TOOLS TO SUPPORT A HEALTH IN ALL POLICIES APPROACH

A GUIDE FOR MOVING FROM THEORY TO PRACTICE

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This guide has been written by the Health in All Policies team at Community and Public Health Te Mana Ora, Canterbury District Health Board to support conversations between policy-makers, planners and other partners in local and central government agencies about some of the tools and resources that can be used to ensure that health and wellbeing are explicitly considered and addressed in plans and policies.

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EVERYONE VALUES HEALTH

Health is one of the cornerstones of living a good life. The World Health Organization identifies that “Better health is central to human happiness and wellbeing. It also makes an important contribution to economic progress, as healthy populations live longer, are more productive, and save more.” Health is top of people’s priorities for their wellbeing, according to the OECD’s How’s Life? 2015 report. So it is important that we all think about health – that’s what a Health in All Policies approach is about.

HEALTH IS EVERYONE’S BUSINESS

It is now widely accepted that the factors that have the greatest effect on people’s health and wellbeing (the social determinants of health) lie outside and beyond the control of the health sector. The places where people live, work and play, and factors such as income, housing, education and employment, are all instrumental to health and wellbeing. But often health and wellbeing outcomes are not explicitly considered in the policy work of these sectors.

SO WE NEED TO WORK TOGETHER

The health sector needs to work collaboratively with policy-makers in local and central government and other sectors to think seriously about the impacts – both positive and negative – that policies in these areas will have on people’s health and wellbeing. By doing so, we can all support local, regional and national agencies to direct investment into policies and plans that improve population health and wellbeing.

The United Nations Sustainable Development Goals (SDGs) provide a roadmap for all countries to societal wellbeing by integrating actions across the social, economic and ecological domains. Health is core to the SDGs. Good health is a prerequisite for sustainable development, as well as an indicator and an outcome of it.
WHAT THE GUIDE INCLUDES

The guide starts by explaining some of the reasons why health and wellbeing are important factors to consider and when you might want to use one of the tools outlined in this guide. It then describes some of the common tools available and provides links to available resources and examples of their use, where possible. The Health in All Policies (HiAP) team has developed some of the tools in this guide and has experience using these tools in our work for over 10 years. Some practical tips are included at the conclusion of the guide based on our experiences.

THE TOOLS SUPPORT THE HIAP APPROACH

Health in All Policies works best when a combination of factors are in place:

- good governance;
- development of strong and sound partnerships based on co-design, co-delivery and co-benefits;
- dedicated capacity and resources; and
- the use of evidence and evaluation.

Together, these factors can and do deliver positive change. Although the tools outlined in this guide support HiAP in practice, it takes more than these alone to fully achieve HiAP.

Health in All Policies (HiAP) is a structured approach to working across sectors and with communities on public policies. It promotes trusting relationships and engages stakeholders to systematically take into account the implications of decisions.

Health in All Policies seeks synergies to improve societal goals, population health and health equity.
WHY USE ONE OF THESE TOOLS

IMPROVE HEALTH AND WELLBEING

Using the tools outlined in this guide will help to ensure that factors affecting health and wellbeing for all population groups, both positive and negative, are considered when developing a plan or policy. In particular, the tools help reflect on the concepts of DEET (Determinants, Equity, Evidence and Treaty of Waitangi), which are central to a HiAP way of working in New Zealand. The tools can help broaden perspectives beyond those each professional brings, to include ideas and solutions that may not have initially been considered. This will ultimately result in a better plan or policy that will have positive impacts on the population’s health and wellbeing.

FOSTER CROSS-SECTOR RELATIONSHIPS

The tools outlined in this guide are designed to support collaborative processes between agencies that help build relationships across sectors. Using these tools facilitates learning across agencies about the perspectives of others. This learning and relationship development is beneficial in the broader HiAP approach and will have positive implications beyond the use of the particular tool in a particular context.

SHARE RESOURCES

This collaboration between partners also means that resources are able to be shared. The use of these tools often requires a variety of skills and expertise in project management, stakeholder engagement, facilitation, review and analysis of evidence and writing. If these skills can be sourced from across agencies then there is less reliance on any one agency requiring all the skills to undertake the work.
The tools outlined in this guide are designed primarily to be used as part of a collaborative process and are not meant to be used as a compliance checkbox activity, by one person or agency, in isolation. While these activities require time and planning in the early stages, this often leads to a much more effective and efficient process.

