Applying a health lens analysis to Healthy Sustainable Regional Development

An evaluation of the Health in All Policies approach to policy development

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Introduction

The South Australian (SA) government and SA Health are committed to taking action to promote health and reduce health inequalities through addressing the social determinants of health. In order to incorporate consideration of health impacts into the policy development process of other sectors and agencies, an innovative policy strategy termed Health in All Policies (HiAP) is being used in SA. This approach requires engagement across government as well as leadership from the health sector and other key decision-makers.

A key mechanism in the SA HiAP model is a process termed ‘Health Lens Analysis’ (HLA), which draws on a range of assessment and analysis methods. The HLA has been applied to a range of policy areas including migrant settlement, water security, transit-oriented development, and access to digital technologies. The HLA process aims to examine the key interactions and synergies between the policy area under consideration and population health and wellbeing. The project partners develop recommendations that inform the development of public policy across the partner agencies involved, while simultaneously supporting improved population health outcomes.

The Upper Spencer Gulf project commenced in 2009 and was initially led by the Department of Primary Industries and Regions SA (PIRSA), until a government restructure resulted in the project being transferred to the Department of Manufacturing, Innovation, Trade, Resources and Energy (DMITRE) and subsequently Department of State Development. Informal consultations also occurred with the Department of the Premier and Cabinet (DPC), Commonwealth Department of Regional Australia, local government and arts and sports organisations.

The products of the HLA include a report and an Atlas detailing the health and wellbeing indicators for each of the communities in the Upper Spencer Gulf region. This atlas was disseminated to Regional Development Authorities (RDAs) and local councils in the Upper Spencer Gulf region to inform their future community planning.

Evaluation is an essential component in the HiAP approach as emerging results inform the future development of models and processes. This evaluation is one in a series of project evaluations which examine the process and methods used during HLA and explore the impacts of the process in terms of policy development.
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**Project Description**

The Healthy Sustainable Regional Development Health Lens project was a collaboration between the Health in All Policies (HiAP) Unit, SA Health and the Policy and Economics Division at the Department for Manufacturing, Innovation, Trade, Resources and Energy (DMITRE). The project also involved consultation with the Commonwealth Department of Regional Australia, Local Governments, Arts and Sports and Regional Development Australia (RDA) bodies.

The SA Government aimed to maintain expenditure on minerals mining exploration and increase the value of minerals production in SA. In an aim to gain health co-benefits from this goal, the Healthy Sustainable Regional Development project used the HLA process to identify mechanisms, strategies and information sources that could be used by regional development organisations, as well as state and federal government agencies, to improve the health and wellbeing, sustainability and economic positioning of the communities in the Upper Spencer Gulf region.

The Healthy Sustainable Regional Development project applied the HLA process to identify opportunities for communities in the Far North, Yorke and Mid North, and Whyalla and Eyre regions to capitalise on mining operations and the associated federal investment in regional Australia and the rollout of the National Broadband Network (NBN). The project was underpinned by the concept of ‘healthy sustainable regional development’, which draws together elements of:

- Sustainable development: meeting the needs of the present generation without compromising the ability of future generations;
- Healthy communities: communities that continually create and improve the physical and social environment, and draw on resources to help individuals and groups realise their maximum potential.

The project aligned with a number of key State Government policy drivers. These policy drivers included the:

- Plan for Accelerating Exploration: A state initiative focused on maintaining mineral exploration levels at or above South Australia’s Strategic Plan (SASP) targets, while responding to the pressures and issues faced by the resources sector)
- South Australian Planning Strategy: Overarching policy framework for the physical development of the state comprised of the 30 Year Plan for Greater Adelaide and seven regional volumes including the Far North Region Plan for responding to the growth of mining and tourism industries); and
- Cabinet Strategic Priority Mining: Realising the benefits of the mining boom for all.

