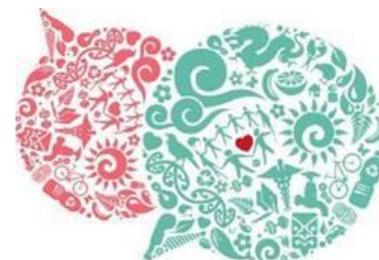


# Health in All Policies (HiAP) Workshop

The Health in All Policies (HiAP) team at Community and Public Health | Te Mana Ora hosted an online workshop about HiAP on Tuesday 5th July 2022. This workshop was for colleagues working in HiAP-related public health roles across New Zealand.



The invitation to the workshop was enthusiastically received, with over 50 total registrations. Participants included people from each public health office within the National Public Health Service of Te Whatu Ora – Health New Zealand, Te Aka Whai Ora – Māori Health Authority, and the Ministry of Health Public Health Agency.

The agenda for the workshop included:

- A HiAP 101 presentation from Dr Anna Stevenson;
- Five public health case studies from across the motu;
- A presentation from the Public Health Agency; and
- A reflection from Dr Kumanan Rasanathan representing the social determinants team at WHO.

As part of the workshop, participants were split into breakout groups to reflect and discuss existing strengths within public health in relation to HiAP, how this mahi relates to Te Tiriti o Waitangi and consider the new opportunities for HiAP in the transition to a National Public Health Service.

[A collation of key readings about HiAP was sent to participants before the workshop](#) [301KB PDF].

[Watch the recording of this HiAP workshop held on zoom](#). Access passcode is &q&3xiy0.

Here is a breakdown of the timings for the presentations in the recording:

1. **Introductions** (00:10:08).
2. **Dr Anna Stevenson from Community and Public Health** (00:35:00)  
An introduction to HiAP from an experienced HiAP practitioner and public health physician.
3. **Case study from Nelson Marlborough Public Health** (01:16:55)  
Using the HiAP approach to advocate for outdoor smoking ban policies within local councils.
4. **Case study from Public Health South** (01:24:50)  
Successes and learnings from three recent HiAP projects.
5. **Case study from Regional Public Health** (01:35:30)  
Reflections on recent HiAP activity and next steps.
6. **Case study from Community and Public Health** (01:50:00)  
A recent integrated assessment process as part of regional urban design planning and reflections against draft WHO HiAP model.
7. **Case study from Taranaki Public Health** (02:07:00)  
Reflections on recent HiAP activity including a Te Tiriti-focused brochure.
8. **Nicky Welch from the Public Health Agency** (02:19:12)  
Introduction to HiAP in a reformed health system including interim GPS and upcoming population and public health strategy.
9. **Reporting back** (03:08:00).
10. **Dr Kumanan Rasanathan from the WHO** (03:28:03)  
Reflections on international context to HiAP work and a challenge for us all to focus our HiAP work strongly on delivering equity.

## Presentations and associated documents from the workshop

[Anna Stevenson: Future prospects for Health in All Policies in Aotearoa/NZ](#) [3.07MB PDF].

[Case study from Nelson Marlborough Public Health](#) [438KB PDF].

[Case study from Public Health South](#) [92KB PDF].

[Case study from Regional Public Health](#) [175KB PDF].

[Case study from Community and Public Health](#) [1.47MB PDF]

[Te Tiriti o Waitangi brochure from Taranaki Public Health](#) [2.46MB PDF].

[Nicky Welch: Health in all policies in the reformed health system - the strategic context](#) [766KB PDF].

[Population Health in New Zealand's reformed Health and Disability System: Working definition and approach](#) [875KB PDF] – associated document to Nicky Welch's presentation.

## Themes from breakout groups

Participants were invited to join breakout groups as part of the workshop. Groups used an online whiteboard to make notes and discuss four questions in relation to HiAP in Aotearoa.

Although each region noted that their usual work had been disrupted for the past two years, the discussions revealed that there is plenty of energy, enthusiasm and interest to utilise HiAP principles and develop HiAP approaches across the motu.

[View a full list of the key themes and all comments made from the breakout groups](#) [170KB PDF].

