can promote health through action on the social determinants of health & health equity outside of the health sector

4 sectors: Justice, Energy, Environment, Urban Planning

Document analysis

- Census of strategic policy

- Selected legislation

Case studies

- 8 examples of policies that reflect SDH considerations. 2 from each sector

Open access protocol paper available:
https://bmjopen.bmj.com/content/8/9/e025358

Open access   Protocol

BMJ Open Qualitative protocol for understanding the contribution of Australian policy in the urban planning, justice, energy and environment sectors to promoting health and health equity

Fran Baum,[1] Toni Delany-Crowe,[1] Matthew Fisher,[1] Colin MacDougall,[2] Patrick Harris,[3] Dennis McDermott,[4] Dora Marinova[5]

ABSTRACT
Introduction A well-established body of literature demonstrates that health and equity are strongly influenced by the consequences of governments' policy and resultant actions (or inactions) outside the health sector. Consequently, the United Nations, and its agency the WHO, have called for national leadership and whole-of-government action to understand and address the health impacts of policies in *all* sectors. This research responds to that call by investigating how policymaking in four sectors—urban planning, justice, energy and environment—may influence the social determinants of health and health equity (SDH/HE).
Methods and analysis The research design is informed by a critical qualitative approach. Three successive stages are included in the design. The first involves analysing all strategic policy documents and selected legislative documents from the four sectors (n=583). The document analysis is based on a coding framework developed to identify alignment between the documents and the SDH/HE. Two policies that demonstrate good practice in regard to SDH/HE will be selected from each sector during the

Strengths and limitations of this study

► A census of all relevant policies will be analysed, allowing a comprehensive view of the policy landscape across and within the four sectors.
► Data collection is bounded by set time periods so will not include new documents as they are released.
► The embedded case studies focus on examples of good practice, facilitating learning about how strong policy can be developed to improve health and equity.
► The design of the study will not allow direct evaluation of the population health impacts of policy interventions, instead causal links between policy implementation and improvements in health will be theorised.

setbacks, including the HIV/AIDS crisis in Africa, people are generally living much

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Phase 1 (2016, 2017 & 2018): Document analysis
Assessing policy orientation to SDH/HE in the selected policy sectors,
across Federal and State/Territory governments.
Identify examples of good practice on SDH/HE

Phase 2 (2017 & 2018): Case studies
Case studies of two policies identified as good
practice on SDH/HE in each of the four sectors
(8 in total)

Phase 3 (2017, 2018 & 2019): Theoretical integration and policy implications

Synthesis of findings and application of theory relevant to each sector to
understand political or institutional facilitators or barriers to action on
SDH/HE, within and between policy sectors

Document analysis

- **Justice: 165 documents**

- **Energy: 132 documents**

- **Environment: 178 documents**

- **Urban Planning: 108 documents**

Document analysis: Social determinants coded

- Education
- Food
- Health systems
- Housing
- Distribution of income
- Stigma/discrimination
- Social relationships
- Social exclusion
- Transport

- Employment
- Welfare system
- Land/country
- Gender
- Safety
- Culture
- Open space
- Natural environment
- Built environment
- Climate change

Document analysis

|	
Problem framing (Bacchi)	• What is the problem? • What response is considered appropriate? • How does the sector understand the relationships between their work, well-being, health & equity?
Are the values stated in the document consistent/ neutral/inconsistent with:	• Health/well-being as a value • health equity as a value
Are the goals, objectives & strategies stated in the document consistent/ neutral/inconsistent with:	• improved health/well-being as a goal • improved health equity as a goal
Is the evidence that is used in the document to make a case for action consistent/ neutral/inconsistent with:	• evidence on social determinants of health/well-being • evidence on health inequities

Case studies

- 2 policies from each sector that provided an example of how core sectoral business could be approached in ways that supported SDH/HE

- Semi-structured interviews with people involved in developing each policy: public servants, NGOs, industry

JUSTICE
Interviews n=6
- ACT Property Crime Prevention Strategy
- Vic Mingu Gadhaba 'Beginning Together' Koori Inclusion Plan
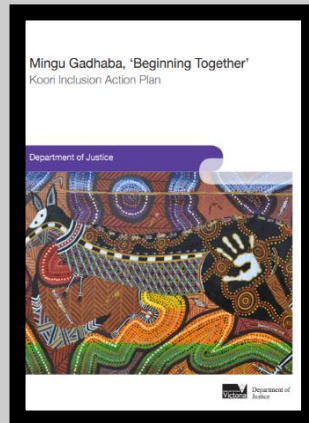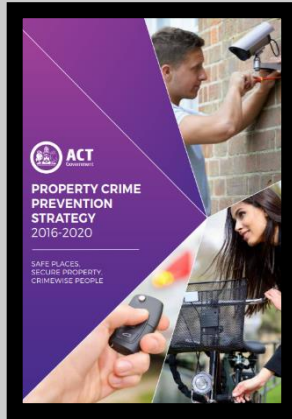
ENERGY
Interviews n=11
- SA Our Energy Plan
- NSW Renewable Energy Plan
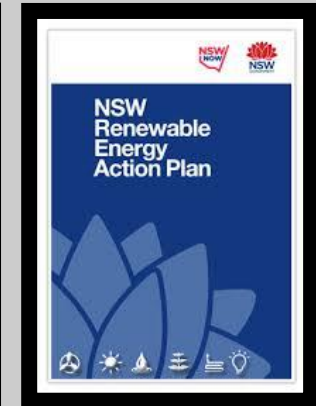
ENVIRONMENT
Interviews n=11
- Parks Victoria Shaping our Future
- ACT Climate Change Adaptation Strategy
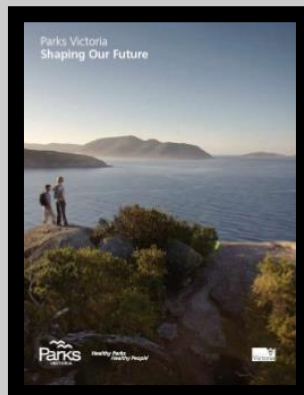
URBAN PLANNING
Interviews n=21
- SA 30 Year Plan for Greater Adelaide
- NSW Long Term Transport Master Plan
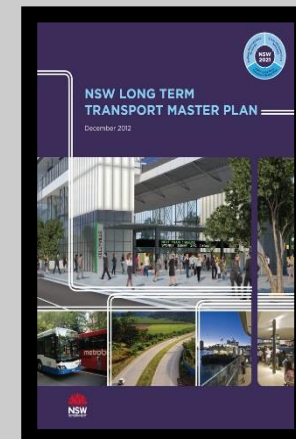
Policy Implications: 3 briefing papers developed to date

1. Promoting well-being and health equity across policy sectors: Lessons from urban planning, environment, energy and justice

2. Healthy Public Policy briefing paper on sectoral co-benefits. Policy making to deliver co-benefits: Why it is important for policies in all sectors to promote population well-being and health equity, and how this can be achieved

3. Action in the energy sector to promote well-being and health equity: Shared goals for a sustainable future

Drafts available for comment today

Translating our research: Rapid summaries for busy policy actors

https://www.flinders.edu.au/healthequity-southgate

Overview of the forum

Mix of presentations on:

- Justice
- Energy
- Environment
- Urban Planning

Each followed by a panel discussion with policy actors seeking broader comment on how each sector affects health

AMBITIOUS

Questions and feedback

Twitter: @baumfran
#healthypolicy

INSPIRING

Co-benefits
Why it is important to understand the drivers of other sectors

ARC Policy Forum

June 26 2019

Carmel Williams
Manager – Health Determinants and Policy
Prevention and Population Health Branch
Department for Health and Wellbeing

Social determinants of health

- ✓ Social
- ✓ Economic
- ✓ Behavioural
- ✓ Environmental

The Challenge

- The agencies who are able to take action on the determinants of health don't (always) know how to and don't (always) see it as their business

- In the Health sector we know we need to work inter-sectorally, but we are not always that good at it . . .

The Challenge

Thallon silos, Queensland

Reframing the Agenda

- We don't try to pull other agencies onto health's agenda or priorities.

- We don't try to turn other sectors of government into health agencies.

- We work with them on their issues and their priorities and help them achieve their policy goals in ways that protect and promote health.

WHAT IS HEALTH IN ALL POLICIES? World Health Organization

Good health requires policies that actively support health

It requires different sectors working together, for example:

HEALTH · TRANSPORT · HOUSING · WORK · NUTRITION · WATER & SANITATION

TO ENSURE ALL PEOPLE HAVE EQUAL OPPORTUNITIES TO ACHIEVE THE HIGHEST LEVEL OF HEALTH

Health in All Policies

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

A Health in All Policies approach to Healthy Public Policy

Creating Healthy Public Policy

Four critical factors for success:

- Good governance for health
- Development of strong and sound partnerships
- Dedicated capacity and resources
- Use of evidence and evaluation

Good Governance for Healthy Public Policy

- Structures and systems that support action across sectors

- Provide clear vision and leadership

- Creates the political environment where people at all levels have the authority to problem solve and harness opportunities

Sound and Strong Partnerships

- Relationships built upon trust
- Clarity of purpose
- Collaborating early in the process
- Using co-design and co-benefit approaches

