



Annual Report

For the year ended 30 June 2020

Presented to the House of Representatives pursuant to Section 150(3) of the Crown Entities Act 2004





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New Zealand

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December 2020

NZBN 9429041905333



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Foreword

Ehara taku toa, he takitahi, he toa takitini

*My success should not be bestowed onto me alone,
as it was not individual success but success of a collective*

We are pleased to present the Annual Report of Te Hiringa Hauora/Health Promotion Agency for 2019/20.

This year has been a year of change and challenge. The change came from within with the development of a new strategic direction; the challenge was from an extraordinary external factor, COVID-19.

Te Hiringa Hauora has always recognised that, while most New Zealanders live long and healthy lives, some New Zealanders, especially Māori, Pasifika and people living in lower-socio-economic areas, experience poorer health outcomes.

While our work programme for 2019/20 gave priority to achieving health equity for these groups, we also developed an ambitious new strategic plan which explicitly stated our commitment to Te Tiriti o Waitangi, equity of health outcomes and sustainability. These three pou form the foundations of the work which we as a Board and Te Hiringa Hauora as an organisation have signed up to.

Implementation of the strategic plan was delayed because of lockdown caused by COVID-19 but will proceed in the next financial year.

COVID-19 created unprecedented challenges for all of us. As an organisation mandated to promote health and wellbeing and encourage healthy lifestyles, Te Hiringa Hauora was acutely aware of the need to maintain critical areas of work such as the mental wellbeing programme of work in an environment where many were facing significant challenges to their health and wellbeing.

As an organisation we had to cope with the uncertainties and ambiguity caused by COVID-19 and the subsequent lockdown. We worked quickly to equip our staff with the resources and support to work effectively from home. While some things had to be put on hold, we reoriented staff and resources to COVID-19 work. We supported the Ministry of Health's psychosocial response to COVID-19 and focused on the wellbeing of five priority groups: pregnant mothers and new parents; Māori; Pasifika; older people; and people with long-term health conditions.

This document reports on the work outlined in the 2019/20 Statement of Performance Expectations. We also report on additional work undertaken at the request of the Ministry of Health that reflects Government priorities or a particular health issue. In 2019/20 this included supporting the COVID-19 psychosocial response, and cervical screening.

As well as being effective, our work needs to achieve efficiencies. We aim to provide the best value for money for Government by seeking ongoing improvements and focusing our activities where we can make the most impact.

The Board would like to thank all Te Hiringa Hauora staff for their expertise, effort and dedication, which ensure we are an effective organisation as we strive to improve the health and wellbeing of all New Zealanders.



Jenny Black
Chair
Te Hiringa Hauora



Tane Cassidy
Chief Executive
Te Hiringa Hauora

Presentation of 2019/20 Annual Report

The Board of Te Hiringa Hauora is pleased to present the annual report of Te Hiringa Hauora for the period ended 30 June 2020.



Jenny Black
Chair
Te Hiringa Hauora

18 December 2020



Dr Mataroria Lyndon
Board Member
Te Hiringa Hauora

18 December 2020

Te Hiringa Hauora/ Health Promotion Agency

Our vision:

Pae Ora
Mauri Ora
Whānau Ora
Waiora

Our mission:

Te Hiringa Hauora:
The unrelenting pursuit
of wellbeing.

Te Hiringa Hauora is a Crown agent established by the New Zealand Public Health and Disability Act 2000.

Our overall function is to lead and support activities to:

- promote health and wellbeing and encourage healthy lifestyles
- prevent disease, illness and injury
- enable environments that support health and wellbeing and healthy lifestyles
- reduce personal, social and economic harm.

We have alcohol-specific functions to:

- give advice and make recommendations to government, government agencies, industry, non-government bodies, communities, health professionals and others on the sale, supply, consumption, misuse and harm of alcohol as those matters relate to the general functions at Te Hiringa Hauora
- undertake, or work with others, to research alcohol use and public attitudes to alcohol in New Zealand and problems associated with, or consequent on, alcohol misuse.

As a Crown agent, Te Hiringa Hauora is required to give effect to Government policy when directed by the responsible Minister. In delivering its alcohol-specific functions, Te Hiringa Hauora must have regard to Government policy if directed to do so by the Minister.