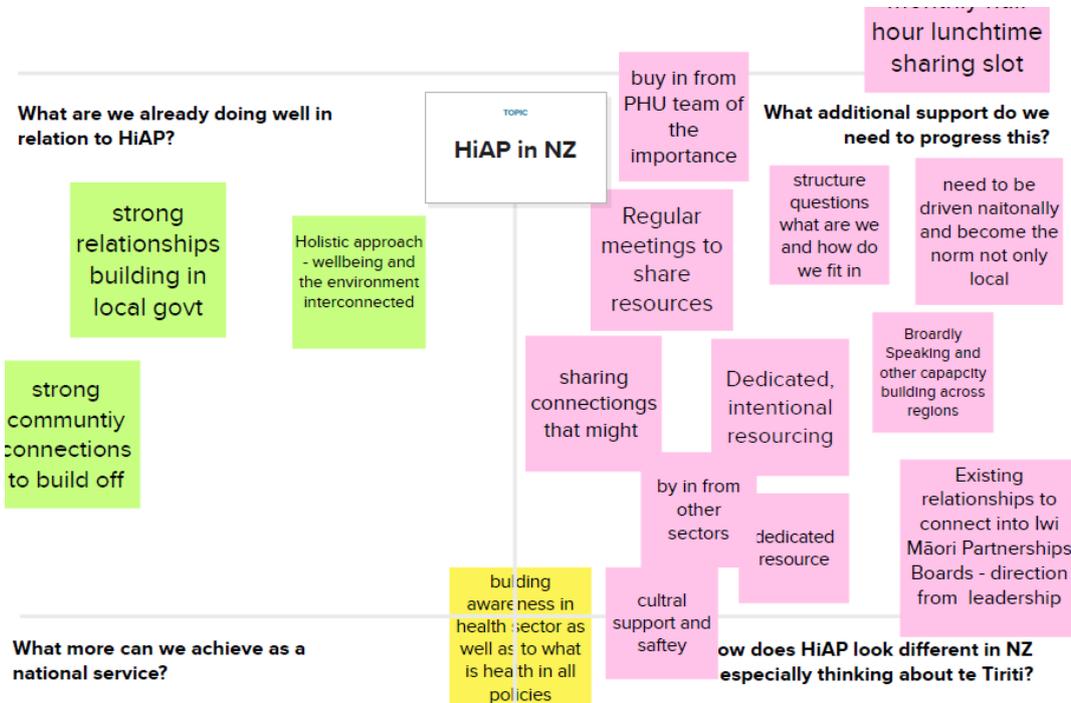


Figure 1: Screenshot of a section of a breakout group's online whiteboard.

Some of the key themes arising from the breakout groups are summarised in the following section.

## What are we already doing well in relation to HiAP?

Many areas in which HiAP is already working well were identified. Strong, well-established local relationships and working collaboratively with key partners in the regions including local councils, Iwi and communities was identified as a specific strength.

Participants identified that they were a sought-after partner in regional or local projects and played an important role in advocating for equity and Te Tiriti in health across this work. In addition, existing trusting connections and relationships between staff within NPHS regional offices (ex PHUs) were recognised to be an asset for HiAP work in Aotearoa, with further opportunities for knowledge sharing and collaboration acknowledged.

Staff with a depth of knowledge about health including how to use various models, approaches and evidence and technical skills across a range of disciplines was recognised as another area of strength.

## What additional support do we need to progress this?

Several opportunities to support the progress of HiAP were identified. A key area is the need to build increased leadership in the HiAP space to provide direction and to facilitate national conversations.

The desire for a strong, clear national vision, strategy and policy was apparent in each group's reflections. This would enable the development of focused national priorities, provide clarity around structures and organisational roles, enable effective monitoring and evaluation, help with buy-in operationally, on a management level as well as at governance level.

A national network and regular workshops to share knowledge, learn from each other and provide professional development opportunities to grow staff capacity in the HiAP space were also identified to be key opportunities. More dedicated, intentional resourcing including staffing, budgets, and access to a shared platform to access tools and resources would also support use of the HiAP approach.

## What can we achieve as a national service?

Many ways by which the transition into a national service can support HiAP mahi were identified. A central theme was integration and advocacy of HiAP approaches at a national level – in policies, position statements, strategies, frameworks and high-level conversations. These structures would support the flow of information around opportunities and outcomes of HiAP work locally, regionally and nationally. Integration of HiAP at these levels would also build awareness, engagement and buy-in of HiAP approaches from within the service as well as with other agencies.



The transition into a national unit also provides an opportunity for regions to work more effectively together and build consistency across the motu. Each group shared hopes of having a strong national network to allow for regions to share learnings, support one another and co-ordinate projects and initiatives collectively.

## How does HiAP look different in NZ especially thinking about Te Tiriti?

Participants identified many ways that HiAP is approached uniquely in Aotearoa in relation to the context, partnerships and obligations that Te Tiriti provides. A key theme raised was the importance of strong partnerships to be formed with Iwi as well as Iwi Māori Partnership Boards. These partnerships are critical to understand te ao Māori approaches, Māori aspirations and progress priorities for kaitiakitanga.

A deep and accurate understanding of Iwi aspirations can also support HiAP mahi to effectively advocate for provision for Māori self-determination in the design, delivery and monitoring of council and agency services.

## Reflections on next steps

The HiAP team within Community and Public Health | Te Mana Ora has reflected on the outputs from the workshop and intends to work with our colleagues across the motu to progress the following:

- Create regular opportunities for all regions to come together, meet and share information (such as workshops, an annual symposium, online and face to face).
- Provide opportunities for capacity building and sharing of human resources across regions.
- Consider opportunities which build local, regional and national HiAP awareness, knowledge and activity, with an aim to make HiAP a legitimate and priority public health activity at all levels.
- Provide a platform or system which enables the sharing of documents across the motu.
- Consider what is required to indigenise HiAP approaches.



**Te Whatu Ora**  
Health New Zealand