This project was also intended to contribute to the achievement of several SASP targets (see Table 1 below).
Table 1: SASP targets relevant to the Healthy Sustainable Regional Development Project

<table>
<thead>
<tr>
<th>2007 SASP Target</th>
<th>Aims</th>
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<tr>
<td>T1.1 Economic growth</td>
<td>Exceed the national economic growth by 2014</td>
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<tr>
<td>T1.12 Employment participation</td>
<td>Increase the employment to population ration, standardised for age differences, to the Australian average.</td>
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<tr>
<td>T1.14 Total exports</td>
<td>Treble the value of South Australia’s export income to $25 billion by 2014.</td>
</tr>
<tr>
<td>T1.18 Minerals production</td>
<td>Increase the value of minerals production to $3 billion by 2014.</td>
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<tr>
<td>T1.19 Minerals processing</td>
<td>Increase the value of minerals processing to $1 billion by 2014.</td>
</tr>
<tr>
<td>T2.4 Healthy South Australians</td>
<td>Increase the healthy life expectancy of South Australians by 5% for males and 3% for females by 2014.</td>
</tr>
<tr>
<td>T2.5 Aboriginal healthy life expectancy</td>
<td>Lower the morbidity and mortality rates of Aboriginal South Australians.</td>
</tr>
<tr>
<td>T4.7 Business innovation</td>
<td>The proportion of South Australian businesses innovating to exceed 50% in 2010 and 60% in 2014.</td>
</tr>
<tr>
<td>T4.8 Broadband usage</td>
<td>Broadband usage in South Australia to exceed the Australian national average by 2010, and to be maintained thereafter</td>
</tr>
<tr>
<td>T6.15 Learning or earning</td>
<td>By 2010 increase the number of 15-19 year olds engaged fulltime in school, work or further education/training (or combination thereof) to 90%.</td>
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<tr>
<td>T6.19 Non-school qualifications</td>
<td>By 2014, equal or better the national average for the proportion of the labour force with non-school qualifications.</td>
</tr>
<tr>
<td>T6.21 VET participation</td>
<td>Exceed the national average for VET participation by 2010.</td>
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The Upper Spencer Gulf project followed the SA HiAP HLA model of engagement, undertaking both quantitative and qualitative evidence gathering, generating recommendations/resources, navigating recommendations/resources through the various governance structures of the lead agencies, and evaluation (see Fig 1).

Figure 1: South Australian Health in All Policies model of Governance and Health Lens Analysis
Evaluation

This evaluation of the Healthy Sustainable Regional Development HLA project was undertaken as part of a series of broader process evaluations of Health Lens projects. This evaluation was undertaken by Southgate Solutions (formerly the South Australian Community Health Research Unit) to explore the process and outcomes of the HLA approach as it has been applied to sustainable regional development in the Upper Spencer Gulf region of SA.

The evaluation drew upon an analysis of project documentation and interviews with public servants involved in the Project (n=4). The interviews were conducted as part of a larger project funded by the National Health and Medical Research Council (NH&MRC) evaluating the effectiveness of the SA model of HiAP in addressing the social determinants of health. The data collected for the NH&MRC case study of the Healthy Sustainable Regional Development project was published in an interim report (Flinders University, 2016). SA Health funded further interviews with staff from the partner agencies (n=4) and further analysis of interview data and documents collected as part of the NH&MRC project, for the purposes of this process evaluation.

Interviews and documents were analysed thematically using NVivo 10 data software to identify information about the processes applied, the outcomes achieved and the perspectives of those involved. The findings of this evaluation are reported by each stage of the HLA process. However, it is important to note that while these stages are reported separately, in reality they often occurred concurrently.

Engage

The SASP mining targets were identified by the Executive Committee of Cabinet’s Chief Executive Group as an area for HiAP work in late 2009. In 2009 and 2010, informal discussions were held between PIRSA and SA Health. In 2011, representatives from PIRSA and SA Health met with representatives of DPC to discuss the focus of the project and to ensure that the project complemented the regional development activities that were being led by DPC.

Through this process, it was decided that this project would focus on the Upper Spencer Gulf region for two reasons. Firstly, the Upper Spencer Gulf region is in close proximity to key mining sites in SA which necessitated increased demand for skilled workforce and infrastructure in the area with the expected mining boom. The boom presented challenges for communities to respond to the opportunities and adapt to the increased population, services and infrastructure needs in the communities. Secondly, the Upper Spencer Gulf region was being considered as a potential recipient of the Government's regional roll out of the NBN. The high-speed internet access brought about by the NBN roll-out opens up further opportunities for the provision of online health services and training and education opportunities for people living in these communities.