Te Hiringa Hauora is funded from Vote Health and the levy on alcohol produced or imported for sale in New Zealand.

Our strategic intentions are:

- People can take action, be effective, and influence their own life.
- Communities meet their needs and goals.
- Environments and systems are enablers not barriers.

We work with a large number of organisations, including health sector agencies, particularly the Ministry of Health, district health boards (DHBs), public health units, primary health organisations (PHOs), primary health services and health professional associations, other central government agencies, communities, industry groups, territorial authorities, iwi and Pasifika, and other health providers and policy makers, academics and researchers.

Our People

Board

Te Hiringa Hauora is governed by a Board appointed by the Minister of Health. Board members are:



Jenny Black
Chair



Dr Monique Faleafa
Deputy Chair



Dr Teuila Percival



Mafi Funaki-Tahifote



Professor Boyd Swinburn



Karaitiana Tickell
Ngāi Tahu, Ngāti Toa, Ngāti Raukawa



Dr Mataroria Lyndon
Ngāti Hine, Ngāti Whātua, Waikato, Ngāti Toa

Executive management team

The executive management team at Te Hiringa Hauora is made up of the Chief Executive and four general managers.



Tane Cassidy
Chief Executive
Ngāpuhi



Laurianne Reinsborough
General Manager
Operations



Cath Edmondson
General Manager
Policy, Research
and Advice



Lucy Hickman
General Manager
Corporate Services



Lynne Walsh
Acting General
Manager
Communications
and Capacity

Our name

Te Hiringa Hauora was adopted as our official name on 16 March 2020.

The name was gifted to the Health Promotion Agency by the late respected kaumātua New Amsterdam (Amster) Reedy (*Ngāti Porou – Te Aitanga a Mate, Putaanga, Te Whānau a Tūwhakairiora, Ngāti Uepohatu*).

Te Hiringa Hauora is described as “the unrelenting pursuit of wellbeing”.

This taonga celebrates our name. It is shaped in the form of a taurapa (stern) of a waka taua (carved war canoe) and symbolises the journey to wellbeing.

The taurapa represents the balance and harmony between all things connected with hauora.

Lewis Gardiner of Rākai Jade in Rotorua crafted our taonga.



A Year of Change

Strategy development

During the year Te Hiringa Hauora developed a strategic plan for the next 10 years. Our goal is intergenerational change in health and wellbeing for those whose needs are the greatest. Some New Zealanders face greater challenges to achieve health and wellbeing and so our new strategic plan will deliberately focus our energy and resources to work with communities where needs are greatest. Our strategy sets out how we will do that over the next 10 years. It is ambitious. It requires change in what we do and how we do it. It is a living document and will continue to evolve, ensuring we are responsive to changes around us.

Everything we do, from the programmes we deliver to the way our organisation works, is built on three pou – our commitments to Te Tiriti o Waitangi, to achieving equitable health outcomes and to a sustainable future.

Te Tiriti o Waitangi

Te Hiringa Hauora has a responsibility to help the Crown meet its obligations under Te Tiriti to uphold and protect Māori rights and interests. This means that what Te Hiringa Hauora does must be effective in realising the goals and aspirations of Māori, and that these goals and aspirations must be authentically Māori.

Each year in our Statement of Performance Expectations we will outline how Te Tiriti has driven our strategy and operational activities across the business

Equity

Te Hiringa Hauora recognises that not all people have the same health and wellbeing outcomes. This is especially so for Māori and Pasifika peoples and their whānau. Unless we change what we do and the way we work, we will be less effective. Achieving equitable outcomes will drive all our work.

Sustainability

Te Hiringa Hauora recognises the significance of te taiao (the natural world) as essential to all areas of health – physical, environmental, mental, emotional and spiritual. We recognise the long-standing relationship with te taiao for Māori and we support Māori in their role as kaitiaki of the taonga.

There are opportunities to improve population health and wellbeing through policies and programmes that acknowledge the interconnection between te taiao and wellbeing and address environmental challenges in ways that protect and promote health.

We are committed to reducing our own environmental impact as well as supporting communities with their aspirations for sustainable wellbeing. We will partner with others that share our values.