Context - Understanding Partners

- Systematically gather and analyse qualitative information about stakeholders
  - Define key stakeholders
  - Understanding where they stand – interests, position, influencing factors
  - Prioritise stakeholders
  - Mapping
  - Strategies for engagement
  - Strategies to mitigate risks
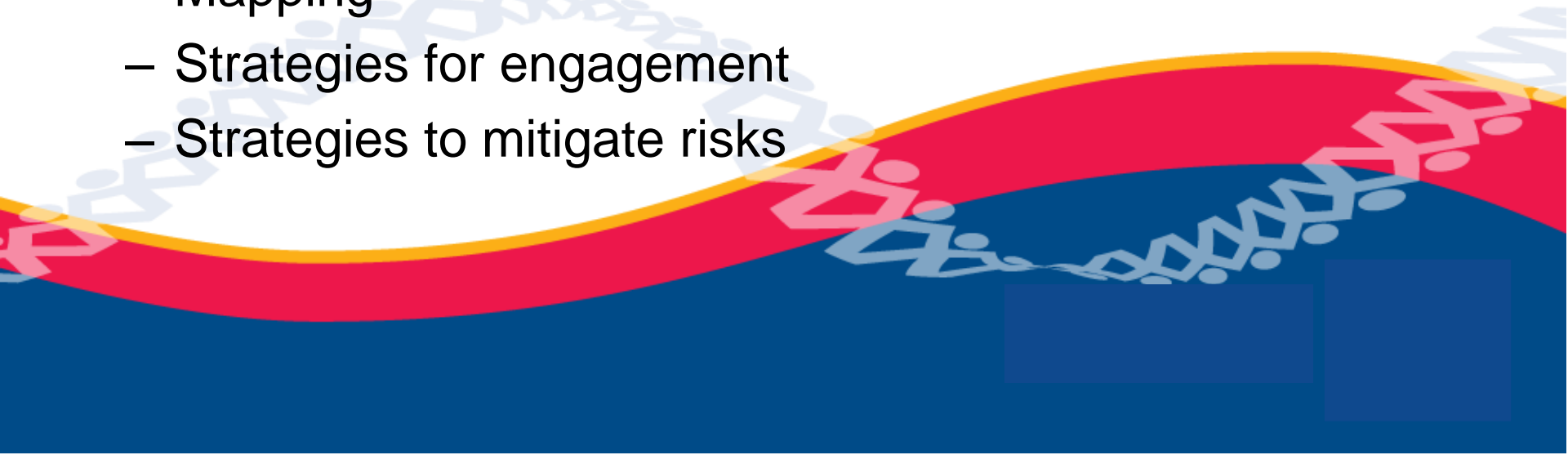
Stakeholder Analysis Matrix
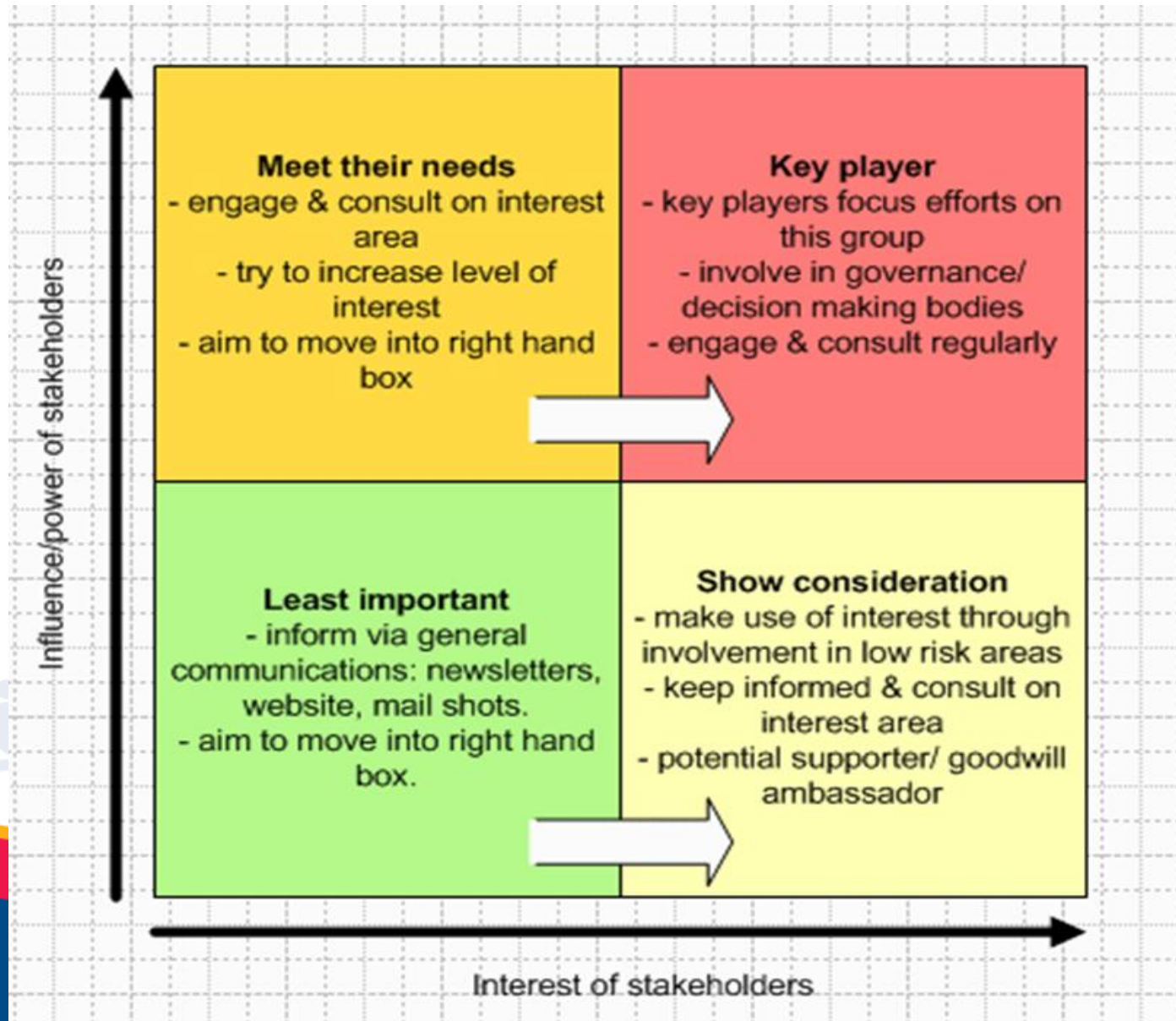
Negotiation for Healthy Public Policy

Multi-sectoral approaches such as Health in All Policies require

- a negotiation strategy that looks for win-win (co-benefits) or Value Added Approach.

- Not zero-sum-games with win-lose outcomes.

Negotiation Outcomes

CONTINUUM OF INTER-GOVERNMENTAL INTEGRATION

Relationship Description	COEXISTENCE	COMMUNICATION	COOPERATION	CO-ORDINATION	COLLABORATION
Relationship Formality	**Informal**				**Formal**
Accountability Relationship	N.A.	NO SURPRISES	NOT GET INTHE WAY & HELP WHERE POSSIBLE	ACTIVELY ALIGN ACTIVITIES	ACTIVIELY ENSURE GOAL ACHIEVEMENT
Relationship Characteristics	**SELF RELIANCE** No Formal Communication Policies & services developed in isolation Autonomy emphasised May have common concerns	**SHARED INFORMATION** Informal meetings e.g. web exchanges Irregular exchange of practices Autonomy Retained Getting together on common interests	**SHARED RESOURCES** Formal e.g. Face to Face meetings Regular exchange of staff, info. practices Autonomy attenuated Getting together on common projects	**SHARED WORK** Sharing on a regular Formal Basis Regular exchanges & specific undertakings Autonomy further attenuated Working together on shared projects	**SHARED RESPONSIBILITY** Formal partnership Shared polices & or practices Autonomy further attenuated still Working together to common goals

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

Features of the SA HiAP model 2017

Governance

Practices and Processes

Outcomes

Central Government Mandate:
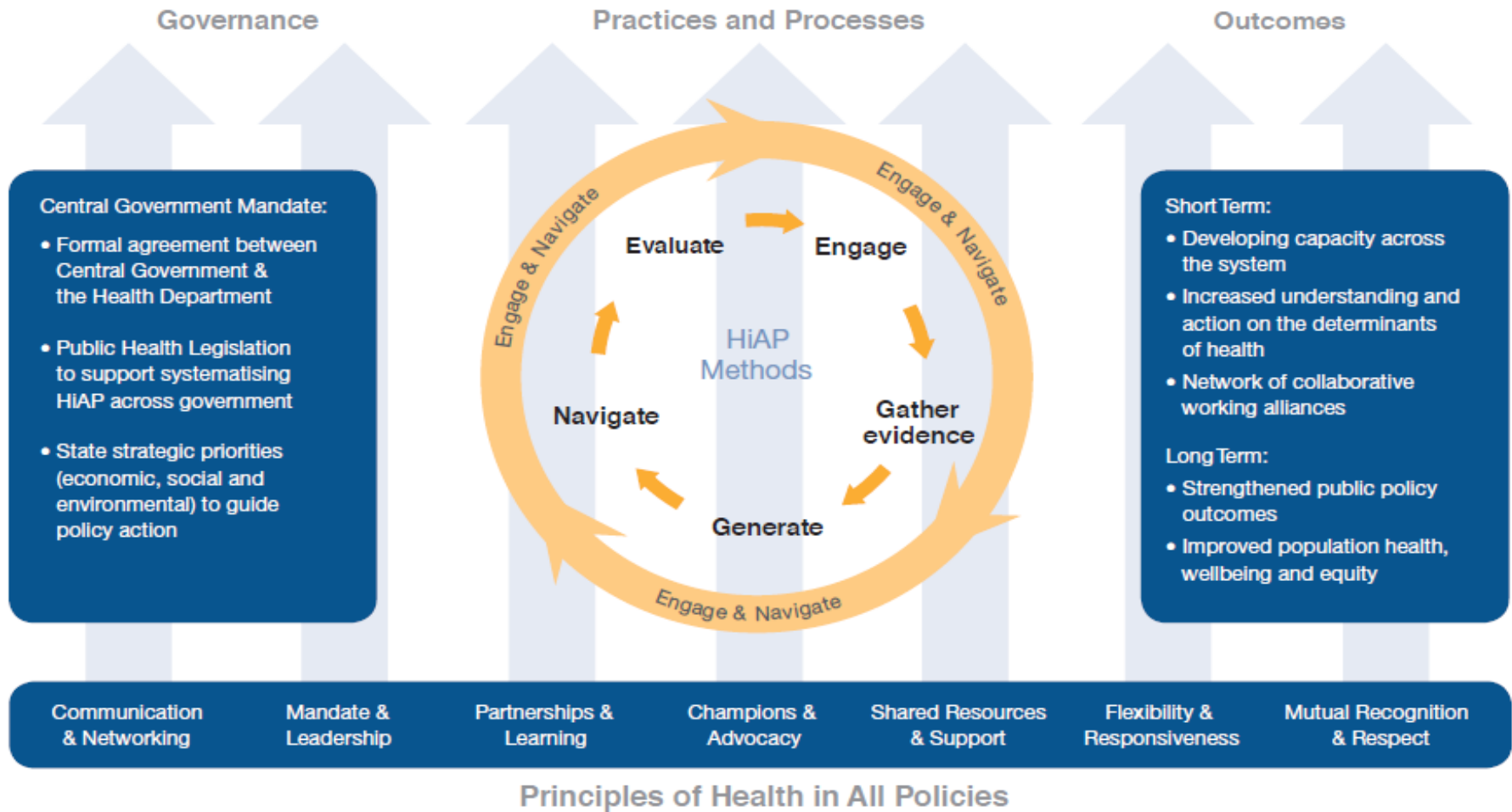- Formal agreement between Central Government & the Health Department
- Public Health Legislation to support systematising HiAP across government
- State strategic priorities (economic, social and environmental) to guide policy action

Engage & Navigate

Engage & Navigate

Evaluate

Engage

HiAP Methods

Navigate

Gather evidence

Generate

Engage & Navigate

Short Term:
- Developing capacity across the system
- Increased understanding and action on the determinants of health
- Network of collaborative working alliances

Long Term:
- Strengthened public policy outcomes
- Improved population health, wellbeing and equity

| Communication & Networking | Mandate & Leadership | Partnerships & Learning | Champions & Advocacy | Shared Resources & Support | Flexibility & Responsiveness | Mutual Recognition & Respect |

Principles of Health in All Policies

Questions?

