

# EXECUTIVE SUMMARY for Canterbury Health in All Policies Partnership (CHIAPP)

**Canterbury**  
District Health Board  
Te Poari Hauora o Waitaha

**Christchurch**  
City Council

**Environment**  
Canterbury  
Regional Council  
Kaunihera Taiao hi Waitaha

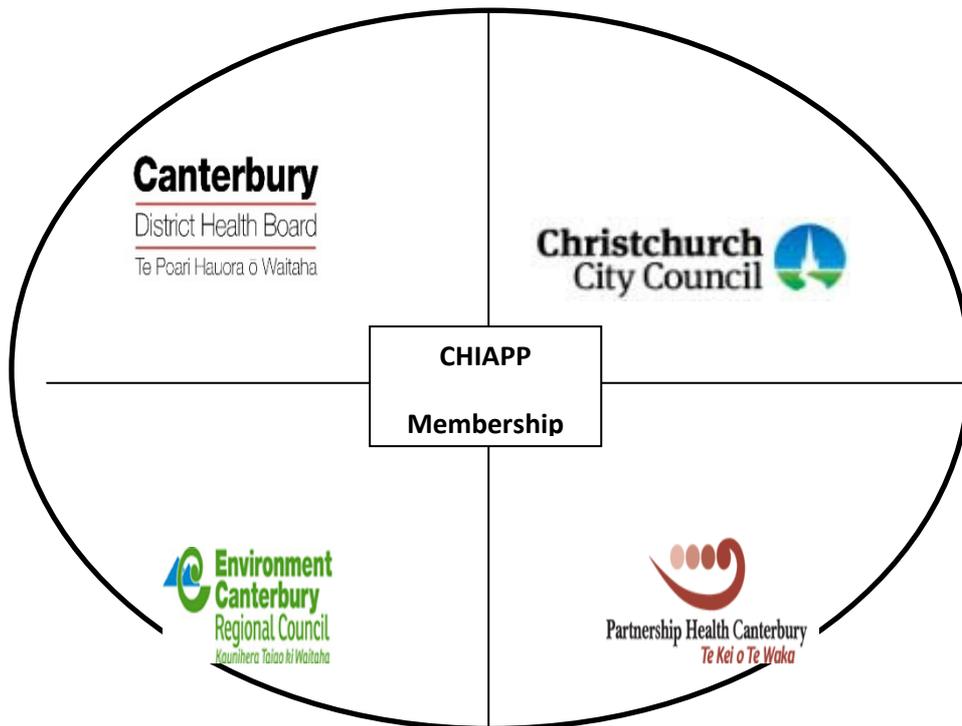
**Partnership Health Canterbury**  
Te Kei o Te Waka

June  
2012

A new phase for CHIAPP



**Libby Gawith**  
2evaluate



**CHIAPP Members**

Christchurch City Council (CCC)	Alan Bywater (2009-	
Community & Public Health / CCC	Anna Stevenson (Public Health Physician) (2009-	
Community & Public Health	Sue Turner (2009-11)	
Environment Canterbury	Rob Woods (2009-10)	Miria Goodwin (2011-
Partnership Health Canterbury PHO	Michael O’Dea (2009-11)	Jane Cartwright (2012-
CHIAPP Project Officer	Alison Bourn (2009-2011)	
Community & Public Health, Senior Project Manager (HIAP)	Alison Bourn (Nov 2011 -	

## Executive Summary

The original Canterbury Health Impact Assessment Partnership Project [CHIAPP] was an initiative launched in October 2009 operating with and co-funded by the four partner organisations of Community and Public Health [CPH] (a division of Canterbury District Health Board, [CDHB]), Christchurch City Council [CCC], Environment Canterbury [ECan], and Partnership Health Canterbury, a Primary Health Organisation [PHO]. The project was resourced with a full time Project Officer co-funded by the four partners for the initial 2 year period of the project. In March 2010, an Evaluation Plan was developed by CHIAPP and Independent evaluators were contracted to carry out this evaluation, following the specific framework.