This means that you will need to consider who to involve in the project team and who to involve in the process of using the tool. You may want to consider the involvement of:

- **Community and Public Health (CPH) staff** — the HiAP team are a key resource and can support the process of choosing and using the tools. Other public health staff with particular expertise may also be involved, e.g., analysts for synthesising evidence, health protection officers for expertise in environmental health implications, health promoters for linkages into communities of interest, or medical officers of health.

- **Local government** — local and regional council staff with particular expertise

- **Central government** — are there central government agencies with an interest in this area that could be involved?

- **Iwi** — you will need to ensure appropriate tangata whenua involvement as part of the process. If you do not already have good connections, CPH might be able to help you identify appropriate connection points.

- **Community agencies** — is this plan / policy relevant to any NGOs or community organisations?

- **Subject matter expertise** — are there private sector consultants or academics with expertise?

- **Community members** — would it be useful to include members from the disability, Pacific, refugee and migrant, LGBTI, other communities?
People are invited to participate not necessarily as representatives of their particular organisation but because they have a perspective to provide that can contribute to the process.

You will want to keep your project team small but it will need to include sufficient people to ensure that the following tasks can be completed:

- deciding on the tool and gaining appropriate approval from contributing agencies;
- project managing the process;
- writing up results; and
- evaluating the process and outcomes.

Depending on the project, you may need to consider contracting external support if appropriate resources or skills are not available within the partner agencies.
Most of the tools in this guide have been designed to be used early in the development of a plan or policy. Some are more suited to early stage project planning, while others will require an early of the draft plan or policy to have been developed that can be assessed. The tables that follow provide some indication of the most useful timing for each of the tools.

However, many of the tools and frameworks are flexible and can be used in a variety of ways including:

- **as a full process to gain input into a plan or policy**
  For example:
  - The Regenerate Red Zone Recovery Plan development included an Integrated Assessment.  
  - A Health Impact Assessment was undertaken on the Canterbury Regional Air Plan.

- **as a framework for plan development**
  For example:
  - Both the Integrated Planning Guide and Te Pae Māhutonga were used to frame working group input into the Resilient Greater Christchurch Plan.

- **as a framework for a workshop as part of plan development**
  For example:
  - Health in All Policies advisors facilitated a workshop early in the development of the Christchurch City Council (CCC) Transport Strategic Plan.
  - HPSTED was used to help shape the objectives of the CCC Transport Strategic Plan.

- **as an audit tool**
  For example:
  - The Greater Christchurch Urban Development Strategy Update was audited using the Integrated Planning Guide at the end of the process to ensure all issues were covered.

Throughout this guide the link symbol indicates a link to an online reference or further information.
It is important to note that there is no one right way to use the tools outlined in this guide. Each time you use one of these tools, the process will be slightly different. It will depend on who is available to contribute and the resources and time available to conduct the process.

In our experience, having good project planning from the outset saves time and avoids confusion. It gives participants confidence if the process they are involved in is well thought through, clear and people know what they are doing. When setting up the project teams it may often be beneficial to include someone with experience using the tool. They will be able to champion the process to other stakeholders and can provide guidance as to the process and point out key stumbling blocks that may occur.

Each time you use one of these tools you will learn more about what they can achieve and what could be improved for next time. We recommend incorporating an evaluation process into your use of any tool so that these lessons can be formally captured for others to learn from —the earlier the better. Superu’s Making sense of evaluation: A handbook for everyone is a useful resource on conducting evaluations.
The following pages describe a range of tools, including information about the resources required and timeframes involved. It should be a joint decision between partner agencies as to which tool(s) to use and you will need to work together to decide which option is the best for your situation, timeframe and resources.

The HiAP team can help with further information and discussion about which tool or tools might be most appropriate for a certain situation.

