



## Promoting Healthy Lifestyles Forum

**STOP! Listen, Collaborate; *working together for healthier communities*'.**

March 12<sup>th</sup> 2014

Facilitated by Anita Thomas, Health Promotion Consultant

### Introduction

Activity Area: Promoting Healthy Lifestyles

Goal: To promote and increase the implementation of Prevention, Health Promotion and Social Inclusion Frameworks by SMPCP Members

Objective 2: To build capacity of Agencies and Professional in the Southern Mallee to support and promote healthy lifestyle initiative

Particular to this Forum the goal was: To promote and increase partnerships to support the implementation of 'our' plans focused on Integrated Health Promotion and Prevention

Anita Thomas, Health Promotion Consultant facilitated the forum in Wycheproof.

- Focus of the workshop was to increase the understanding of Integrated Health Promotion [IHP] and the Social Determinants of Health.
- Understand the importance of ongoing commitments to partnerships.
- Future progression of work and opportunities toward social determinants of health, IHP and partnerships.

This report will describe common understanding achieved in the area of Integrated Health Promotion, Social Determinants of Health and Partnership development, the commitments made to embed this understanding into practice and recommendations for ongoing work to further build the capacity in these areas.

### Integrated Health Promotion

#### **Common understanding**

Integrated Health Promotion refers to agencies in a catchment working in collaborative manner using a mix of health promotion interventions/strategies and capacity building strategies to address priority health and wellbeing issues. Fundamental to good practice is the role of partnership, a mix of strategies that include both individuals and population wide health promotion strategies and working across the range of sectors and settings that influence the priority area.

During the workshop a "Jigsaw" analogy was used to describe the translation of this definition into local context and practice. Effective work in this space requires a shared vision that paints the common picture, an understanding of the contribution that each organisation makes, that not all contributions will be the same, some will fit more easily and no one organisation can do it all.

Participants engaged in this conversation and could see how their work could contribute to the bigger picture. Organisations were able to identify work they currently do in an integrated way and reflected that this work could be strengthened and were committed to doing so. Participants committed to establishing better communication system between organisations, building health promotion understanding across their own organisations and broadening, revisiting and strengthening partnerships.

#### **Embed into practice – future work and opportunities**

In presenting municipal and organisational plans participants demonstrated the current level of integrated health promotion work, and were able to reflect that levels of integration across organisations particularly local government, health services and the PCP has strengthened significantly over recent years. Participants also acknowledged that there was a great opportunity in the implementation of current plans to strengthen this integration and broaden the organisations involved.

## **Social determinants of health**

### **Common understanding**

There is clear evidence that it is social, economic and environmental factors, and conditions over which individuals have limited direct control, which influence health. VicHealth has gathered both international and local evidence to develop its list of social and economic determinants of health, these are: the social gradient: income and social status, early life, social exclusion, unemployment, employment and working conditions, social connection, food security, education, gender, discrimination, addictions and substance misuse, environments, transport, personal health practices and resilience, violence and physical activity. Participants were provided with a summary of the evidence gathered.

The health iceberg was used as a tool to describe the relationship and differences between illness management (on top of the water), risk factors (just below the water line) and the social determinants of health (at the base of the iceberg). Health promotion and primary prevention focus effort under the water line to the risk factors and social determinants of health. Examples were used to demonstrate the 'unpacking' of an issue from a focus on illness to an understanding of the determinants.

In summary the key learning's for participants were:

- Health is created outside of the health sector and restored / repaired within it.
- Action requires partnership with the sectors and settings that influence these determinants.
- No one agency or organisation can be responsible for all.
- Health promotion effort focuses on risk factors and social determinants of health.

### **Embed into practice – future work and opportunities**

Organisational priorities were mapped using the health iceberg demonstrating a focus on the risk factors (physical activity and nutrition) and limited focus on the social determinants of health (social connection in the broader context of mental health and wellbeing). Organisations understood the determinants of health but had not defined them as priorities within their municipal or organisational plans. Participants identified that adopting a determinants approach to their work is challenging and identified it as an area that requires strengthening.

