

9 June 2020

Mr Don Challen AM  
Chair, Premier's Economic and Social Recovery Council  
Email: [secretariat.PESRAC@treasury.tas.gov.au](mailto:secretariat.PESRAC@treasury.tas.gov.au)

Dear Mr Challen

***Re: Stage one consultation by the Premier's Economic and Social Recovery Council***

I congratulate you on your appointment as Chair of the Premier's Economic and Social Recovery Council. AMA Tasmania supports the work of the Council to look at the short, medium and long term recovery of the Tasmanian community post the COVID-19 outbreak.

While AMA Tasmania was not invited to be part of stage one of your Council's consultations, I have taken the opportunity to write to you to put forward the views of the AMA, which I believe should form a part of your thinking.

Of course there are the bricks and mortar projects that we would advocate for to be part of any stimulus that might be promoted to help create local jobs, and to that end I attach a copy of the AMA's 2020-21 budget submission that outlines such projects. We also have supported a submission from Primary Health Tasmania, that encourages investment in ICT to help bring our health system into the twenty-first century and take advantage of the use of technology that has been thrust upon us all across the community through the COVID-19 lockdown.

However, there is more to our future than one-off projects. The opportunity to save livelihoods and advance Tasmania's economic future should be in natural partnership with improving the life prospects and health of all Tasmanians. Our current post-COVID preparation gives us a unique opportunity to re-evaluate what we have been doing and what we should be doing to improve the socioeconomic prospects of Tasmanians.

To this end, we now have a unique opportunity to fundamentally improve the socioeconomic determinants of health for current and future generations of Tasmanians as we emerge into the post-COVID "new normal". AMA Tasmania is more than willing to work with you achieve a shared objective - ensuring all Tasmanians have the chance to optimally participate in our economy and society, and in return enjoy improved health and wellbeing.

It was particularly pleasing to note the Premier's comments early in his term indicating an intention of the government to tackle disadvantage in Tasmania; to consider how we might best grow and share the prosperity of our state to the benefit of all its citizens. The establishment of this Council with both an economic and social focus is testament to his commitment.

I am passionate in my belief that there is both an immediate opportunity as well as desperate need for us to address the gap in health, wellbeing and societal participation that afflicts too many Tasmanians who live in areas of entrenched suburban disadvantage. For example, the 19 year life expectancy gap that exists between those who live in Hobart suburbs that are only 19 kilometres apart from each other, can be addressed, but it will require a cross-portfolio approach dealing with the root cause of intergenerational disadvantage in educational achievement, employment opportunity and health outcomes. Such suburban differentials in outcomes are an issue of state-wide relevance, for each of our cities have similar histories of entrenched outer suburban disadvantage. But, together we can stop perpetuation of this history of disadvantage. We can use evidence based holistic policy to break the cycles of intergenerational disadvantage.

A socioeconomic determinants of health and wellbeing strategy that puts the consideration of Health and Wellbeing in all policies and in all portfolios is a way forward that is evidence based and strongly supported by international experience and literature. It is a worthwhile way of ensuring the often forgotten Tasmanians who live in our outer suburbs share in and contribute to our State's prosperity. It is also a strategic approach to reducing the long-term costs to government and our broader society that are associated with intergenerational poor health, poor employment skills and poor societal participation.

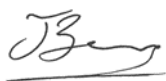
The opportunities this great State of ours can afford begin by optimising the biological and social foundations of literacy in the earliest years of life, the capacity to participate in meaningful education and training, through to realising opportunities for meaningful employment.

A tangible demonstration project for this approach would be a *"From the first 1000 days to the first day of School"* strategy to provide a conception to age four years approach to establishing the health, language, literacy and socialisation capabilities needed for children to perform at their optimum in entering our school system.

Optimal educational attainment can be every Tasmanian's ticket out of poverty and entrenched disadvantage, to employment health, community participation and general wellbeing. No one portfolio can deliver this; it cuts across all portfolios, particularly Health, Justice, Police, Communities and Education.

I would be happy to speak to you about any of these issues should this be of interest to you and your council.

Yours sincerely



Professor John Burgess  
President, AMA Tasmania



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## AMA TASMANIA POLICY POSITION STATEMENT

### September 2019

# Addressing intergenerational health disparities: The -1 to 5 Healthy Start Agenda

## Position

The AMA recognises that many factors impact a child's health and wellbeing. In particular, a healthy start to life commencing with parental health pre-conception through to age 5 years, fundamentally impacts every person's lifelong health and wellbeing prospects. Many of the factors impacting the -1 to 5 years of life are influenced by the family, community and access to government services.

The AMA believes that all government policy, implementation strategies and actions can be assessed against five target domains so as to ensure every child has a healthy start to life. The five domains are:

1. **Healthy families:** ensure access to housing, food and employment which will help to provide good physical, mental health and emotional security to a child; provide programs to assist parental literacy and particularly health literacy, so parents can make well informed decisions that will impact positively on their children.
2. **Preconception planning:** help prospective parents to look after their own nutrition; stop or reduce the consumption of tobacco, alcohol or other drugs; increase iodine, folate and exercise; and reduce obesity
3. **Healthy pregnancy:** encourage exercise to help reduce obesity and increase fitness; encourage better general nutrition and increase iodine and folate; discourage consumption of tobacco, alcohol or other drugs
4. **Healthy early childhood:** promote exercise, play, general nutrition, iodine, folate and immunisations; encourage healthy family environments to help provide emotional and physical security for children; improve parental literacy and education
5. **Education for a healthy life:** support language development, which is the foundation of literacy and later learning

## Background

The start children get from the beginning of pregnancy through to school age has a critical impact on health life-long. During this time genes are turned on and off, massive brain development occurs and the foundations of both good and poor health are laid. Parental health and parental environment are also critical factors impacting on a child's healthy start to life.

## Issue

Tasmania has a higher portion of people living in a lower economic status group than other states. Around 120,000 Tasmanians live in poverty. Families can struggle to find stable accommodation and provide appropriate nutrition for their children. Access to medical care and appropriate health literacy can be challenging. The health, wellbeing and environment of the parents and family fundamentally impact the growth and development of the foetus as well as the child. A safe and stable family environment along with literacy precursors such as being read stories in early childhood and addressing family violence are critical to subsequent socialisation, wellbeing and educational opportunities when children enter to school system.

## Summary

A health start to life in the period of -1 to 5 years age is critical to lifelong health and wellbeing. Health-related capacity building between -1 to 5 years age means requires support for children, their families and their communities. Government can play a key role through thoughtful design and implementation of all policies and programs, in ensuring all children get a health start to life.

## Relevant AMA resources

*Breaking the cycle of intergenerational dependency through health-related capacity building* August 2011

## References

*The Health and Wellbeing of Tasmania's Children and Young People Report 2018* (Commissioner for Children)

*Tasmanian Child and Youth Wellbeing Framework 2018* (Tasmanian Government)

*Child and Student Wellbeing Strategy (2018-2021)* (Tasmanian Education Department)

*Suburbs with the worst smoking rates in Australia revealed* (ABC 1 June 2019)

*'I'm sleeping in my car': These are the victims of Hobart's housing affordability crisis* (SBS News 8 July 2019)

*Socio-Economic Advantage and Disadvantage – ABS 2016 Australia snapshot*

*What does poverty look like in Tasmania?* TasCOSS July 2019