THE TOOLS

Health Promotion and Sustainability Through Environmental Design 11
Integrated Planning Guide 12
Integrated Assessment Model 13
Health Impact Assessment 14
Enquiry by Design Process 16
Te Pae Māhutonga 17
Health Equity Assessment Tool 18
Health Promotion and Sustainability through Environmental Design (HPSTED) is a guide for planning that was developed by Christchurch City Council (CCC) and Community and Public Health (CPH) in 2008. HPSTED is divided into fourteen themes or dimensions that identify the links between environmental design, and community health and wellbeing.

While some of the content might appear to be dated, the principles remain highly important. The evaluation criteria on their own are still very useful.

| OVERVIEW |
| Health Promotion and Sustainability through Environmental Design (HPSTED) is a guide for planning that was developed by Christchurch City Council (CCC) and Community and Public Health (CPH) in 2008. HPSTED is divided into fourteen themes or dimensions that identify the links between environmental design, and community health and wellbeing. While some of the content might appear to be dated, the principles remain highly important. The evaluation criteria on their own are still very useful. |

| LINK |
| Health Promotion and Sustainability through Environmental Design |

| TYPICALLY INVOLVES |
| Can be used in project planning and design by individuals or groups. Each of the fourteen themes (e.g., Active Lifestyles, Transport Accessibility, Social and Community Capital) has a dedicated section which covers key points to be considered in the planning process. The guide can be used as a desktop exercise or as a format for a workshop. |

| TIME FRAMES |
| A few days to many months when used as a guide for projects. |

| BEST SUITED TO |
| Can be used either at the very early stages of planning or programme development and/or when a project is underway to ensure its outcomes will be achieved. |

| PREVIOUSLY USED |
| In a variety of ways by public health staff, CCC staff and urban planners, some of which are outlined in an evaluation by CPH. |
The Integrated Planning Guide was initially developed with a recovery planning focus in 2011 following the earthquake sequence in 2010/11. It was developed in collaboration with CDHB, CCC, Environment Canterbury and the Greater Christchurch Partnership. The guide had its origins in HPSTED (page 11). The guide was updated in 2018 to keep the planning focus but remove the direct focus on recovery. Both versions are available online.

The guide provides lists of sample questions across a range of dimensions of health to provide a basis for developing and evaluating planning proposals and projects. It’s a way of ensuring the principles of health and sustainability are integrated into planning.

Integrated Planning Guide *(available later in 2018)*

**Typically involves**

This tool can be used in many ways and is probably the most versatile of them all. It can be used as a desk guide right through to being the focus at large workshops and engagement. The questions within the guide enable meaningful conversations to ensure all aspects of health and sustainability are considered.

Regardless of overall scope or size of a project it is beneficial to:
- Meet to set up parameters and agree the scope;
- Consider a workshop to gather input or to practically apply the tool;
- Follow up with plan writer or programme lead to identify solutions to any identified issues; and
- Recording along the way how the guide was used and any influences based on its use.

**Time Frames**

From a few days for a desk top or small group exercise through to a month or longer when integrated into a planning process.

**Best suited to**

Early planning or programme development ideally. Also useful to assess an existing plan or project while it is still able to be influenced.

The earlier guide has been used extensively at many different stages of a project or strategy development. Some specific examples are given below but it has also been used in quick desk exercises to identify key gaps for further discussion.

- Used to help develop criteria as part of the Integrated Assessment processes for the Lyttelton Port, Waimakariri Red Zone and Land Use Recovery Plan
- Used as framework for development of Greater Christchurch Resilient Greater Christchurch Plan and Greater Christchurch Urban Development Strategy update
- Used to frame up discussions and presentations for the Enquiry by Design process as part of the Ferry Road, Sydenham and Lyttelton masterplan developments
- Used as a framework for an academic literature review of water management and the broader determinants of health
Integrated Assessments are collaborative processes that bring together a group of experts to assess the implications and consequences of a plan. The process recognises a multi-criteria assessment but, importantly, all the criteria are given equal weight. There is no fixed process for integrated assessment but the process outlined here is one used over a number of years in Canterbury based on Sadler and Ward’s 2008 *Framework Approach to Sustainability Appraisal*.

**OVERVIEW**

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**LINKS**

No written formal guides – requires someone with experience of undertaking an integrated assessment to manage the process.

