**ASSA and AAHMS Post Symposium: Communique**

**The Fellows of the Australian Academy of Health and Medical Sciences (AAHMS) and the Academy of Social Sciences in Australia (ASSA) assembled together for their annual meetings (Adelaide, 18-20 Oc. 2017) culminating in a joint symposium *Health Equity; challenges and solutions.***

**The presidents of the academies, Professors Ian Frazer (AAHMS) and Glenn Withers (ASSA) lauded the opportunity for their members to engage on a topic of mutual interest and national importance. Both leaders pointed to the importance of experts across many disciplines exploring opportunities for providing robust and wide-reaching solutions to health concerns. An equitable and accessible national health system deserves a broad and constantly improving front of complementary public policies that provide for one and all. Experts from these two academies committed to help provide the national health system with cooperative and research-based knowledge for policy development and national well-being.**

**Defining the challenges**

Worryingly, health inequity in Australia is increasing, and in easily identifiable ways. For instance, Indigenous peoples’ death rates approach double those of non-Indigenous peoples, while avoidable deaths are significantly higher for more socio-economically disadvantaged people, particularly those in rural and regional areas. Health inequities also operate as a gradient in society whereby across five socio-economic quintiles there are distinct differences between each level.

One part of the problem is that Australia treats health as an issue for the health sector alone, while public health experts see health as embedded in many sectors of society, and as greatly affected by socio-economic conditions and the distribution of resources. Evidence from the social sciences shows that when a more embedded approach is taken, public policy levers can flatten the health gradient and close the health inequity gaps that exist. For instance, in New Zealand, the investment in policy initiatives, such as the implementation of a tobacco tax and colorectal cancer screening, have shown to be effective at reducing health inequalities. In Australia legislation mandating plain packaging of tobacco policies has had a positive impact in reducing smoking, while, medically driven HPV vaccination programs in subsistence economies have reduced inequalities in affected communities. In each successful case, the core goal has been improving access to health services for whole populations and reducing social, cultural and economic barriers to access for those for whom services are hard to reach. For Australia, encouraging policies that embed health equity objectives across all sectors could help flatten the health gradient and improve the health of Aboriginal and Torres Strait Islander people, and rural communities.

**Finding solutions**

The medical sciences are critical for treating persons who are already un-well. Similarly, the social sciences, in collaboration with the medical sciences, are critical for developing preventive strategies and in finding new measures to improve the health care system. All evidence suggests that health researchers collaborating with demographers, economists, statisticians, sociologists, psychologists, political practitioners, legal experts and other social scientists will not only be able to identify more detailed and robust solutions to existing problems of public health delivery, but their collaborations are likely to anticipate future needs and efficient means to address them.

The new age of big data collection and super-computers can assist analyses of data. When combined with collaborative research initiatives that will investigate patterns of health, associated social and environmental factors, life history and the complex interactions of factors leading to healthy or unhealthy lives, new technologies have the potential to have a profound impact on human health.

To best achieve these goals researchers and practitioners will do well to take a more systematic approach to strengthening collaboration across the disciplines. In some cases this will require radically different approaches to how research questions are asked methods are devised to include both quantitative and qualitative approaches. The social determinants of health are known to play a powerful part in determining how healthy people are, including in terms of access to health services. Government policies and programs will also need to adjust to changing health research needs. With increasing multidimensional and cross-sectoral research teams being developed funding bodies such as the National Health and Medical Research Council and the Australian Research Council will be challenged at their boundaries to accommodate new forms of robust collaboration. Balancing the needs of different communities, achieving health equity and establishing effective economic policies will challenge government and those experts who provide research based advice. Those challenges must be met.

**Indigenous Health – can we close the gap?**

In Australia, one of the most visible outcomes of health inequity are the persistent disparities in Indigenous health outcomes when compared with other Australians. Our health systems have been unable to meet the needs of Aboriginal and Torres Strait Islander health. Closing this gap has been established as a national priority with bi-partisan support. The symposium presenters showed evidence that for Indigenous Australians we must rethink how health is viewed, and how positive outcomes can be achieved. For example, often the focus for Indigenous communities is largely on acute health care, with the social determinants of health acknowledged but left unattended.

Developing multi-dimensional approaches to healthy individuals and their communities can achieve much in reducing inequality in population health. Also, engaging with Indigenous doctors and allied health professionals in partnership with communities will assist in eliminating inequalities and effectively help to “close the gap”. Prime Minister Turnbull said in the 2017 ‘Closing the Gap’ report: “*While governments have a critical role in setting polices and implementing programs, true gains are made when Aboriginal and Torres Strait Islander people are able to work with governments to set the agendas that impact on their wellbeing”.*

Aboriginal community-controlled health services were highlighted as an effective model of care that improved health outcomes through focussing on both issues of identifying and addressing social determinants and also self-determination

Health sciences and social sciences share many common goals. At their foundations those goals are devoted to finding equitable means by which all people can share in national fortunes. This symposium focused on how equity can be promoted in the health of the Australian population. Valuable ideas were put forward, evidence aired and experts discussed. The job ahead has just begun.