Healthy Christchurch is the umbrella organisation for CHIAPP and is an initiative and network sponsored by CDHB, CCC, ECan, Ministry of Health, Partnership Health Canterbury PHO, Pegasus Health, NZ Police Canterbury Region, Te Runanga o Ngai Tahu [TRONT], University of Otago, Christchurch and Canterbury Earthquake Recovery Authority [CERA].

Since September 2010, Christchurch has had multiple major earthquake events (September 10, Dec 26, 2010; February 22, June 11 and December 23, 2011) and a further 9000 or more aftershocks. The ability to complete both the planned HIA work and subsequent evaluation has been interrupted. While physical locations of work and changing priorities impacted on how the evaluators could carry out the evaluation tasks, the opportunities that these natural disasters afforded the project were serendipitous. The ability to create major pieces of work such as the Integrated Recovery Planning Guide (IRPG), and the opportunity to ensure that the determinants of health were included in future planning for the city, were timely.

HIAP - Health in All Policies [HIAP] is a **way of working** that aims to ensure health, wellbeing, sustainability and equity issues are explicitly addressed in the policy or decision making process and clearly understood to be important considerations or outcomes of almost any policy or decision (adapted from Quigley, 2012). HIAP is an encompassing approach that goes beyond the health sector boundaries to strengthen the link between health and other policies (Stahl, Wismar, Ollila, Lathinen & Leppo, 2006) and involves other (non health) sectors in “partnerships and seeking common outcomes” (Ward, 2011, p.13).

HIAP understands that a healthy population is a key requirement for society’s goals (WHO and Government of South Australia, 2010, p.2). It highlights that many of the factors that affect health and wellbeing are multiple and multi layered (as in Figure 1) and lie beyond the reach of health services and policies as illustrated in Figure 2. It is interesting to note that health care is a 10% contributor to preventing premature death and that behaviour patterns are 40% contributors as outlined in Figure 2.

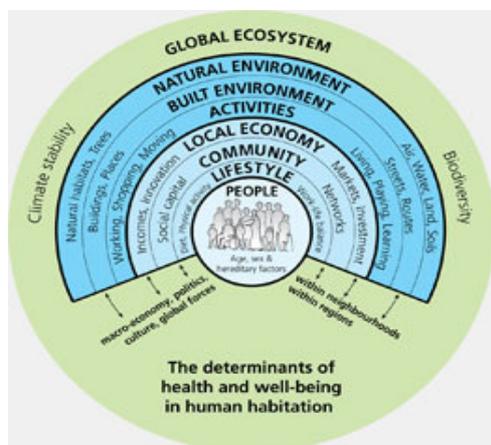


Figure 1: Factors that affect our health and wellbeing  
Source: Barton & Grant (2006.p.252).

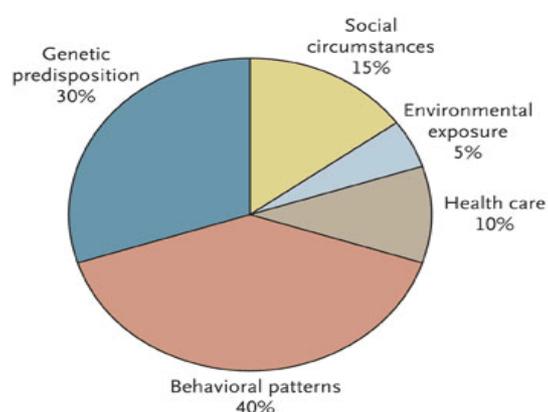


Figure 2: Proportional Contribution to Premature Death  
Source: Schroeder (2007).

HIA - Health Impact Assessment (HIA) is a “formal process that aims to ensure public policies, programmes and plans enhance the potentially beneficial effects on health and wellbeing and reduce or mitigate the potential harm with innovative solutions” (Public Health Advisory Committee [PHAC], 2007, p.6).

HIA is important as it can:

- influence decisions in policy fields other than health, which seldom take health impacts into consideration (Puska, 2007, p.328)
- help policy makers “foresee how different options will affect health and so takes the health consequences into account when choosing between options” (Stahl et al., 2006, p. 189).