**TYPICALLY INVOLVES**

Pulling together a core project team, including plan writers, to collaboratively develop a series of criteria across social, cultural, environmental and economic aspects of health and wellbeing directly relevant to the plan being produced. The criteria need to be developed based on the aims and objectives set for development and delivery of the policy, plan or project. They also need to take into account the scope and parameters of the plan. Other tools, such as the Integrated Planning Guide, can be used to help develop the criteria.

As with all projects, local iwi should be involved at the earliest stages so they are able to determine their level of input.

Workshops (typically 2 or 3 spaced over time) are used to confirm the criteria, set upper and lower limits of acceptability and assess the plan. Strong engagement with participants between workshops is required, respecting the time they are giving to the process.

**TIME FRAMES**

3 months (2 workshops) to 6 months (3 workshops)

**BEST SUITED TO**

- Plans where there is opportunity to influence early drafts.
- Strong organisation commitment and capacity.
- Plans that need an efficient and effective way of incorporating all impacts (social, economic, environmental and cultural wellbeing).

**PREVIOUSLY USED**

- Canterbury
  - Regenerate Christchurch Ōtākaro Avon River Corridor Integrated Assessment 2017/2018
  - Waimakariri Red Zone Recovery Plan Integrated Assessment 2016
  - Port of Lyttelton Recovery Plan Evaluation of the Wellbeing Assessment 2014
  - Land Use Recovery Plan Integrated Assessment 2013
  - CCC Draft Central City Plan 2011
Health Impact Assessment (HIA) is a formal, internationally recognised process used to predict the potential health effects, both positive and negative, of a policy with particular attention paid to impacts on health inequalities. It aims to incorporate evidence into policy making and promotes cross-sectoral relationships.

**A Guide to Health Impact Assessment: A Policy Tool for NZ**

*Ministry of Health guidance document*

Ministry of Health webpages on HIA

HIA can be comprehensive, rapid or even as a desktop depending on the size, scale and scope of the project and generally are conducted in five stages. Regardless of scale, similar steps are taken; it is the depth of the stages that might change. Rapid HIAs are the most frequent in practice because they require less extensive resources. All ideally have a core cross agency team to oversee the project and ensure there is maximum value added. Workshops with stakeholders are usually required.

1. **Screening** – meetings held to decide the need for a HIA.
2. **Scoping** – meetings to define the HIA’s scope, objectives, resources and data requirements.
3. **Appraisal stage** – collect and analyse a range of quantitative and qualitative evidence, including public dialogue, for potential impacts on health and equity.
4. **Reporting and recommendations.**
5. **Evaluation** – always include and budget accordingly.

If not done as a short desktop exercise, a rapid HIA could occur over a full 2-3 months of a project. A full HIA generally takes 4-8 months. This allows for all aspects of the activity or planning cycles to occur. Participants will not be involved full time throughout this period.

**BEST SUITED TO**

- When there is sufficient time to undertake the tool
- A plan that impacts on an identifiable health and wellbeing issue
HEALTH IMPACT ASSESSMENT

PREVIOUSLY USED

Canterbury
- ECan - Canterbury’s Air Plan – 2014
- Canterbury Regional Land Transport Strategy 2010
- Central Plains Water – RMA application 2008
- Urban Development Strategy 2006

Other parts of New Zealand
Many HIAs have been undertaken in New Zealand
Ministry of Health Examples

Internationally
HIAs are used as a tool in a wide variety of jurisdictions internationally including:
- Wales
- New South Wales, Australia
- Scotland
- United Kingdom (Department of Health guide to HIA)

The World Health Organization also provides information about HIA and its use in various countries
Workshops are used to bring together major stakeholders to discuss, develop and create urban design and planning solutions to specific, place-based problems. Also sometimes called a ‘charrette’.

South Australia Guide to Enquiry by Design
Western Australia Preparation Manual for an Enquiry by Design Workshop

- A workshop where participants from different disciplines present on the principles of best practice, sustainable urban design from the view point of their skill base e.g. transport, natural environment, health and wellbeing, etc.
- May first include a briefing session and site tour.
- Joint designing taking into account the various view points and then reviewing.
- Broad engagement from a cross section of experts and community participants. Can be a good way to engage with urban planners.