For further information:

Health Determinants and Policy

Prevention and Population Health

Department for Health and Wellbeing

hiap@health.sa.gov.au

https://www.sahealth.sa.gov.au/healthinallpolicies

Thank you!

MORNING TEA

SESSION 2
Justice Sector Policy

Session Chair:

Professor Fran Baum
Director
Southgate Institute for Health, Society & Equity

Background: *Why study justice sector policy from a SDH/HE perspective?*

- Crime occurs in a social context, & is more likely when support systems do not work effectively

- Excess incarceration is a social determinant of health and a vital issue for health promotion

- This is especially true for Indigenous peoples in colonised systems of (in)justice

Background

- Certain communities have ↑ justice system contact
    - Indigenous Australians: imprisonment 13x more likely
    - Insecure accommodation month before prison: 1 in 4 prisoners
    - Unemployed: 1 in 2
    - Not finished secondary school: 2 in 3 (AIHW, 2017)

- Addressing SDH/HE therefore vital to ↓ incarceration / promote health

Background

'Tough on crime' policies = excess incarceration for minor offences - exacerbates existing disadvantage

When governed poorly can reinforce & perpetuate social disadvantage, making crime more likely

JUSTICE SYSTEMS
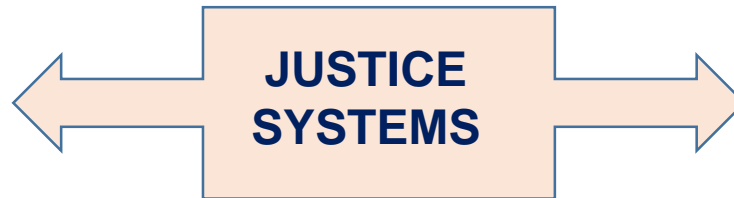
When governed effectively can improve life circumstances & prevent crime

Document analysis: Key themes (1/3)

- SDs of incarceration/crime discussed in problem-framing sections
- Discourse then drifts largely to individualistic focus in behaviour change intervention strategies
- Focus on assessment of individual problems/pathologies
- Few relevant post-release strategies &/or intersectoral action to keep those in vulnerable situations from *entering/re-entering* the system

What drives this disconnect?

Document analysis: Key themes (2/3)

- Primary focus on protecting public & staff safety
  - Offender rehabilitation & support only secondary

- System expansion prioritised over alternatives to incarceration

- Weak policy commitment to primary prevention
  - for example: Justice reinvestment

- Crime prevention / intersectoral action not a KPI in plans ("we treasure what we measure")

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Document analysis: Key themes (3/3)

Discussion of Aboriginal & Torres Strait Islander people

- Acknowledgement of SDOH in making imprisonment

more likely but individualistic interventions that deny impacts of colonisation, trauma, discrimination & disadvantage

- Constructed as 'risky' rather than as 'at risk'

Implications of the dominant policy framings

- Even though SDOH recognised, the policy frame and action strategy is the dysfunctional/misbehaving individual

- Foregrounding of 'risk' legitimises intervention

- Given the framing, the 'appropriate' remedies are to fix the individual – by punishment and rehabilitation

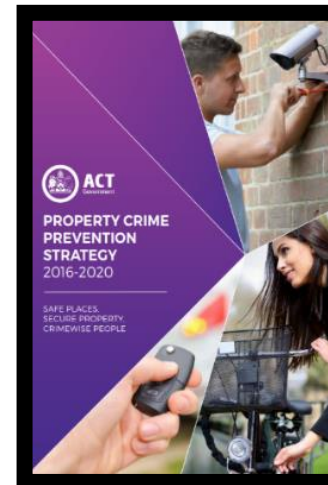- This marginalises consideration of SDOH as causes of crime and incarceration

Case Studies:

What supports policy that addresses SDOH?

Interviews (n=6)

O

ACT Property Crime Prevention Strategy

- The ACT "citizen-centric model" (Policy officer, Justice Directorate) stimulated our policy focus. Property crime issue of concern for personal safety (mental/physical safety and financial impacts)

- Current Attorney General and Minister are advocates for restorative justice and justice reinvestment

- ACT cabinet applies a **whole of Government** approach to decision making … involves close, between-minister, collaboration and necessitates cross-directorate work

ACT Property Crime Prevention Strategy

"Every element of what we do is an across-Government piece of work, there's … groups of directors general who have like policy areas or issues getting together and working through strategies to address them. So ACT Justice is lined up with Community Services, Health and Education to link up our policies. Lots of policies and projects are driven out of that at a very senior level, so it really helps when you've got that drive from Government and your senior bureaucrats as well." (Manager, Justice Directorate)

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ACT Property Crime Prevention Strategy

- Stable ACT Government has provided policy continuity … consistent directions pursued in Justice … despite change of Ministers. This has supported sustained inter-sectoral action and allowed innovation (e.g. Justice Reinvestment

- ACT pub. serv. culture of taking "managed risks". Fosters innovation: *so long as you back up ideas with rationale, and ensure you do program evaluations to be able to show they are working* (Manager, Justice Directorate)
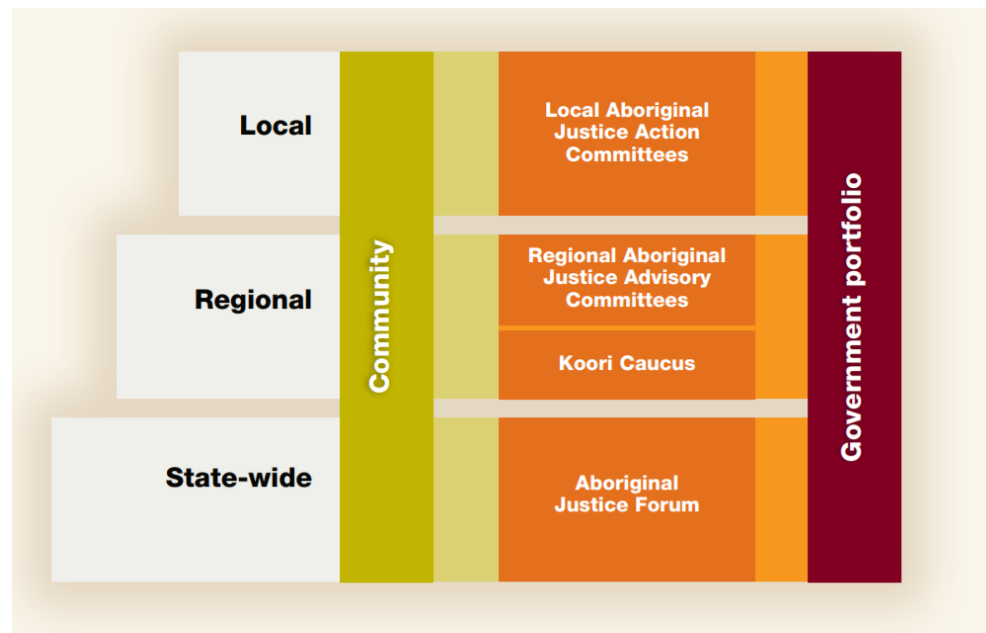
Victoria: Mingu Gadhaba

- The Plan was developed following 18 years of associated work in Victoria (this mirrors a dominant theme from other sectors about the **value of sustained work**)

- During the 18 years **supportive infrastructure** has been embedded in the justice system to support Koori Inclusion

Mingu Gadhaba stems from the Victorian Aboriginal Justice Agreement … launched in 2000, and … in early, maybe, 2011 there was a Victorian Indigenous Inclusion Framework that was developed by, then, Aboriginal Affairs Victoria, which really put the mandate on the whole of the Victorian public service to really think deeply about inclusion within the respective departmental portfolios." (Justice Dept, policy officer)

Victoria Mingu Gadhaba

Mingu Gadhaba is supported by structures and processes that link Koori community members directly to priority setting, decision making and budgeting in Victoria

Victoria Mingu Gadhaba

- Koori Inclusion Unit, embedded within the Victorian Justice Department, led development of the Plan and assisted in ensuring that Koori rights and needs remain on the policy making agenda

- Emphasis on strengths rather than deficits facilitated broadened understandings, shifting focus from incarceration and policing to support strategies and facilitating a shift in sector discourse to include empowerment

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Victoria Mingu Gadhaba

Koori Inclusion Unit has prioritised forming relationships across sectors, particularly with the mental health sector.

We have a very strong cross-government relationship with Health, Human Services, Police, Courts, and all of those sorts of things. There was a Koori prison and mental health study done a few years ago, and it showed shocking results …75% of women have an undiagnosed mental health condition, and very bad results also for our male population, so … we've tried to take the view that when we're working with our community we have to take a holistic approach. If someone walks in the door to pay fines, for instance, there'll be a look at what else is happening: "How did you get those fines?" "Well, I'm involved in family violence, and this, and that," so we make sure there's supports …available to our community." (Manager, Koori Inclusion Unit)

Victoria Mingu Gadhaba

- Despite supportive structures, Aboriginal and Torres Strait Islander imprisonment in Victoria has risen since 2012. This raises questions about what else is required.