COVID-19

COVID-19 has created unprecedented challenges for all of us. As an organisation mandated to promote health and wellbeing and encourage healthy lifestyles, Te Hiringa Hauora was acutely aware of the need to maintain our programmes, such as the mental wellbeing programme of work, in an environment where many were facing significant challenges to their health and wellbeing.

As an organisation we had to cope with the uncertainties and ambiguity caused by COVID-19 and the subsequent lockdown, and we worked quickly to equip our staff with the resources and support to work effectively from home. While some things had to be put on hold we reoriented staff and resources to COVID-19 work. We supported the Ministry of Health's psychosocial response and focused on the wellbeing of five priority groups: new and pregnant mothers; Māori; Pasifika; older people; and people with long-term health conditions.

To support this mahi we worked in innovative ways with our partners who could not achieve their work due to lockdown.

We partnered with leaders of community organisations to identify the needs of each of the priority groups, developing appropriate messaging and bespoke initiatives, and then jointly promoting them to each audience. We provided COVID-19-related wellbeing information relevant to each priority group with pages on depression.org.nz, as well as using our social media pages to engage viewers. We also formed a collaboration with the Mental Health Foundation and the All Right? team for the Getting Through Together campaign. This work continues into the 2020/21 financial year.

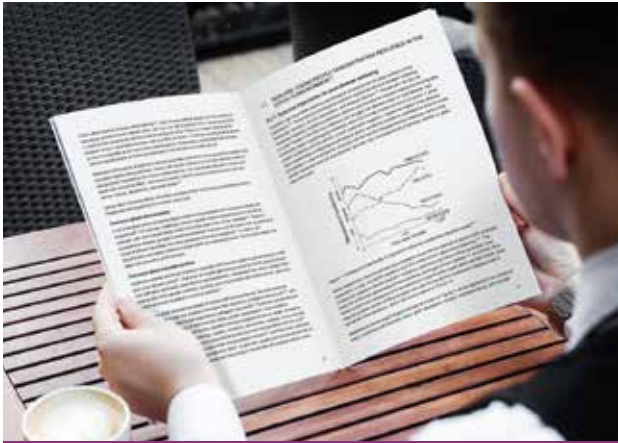
Our COVID-19 mental wellbeing work also sped up a planned social media strategy and deployment, with Te Hiringa Hauora launching an Instagram page for The Lowdown and content strategy in the first week of Alert Level 4 in late March 2020. Across our social media platforms we managed

to reach more than two million New Zealanders. From 13 March 2020 through to 10 September 2020 there were 65,000 visits to The Lowdown website and 319,181 visits to depression.org.nz. Our COVID-19-specific page on depression.org.nz had 73,512 visits.

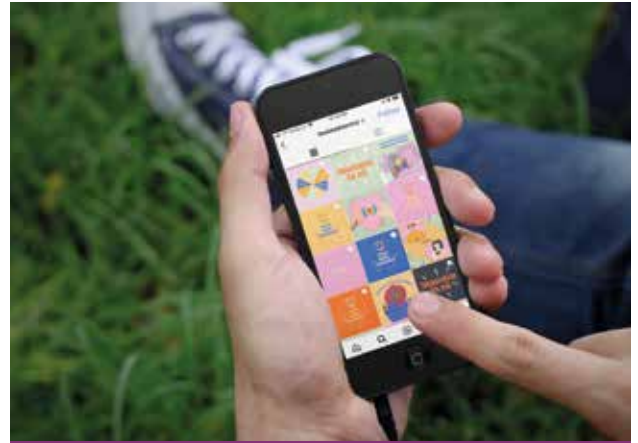
Another key aspect of our COVID-19 response has been partnering with regional and community groups and organisations, by helping them develop resources and tools to support their local campaigns and initiatives.

Te Hiringa Hauora produced a COVID-19 Rapid Evidence Brief at the request of the Ministry of Youth Development (MYD). The report looked at national and international evidence on how young people recover from traumatic events, natural disasters and economic downturns. The report was used to inform the development of the Youth Plan 2020-2021: Turning Voice into Action, a deliverable under the Child and Youth Wellbeing Strategy.