Participants worked in municipal groups to identify opportunities in the short and longer terms to broaden their work's focus to apply a determinants lens, to identify the barriers and enablers to doing this and identify support required. Overall this proved to be a challenging task for the participants, highlighting the challenge of moving from an understanding of these determinants to applying this knowledge in to practice. Some of the barriers identified included lack of understanding of the determinants across their organisation, the expectations from leadership of their roles in health promotion, the movement of staff and the impact that has on organisational knowledge and limited resources. Participants identified developing common goals, increasing organisational and community understanding of the social determinants of health and strengthening communication within and between organisations as common enablers.

Participants identified whole of organisation understanding and support, practice tools including those that communicate evidence of the determinants of health, stronger co-ordination between organisations and succession planning with staff as examples of the support that was required to adopt a determinants approach. Each municipal group listed short and longer term opportunities to strengthen their approach to taking a determinants lens. The table below captures these small group discussions. (It is worth noting that this activity was completed at end of the day and a number of people had already left the workshop).

Taking a determinants approach	
Short term	Long term
<b>Buloke Shire</b>	
Formation of group – mental health Municipal Health Plan Objectives and key plans Achievements program – going to schools and wider community	Recreation Community Development
<b>Gannawarra Shire</b>	
Mindfulness about determinants and the importance of unpacking health issues. Give some knowledge /opportunity for people living rural and remote access to information services of dementia. GOAL_ Your “brain matter” program, promote this Document / gather local data, join the dots	Better communication between service providers Involvement of GP where practical More employment More appropriate / sensitive approach to CALD and Aboriginal communities
<b>Swan Hill Rural City</b>	
Providing consultation on women’s health to key groups / organisations Identifying how to work / partner with particular agencies to target key groups Providing information / support to local government councilors	

## **Partnership**

### **Common understanding**

Participants were universally committed to working in partnership. All agreed on the benefits and could easily list common barriers and enablers. There was also consensus that “when partnerships were good they were good and when they weren’t they were hard work”. Identifying how to overcome the barriers and strengthen the enablers in a realistic way was an ongoing challenge.

The VicHealth Partnership Analysis tool was described and provided to each participant. A focus of the discussion was the continuum of partnership that is described in the tool –collaboration, cooperation, coordination and networking, and how these definitions of partnership could be used to better understand the nature of a partnership and determine the effort required to build and maintain them.  
[http://www.vichealth.vic.gov.au/~media/ResourceCentre/PublicationsandResources/General/Partnerships\\_Analysis\\_Tool\\_2011.ashx](http://www.vichealth.vic.gov.au/~media/ResourceCentre/PublicationsandResources/General/Partnerships_Analysis_Tool_2011.ashx)

### **Embed into practice – future work and opportunities**

Participants recommitted to strengthening partnerships and used the workshop as a forum to connect to individuals and organisations. There were a number of participants who reflected that the workshop re-energized them towards partnership development.

It was important to provide participants the opportunity to share their expertise in developing, maintaining and sustaining partnerships. It was obvious that the group understood the theory of partnership and it was important to provide opportunity to share the learning’s that can only be gained in practice. The group was charged with responsibility to develop a list of practice pointers to provide “real” insight and practical ideas to support strengthened partnership development – for both new and existing partnerships.

**Partnerships are critical  
How to do it?  
Tip Sheet**

- **Demonstrate respect**
  - Know your limitations – don't say you are going to do something you can't do
  - Persevere – don't give up
  - Don't presume
  - Be prepared to own mistakes
- **Know your own organisation**
  - Understand your own program and work out ways to communicate it
  - Understand the barriers of your own organization – realize this might be an issue you come up against. Admit them and be prepared to own your own mistakes
- **Know your partner agency**
  - Develop contacts with the agency – give it time
  - Ask what they understand about your organisation, check your understanding of their organization.
  - Get to know your partner organisations
  - Ask how it fits with your / their business
  - Develop trust
  - Use evidence/data to explore issue and show the connection between organisations
- **Acknowledge history**
  - Be aware of cultures and traditions in town/s
- **Acknowledge the importance of disagreeing**
  - Be able to disagree in a conciliatory manner
  - Commit to honesty and cohesion
- **Look for leaders and champions in field or organisations**
- **Use same language**
- **Prioritise time to the partnership**
- **Defined and agreed mechanics for the partnership**
  - Identify common goals and objectives
  - Communication system developed
  - Agreed processes – meeting minutes, roles and responsibilities
  - Identifying lead agency
  - Determine role / delegation in the partnership
  - Define decision making processes