> *Our numbers fluctuate and that's why, I mean, you can only do so much. We can do so much, and work with prisoners, but ultimately it comes down to the individuals and their circumstances. So that's sort of the next step to look at besides having a look at putting in place community prisons and all that sort of stuff." (Koori Caucus member)*

Justice Reinvestment in Australia

Dr Meng Evans
MD LLB (Hons) BSc
Flinders University
Intern SA Health

Research done as part of the Flinders University Doctor of Medicine
Advanced Studies Program

With thanks to Dr Toni Delany-Crowe

What is Justice Reinvestment

- A criminal justice policy approach conceptualised in the United States in 2003.

- Diversion of funds from criminal justice administration to evidence-based initiatives to decrease crime and incarceration.

- Aims to:
  - 1) Reduce prisoner numbers and reduce recidivism
  - 2) Reduce overall government spending
  - 3) Enhance public safety, community cohesion and development

Place-based, social determinants approach

"We advocate taking a geographic approach to public safety that targets money for programs in education, health, job creation, and job training in low-income communities"

- Tucker & Cadora (2003)

Justice Reinvestment in the United States

- Justice reinvestment gained momentum from 2004 onwards

- Federal government funding commenced 2010

- 30 states have joined the "Justice Reinvestment Initiative"

- Many "success stories" such as South Dakota
  - Since 2011 $544 million in savings/averted costs and $48 million in JRI investment
  - 39 percent decline in probation
  - 9 percent fall in prison population, allowing the state to close 11 small facilities
  - Stable crime rates
  - Initiatives predominantly 1) Improved access to substance use treatment programs 2) Reformed sentencing practice and 3) Reformed probation and post-release supervision

- Drift away from the local community level focus originally envisaged, in favour of state level criminal justice system reforms

Justice Reinvestment in Australia

2009 onwards	• Australian Human Rights Commission *Social Justice Report* 2009 recommended that justice reinvestment be identified as a priority issue. Since then JR has been considered in a number of Australian Federal and State Government reports.
2013	• In 2013 The Senate Legal and Constitutional Affairs References Committee released "*Value of a justice reinvestment approach to criminal justice in Australia*" which made an extensive range of recommendations in favour of justice reinvestment. There has not yet been any commitment from the Federal Government.
2013 - current	• Bourke NSW – largest JR initiative in Australia: a community-driven, collaborative approach to JR. Commenced in 2013, implementation phase 2016-2019. Impact report November 2018: 23% reduction in domestic violence, 42% reduction in days spent in custody, 31% increase in year 12 student retention, $3.1 million impact in 2017.
2014 - 2018	• ACT Justice Reinvestment Strategy – a government initiative with 2 streams: 1) building an evidence base to support decisions about reducing recidivism and diverting offenders and 2) establishing and evaluating justice programs and trials.
2014 - current	• Other JR projects around Australia include: Port Adelaide SA (Tiraapendi Wodli Action Plan 2019-2021), Cowra NSW, Cherbourg and Doomadgee and Mornington Island Qld, Halls Creek WA and Katherine NT .

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Challenges for JR in Australia

1. Bipartisan support at multiples levels of government

2. Quality data and evidence on crime, incarceration and prevention strategies

3. Selection of initiatives in keeping with geographic and "social determinants" approach

4. Aboriginal and Torres Strait Islander focus of initiatives

5. Financial considerations for initial funding and models of analysing savings

6. Sustainability of initiatives that are often driven by individuals and small groups

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What's required for real change …?
… *Not Just Punishment*

Re-orientate justice sector activity to balance efforts to stem the flow of offending & recidivism with rehabilitation strategies

- **Strengthen policy commitment** - & fund long term community wide strengths based approaches (such as Justice Reinvestment)

- **Provide meaningful support to** help **address SDOH**, including post-release

- **Remove mandatory detention (3-strikes)** and provide alternatives to incarceration for minor offences

- **Make offending less likely** by improving overall social conditions

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Otherwise …

… incarceration rates will continue to increase: further disadvantaging Indigenous people, further stretching prison & health systems & impeding realisation of the integrated inter-sectoral agendas

Questions?

Thank you

JUSTICE SECTOR PANEL

Facilitator: Dr Matt Fisher

Panellists:

- Louise Kelly, OARS Community Transitions

- John Rawnsley, Northern Australian Aboriginal Justice Agency

- Dr Anthea Krieg, InComPro Aboriginal Association

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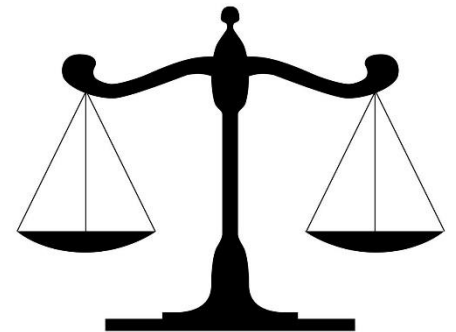
Comments and Observations from our Critical Friend

Professor Richard Eccleston

Institute for the Study of Social Change
University of Tasmania

 #healthypolicy

LUNCH

SESSION 3
Energy Sector Policy

Session Chair:

Professor Dora Marinova
Curtin University Sustainability Policy Institute

Energy and equity: plan

- The links between energy and health in Australia

- What governments can do

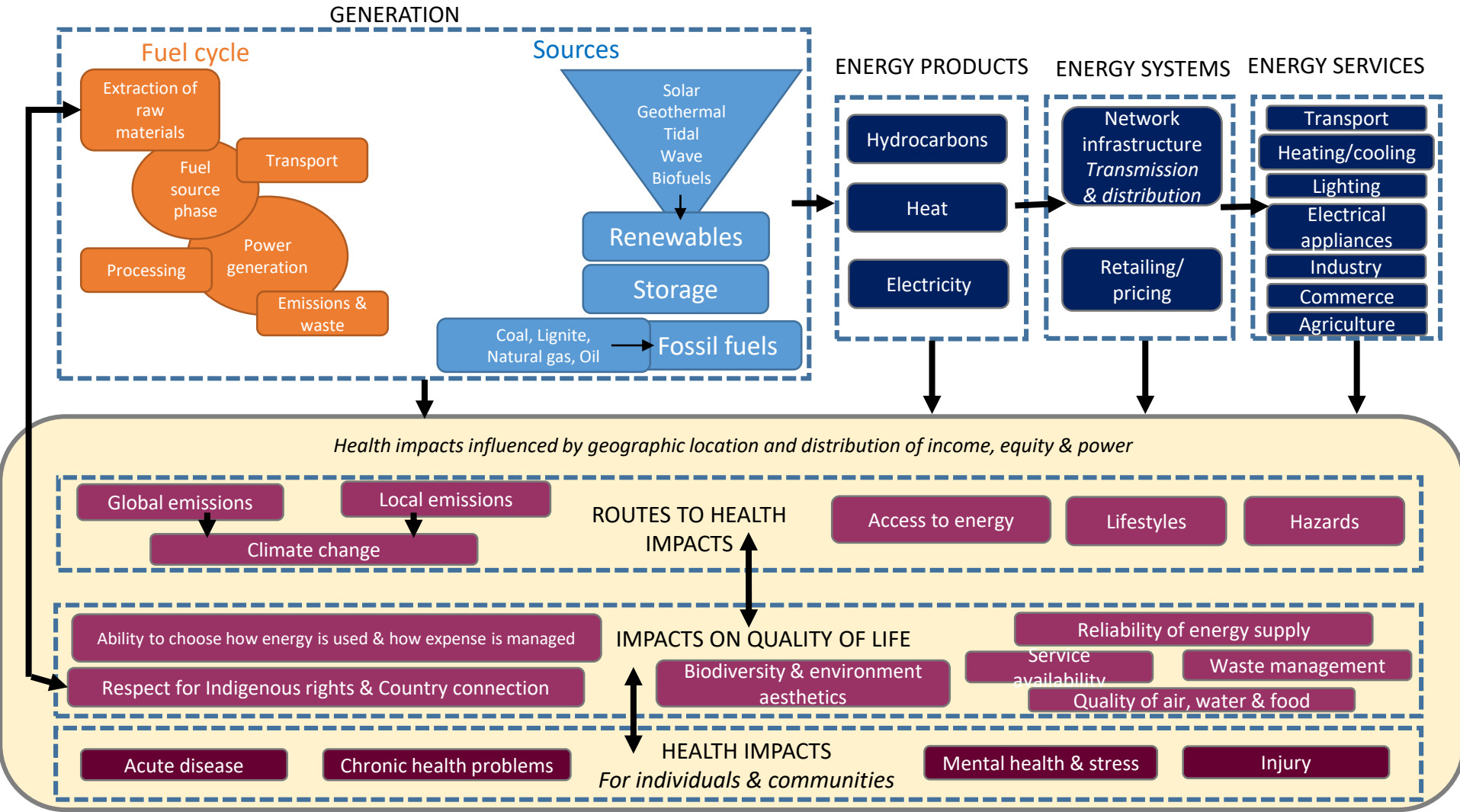- Findings to inform panel debate:
  -how equity is defined
  -individual choice
  -structure
  -climate change
  -Indigenous Australia

- Politics

Australian pathways between energy, well-being and health equity

GENERATION

Fuel cycle
- Extraction of raw materials
- Transport
- Fuel source phase
- Processing
- Power generation
- Emissions & waste

Sources
- Solar
- Geothermal
- Tidal
- Wave
- Biofuels
- Renewables
- Storage
- Coal, Lignite, Natural gas, Oil → Fossil fuels

ENERGY PRODUCTS
- Hydrocarbons
- Heat
- Electricity

ENERGY SYSTEMS
- Network infrastructure *Transmission & distribution*
- Retailing/pricing

ENERGY SERVICES
- Transport
- Heating/cooling
- Lighting
- Electrical appliances
- Industry
- Commerce
- Agriculture

Health impacts influenced by geographic location and distribution of income, equity & power

ROUTES TO HEALTH IMPACTS
- Global emissions
- Local emissions
- Climate change
- Access to energy
- Lifestyles
- Hazards

IMPACTS ON QUALITY OF LIFE
- Ability to choose how energy is used & how expense is managed
- Respect for Indigenous rights & Country connection
- Biodiversity & environment aesthetics
- Reliability of energy supply
- Service availability
- Waste management
- Quality of air, water & food

HEALTH IMPACTS
For individuals & communities
- Acute disease
- Chronic health problems
- Mental health & stress
- Injury

Policy briefing paper 1
Action in the energy sector to promote well-being and health equity: Shared goals for a sustainable future

Governments have the capacity to develop and implement policies to ensure that Australians have access to energy systems that meet their needs, support environmental sustainability, and are affordable and accessible to all, regardless of socioeconomic circumstance or location.