As part of our legislated role to undertake research into the effects of alcohol, Te Hiringa Hauora commissioned Nielsen to conduct an online survey to look at the impact of Alert Level 4 conditions, including on people's alcohol consumption. The online survey of 1,190 individuals was weighted to be representative of the total New Zealand population and was conducted from 7 to 13 April 2020, which corresponded with Alert Level 4 lockdown days 13 to 19. One-third of respondents surveyed on their drinking during the Level 4 lockdown said they were drinking less than before



COVID-19 Rapid Evidence Brief for MYD.



Instagram page that was launched for The Lowdown.

the lockdown, while almost half said they were drinking at the same levels. However, one in five reported drinking more than usual with increased drinking more prevalent among 25 to 49-year-olds. The majority of those who were drinking more said it was to help them relax or switch off.

During COVID-19 Alert Levels 3 and 4, alcohol-related social media posts were promoted through existing channels, and we supported the NZ Drug Foundation's Best Bubble campaign, which was developed as part of the Government's COVID-19 response.

Our Helpseekers campaign was also revived during Alert Level 4 to support those who needed help with their drinking. The campaign invited drinkers to answer a few questions about the consequences of their drinking and call the Alcohol Drug Helpline if they found themselves answering 'yeah' more often than they would like.

During the various COVID-19 Alert Levels, Te Hiringa Hauora worked closely with the Ministry of Justice on online alcohol sales, the service of alcohol in on-licensed premises and the development of web content for the Ministry of Business, Innovation and Employment's essential services information on alcohol. Te Hiringa Hauora also supported the Ministry of Justice as it drafted the COVID-19-related Immediate Modification Orders to the Sale and Supply of Alcohol Act and related advice to territorial authorities (TAs) and others.

When the country went into Alert Level 4, there was a need to ensure that people could continue to

access gambling help services and information. We worked with frontline gambling help services to provide updated information about the availability of their services (via phone/text/Zoom) during the lockdown on the Choice Not Chance website, and promoted these through our social media channels.

While opportunities for physical gambling were not available during Alert Level 4, there was heightened concern about online gambling. Te Hiringa Hauora updated the Choice Not Chance website and developed a mini-campaign on online gambling.

In addition, we developed messages to help protect those people who had found the enforced break from physical gambling helpful but could easily return to unhealthy behaviours when venues opened back up. These messages were about putting in place plans to help reduce the risk and using minimising gambling harm services to help support them.

The 2019 national measles outbreak and the COVID-19 pandemic both had a significant impact on the immunisation programme. This meant that previously planned work on the development of a Māori Immunisation Strategy to respond to declining immunisation rates for Māori infants was not able to progress. However, this critical equity work is in the work plan for the next financial year.

Strategic Framework



Our strategic framework diagram above includes our strategic intentions and output classes, and provides a line of sight between these and wider health system outcomes.

Our Work 2019/20

Te Hiringa Hauora is proud to be part of the New Zealand health sector team working toward the Government's priority of improving the wellbeing of New Zealanders and their whānau.

In line with our new strategy and the Government's focus on wellbeing, in 2019/20 we started to shift our work to focus on making an early investment in people's lives. This includes focusing on the first 1,000 days of a child's life, young people and the prevention of non-communicable diseases.

The first 1,000 days of a child's life is from conception to two years. We worked with others to ensure all children start well and develop well for a healthy future by empowering whānau to make healthy lifestyle decisions in relation to nutrition, physical activity and sleep, and encouraging immunisation as the best protection against serious but preventable diseases. We also worked to support women and their whānau to have healthy pregnancies and to maintain their wellbeing after the baby's birth.

To support young people's wellbeing, we built on our existing involvement in successful initiatives like Smokefreerockquest and Smokefree Tangata Beats, as well as a new investment in the rugby league community.

The Government Inquiry into Mental Health and Addiction set us a challenge to do better to support mental wellbeing and prevent mental health and addiction problems. We have continued to make sure our mental wellbeing programmes are effective and can be adapted to the Government's response to the Inquiry.

We cannot be successful in our role on our own. Working with others in the health sector and in communities is essential to ensure messages are appropriate and delivered efficiently and consistently across New Zealand. In practical terms Te Hiringa Hauora provides advice, resources and tools to a wide range of individuals and groups.