These two factors combined to produce renewed federal government commitment to regional development in that part of SA. In defining the scope of the Healthy Sustainable Regional Development project, the initial focus was on minerals exploration. The scope of this project then narrowed to fly-in-fly-out (FIFO) workers before finally concentrating on the sustainability of the development of the region. These factors are significant determinants of health, therefore it was important they were investigated so that planning in the region could capitalise on these opportunities.
After the scope of the project had been defined, the project was endorsed by the Chief Executives of SA Health and PIRSA. This project differed from other HLAs in that a formal executive oversight group was not established. However, senior executives provided advice at various points throughout the project and an inter-departmental working group, comprising staff from PIRSA and the HiAP Unit in SA Health was established.

This working group engaged in discussions with the then Department of Further Education Employment, Science and Technology (DFEEST), the Department of Trade and Economic Development, the Economic Development Board and Regional Development Australia (RDA), as well as the Federal Department of Broadband, Communications and the Digital Economy. Part way through this project, there was a machinery-of-government restructure and the corporate responsibility for mining was moved from PIRSA to DMITRE. Despite the change in corporate responsibility, a number of factors led to the Sustainable Regional Development Project continuing through DMITRE; the project fitted with DMITRE’s core business, the staff who had been engaging with this project also moved to DMITRE and management were responsive to and supportive of the project.

After some of the evidence gathering stages (discussed below), the Chief Executive of SA Health sent the Chief Executives of DMITRE and PIRSA letters outlining the links between the project and their respective department’s core business to demonstrate the benefits to their agency. DMITRE then formally signed on to become a partner on the project. During the evidence gathering stage a meeting was held with the State Director of the Department of Regional Australia, Local Government, Arts and Sport to discuss alignment of the Healthy Sustainable Regional Development HLA project with the department’s regional development priorities. Discussions were also held between DMITRE, the HiAP Unit and the Chief Executive Officers of the Yorke and Mid North and Far North RDAs to discuss the HLA project and how it could assist them with their annual planning. These discussions with the RDAs confirmed the importance of identifying opportunities to improve health and wellbeing in the Upper Spencer Gulf area in their future planning.

**Gather Evidence and Generate**

In order to develop a profile of the Upper Spencer Gulf region, the evidence gathering stage involved a number of components. The evidence gathering and generating stages of this project occurred simultaneously. The generating stage did not progress in the same way as other HLA projects; similar to the Transit-oriented Development HLA, this project did not result in a set of policy recommendations, rather, it resulted in the production of a number of resources aimed at informing planning and policy development. This decision was based upon the recognition that a comprehensive source of information specifically about the Upper Spencer Gulf Region was needed. The evidence gathering and resource generating stage of this project involved a number of steps:

- A literature review examining the impacts of mining and FIFO workers on a region. The literature review began broadly by examining general issues such as the sustainability of a FIFO workforce.

- Concurrently, work was undertaken to collect examples of frameworks that can be used to assess and understand sustainable regional development. This involved the collection of ‘triple bottom line’ models that consider the economic, environmental and
social aspects of regional economic development, as well as resources that facilitate assessment of health benefits and costs.

The literature review and collection of frameworks assisted in determining the focus of the project, which centred on considering the impacts of mining on the health and wellbeing of the communities concerned. This focus also aligned with emerging interest areas in the partnering departments.

- Furthermore, a review of “road maps” (planning documents) for Whyalla and Eyre Peninsula, Far North and Yorke Peninsula, and Mid North produced by RDA indicated that greater attention to social aspects of regional development was needed.
- The HiAP team then evaluated the effectiveness of existing programs in addressing the social, economic and environmental needs of regional communities.
- Community Profile ‘samplers’ for each RDA region examining social and community strengths, economic inputs and environmental factors were also developed to provide a snapshot of the regions.
- The University of Adelaide was contracted to develop a detailed atlas of social, economic and environmental factors that impact on health specifically for the Upper Spencer Gulf region. A Regional Atlas of Community Health and Wellbeing in the Upper Spencer Gulf, South Australia was developed to inform the development of the areas.
- An analysis of the impact of priority areas in the SA Government’s Seven Strategic Priorities on social determinants of health was also used to develop an Issues paper which discussed issues associated with mining and FIFO workers: A health lens over the seven strategic priorities: Realising the benefits of the mining boom for all. This paper highlighted the social, economic and environmental impacts of FIFO workforces and was drawn upon and developed further in the context of the Upper Spencer Gulf region as the project progressed.
- This Issues paper was used to develop a budget bid to examine the ways to provide opportunities to people within the Upper Spencer Gulf to develop businesses and obtain traineeships to service the mining sector. This budget bid was not successful; however another budget bid to map the assets in the area was successful and was awarded $75,000 in June 2014.
- In 2015-16, the Upper Spencer Gulf Community Capacity Building project was commissioned by the Department of State Development, Department for Health and Ageing and Regional Development Australia Yorke and Mid-North. The project aimed to identify, map, review and further enhance strategies underway to increase community capacity and address the social determinants of health. The project followed the development of the Regional Atlas and was informed by a literature review. A Background Paper for the project was produced in June 2016.

