

Research Director  
Health and Ambulance Services Committee  
Parliament House  
George Street  
BRISBANE QLD 4000  
hasc@parliament.qld.gov.au

To the Research Director

**Re: Inquiry into the establishment of a Queensland Health Promotion Commission**

Australian College of Nursing (ACN) is pleased to provide a submission to the establishment of a Queensland Health Promotion Commission. ACN is of the view that the nursing profession plays an important role in health promotion and that potential exists for the expansion of this role.

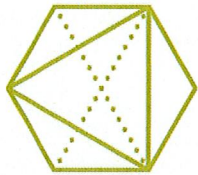
Please do not hesitate to contact me if you have any questions or if you would like to discuss any aspects of this submission.

Yours sincerely,

A handwritten signature in dark ink, appearing to read 'K Ward', with a large, sweeping flourish over the 'd'.

Adjunct Professor Kylie Ward FACN  
Chief Executive Officer

3<sup>rd</sup>  
December 2015



ACN

ACN submission to the inquiry into the  
establishment of a Queensland Health  
Promotion Commission

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# ACN submission to the inquiry into the establishment of a Queensland Health Promotion Commission

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Australian College of Nursing (ACN) is pleased to provide a submission to the inquiry into the establishment of a Queensland Health Promotion Commission. ACN welcomes the inquiry and commends the Queensland House of Parliament for proposing its establishment.

ACN is the national professional organisation for all nurse leaders. ACN is an advocate for the nursing profession, advancing the skills and expertise of nurses to provide leadership in their contribution to the policy, practice and delivery of health care. ACN chose to provide a submission to the inquiry into the establishment of a Queensland Health Promotion Commission to make the Health and Ambulance Services Committee aware of nurses' important role in (1) delivering health promotion (2) developing health literacy and (3) addressing the Social Determinants of Health.

## ***General observations***

Nurses are a widely distributed workforce with a presence in hospitals and non-acute settings such as aged care, mental health services and other community and primary health care settings. They work in metropolitan, regional, rural and remote areas. Of all health professions, the nursing profession has the most extensive reach across and within communities. Nurses already make an important contribution to the delivery of health promotion, such as through developing peoples' health literacy. However, ACN believes that the potential exists to further develop nurses' role in health promotion and developing health literacy, given supportive government funding and policy arrangements are put in place. For example, nurses could deliver health promotion and illness prevention activities targeting older Australians. Frailty prevention advice, falls prevention and vaccinations may save older people much suffering, and the public purse avoidable expenditure.

School children are another population group that ACN believes should be targeted with initiatives for the development of health literacy as children have a lifetime ahead of them to benefit from the knowledge gained. School nurses are well placed to deliver health literacy building initiatives.

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## **TOR 2a: Approaches to addressing the social determinants of health**

Social Determinants of Health (SDH) refer to the conditions and opportunities associated with education, employment, income, housing, food security, transport, physical spaces, gender, culture, social inclusiveness, racism, connection to land, incarceration and the environment, among others.<sup>1</sup> People's health outcomes are much more strongly influenced by these conditions and opportunities than by access to health care alone. Research demonstrates, for example, that between one third and one half of the gap in life expectancy between Indigenous and non-Indigenous Australians can be explained by differences in the SDH.<sup>2</sup> Poor education and literacy is linked strongly to low income and poor health status; smoking, overweight and obesity, and other chronic disease risk factors are strongly associated with low socio-economic status; and poverty reduces access to health care services and medicines, further exacerbating already at risk populations.<sup>3,4,5</sup> ACN believes a Health in All Policies model of public governance to constitute the most effective approach to addressing health inequity arising from SDHs for governments.

### **Nurses role in addressing SDHs**

Clinicians also play an important role in addressing the SDH at the level of the individual or family. Nurses in particular have an opportunity through their holistic approach to care to identify SDH-related problems affecting people they see. And through their role as care coordinators, nurses are able to offer people care that includes linking them up with services beyond the usual clinical setting such as employment and housing services. This type of care already occurs in a number of existing health service models, such as through Aboriginal Community Controlled Health services and the Mental Health Nurse Incentive Program (MHNIP) these models adopt a holistic approach to care where nurses and Aboriginal and Torres Strait Islander health workers partner with their clients to identify, and subsequently link them with, the types of services that are required to address a person's comprehensive needs. This may include, for instance, referring them to, and coordinating their care between, family violence, drug and alcohol, employment, and housing services, in addition to clinical care. Nurses also contribute to addressing the SDH through their roles in schools, workplaces, and other non-clinical settings, where, among other things, they provide education, advice, support, and referral options.

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<sup>1</sup> Carson B, Dunbar T, Chenhall RD, Bailie R, eds. 2007. *Social determinants of Indigenous health*. Crows Nest, NSW: Allen and Unwin.

<sup>2</sup> Booth, A & Carroll, N 2005, *The health status of Indigenous and non-Indigenous Australians*, Centre for Economic Policy Research, Australian National University, Canberra; DSI Consulting Pty Ltd & Benham, D 2009, *An investigation of the effect of socio-economic factors on the Indigenous life expectancy gap*, DSI Consulting Pty Ltd.

<sup>3</sup> Marmot, M and Wilkinson, R (eds) 1999. *Social Determinants of Health*, Oxford University Press, New York.

<sup>4</sup> Marmot M. 2004. *The status syndrome: how social standing affects our health and longevity*. New York: Holt Paperbacks.

<sup>5</sup> Marmot M. 2003. *Social determinants of health: the solid facts*. Denmark: World Health Organisation

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While this role is well within the nursing scope of practice, currently it may often be beyond nurses' work capacity in general health care settings. For example, Maternal, Child and Family Health Nurses (MCAFHNs) currently work in a range of comprehensive care settings to improve health outcomes for children and families,<sup>6</sup> prevent disease and illness, and modify the effects of chronic disease that can occur following low birth weight.<sup>7</sup> However, their scope of practice is often constrained by disparate jurisdictional/national funding priorities for primary care. Where there is clear evidence that early intervention in the form of comprehensive care, incorporating the SDH, can reduce a host of physical and psychological diseases<sup>8,9</sup> and result in the highest rates of economic return for human capital investment, there is an imperative to uniformly increase the capacity of MCAFHNs to undertake these roles.<sup>10</sup> For nurses to proactively address the SDHs, they require supportive government funding and policy arrangements, such as those that recognise the breadth and potential of their skills set, and which enable them to work to their full scope of practice.

Despite the important work nurses already contribute, there are opportunities to expand nurses' role in health promotion and illness prevention. ACN would like a Queensland Health Promotion Commission to consider how to better utilize nurses' breadth of skills and reach across communities for the delivery of health promotion activities. Further, nurses are well placed to identify SDH-related issues affecting people and communities they interact with.

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<sup>6</sup> Fraser, S., Grant, J. and Mannix, T.G. 2014. The role and experience of Child and Family Health Nurses in developed countries: A review of the literature. *Neonatal, Paediatric and Child Health Nursing*, 17(3) pp. 2-10.

<sup>7</sup> Schmied, V., et al. 2011. *National Framework for Universal Child and Family Health Services*. Canberra, Australian health Ministers Advisory Council.

<sup>8</sup> Shonkoff, J. 2000. *From Neurons to Neighbourhoods: The Science of Early Childhood*.

<sup>9</sup> Shonkoff J. 2011. 'Building a Foundation for Prosperity on the Science of Early Childhood Development', *Pathways Winter*, pp. 10-15.

<sup>10</sup> Productivity Commission 2011, 'Early Childhood Development Workforce', Research Report, Melbourne.