Intergenerational equity: the broad view

...principles of sustainable development are — community wellbeing and welfare should be enhanced by following a path of economic development that safeguards the welfare of future generations;

...equity within and between generations;

...need to develop a strong, growing, diversified and internationally competitive economy that can enhance the capacity for environment protection;

measures... should be cost effective and flexible, not disproportionate to the issues being addressed, including... pricing and incentive mechanisms

Victorian Mineral Resources (Sustainable Development) Act 1990 p3

Intergenerational equity: the broad view

- responsible use of our natural resources—water, land, minerals and energy—to sustainably generate prosperity for current and future generations of Queenslanders

QLD Department of Natural Resources and Mines Strategic Plan 2015–19 pg1

Equity: the narrow view

Customers living on low incomes or facing financial disadvantage will have access to concession arrangements, assistance programs and billing practices to assist them with their energy consumption costs.

WA Strategic Energy Initiative p 10

Choice

- Framing: consumers not communities

- Energy source diversification increases choice
  - renewables the easier choice

- Information empowers individual consumers

- Some recognition that not all can choose freely
  - particularly low income earners for whom
  subsidies are available

Structural initiatives: SA

a project to broaden participation in solar ownership, including to people who would otherwise be precluded by virtue of financial means and housing tenure. Leveraging private and Australian Government investment, the South Australian Government contributed $100,000 towards a project by Unity Housing Company to enable people in low income housing to participate in a pilot to reduce electricity costs. In late 2014, the pilot delivered 1.5 kilowatt systems for 80 new houses in a number of regional towns

(SA Low Carbon Investment Plan p32)

Structural initiatives

...advocate for national standards through... national forums... (and) advance... building and planning policies... consistent with Sustainable Energy Policy objectives.

...continue to support the improvement of the energy performance of appliances and equipment through... Minimum Energy Performance Standards and labelling requirements for electrical and gas appliances.

The new Transport for Canberra policy will include policy... and actions to reduce energy use in transport, based on reducing travel demand... and increasing vehicle efficiency....

The ACT Government will review the existing Green Vehicles duty scheme and consider how it would more effectively encourage less energy intensive vehicle purchases, and will explore new pricing and regulatory initiatives to encourage a transition to low emission vehicles in a transport pricing study in 2011-12.

ACT Sustainable Energy Policy p3

Policy gaps

- Support for a range of fuels with vastly different contributions to pollutants, climate risks & health risks across jurisdictions

- Variable support for renewables

- Fragmentation rather than cohesive ISA across energy, environment and urban planning despite all having a policy focus on renewables and all having a strong influence over energy use

- Market filling government policy vacuum

Whither climate change?

- Acknowledgement of climate change in policies in energy jurisdiction, but responsibility deferred to climate change Acts and little cohesive policy action across sectors

- Weak central leadership on climate change (in Aust govt and in central agencies of each jurisdiction)

- NT and WA prioritise coal & business interests over future energy and environmental sustainability

Indigenous Australians

- Not mentioned in most documents

- When they are: framed as a vulnerable consumer group, often in relation to supply in rural communities

- Tokenistic or little shared decision making about where exploration can occur
  e.g. NT Lands Council provide recommendations in policy about exploration on Indigenous land, but in the Act the Minister makes final decisions

Politics

… So in terms of this energy plan we'd been working on the ideas for some time but the transition of the South Australian energy supply system from what was conventional energy to a very successful investment in renewable energy was down to…a series of critical events that … caused community impacts... where load shedding occurred and then a blackout where the whole system went black… the energy plan evolved out of that. They [politicians] came out the day after and said we'll come back with a plan to take control of our energy and this was the outcome of that about six weeks later. It also became political … and had a very significant impact on the government of the day… who framed the cause as the state relying too much on unsustainable fuels and ineffective interstate or national frameworks. So renewables provided a political point of difference.

(Policy manager, South Australian Government, Energy)

Questions?

Thank you

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ENERGY SECTOR PANEL

Facilitator: A/Prof Peter Sainsbury

Panellists:

- The Honourable Mark Butler MP, Federal Shadow Minister for Climate Change and Energy

- Fiona Armstrong, Climate & Health Alliance

- Mark Henley, Uniting Communities

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Comments and Observations from our Critical Friend

Professor Richard Eccleston

Institute for the Study of Social Change
University of Tasmania

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SESSION 4
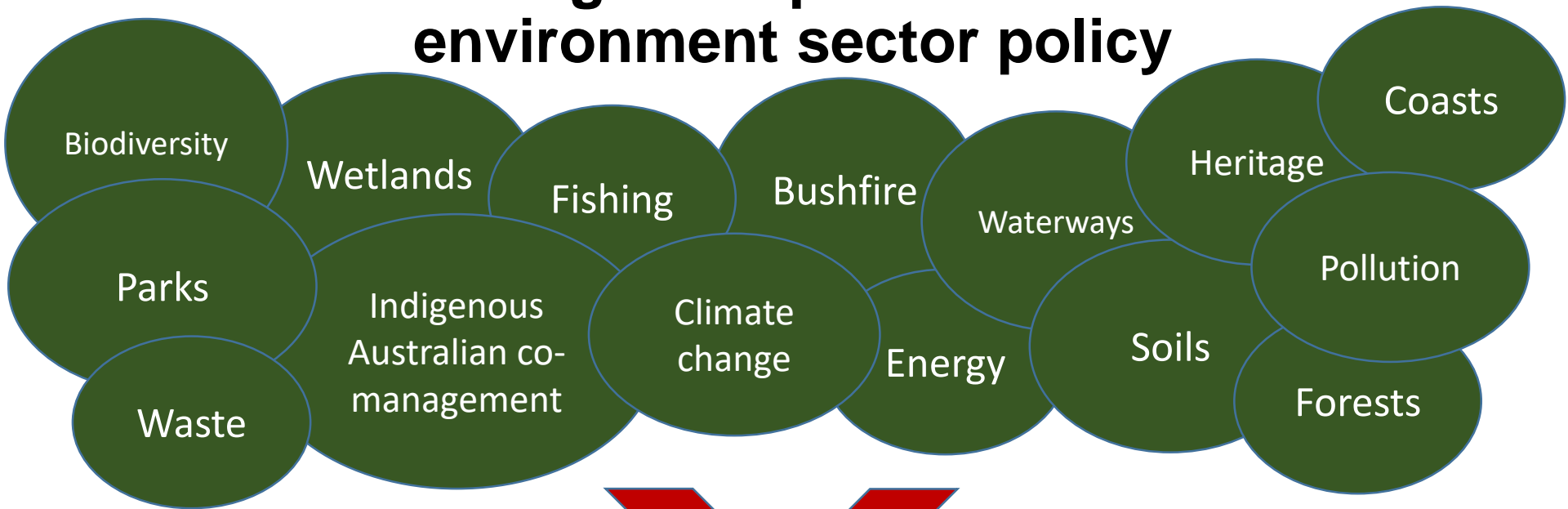## Policies of the Environment and Urban Planning Sectors

Session Chair:
Amanda Bray
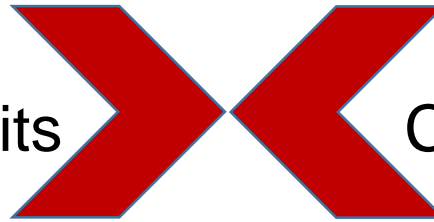Fairfield City Council, NSW

Environment sector data presentation

Professor Dora Marinova
Professor of Sustainability
Curtin University Sustainability Policy Institute

Broad range of topics addressed in environment sector policy

Biodiversity

Wetlands

Fishing

Bushfire

Coasts

Heritage

Waterways

Parks

Indigenous Australian co-management

Climate change

Energy

Soils

Pollution

Forests

Waste

Human use and profits   Conservation

Degradation Vulnerability

Sustainability Resilience

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Factors most frequently discussed as environmental risks

Population growth

Climate change

Air, water and soil pollution (frequently linked to population growth)

Increased land use and clearing

Resource exploration (oil, gas, coal)

Habitat destruction

Waste

Key Findings: Strengths

- Explicit & implicit commitment to promoting social well-being via direct references to health and attention to the SDH

Healthy Parks Healthy People is encapsulated in four key principles:
- *the wellbeing of all societies depends on healthy ecosystems*
- *parks nurture healthy ecosystems*
- *contact with nature is essential for improving emotional, physical and spiritual health and wellbeing*
- *parks are fundamental to economic growth*

(Parks Victoria Shaping Our Future)

…climate change will have direct and indirect impacts on our health and wellbeing, particularly for vulnerable members of the community such as the elderly, those who live in remote settlements, the sick and people on low incomes. (SA Prospering in a Changing Climate)

Victoria's rivers, estuaries and wetlands are healthy and well-managed, supporting environmental, social, cultural and economic values that are able to be enjoyed by all communities. (Victorian Waterway Management Strategy)

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Key Findings: Strengths

- Strong commitment via policy and legislation to protecting designated areas to preserve biodiversity & create sustainable employment.