The development and collection of resources provided a body of evidence upon which to base future planning.

**Navigate**

Because there were no recommendations produced as part of this HLA project, the navigation stage was different to previous projects. The major outcome of this work was the development of an Atlas which provides detailed information about health, economic
and social indicators for each of the communities in the Upper Spencer Gulf region of South Australia.

The Atlas was developed by the Public Health Information Development Unit at the University of Adelaide in consultation with DMITRE, the HiAP Unit and members of the RDAs. In order to complete this resource, drafts were sent between the collaborators and feedback was incorporated into the final version. Upon completion of this resource, a briefing was produced for the Senior Executive of the Department for State Development (formerly DMITRE) and SA Health to inform the departments of the release of the document. These two briefings led to the Atlas being presented at a Country Cabinet meeting focused on planning.

The Atlas has been distributed widely to Regional Development Authorities and Local Government. An online version, where the data will be kept up to date, is available from: [www.atlasesaustralia.com.au/upperspencergulf/atlas.html](http://www.atlasesaustralia.com.au/upperspencergulf/atlas.html).
Participant perspectives on the HLA process for the project

The participants in the evaluation project were representatives from partner agencies, as well as from SA Health, all of whom had been actively involved in the HLA.

Engage

The engagement phase of this project began informally, with conversations about opportunities for the collaboration taking place over a number of informal meetings before formal discussions took place.

Some participants indicated that the engagement stage of this project took longer than expected because of delayed responses from staff at one of the partner agencies in the initial stages of the project. Some participants indicated that although the work was clearly important, they had concerns about how much support there was for the project in the initial stages:

“So we felt that there were things that gave the project rationale, so there was no shortage of those. Whether anybody was prepared to champion that, the project based on that rationale, I would say there wasn't.”

However, once the partners became engaged with the project, participants indicated that the general scope of the project was decided upon relatively quickly, due to the development in the Upper Spencer Gulf area at the time:

“When we were talking about the Upper Spencer Gulf it was really in relation to the mining boom and so I think that was probably the first thing that we settled on.”

While deciding on the SA region was straightforward due to the roll out of the NBN and the imminent mining boom, deciding on the specifics of the scope was reported to be time consuming. As previously discussed, the scope of the project changed from a focus on FIFO workers to a focus on healthy, sustainable communities. One participant reflected on this phase, indicating that it took some time for shared understandings of the health impacts and issues of sustainable development to be developed:

“That person said ‘Wow, there’s something missing here. Where’s the health and wellbeing?’ and I’m a health person going ‘Well, I could have told you that from the start but obviously this process is not for us to lead it. We’re there to facilitate, help build a picture, tell a story…”

“I think that’s the nature of the Health in All Policies projects, that they do move and shape and they do take a bit longer because you are trying to find that place to settle.”
Although this suggests that the process of defining the scope was lengthy, participants indicated that once the scope had been defined, the project progressed smoothly because the parameters for the project were clear:

“I think there was a lot of learning that went on within the project which got us to where we – well really where’s the value we add and where are we – where do we have the licence to operate? Clearly it was in a fairly defined space, so once we’d established that it became a whole lot easier to move forward on it.”

One participant commented that the HiAP Unit promoted continued engagement with the project, and that this maintained their interest in the project and its outcomes. This engagement was reported to be relatively informal and quite effective for building trust and commitment:

“It was pretty simple, just gathering for a cup of coffee and a chat”

Participants also indicated that the informal meetings continued through the writing of the project proposal:

“He didn’t mind me having these coffee conversations; I think he used to think it was a bit odd, and then slowly we got a proposal together and I think we had a couple of versions. I kept rewriting things.”