1-2 months

Site specific plans
Can also be used for programme design

Canterbury
- Ferry Road Master Plan
- Sydenham Master Plan
- Lyttelton Master Plan

Sydenham Master Plan (copyright Christchurch City Council)
Te Pae Māhutonga is a health promotion model that incorporates an implementation planning guide.

It encompasses the elements needed for strong community development including: Te Oranga (participation in society), Mauriora (connection to community and culture), Toiora (healthy lifestyles), Waiora (environmental protection), Te Mana Whakahaere (community ownership and autonomy) and Ngā Manukura (leadership).

The proposed plan is compared against the questions in the guide. Although the tool is framed using health promotion language and for working with Māori concepts, it is equally applicable to assessing a plan or policy. When working alongside Māori partners first ensure this is an appropriate tool to meet their needs. It is also a useful tool for consultation and feedback to a wider community.

From a few days for a desk top exercise through to a number of weeks when there are specific milestones in a project or plan where repeated assessment can be used to ensure consistency.

Can be used stand alone to assist in designing a programme or project or can be incorporated into some of the other HiAP tools.
HEALTH EQUITY ASSESSMENT TOOL (HEAT)

OVERVIEW

A planning tool developed by academics and the Ministry of Health in the early 2000s that enables rapid assessment of health initiatives for their current or future impact on health equity.

Flexible tool that focuses on answering ten questions.

While the tool is health focused, it can be used for any policy, programme or service that may have equity implications.

LINK

Health Equity Assessment Tool

TYPICALLY INVOLVES

A workshop including:

- A presentation on key issues, identified inequalities and possible outcomes;
- A briefing session;
- Small group work answering the 10 Heat Tool questions (answers need to be qualitative and quantitative); and
- Concluding presentation and comments.

TIME FRAMES

From short desk top exercise to 2-4 weeks.

BEST SUITED TO

Early stages of a policy or programme proposal, especially health-focused services or programmes. It can be used for a rapid assessment or in conjunction with other assessment tools.

PREVIOUSLY USED

The Ministry of Health and DHBs have used HEAT as have a variety of NGOs and other sectors with influences on health outcomes (e.g., education, housing).
The following resources are useful ways to think about the perspectives of particular population groups. They can be used in conjunction with the tools outlined in this guide or independently.

**Disability**

The Building for All Portal is a CPH initiative that collates information about designing places and spaces to ensure they are accessible to all, including those with disabilities.

- Building for All Portal

**Mental Wellbeing**

Mental Wellbeing Health Impact Assessment is a specific version of a health impact assessment tool focused on assessing impacts of a plan or policy on mental wellbeing. Developed by the English Mental Wellbeing Impact Assessment Collaborative.

- Mental Wellbeing Impact Assessment (2011)

**Pacific Models**

The Ministry for Pacific People’s Kapasa is a tool for policy managers, advisers and analysts within government agencies. It is an approach for incorporating the perspectives of Pacific peoples in the generic policy development process.

- Kapasa Tool
MĀORI MODELS

WHĀNAU ORA

Whānau Ora is a government policy for increasing the wellbeing of individuals in the context of their whānau. Whānau-centred, it differs from traditional social and health approaches that focus solely on the needs of individuals. HiAP approaches and Whānau Ora approaches have many overlaps.

Whānau Ora recognises the strengths and abilities that exist within whānau and aims to support and develop opportunities that fulfill potential.

About Whānau Ora

WHĀNAU ORA HEALTH IMPACT ASSESSMENT

Whānau Ora Health Impact Assessment focuses on health impact assessment from a Whānau Ora perspective – assessing the health impacts of a policy on Māori and their whānau. Incorporating the principles expressed in He Korowai Oranga, there is a particular focus on equity and ensuring Māori whānau and communities are involved appropriately in decision-making and throughout the process.

Whānau Ora Health Impact Assessment

TE WHARE TAPA WHA

The Four Walled House model developed by Prof. Sir Mason Durie encompasses the four dimensions of Māori wellbeing – Wairua (spirituality), Hinengaro (mental health), Tinana (physical health) and Whānau (family).

