

Centre of Research Excellence on Social Determinants of Health Equity

Trans Pacific Partnership – Interview Schedule

General preamble

We are conducting a series of case studies into how different stakeholders' interests make it into policy. We are particularly interested in how concerns for health and inequalities in health get into policies that on the face of it don't seem relevant to health.

Today we are exploring trade policy (specifically the Trans Pacific Partnership Agreement) in relation to health and health inequalities. We think that trade and investment can affect health, positively and negatively in various ways: for example access to medicines; income growth and working conditions, and the availability of health related commodities including tobacco, alcohol and food.

The aim is to understand how the TPP came about and what factors led to the inclusion and prioritization of different health and related social concerns in the TPP process and final text. Ultimately we would like to use this information to understand how to bring economic, plus social and health goals into future trade policy development.

We are most interested in the events between 2008 when Australia entered the TPP negotiations and late 2015 when the negotiations concluded. However we welcome your reflections on earlier or later developments if you think these are relevant.

Introductory:

1. Can you please tell me about your role and background as it relates to trade policy and the TPP? (could be several)
2. How long were you in these positions/organizations?
3. What is the purpose or purposes of a trade agreement? How did you come to this view?
4. Are you aware of any 'non-economic' policy priority entering into trade policy? (such as environment, labor, health)
5. What role do you think trade plays, if any, in addressing or decreasing inequality? Should trade policy play a role in decreasing inequality?
6. Do you think that protecting health is a purpose of trade agreements? Should it be?

Actors to consider:

7. Who were the main actors seeking to shape the Australian government's priorities in the TPP? (Industry, civil society, academics, politicians at different levels of government, government officials, media or other).
8. In your view, which of these actors were influential? Why?
9. Did you/your organisation collaborate or partner with other actors (national or international)? (This could be, for example, through information sharing, developing shared messages or lobbying strategies).
10. Were you aware of other actors working together?

11. Can you comment on the role of the media? (In particular, did the media bring health and social issues to the fore?)
<i>Interests and how they are framed:</i>
<p>12. What was your/your organization's objective regarding the TPP?</p> <p>13. How were actors positioning their interests and framing their ideas of what the Australian government should prioritize in the TPP? Were there competing ideas?</p> <p>14. Were public health arguments or arguments about addressing health and social inequalities raised? If so by whom?</p> <p>15. In your opinion, why were some ideas regarding the priorities for the Australian government more influential than others?</p> <ul style="list-style-type: none"> - To what extent were the ideas presented based on evidence? What forms of evidence were used? - Can you comment on whether ideas around public health and social objectives were viewed as feasible/unfeasible?
<i>Processes to consider:</i>
<p>16. What were the formal inter-government mechanisms that you/your organization used and did these enable your policy goals to be considered?</p> <p>17. Were there other processes for stakeholder input? Were these effective? Were these inclusive for all stakeholders?</p> <p>18. Did you/your organization use informal processes such as informal meetings, phone calls? Were these effective?</p> <p>19. Were there processes to bring public health issues into the TPP discussions?</p> <p>20. Can you comment on whether international standards or agreements played a role in shaping the government's priorities? (economic and/or non-economic)</p> <p>21. In your view, did the processes enable the representation of Aboriginal and Torres Strait Islander perspectives?</p>
<i>Political context:</i>
<p>22. We have a timeline of key events in this period of 2008-2015 below. Were there turning points or events that shifted the agenda over this time period? (2008-2015) (this could be changes in government, shifts in public opinion, government reports, external events).</p> <p>23. Were any of these more or less enabling or constraining for prioritizing health?</p> <p>24. Were there other domestic policy agendas that may have influenced events and outcomes with regards to the consideration of health issues in the TPP?</p>
<i>Concluding questions</i>
<p>25. Can you provide any final reflections as to how public health and social concerns can be prioritized in future Australian trade policy?</p> <p>26. Is there anything you think important that I may have missed?</p> <p>27. Can you suggest others who could provide an informed view on this subject?</p>

Northern Territory Intervention – Interview Schedule

General preamble
<p>The Centre for Research Excellence on the Social Determinants of Health Equity is looking at the ways in which issues of equity are managed across a broad range of sectors throughout the policy cycle – agenda setting, policy formulation, implementation and evaluation. In doing so, we aim to develop tools and strategies that enable the prioritization of health equity in policy.</p> <p>In work package one, we are specifically exploring agenda setting and the ways in which ideas, people, organizations and processes influence what issues are acted upon by governments and agencies. To do this we are conducting several case studies including examining the Northern Territory Emergency Response (also known as the Northern Territory Intervention). The time period of interest is the events leading up to the NTER enabling legislation, with emphasis on those events between the Little Children are Sacred Report and the decision by the Howard Government to enact the special measures.</p>
Questions: Supplementary questions (if required) shown as dot points under each main question.
Introductory:
<ol style="list-style-type: none"> 1. What is your current role? 2. What was your role at the time of the NTER? 3. In what ways do you think the NTER improved Aboriginal and Torres Strait Islander people's health? In what ways do you think it undermined Aboriginal and Torres Strait Islander people's health?
Processes to consider:
<ol style="list-style-type: none"> 4. What were the key national events and Commonwealth Government policy processes leading up to the NTER? <ul style="list-style-type: none"> • Particularly related to the Little Children Are Sacred Report? 5. With regards to the Commonwealth Government were these processes different to or typical of policies affecting Aboriginal and Torres Strait Islander peoples, and if different, in what ways? <ul style="list-style-type: none"> • Were Aboriginal or Torres Strait Islander people included in these processes? If so how, and if not why not? • Do you think the processes gave due consideration to Aboriginal or Torres Strait Islander peoples' priorities and ways of working in the Northern Territory? 6. With regards to the Northern Territory and NT Government what were the key events and policy processes leading up to the NTER? <ul style="list-style-type: none"> • Particularly related to the Little Children Are Sacred Report? 7. Were these processes different to or typical of approaches to Aboriginal and Torres Strait Islander policies in the NT, and if different, in what ways?