One participant from Health also reflected on the process of developing the scope of the project whereby the health and sustainability impacts of the development in the Upper Spencer Gulf region were realised, indicating that this was an important step for engagement in the project:

“There was interest … from other partners to take on some of that work and feed it into what they were doing … probably for me that was the ground breaking moment, in that from my understanding of how determinants of health can be applied to different areas and how we all have light-bulb moments about, ‘What does this mean? What does this mean for the project?’ … because when non-health people are starting to see that if not done properly it would not be sustainable and so then that would also compromise these targets.”

The Government re-structure in which the corporate responsibility for SASP mining targets was shifted from PIRSA to DMITRE occurred during the progression of this project. As a part of the re-structure, key staff involved in the Healthy Sustainable Regional Development project also moved to DMITRE. Participants indicated that the change in partnering agency was not an issue for the project, and that the continuity of the staff assisted this smooth transition:
“It was always associated with the SASP targets and the SASP targets came with us so in a sense the project naturally came with us.”

**Gather**

When reflecting on the evidence gathering stage of this project, participants described the importance of this stage in informing the discussions which took place and decisions which were made:

“What we felt was that the people that are having the discussions up there didn’t have a strong evidence base to be having the discussions around sustainable communities and so that’s where we focused on, is how do you actually have informed discussions there and what is the information you need to provide the basis for those informed discussions? So that really became the focus of the project.”

The evidence base established was described as essential for understanding the problems and framing the issues in terms of health and sustainability. The evidence base also informed what work would be helpful in the specific policy space:

“The formative stage of the project needed to have … a better understanding of the problem and what we could do in that space and what we couldn’t which is where we came down to ‘Okay, let’s really focus in on the information gaps in the evidence base, but what frame does that exist in?’ and the frame was around a sustainable community in a broad sense as opposed to ‘we’re going to be a player in regional development.’”

Participants also indicated that the evidence gathering stages highlighted the health impacts of development specific to the Upper Spencer Gulf area, and the complexity of these health issues compared to other areas within the partner agencies responsibilities:

“There’d been various studies around the Upper Spencer Gulf around economic development stuff and they all sort of said ‘the community needs to be more functional, have stronger networks so you get higher levels of skills and health and all that sort of stuff’ but no-one’s invested in doing something because it’s easier to go and, you know re-design an intersection.”

**Generate and Navigate**

The Sustainable Regional Development project has been described as being different in the generating phase than other HLA projects because rather than developing a set of recommendations for the policies of partner agencies, this project resulted in the generation of a number of resources. The decision to develop resources rather than recommendations was based upon the recognition that there was a need to gather evidence upon which planning for the development of the Upper Spencer Gulf region could be based:
“A lot of people know the issues up there, they just haven’t quantified them or if they’ve quantified them it’s in a very fragmented sort of way. So this was an attempt to … shine a light on them in a more rigorous way and bring it together in terms of the Atlas.”

One participant described the development of these resources as tangible, practical and applied:

“I don’t think it’s a Health in All Policies project in the way that the previous ones have been because they have had specific policy recommendations to state government agencies whereas this one has resulted in a resource, I guess, as well as obviously building capacity within DMITRE and the RDAs and others to think about health and wellbeing in their planning, but really a solid kind of outcome is going to be the resource, not specific policy recommendations. I mean we could make recommendations around how the resource is used in policy development but we’re not at that point at the moment.”

The major outcome from this project was the development of the Atlas which includes economic, environmental and wellbeing indicators for the communities in the region. This Atlas was designed to inform the RDA’s regional plans. The release of this Atlas (as with the final report) was delayed so that it did not coincide with the Federal election. The release was also delayed due to the sensitive nature of the Port Pirie maps given the health and wellbeing indicators which are affected by lead exposure in the area:

“The whole document has been completed. The holdup was data around Port Pirie because obviously it’s quite a sensitive issue for state.”

The navigation around the issue of lead was reported to be slightly more complex than the typical HLA navigation process:

“Government and the lead, so that in itself required a bit of navigation and needed to go through the Port Pirie transformation group, which is the state government and [organisation] that oversee the lead abatement program in Port Pirie.”