A diverse range of over 40+ HIAs have been completed in New Zealand over the past seven years (refer Appendix 1b). It is important to “acknowledge that most HIAs in New Zealand are done so on a limited budget, ...with little time available....and often undertaken by new or relatively inexperienced practitioners” (Ball, 2010, p.18). For more information on HIA, refer to Information Sheet 2 (Gawith & CHIAPP, 2012b).

It is important to consider local Health in All Policies and Health Impact Assessment activity within the sphere of international activity. Different countries around the world are at different stages of working with HIAP and HIA and the work is growing in momentum. For more information, refer to Information Sheet 3 (Gawith & CHIAPP, 2012c).

Overall, HIA considerations create **better policy** and **better outcomes**. For policy to be judged of high quality, it should have considered the relevant health impacts.

### **Methodology for evaluation**

Content from the previous two evaluation reports (2evaluate 2010; 2evaluate 2011) has been included in this report for continuity.

Strategic Planning Day (August 2011) - CHIAPP organised a Planning Day in August 2011 for the Steering Group members and evaluators to explore arrangements after October 2011 when the original 2 year project was due to finish. Results from this planning day have been included in Appendix 2.

CHIAPP Self Evaluation/Monitoring Tool (2011) - The CHIAPP Leadership Group and the evaluators developed a self evaluation/monitoring tool in October 2011 to be used by members to keep the five working objectives prioritised and progress evaluated.

Interviews with Leadership Group members and Healthy Christchurch representatives (December 2011) - Interviews were carried out with the CHIAPP Leadership Group in November 2011. In addition, a former Steering Group member and three representatives from Healthy Christchurch were interviewed in December 2011.

Key literature review and Information Sheets (April 2012) - An extensive literature review was carried out by an evaluator in late 2011 on HIAP and HIA work carried out internationally and within New Zealand which resulted in a series of Information Sheets as outlined in Appendix 1c.

### **Findings**

Since the inception of the original two year CHIAPP project funded by the four partner organisations, much has evolved and developed. Since the end of the first two year phase of the CHIAPP in October 2011 there is now: a) a new name with the same acronym – Canterbury Health in All Policies Partnership (CHIAPP), b) a renamed Leadership Group, c) five synthesised objectives instead of the original twelve, d) a new self evaluation/monitoring tool, and e) new work plans focusing on HIAP and not HIA, which are being planned earlier and more systematically within partner organisations.

CHIAPP have been steadily working on most of their original objectives. Progress on the current synthesised five objectives is more focused and monitored regularly. There have been some key successes with transport HIAs and regional policy statement work and useful resources and literature reviews developed. Lessons have been learnt for other cities wanting to adopt a model similar to CHIAPP including strong partnerships with other organisations in the collaborative, a dedicated Leadership Group, overall clarity of purpose and terminology, funded Project Officer role as well as clearly defined Objectives and paperwork. Optimum ways to go forward have been identified and one case study offers some pragmatic and useful advice for successful working within a CHIAPP type model. Making Health in All Policies work more visible and building stronger working relationships with Healthy Christchurch member organisations, is a key direction for CHIAPP.

## **Conclusions**

The original Canterbury Health Impact Assessment Partnership Project was concluded in September 2011. The subsequent development of the Canterbury Health in All Policies Partnership (CHIAPP) from October 2011 is now a business as usual arrangement with the four partner organisations. CHIAPP is in a new phase of development. The Steering Group with representatives from the four organisations that funded the original project has very intentionally evolved to a Leadership Group with a shift in focus from the work of the project and the Project Officer to that of a leadership group with members working within their organisations. The Group is developing soundly and in a solid direction.

It is clear that significant learning and achievements have occurred over the tenure of this project for the four partner organisations at the Canterbury regional, local, DHB and PHO levels. The Public Health Specialist working within CCC and C&PH has been instrumental in developing capacity building and rich understanding of the importance of the determinants of health, and the nature of wicked and complex problems, for the partner organisations and for the Leadership Group. The Senior Project Manager has been working steadily throughout the tenure of the project to advance HIA expertise, HIAP understanding and public health's connections with non-health sectors.