**Evaluation:**

Twenty Nine participants attended from Agencies providing services in the Southern Mallee, from Local Government, Health and Community based Agencies. There was a demonstrable increase in participants understanding of Integrated Health Promotion and the Social Determinants of Health. See Table 1:

<b>Table 1: Survey Questions.</b>	<b>Pre Forum</b>	<b>Post Forum</b>	
<b>Rate Your Understanding of Integrated Health Promotion</b>			
1 [low]	0.00%	0.00%	No change
2	5.56%	0.00%	Decreased 5.56%
3	50.00%	11.11%	Decreased 38.89%
4	33.33%	61.11%	<b>Increased 27.78%</b>
5 [High]	11.11%	27.78%	<b>Increased 16.67%</b>
<b>Rate Your Understanding of the Social Determinants of Health</b>			
1[low]	0.00%	0.00%	No change
2	11.11%	0.00%	Decreased 11.11%
3	27.78%	5.56%	Decreased 22.22%
4	38.89%	72.22%	<b>Increased 33.33%</b>
5[ High]	22.22%	22.22%	No change

- 65% of participants who attended the forum stated a change in understanding of **Integrated Health Promotion**.
- 67% of Participants who attended the forum stated a change in understanding of the **Social Determinants of Health**.
- 94% of participants stated an increased knowledge in how to **support** healthy lifestyle initiatives.
- 89% of participants stated an increased **knowledge** in how to support healthy lifestyle initiatives.
- Participants identified areas that would help to implement their plans focused on Integrated Health promotion. Internal support from Agencies was identified as an important factor, as was information and resources. [See Table 2.]

<b>Table 2: Areas identified by Participants that would help to implement their plans focused on Integrated Health Promotion and Prevention</b>	<b>Response Percent</b>
Information	50.0%
Resources	58.3%
Training	41.7%
Other Supports - Internal	75.0%
Other Supports- External	41.7%
Other	0.0%

**Participant feedback:**

- There are so many angles with health promotion and all attendees today are striving for a common goal “To assist our communities to live a long healthy life”.
- Really good workshop - has made me think more broadly with work I do
- It would be useful to have Anita come back and talk us through the next level of Health Promotion

**Recommendations**

Following are a number of recommendations for consideration from the workshop discussion:

- Continue to provide opportunities to bring organisations together around common areas of priority. The exchange of information, the practice expertise and opportunity to extend partnerships is strong and will contribute to strengthened integration.
- Provide capacity building opportunities for organisations to strengthen their approach to the social determinants of health. Consider narrowing the focus to applying a determinants approach particularly to the PCP priority areas of physical activity, nutrition and mental health and wellbeing. This would focus on ‘unpacking’ these issues specifically rather than a focus on the broader social determinants of health.
- Explore opportunities to build knowledge of the Social Determinants of Health throughout organisations with particular focus on the leaders. This is important for local government where they have great influence across the broader determinants of health, but as an organisation may not recognise the contribution. Equally important in health agencies where the main focus of its work is on health restoration and repair not on the social determinants of health.
- Consider developing evidence summaries of the social determinants of health that are used consistently across the partner organisations.
- Consider developing evidence summaries about each of the PCP priorities through the lens of the social determinants of health.
- Ensure that the key shared learnings from this workshop are embedded as critical elements in the development of the SMPCP Health Promotion framework.

- Health promotion effort focuses on risk factors and social determinants of health.
- Health is created outside of the health sector and restored / repaired within it.
- Action requires partnership with the sectors and settings that influence these determinants.
- No one agency or organisation can be responsible for all.
- Requires mix of strategies that include both individuals and population wide health promotion strategies (the Ottawa Charter provides an evidence based framework).

**Conclusion:**

The presentation of Municipal Health and Wellbeing, and Integrated Health Promotion plans at PHL Forum 1 highlighted the current level of integrated work on the Strategic Priority- Promoting Healthy Lifestyles. Participants identified a need to adopt a Social Determinants of Health approach to Integrated Health Promotion, focusing on “upstream” determinants.

Participants were able to reflect on the strength of collaboration, which had been enhanced over the years with Local Government, Health services and PCP.

Participants have been reenergized toward partnerships. However, partnerships require a clear purpose. Partners need to be valued. Collaborative work must be carefully planned, monitored and evaluated.

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