- Strong emphasis across jurisdictions on facilitating Indigenous co-management

Supporting and promoting the employment of Aboriginal staff within natural resource management (NSW Fisheries Strategy and Implementation Plan)

Key Findings: Strengths

- Advocacy for expansion of renewable energy in most jurisdictions & innovative waste management strategies

…there is often a lost employment and economic opportunity in disposing resources to landfill instead of reusing them. The Government will review the Tasmanian Waste and Resource Management Strategy to incorporate actions

(Embracing the climate challenge: Tasmania's climate change action plan)
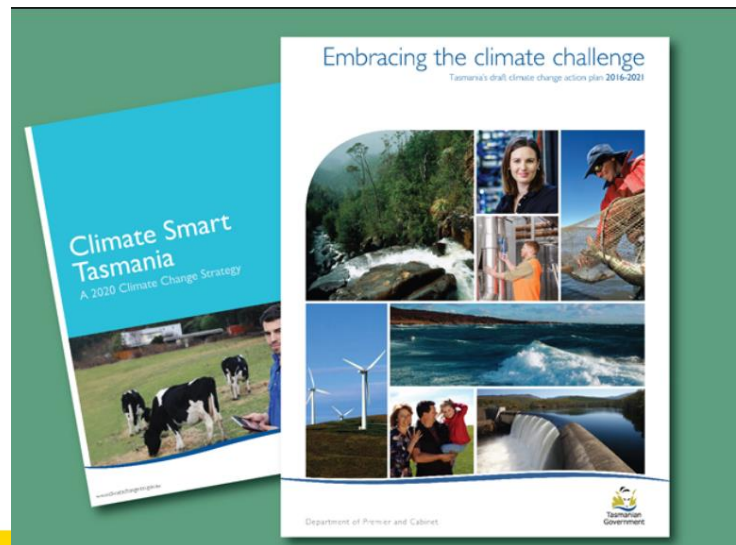
Key Findings: Weaknesses

- Primary emphasis on climate change adaptation & resilience, rather than mitigation.

We will continue to build resilience to a changing climate within our natural environment and in relation to our Aboriginal and historical heritage values for future generations through:

• ongoing development and implementation of tools to support decision-making including assessing climate impacts;

• ongoing key research and monitoring programs; and

• regulatory activity and collaboration with stakeholders.

(Embracing the climate challenge: Tasmania's climate change action plan)

- Selective focus on heat related effects of climate change, denying more complex impacts on health and equity.

- Few intersectoral partnerships evident despite overlapping areas of core business in the environment, urban planning and energy sectors.

Key Findings: Weaknesses

- Sporadic, vague and weak national leadership

__Audit__ of existing waste infrastructure and local capability in selected remote Indigenous communities as part of essential services audit under the COAG National Indigenous Housing Partnership. (Australian Government). (National Waste Policy)

This Strategy is designed to __guide__ all Australian biodiversity strategies and policies, including those of the Australian, state and territory governments, and the private sector, that address specific aspects of biodiversity conservation. (National Biodiversity Strategy)

development of __appropriate__ management and, __if required__, disposal strategies __where appropriate__. (National Heritage Strategy)

Key Findings: Tensions

- Tensions between land conservation & use
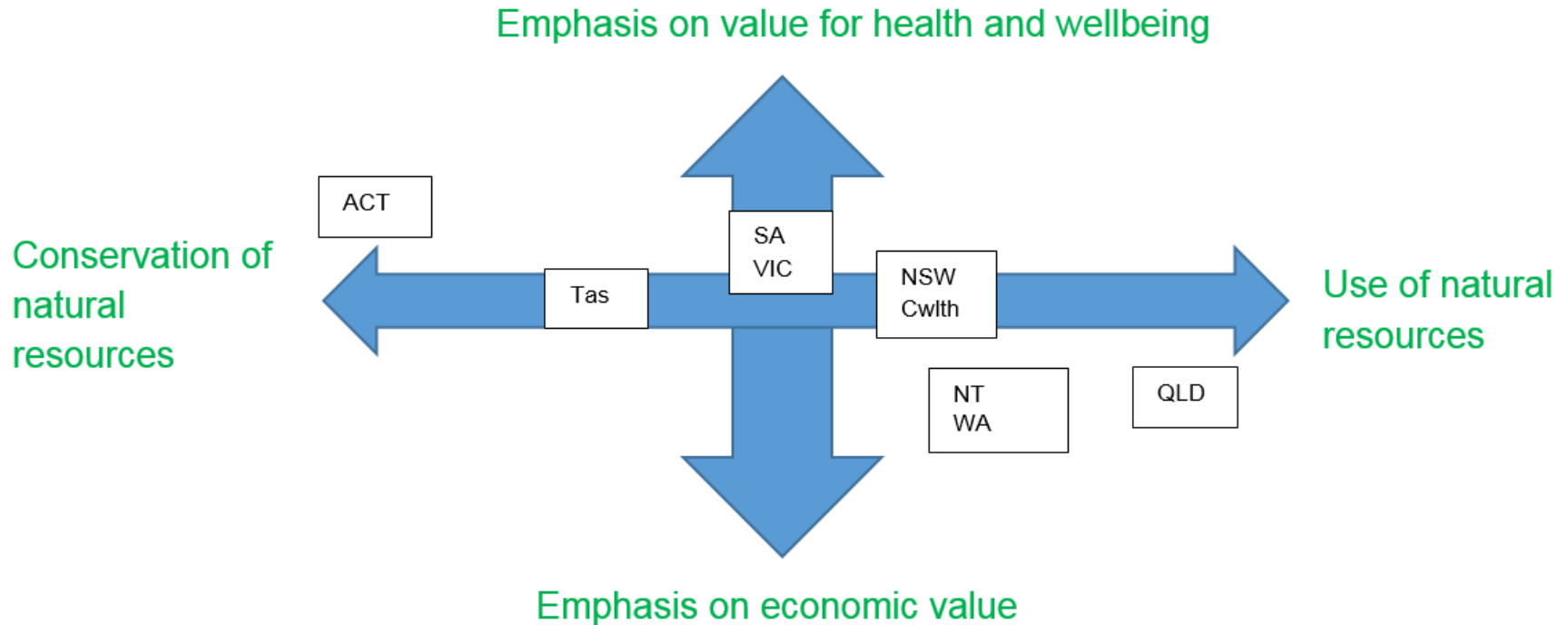
Key Findings: Tensions

- Varying values and regulatory zoning evident across jurisdictions that share waterways, fragmenting waterway management efforts.

South Australia must remain vigilant and maintain the strong and united approach to ensure the Basin Plan is implemented successfully and that other Basin states meet their obligations.

(SA Murray Darling Basin Plan)

- Subordinance of environmental conservation to commercial interests

…nothing in this Act shall derogate from the operation of the Mining Act 1978, the Offshore Minerals Act 2003, the Petroleum and Geothermal Energy Resources Act 1967, the Petroleum (Submerged Lands) Act 1982, (or) any other Act relating to minerals or petroleum. (Western Australian Conservation and Land Management Act)

Initial case study selection
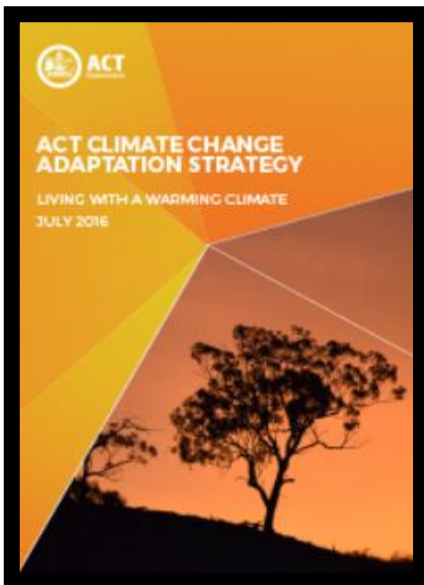
Final case study selections

7 interviews: Parks Victoria, Health Dept. and relevant NGOs

Senior project officers, managers, current and ex CEs and policy officers

4 interviews: Environment and Health Directorates

Senior project officers, managers and a director

Parks Victoria Shaping Our Future

- **Long term project:** HPHP focus developed over 15 years

- **Recognition of mutual benefit has driven emphasis on wellbeing**

  I guess what we've been trying to highlight in both Shaping Our Future and HPHP is that it's not just about healthy people. It's actually about healthy parks and healthy people that lead to improvements in each other (Policy officer, Parks Victoria)

- **Bipartisan support for HPHP**: HPHP focus retained despite turbulent political and bureaucratic contexts

- **Parks Victoria recognised as global leaders in HPHP**: Has supported the Govt's long term commitment

- **Core business has shifted:** Adopting a holistic view of parks as community well-being and equity assets has broadened partnerships and directed focus to a range of population groups

Parks Victoria Shaping Our Future

- **Economic drivers:** Being able to claim health and broader economic benefits from Parks' work was motivated in part by desire to attract greater support and funding from Treasury and the Vic Govt more generally

- **Intersectoral collaboration:** *Shaping Our Future* used to align Parks Victoria work with the work of the Health Dept, as a mechanism to attract funding. So far though collaboration has only been achieved with the nutrition and recreation sections of the Health Dept, which are also underfunded.

    Health promotion and parks conservation are both marginalised issues on the Government agenda, and gaining the traction required to achieve adequate funding is difficult (Manager, Health)

ACT Climate Change Adaptation Strategy

- "Community health and wellbeing" is a key priority area in the Strategy

- **Collaborations vital:** Govt partnered with UNSW on research to project global climate change impacts. Health and wellbeing emerged as primary concerns at local level. Stimulated direct partnership between Health and Environment in developing the Strategy.

- **Strong, sustained political will** around climate change in ACT around addressing and preventing climate change impacts. Government is a Labor/Green coalition. There is a Greens Climate Change and Sustainability Minister (Shane Rattenbury). Prior two Ministers supportive of addressing climate change holistically.

- **No Local Govt layer in ACT:** Encourages regular community consultation. 3000 community members responded to climate change survey, many identified wellbeing related concerns.