Environment Canterbury representatives have been steadily increasing the capacity of their organisation to include health in all their policies and planning. The Christchurch City Council has been making steady progress and creating opportunities to embed health determinants and health considerations in their strategic planning and policy work. Community & Public Health have renamed their policy team, the Health in All Policies (HIAP) team. Partnership Health PHO has remained a committed member of the CHIAPP group.

Some important messages that CHIAPP continually promotes:

- The goal for Health in all Policies (HIAP) is that it leads to a better city for everyone.
- The work is about the systematic embedding of HIAP in the partner (and other) organisations and moving explicitly toward using a HIAP approach on a daily basis.
- The HIAP approach uses HIA as one of its tools to get a better, healthier city for all.
- HIAP is an ongoing, useful and valid way of working considering health determinants and is not just a one off project.
- The focus is to educate and re-orientate the health sector and other sectors around a determinants focus e.g. ***"I work at C&PH in a health determinants way and the determinant under focus now is water"*** (Ramon Pink, Medical Officer of Health at Community & Public Health, 2011).
- The understanding that HIAP work is a long term process and a long haul and that it takes a lot of energy to maintain collaborative partnerships but that it is a worthwhile and valuable pursuit.

CHIAPP now has a self evaluation tool and is much more **focused** than in 2011. Much progress is being made within the four partner organisations in identifying projects to include HIAP considerations early in their work cycles and this is a significant achievement.

### **Case Study: Building capacity for HIAP work within partner organisations**

The following are ways of working for one of the CHIAPP partner organisations to build internal capacity. They:

- ensure that there **are levels and layers** of people within their organisation who understand CHIAPP and HIAP
- ensure there are two people in their organisation who can bounce ideas and alternate attendance at CHIAPP meetings
- keep CHIAPP and HIAP a priority and have more than one person as a champion / sounding board within the same organisation
- ensure there are non management staff involved as these have more time to work on influencing others internally within the organisation
- make the connection between staff's daily project work and health as then it is easier to get ideas supported from their direct manager.

### **Recommendations**

Key recommendations are framed around the current five working objectives.

**Recommendation 1:** The Leadership Group operates as a highly functioning and effective partnership in order to develop the HIAP approach in Canterbury through:

- a) making HIAP work more visible and profiled within Healthy Christchurch.
- b) continually reviewing CHIAPP's relationship with the Healthy Christchurch network and member organisations to build closer working frameworks to maximise the potential of and benefit for both groups.
- c) developing Communications strategies and opportunities for CHIAPP.
- d) inviting and including new organisations that need to be working to reduce inequities in health in Canterbury e.g. MSD, Housing, CERA.

**Recommendation 2:** The Treaty of Waitangi is recognised and informs the work of the CHIAPP Partnership through:

- a) using the Māori relationships and plans within the partner organisations to advance HIAP and
- b) developing existing relationships with local Māori within the Healthy Christchurch network.

**Recommendation 3:** The partner organisations increase their understanding of the Health in all Policies approach through capacity building/training activities (e.g. HIA training, presentations) that are planned and evaluated through:

- a) developing and ascertaining a baseline of the understanding of HIAP in partner organisations,
- b) developing an annual calendar of training opportunities and HIAP work within the partner organisations.

**Recommendation 4:** The partner organisations promote and incorporate HIAP activities e.g. HIA, Integrated Recovery Planning Guide or IRPG, cross-sector workshops into policy and programme development as part of annual planning processes through:

- a) building systematic planning approaches and timelines within partner organisations.
- b) monitoring the emerging approaches in the partner organisations for effectiveness in embedding HIAP and
- c) adopting most effective ways of working and integrating HIAP.

**Recommendation 5:** The partner organisations have a commitment to continuous quality improvement and evaluate the HIAP activities within their organisations to continually improve and assess value through: a) possibly an annual external review of progress in embedding HIAP from partner organisations or Healthy Christchurch representatives.

**Recommendation 6:** The partner organisations collectively prioritise and target work with other organisations to continually improve the health of the people of Canterbury e.g. MSD, Housing CERA.