However, despite the delay in release, participants have reported that the Atlas has been used to inform the regional development plans:

“We developed them with the idea that the RDAs would use them and there is some evidence that they’ve already started to use the Atlas document in their planning which is … what we wanted. I guess there are opportunities for other groups in the region to also use the document in their planning, whether that’s services or local government. Public health planning for example, there’s some really key sections on the three towns that we looked at. I imagine that would be a great resource for a local government who needs to develop a public health plan”
Here, the participant also highlights the opportunity for the Atlas to inform other work in these regions, thus furthering the impact of the work carried out in this project. Another participant indicated that while the development of the Atlas was time consuming, the resultant product was very useful, and that this may be because of the time taken to consider the uses and many opinions on the final product:

“I’m so happy with the product it will actually be really useful and so some of those delays become irrelevant because I’ll actually be able to get on and use it.”

Other participants also commented on the further use of the Atlas to inform future work and planning. In this case, the participant indicated that the extent to which the maps are used may depend on the push from both Health and the partner agencies, and the amount of follow-up on the use:

“I guess it’s in both our department’s interests that the product is used; to the extent to which we will formally chase that is a little unclear. … There has emerged that broader common purpose group that tries to bring economic development, the social, and the environmental bodies together at decision making there. One would like to think that they will utilise the tool that’s been created out of this on an ongoing basis and that other Regional Development Authorities will see this as being ‘Well, that was pretty handy; let’s do one for the Riverland or the South-East or the West Coast’ or wherever.”

In addition to the need to encourage the use of the Atlas, participants indicated that although it provides in-depth information, there may be a need to assist in the interpretation of the information and translation of this information into practice and planning:

“I think at this stage they’re all happy to have the information there but probably not quite sure about how to proceed with digesting some of that information”.

However, interviews which were conducted after the release of the Atlas have indicated that it is being used and even in the early stages has informed some planning in the communities that it provides information about:

“So we’ve used this work now it’s published to go to our local councils, particularly in low socioeconomic areas. Like I’ve given a copy to [community] and said ‘I need to think about how it is you want this to be done’ and they’re like ‘Oh this is great’ because they’re a small council and community.”
Reflections on the overall process

When reflecting on the project in general, participants indicated that there were delays at several stages. Several participants also indicated that the project was relatively long. However, these participants indicated that the length of time taken to complete the project was a result of the complexity of the issues and of the proposed solutions to these issues, and that more time was taken because it was not as clear cut as other work:

“Whatever, it’s a fairly long period of time. Because we haven’t had a really discrete issue and we’ve really tried to take a broader one. I think if we had a more discrete one it would have been – you know, we would have just sort of done it, delivered the outcome, the program would have been put in place and that’s it, where this thing is actually trying to get a change of outlook of the agents within policy thinking, which is much more…”

One participant also suggested that there was general consensus that the project was important, but due to the complexity of the work and the issue, it hadn’t been undertaken before because it was seen as something that was too hard and therefore not as much of a priority as other more clearly defined areas of work.

Participants indicated that even greater understanding of the topic area may emerge from Stage 2 of the project, which has not yet been evaluated. Stage 2 involved further work to explore how the strengths of communities in the Upper Spencer Gulf may be further enhanced through regional economic development.

Conclusion

The process of this HLA followed the SA HiAP model. However, rather than producing recommendations as most HLA projects do, this project resulted in the production of a resource, which may have the potential for ongoing value in the Upper Spencer Gulf region. The Atlas resource, intended to inform planning in the Upper Spencer Gulf region, was developed through consultation with the University of Adelaide and the RDAs to ensure that it provided comprehensive information that is useful to planners in the Upper Spencer Gulf region.

Timeliness is an issue which is relevant to most HLA projects due to the complex and politically sensitive nature of the problems that are being dealt with. In this project, most participants indicated that the process was relatively smooth and timely. However, the development and re-drafting of the Atlas was one area within this project in which there were delays. Despite these delays, the Atlas was received well, and participants indicated that the process of re-drafting was important in achieving a useful resource. Therefore, this project provided a different way to view the timeliness of projects; complex issues often require the development of a shared understanding of the issue and potential solutions to the issue, and this process of learning and negotiation is essential to effectively developing solutions.
References