ACT Climate Change Adaptation Strategy

- Climate change positioned as a **whole of Govt concern**:

Most of the time we try and manage to one variable. But we know from the evidence and our consultations that climate change will give you a series of impacts together. So, for example, there's going to be a doubling of heatwave days. And we have to prepare for the worst case situation. What if that came on the back of an extended drought? What if it was a bushfire? So we painted the picture to the Health Directorate that in having one or two presentations from heatstroke, all of a sudden they could have quite a few, you know, dozens or 100 presentations. And it wasn't just health services. Obviously it would test other essential services, for example the provision of electricity. There might be a brown-out. There might be water shortages. So we really had to change what we believe was business as usual. We needed a much higher degree of awareness of the series of synergies in the impacts. And so we started to look at presentations at hospital. We started to look into outdoor activities. How it would impact work and school events, et cetera. We are moving towards being a more compact city. And if you have a compact city that is very hot, and everybody's in a little brick oven in an apartment, then that creates an increased need for green open spaces where people can go out and cool themselves. And it also raises the need to address mental health issues - stress, fear, social isolation. So we need to think in those terms. (Manager, Environment Directorate)

- Buddy role established by Environment Dept. to ensure that staff resources were dedicated to working intersectorally, helping all departments to integrate climate change strategies into their policies

Theory 1: Sustainability Transitions

- Existing systems are difficult to change as they are stabilised by various lock-in processes that lead to path-dependent developments and entrapment

- Different actors and their agency need to play a role in making the transitions happen

- Characteristics which define good strategies in the transition:
  - directionality – to be clear what is the direction of the required change;
  - timeliness – clear set timeframes;
  - responsibilities – who and how is responsible for the transition;
  - resources – what is required for the implementation etc….
  - development of policies and players – process;
  - new opportunities – to break the trajectory – new way of thinking, circuit-breaker

- The two case studies are good examples in facilitating such transitions

Theory 2: Planetary health

…the achievement of the highest attainable standard of health, wellbeing, and equity worldwide through judicious attention to the human systems—political, economic, and social—that shape the future of humanity and the Earth's natural systems that define the safe environmental limits within which humanity can flourish. Put simply, planetary health is the health of human civilisation and the state of the natural systems on which it depends.

The Commission on Planetary Health, 2015

Conclusion

- The *Australia: State of the Environment* reports emphasises that if current environmental trends continue, the Australian natural environment will have deteriorated significantly by 2050

- Urgent action is necessary - Australia is currently well behind most nations

- Need to avoid short-sighted policy vision and understand that without proactive policy major declines in quality of life will eventuate

- Must manage private interests to share power & ensure that outcomes are in the public interest

- Essential that as governments change we build & nurture strong policy leadership that strives for improvement in living conditions to create healthier, more equitable societies via activity in all sectors, particularly the environment sector

- Our link with the natural environment and the concept of planetary health is not new to Indigenous people but we need to rediscover it
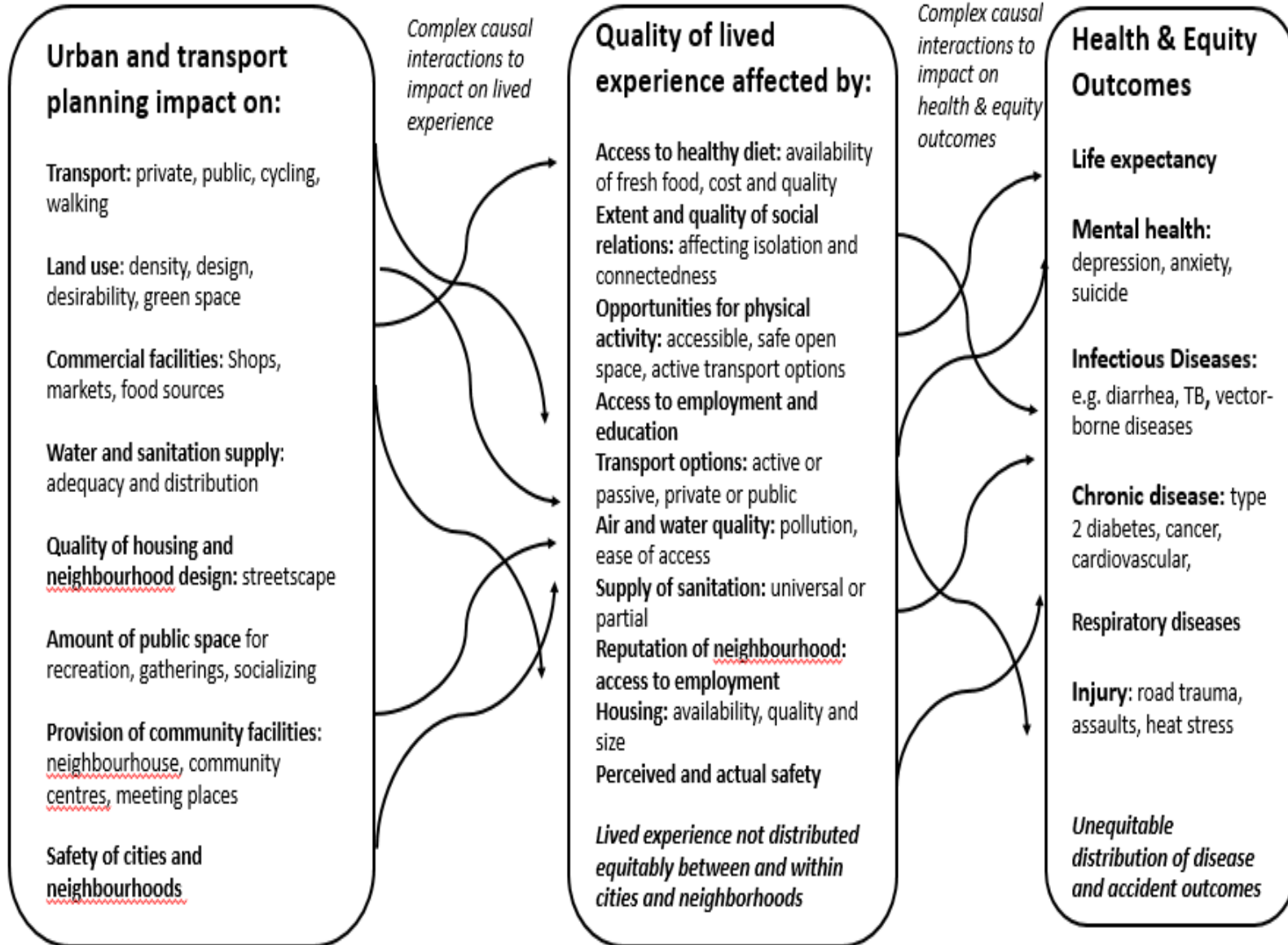
Questions?

Thank you

Urban Planning

Dr Michael McGreevy

Southgate Institute for Health, Society & Equity and the ARC Project Team

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IMPACT OF URBAN PLANNING ON HEALTH

Urban and transport planning impact on:

Transport: private, public, cycling, walking

Land use: density, design, desirability, green space

Commercial facilities: Shops, markets, food sources

Water and sanitation supply: adequacy and distribution

Quality of housing and neighbourhood design: streetscape

Amount of public space for recreation, gatherings, socializing

Provision of community facilities: neighbourhouse, community centres, meeting places

Safety of cities and neighbourhoods

Complex causal interactions to impact on lived experience

Quality of lived experience affected by:

Access to healthy diet: availability of fresh food, cost and quality

Extent and quality of social relations: affecting isolation and connectedness

Opportunities for physical activity: accessible, safe open space, active transport options

Access to employment and education

Transport options: active or passive, private or public

Air and water quality: pollution, ease of access

Supply of sanitation: universal or partial

Reputation of neighbourhood: access to employment

Housing: availability, quality and size

Perceived and actual safety

Lived experience not distributed equitably between and within cities and neighborhoods

Complex causal interactions to impact on health & equity outcomes

Health & Equity Outcomes

Life expectancy

Mental health: depression, anxiety, suicide

Infectious Diseases: e.g. diarrhea, TB, vector-borne diseases

Chronic disease: type 2 diabetes, cancer, cardiovascular,

Respiratory diseases

Injury: road trauma, assaults, heat stress

Unequitable distribution of disease and accident outcomes

Urban Planning Sector

- 108 Acts and policy documents analysed from all state, territory and federal governments
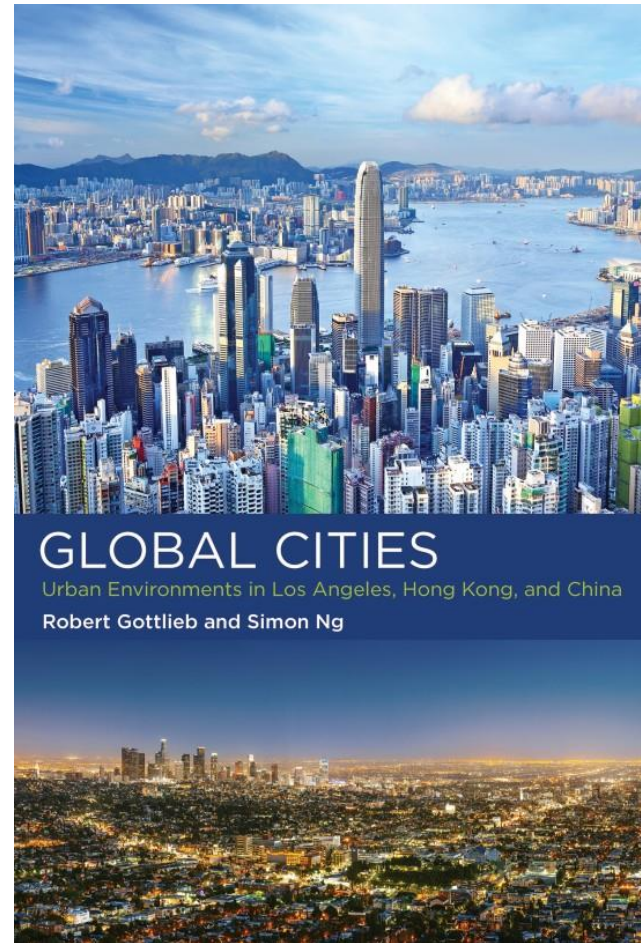
Research Translation

- Planning healthy neighbourhoods: Addressing the links between health, wellbeing, and neighbourhood built form. Paper presented at the State of Australian Cities Conference. Adelaide, November 2017.

- How can the justice sector improve the social determinants of health and equity? Findings from an analysis of a census of Australian policy. IUHPE World Conference on Health Promotion, Rotorua NZ, April 2019

Research Translation

- How well do Australian government urban planning policies respond to the social determinants of health and health equity? (submitted to Land Use Policy).

