In Tasmania there is preoccupation with hospitals, not health. Hospitals should be a last resort not the first.1

The evidence is clear: health systems oriented towards primary health care achieve better health outcomes for a lower overall cost than systems focused on specialist or tertiary care. The international trend is moving away from hospital care.2 Primary health care treats people in the community, and is concerned with action on the social determinants of health and a preventive approach, emphasising the need for social justice, equity, solidarity and intersectoral collaboration.3

The Social Determinants of Health Advocacy Network (SDoHAN) calls for five actions to help achieve the Government’s vision for Tasmania to strive to have the healthiest population in Australia by 2025.

Action #1: Prioritise the early years

The early childhood period is considered to be the most important developmental phase throughout the lifespan. Healthy early child development strongly influences well-being, obesity, mental health, heart disease, competence in literacy and numeracy, criminality and economic participation throughout life. Investment in early childhood development will pay for itself many times over.3

The SDoHAN calls for a comprehensive, whole-of-government social determinants of health approach to early life. As part of this, we call on the Government to: 1) build – not cut – Tasmania’s education system; 2) retain the Tasmanian Early Years Foundation; 3) support the implementation of the Early Years Learning Framework; 4) build the capacity of Population Health Services in the Department of Health and Human Services (DHHS) to focus on nutrition, physical activity and mental health initiatives for the early years, and 5) implement targeted preventative initiatives to reduce the number of children entering the foster care system.

Action #2: Implement a Health in All Policies approach

A social determinants approach recognises that action outside of the health system is required to establish the conditions that promote good health and wellbeing, and reduce our dependence on hospitals and health care services. In order to do so we need to get all tiers and areas of government working together towards this common purpose. A Health in All Policies approach would ensure that the health of the population is given priority across government.

SDoHAN endorses the call by the Health in All Policies Collaboration to implement this agenda in Tasmania through appropriate legislation, the establishment of an independent overseeing board and the allocation of specific funding to ensure that government policies, programs and practices aim to reduce inequities in health.

An ageing population, increasing rates of chronic disease and health workforce shortages are straining our health system. Without change, we will spend more.1

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Action #3: Direct resources into an intersectoral unit to reduce poverty in Tasmania

Some interventions to improve health (such as legislative changes or public education) are rightly aimed at the whole population. However, if these initiatives do not take account of the needs of marginalised groups they can inadvertently widen health inequalities. While we need to improve the health of everyone, we also need to focus on those facing the greatest need and the worst health outcomes.

SDoHAN calls for the establishment of an intersectoral unit to be established in the Department of Premier and Cabinet to develop a comprehensive plan that will address the needs of specific populations at greatest risk of poorer health and wellbeing. As its primary goal this plan should seek to reduce the number of people living in poverty in Tasmania – because, above all, poverty is the greatest threat to health.¹

Action #4: Mandate training for health workers on social determinants of health & health literacy

All health services staff need to have an understanding of the social determinants of health and health promotion – this will support a more cost-effective and sustainable model of health care. Building a health promoting workforce means that staff will work towards preventing chronic conditions, and facilitating people’s access to and understanding of health information as well as increasing people’s capacity to use this information.

DHHS and Tasmanian Health Organisations (through Population Health and Health Promotion teams) have been engaging staff in health promotion and health literacy training within the ‘Working in Health Promoting Ways: A Strategic Framework for DHHS’ and the ‘Communication and Health Literacy Action Plan’, however this training is voluntary, and we recommend that this be made mandatory for all staff.

Action #5: Implement a ‘social determinants - pull model’ in health care

Every day our hospitals and health care providers see patients with complex health needs that arise from a combination of biological, psychological, social, economic and environmental factors. Many of these patients are on a ‘treadmill’ of treatment – presenting again and again to the Emergency Department or other parts of the health care system for the same or related health problems – and costing millions of dollars. It’s time to ‘break the cycle’ by moving beyond an ineffective ‘push’ - ‘fix them up and move them on’ model of care to a comprehensive ‘pull’ model that recognises the broader determinants of health.²

Such a model would involve ‘pulling’ patients along their journey, proactively engaging services and supports ‘upstream’ in treatment and care. It involves identifying the underlying reasons for poor health (such as inadequate housing, poor education, unemployment, addiction, and mental health problems) and setting people up for success by building ‘treatment’ pathways that cross traditional boundaries of health care. The SDoHAN calls for Government to trial and evaluate such a model in Tasmania.