<ul style="list-style-type: none"> • Were Aboriginal or Torres Strait Islander people included in these processes? If so how, and if not why not? • Do you think the processes gave due consideration to Aboriginal and Torres Strait Islander peoples' priorities and ways of working in the Northern Territory? <p>8. What community level processes and actions, if any, influenced the NTER?</p> <p>9. Can you comment on the timing of the announcement and evolution of the NTER, given how rapidly it was developed (e.g. 500 pages of enabling legislation in just 10 days)?</p>
<p>Actors to consider:</p>
<p>10. Who do you think were the most powerful people and organizations in shaping the NTER policy and final outcome?</p> <p>11. What interests do you think drove the actions of (person or organization)?</p> <ul style="list-style-type: none"> • Consider – governments, bureaucrats, civil society, advocates, academics, military, media.
<p>Ideas to consider:</p>
<p>12. What do you think were the main drivers of child sexual abuse in Aboriginal communities in the Northern Territory?</p> <p>13. What were the most powerful ideas used to justify and promote the NTER?</p> <ul style="list-style-type: none"> • Where did they come from? Who used them? • Did these ideas include issues of health equity and social justice? • Did any of these ideas include Indigenous perspectives and/or knowledge? • How were Indigenous people framed by various stakeholders at the time of the NTER? <p>14. To what extent were these ideas evidence based and to what extent were they based on values, worldviews or political interests?</p>
<p>Political context:</p>
<p>15. In your opinion, how did the broader political context shape the agenda in the case?</p> <ul style="list-style-type: none"> • Consider the election in 2007 <p>16. Do you think there were hidden or unspoken agendas at play?</p> <p>17. Did related policy agendas influence events?</p> <ul style="list-style-type: none"> • Consider Aboriginal and Torres Strait Islander health, welfare reform, mining economy/land use <p>18. Did international factors, including Australia's human rights obligations, influence the policy agenda?</p>
<p>Concluding questions</p>
<p>19. Can you provide any final reflections as to how health equity might be prioritized in future policies affecting the health and wellbeing of Aboriginal and Torres Strait Islander peoples?</p> <p>20. Is there anything of importance that I may have missed?</p>

21. Can you recommend anyone else to interview who might provide a view on this subject?

Paid Parental Leave Case Study – Interview Schedule

General preamble
<p>The Centre for Research Excellence on the Social Determinants of Health Equity is looking at the ways in which issues of equity are managed across a broad range of sectors throughout the policy cycle – agenda setting, policy formulation, implementation and evaluation. In doing so, we aim to develop tools and strategies that enable the prioritization of health equity in policy.</p> <p>As background, we are conducting a case study on Australian paid parental leave policy to understand how PPL came about. We are inviting key government and non-government stakeholders to share their views. We are interested in the events leading up to the adoption of PPL in 2011, especially events in the past 10-15 years (or since 1990, when the Parental Leave for Men and Women Test Case (AIRC) was passed.</p>
Introductory:
<ol style="list-style-type: none"> 1. Can you please tell me about your role and background? (could be several) 2. In your view, what are the key issues surrounding paid parental leave? 3. Do you think paid parental leave can improve health? Should it be used for that purpose? 4. Do you think paid parental leave has a role in terms of addressing inequality? 5. Is paid parental leave a social policy issue or an industrial relations issue?
Processes to consider:
<ol style="list-style-type: none"> 6. What were the key historical events and policy processes that shaped the PPL leave agenda? 7. Can you please comment on the role of collective bargaining in shaping the PPL agenda? 8. What were the ways your goals and viewpoints were communicated to the key stakeholders (e.g. meetings, media, briefs etc.)? 9. What were the processes for stakeholder input? Were these effective? Were these inclusive to all stakeholders? 10. In your view, did the processes enable the representation of Aboriginal and Torres Strait Islander perspectives?
Actors to consider:

<p>11. Did you/your organization work with others to raise your concerns? Were you aware of other actors working together?</p> <p>12. Who were other main actors seeking to shape the agenda? (Industry, civil society, academics, politicians at different levels of government, government officials, media or other).</p> <p>13. In your view, which of these actors were influential? Why?</p> <p>14. Can you comment on the role of the media? (In particular, did the media bring health and social issues to the fore?)</p>
<i>Ideas to consider:</i>
<p>15. In your view, how evidence based was the PPL agenda and outcomes relative to values and political interests?</p> <p>16. Do you think that Aboriginal and Torres Strait Islander perspectives were considered in the various processes?</p>
<i>Political context:</i>
<p>17. How did the broader political context, for example a change in Government, shape events and the policy agenda in PPL? What were the turning points?</p> <p>18. What related policy agendas may have influenced events and outcomes?</p>
<i>Concluding questions</i>
<p>19. Is there anything you think important that I may have missed?</p> <p>20. Can you suggest others who might provide an informed view on this subject?</p>