- The role of collaborative urban spatial planning in successfully advancing social determinants of health: The case of the Thirty Year Plan for Greater Adelaide, 2017. (submitted to Planning Theory).

- Can urban planning strategies designed to advance global competitiveness also advance health and health equity? Lessons from two Australian case studies (Submitted to Social Science and Medicine).

Key goals in documents

- Growth facilitation
- Global competiveness
- Productivity
- Liveability
- Sustainability

GLOBAL CITIES
Urban Environments in Los Angeles, Hong Kong, and China
Robert Gottlieb and Simon Ng

Two interpretations of Liveability

Economist Intelligence Unit:

- *Levels of comfort for expatriate executives.*

Planning definition

- *safe, attractive, socially cohesive and inclusive, and environmentally sustainable; with affordable and diverse housing linked by convenient public transport, walking and cycling infrastructure to employment, education, public open space, local shops, health and community services, and leisure and cultural opportunities.*

Common objectives & strategies

- Image enhancement
- Infill over greenfield
- Land use & transport integration
- Mixed use activity centres
- Increase active and public transport
- Overcoming congestion
- Housing diversity & affordability

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Land Use & Transport Integration

- *Planning and design of activity centres around transit oriented development principles to promote public transport, walking and cycling as an alternative to private car use (WA).*

- *Increase residential and mixed use development in the walking catchment of strategic activity centres, appropriate transit corridors strategic railway stations (SA).*

- *Support council-led urban infill and to support local efforts to lift housing production around local centres, transport corridors and public transport access points (NSW).*

Infill: efficiency, health, equity, diversity & environmental sustainability

- *More efficient use of physical and transport infrastructure;*

- *Reduced ecological footprint of urban development and reduction in loss of biodiversity;*

- *Increased opportunities for social interaction and reduction in social segregation;*

- *A greater proportion of the population living in proximity to services and employment opportunities;*

- *Increased economic viability of public transport, and subsequent extension thereof;*

- *Better utilisation and revitalisation of other public infrastructure, including parks and open spaces;*

- *Provision of a greater range of housing options to suit the decreasing size of households and ageing population;*

- *Promotion of health and wellbeing by eliminating distance as a barrier to walking and cycling as preferred modes of transport;*

(Southern Tasmanian Regional Land Use Strategy)
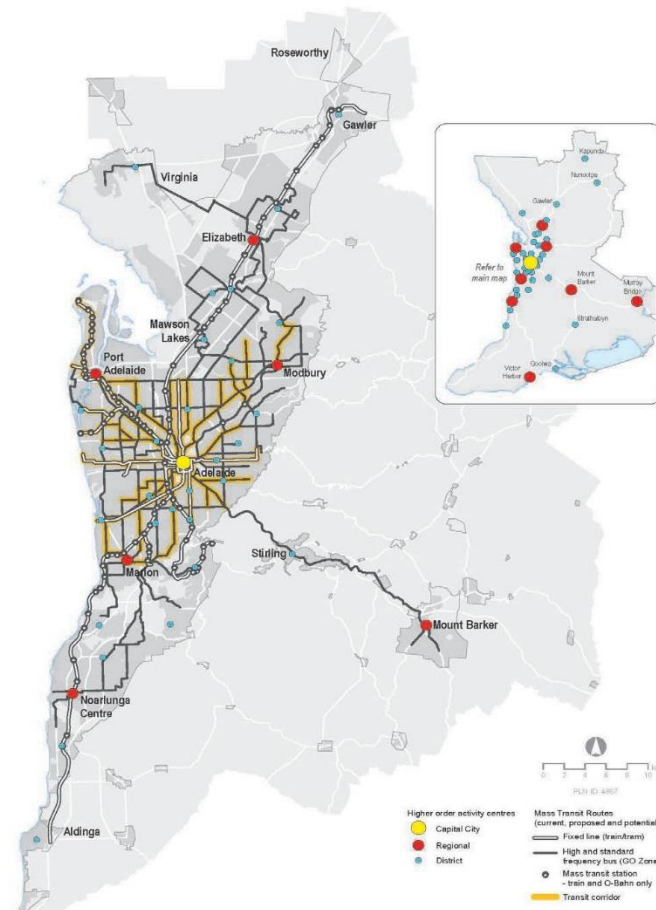

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Specific health objectives

- Physical health
  - Promoting walking and cycling
- Access
  - Services
  - Open space
  - Public transport
- Mental health
  - Social connectedness
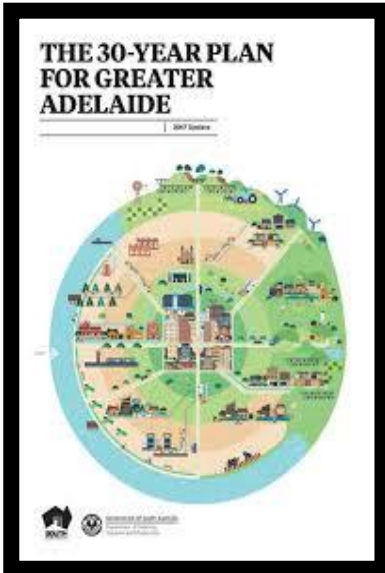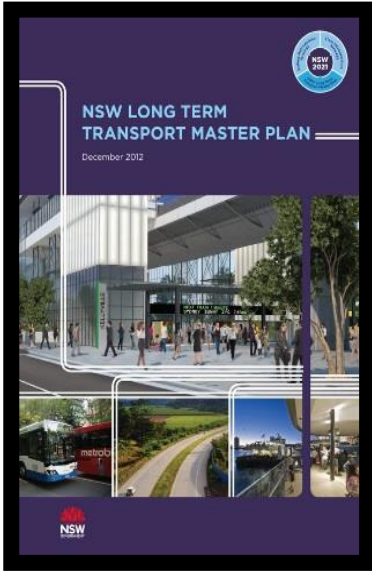
Targeted infill

- Transit corridors
- Expanded activity centres
- Brownfield
- Greyfield

Interviews

9 people interviewed: Transport Dept, Infrastructure Dept, Planning and Environment Dept, Health Dept, Business council, consultants, transit authority

11 people interviewed: Planning Dept, Health Dept, Human Services Dept, and NGO

Thirty Year Plan

- The 2017 document was an updated version of the 2010 Plan.

- Health department staff were involved in both versions and multiple projects in between.

- In general all those interviewed were happy with both the process that formulated and the directions of the 2017 edition.

- *it is a solid document, it's definitely better than the previous 30 Year Plan, so I think for us, we were happy with the – with the result, with how it was written, and I think there is great potential for it to improve health and well-being (Health PS).*

The role of collaboration

- The initial interaction between planning staff and health staff as influencers on the 2010 edition was 'difficult'

- *the collaboration between the town planners, health in all policy town planners, and the health public policy people […] became completely intractable* (Senior Public Servant, Planning 1).

- *I think the experience was a little bit – not bruising, bruising's probably going a bit far, but there was a lot of areas where we hit the wall in terms of language and so on* (Senior Public Servant, Health 1).

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The role of collaboration

- Sustained collaboration, dialogue and compromise eventually overcame many issues and enabled consensus to be reached

- *So again that was more a relationship or an engagement type thing that was fairly difficult at the start, but I think we all started to come round a little bit and appreciate what's going on. Because a lot of the same players are still involved in some of those sorts of things we I think well me personally anyway, in understanding what planning is trying to do and how difficult it actually is, particularly when you are looking to change a mindset or a paradigm of how development is meant to be* (Senior Public Servant, Health 1).

Finding common language

- Liveability became a 'good' to be argued for in the first edition then expanded upon in the second

- *What we ended up doing was trying to find a phrase that meant roughly the same thing [health] but which was more palatable and more acceptable in the planning profession. Liveability was starting to be used a bit, so we jumped on that and used that (SA Public Servant, Health 1).*

- *Our focus was broad, and we were really pleased when they expanded the liveability bit to include a focus on healthy neighbourhoods. That was a really big shift. In the beginning it was all about liveability, and they really increased the health focus (SA Public Servant, Health 2).*

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NSW long term transport master plan

- The NSW plan had a economic efficiency (productivity) focus.

- Congestion was seen as the most significant obstacle to productivity gains because of its effects upon travel times.

- *[health] was never going to be what primarily drove the plan which was broadly an economic development and economic development supporting agenda* (NSW Public Servant, Transport 4) *.*

- *the biggest issue of the day was congestion. […] the notion of the walkable city, the thirty minute city, the transit oriented development, all of these things were about freeing up congestion*

Economic justification required

- A successful approach to ensuring that health and wellbeing considerations were included in the objectives of the Plan was to argue for these on **economic and financial grounds**.

"So, we just leveraged it into the Plan but it was all about economic and financial savings. So, when you do a cost benefit analysis with that stuff obviously you throw all the health benefits in though because it's actually a recognised thing of Treasury, that there are health benefits to walking and cycling so you can increase your upside, which is why cycleways and footpath upgrades always rate really well with a cost benefit analysis." (Manager, Transport).

Travel time savings

- A dominant theme in the interview data though is the priority given at the political and higher management levels to the goal of reducing travel time on productivity grounds.

- This seems to **overshadow health considerations** somewhat, supporting an assumed logic during implementation about the need to focus on supporting vehicular travel.

- A: "The priority is the movement of cars, and whatever will facilitate the movement of cars is the focus. And, what I've definitely learnt over time is that transport engineers are very good at solving problems, and that essentially that the problem that they're given, and have been given for a long time is how quickly can we move cars? As opposed to mobility.

- Q: Ok and as opposed to ensuring effective land use, or cutting emissions or such things?

- A: Oh, no, none of that." (Manager, Health)

Questions?

Thank you

AFTERNOON TEA

HEALTHY, SUSTAINABLE ENVIRONMENTS PANEL
Facilitator: Professor Colin MacDougall

Panellists:

- Professor Ian Lowe, Griffith University

- Carmel Williams, Health Determinants & Policy, SA Department of Health and Wellbeing

- Dr Patrick Harris, Menzies Centre for Health Policy, University of Sydney

- Paul Laris, Western Adelaide Coastal Residents Association

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CONCLUDING REMARKS

Professor Fran Baum AO

@baumfran

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Thank you

Please join us for drinks and networking