Te Whare Tapa Wha

TE WHEKE

The concept of Te Wheke (the Octopus), by Rose Pere, uses different body parts to represent specific dimensions of health: Wairuatanga (spirituality), Hinengaro (the mind), Tinana (physical wellbeing), Whanaungatanga (extended family), Mana ake (identity of individuals and family), Mauri (life force in people and objects), Hā a Koro ma a Kui mā (breath of life from forebears), and Whatumanawa (open and healthy expression of emotions).

Te Wheke

MEIHANA MODEL

Built on the foundations of Te Whare Tapa Wha, the Meihana model is used mostly to assist with clinical history taking to give a broader understanding of Māori patients. The analogy of a waka hourua (double-hulled canoe) is used to describe the elements and their interactions. Two hiwi (hull, representing the patient and whānau) are attached through aku (crossbeams, representing wairua, tinana, hinengaro, taiao and iwi katoa). Each voyage is charted towards a destination – of attaining hauora (health/wellbeing). The voyage can be influenced by ngā hau e wha (the four winds), ngā roma moana (ocean currents) and whakatere (navigation).

Meihana Model
The HiAP team has learned a lot by using many of these tools and from evaluating their processes. You can read the evaluation reports on our website.

- These tools require an allocation of time and resources. The first step of scoping the process is important to ensure that the tool will add value to the project or plan. Time spent up front planning often leads to a much more streamlined consultation and development phase.

- Using these tools is a project in itself and deserves a separate project plan that outlines responsibilities, timelines, resources available, expected outcomes and evaluation processes.

- Participants who are involved in engagement as part of using these tools may not know much about the tool or the process. It is useful to provide them with some written information about why the process is being carried out and what they can expect at a workshop. Reiterating this verbally at the workshop can help people understand what is expected of them.

- It is important that workshop facilitators have some understanding of both the process and the key issues under consideration.

- Plans and projects often are prepared within the context of existing regulations or documents that influence the outcome. Where this is the case it is important to make this clear to participants from the beginning so expectations are clear.

- When tools are applied to plans it is essential to have plan writers and notetakers attend the workshop(s). The presence of plan writers means that questions can be asked and answered directly, making efficient use of time. Dedicated notetakers can record the proceedings and the intended amendments to the plan.

- Feedback to workshop participants at the end of the process is valuable — people feel respected and they like to know the result of their input. This is particularly important when participants have taken time without recompense to input into the process.
HOW ELSE WE CAN SUPPORT A HIAP APPROACH

Using any of the tools or resources in this guide is only one part of the wider HiAP approach advocated by CPH.

The HiAP team is involved in many other activities that support the development of health promoting policies across all sectors. This includes capacity development by way of running training and workshops, facilitating joint work programmes between agencies and co-ordinating and developing submissions.

You can find out more about these activities on our website: https://www.cph.co.nz/your-health/health-in-all-policies/
Health in All Policies, Community and Public Health: https://www.cph.co.nz/your-health/health-in-all-policies/


Health Promotion and Sustainability through Environmental Design (HPSTED): 
https://ccc.govt.nz/assets/Documents/The-Rebuild/Strategic-Plans/HPSTED.pdf


Regenerate Christchurch - Integrated Assessment for the Ōtākaro Avon River Corridor: https://engage.regeneratechristchurch.nz/otakaro

Waimakariri Red Zone Recovery Plan Integrated Assessment 2016: 

Port of Lyttelton Recovery Plan Evaluation of the Wellbeing Assessment 2014: 
http://www.cpublichealth.co.nz/Files/evaluationwellness@lytteltonport.pdf


Health Impact Assessments - Wales: https://whiaisu.publichealthnetwork.cymru/en/


South Australia Guide to Enquiry by Design: http://bettertogether.sa.gov.au/media/W1siZiIsIjIwMTUvMTIvMTEvMTBvNHUueHd1dnNpYl9CZXRXJVJVG9nZXRoZXJfRW5nYWdlbWVudF90b29sc19DSEtFUKUVEVtR5U3WV99CW9ERVJRO5FREucGRmIl1d/Better%20To
gether%20%20Engagement%20Tools%20%20CHARRETTE%20ENQUIRY%20%20%20DESIGN%20%20FA.pdf


Building for all Portal: https://www.healthychristchurch.org.nz/priority-areas/urban-design/building-for-all-portal


FULL LINK ADDRESSES
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