Strong partnerships are key to our success. We are well connected and have established a large number of successful working relationships across sectors and communities, in a range of environments and settings. These include:

- health sector agencies, particularly the Ministry of Health, DHBs, public health units, PHOs, primary health services, iwi and Māori health providers, and health professional associations
- the community and voluntary sector
- non-government organisations
- central and local government agencies
- education sector agencies
- businesses
- policy makers, academics and researchers.



Te Hiringa Hauora leads and supports national health promotion initiatives through:

- undertaking and supporting research and providing advice to inform our work and the work of others
- supporting and partnering with community-based initiatives to help communities develop local solutions to local problems
- marketing and communications activities, including behaviour change mass media campaigns
- providing audience-focused tools and resources to a wide range of individuals and groups
- supporting coordinated health promotion activities across the sector, including with DHBs and public health units
- working to ensure that key environments protect rather than hinder health and wellbeing, such as alcohol drinking environments, sports settings and workplaces
- providing advice and, for alcohol, contributing to policy processes and laws by making submissions to select committees and local government and providing evidence-based research and policy.

An equally important part of our work is ensuring the environments where New Zealanders live, work and play support and promote health and wellbeing.

To achieve this we:

- work with communities to help them develop local solutions to local problems
- undertake and support research and provide advice to inform our work and the work of others
- offer specialist knowledge and undertake work to improve the incorporation of health promotion into workplace, sport and education settings
- influence the development and implementation of policies and laws by contributing to interagency processes and making submissions to central and local government, and by providing evidence-based research.

Te Hiringa Hauora has a Statement of Intent for 2017-2021 and a Statement of Performance Expectations for 2019/20.

The following pages outline our key results for 2019/20.

Alcohol

The harmful use of alcohol is one of the leading risk factors for premature death and disability in New Zealand and an important driver of inequities.

Alcohol is a group 1 carcinogen, known to cause cancer in humans. It also leads to a range of social harms such as crime, unemployment and family violence, and it negatively impacts mental health. Yet in New Zealand it is highly affordable, easy to access and widely promoted, including in family-oriented environments like sport. Even low levels of consumption increase risk factors for premature death, disability and social harms.

Alcohol is a strong driver of inequities, particularly for Māori. Some examples include:

- The death rate from drinking alcohol is disproportionately higher for Māori (34 deaths per 100,000 compared with 14 for non-Māori).
- Māori men drink more hazardously than any other group (one in two Māori men who drink do so hazardously). Māori women drink more hazardously than any other female group (one in three Māori women who drink do so hazardously).
- Higher proportions of cancer among Māori are due to alcohol. A higher proportion of Māori cancer deaths are due to alcohol than for non-Māori.
- Māori are more likely to experience harmful effects in areas such as financial position, work, study or employment, injuries and legal problems as a result of their drinking compared with other New Zealanders.

Our work is focused on changing alcohol-related policy at a local and national level, and changing the New Zealand drinking culture. New Zealand and international evidence points to policy and culture change as the two critical requirements for reducing alcohol harm, as summarised in the World Health Organization's SAFER Framework:

- **S**trengthen restrictions on alcohol availability
- **A**dvance and enforce drink driving counter measures
- **F**acilitate access to screening, brief interventions and treatment
- **E**nforce bans or comprehensive restrictions on alcohol advertising, sponsorship, and promotion
- **R**aise prices on alcohol through excise taxes and pricing policies

We prioritise work with Māori communities, recognising both our commitment to Te Tiriti o Waitangi and the disproportionate harm Māori experience.

Our focus 2019/20

Alcohol-free pregnancies

Through our alcohol-free pregnancy work, Te Hiringa Hauora communicates with young women, their whānau and the health sector about alcohol-free pregnancies, with an aim to prevent fetal alcohol spectrum disorder (FASD).

FASD is an umbrella term describing the range of physical, cognitive, behavioural and neurodevelopmental disabilities that can result from alcohol exposure during pregnancy. FASD is estimated to affect up to 3,000 babies born each year in New Zealand. Two out of every five New Zealand babies are born each year as a result of an unplanned pregnancy (24,000 births). Approximately half of women drink alcohol in early pregnancy before they know they are pregnant, inadvertently exposing their developing baby to risk.

In July 2020 Food Standards Australia New Zealand (FSANZ) made a decision to ensure pregnancy warning labels on alcohol will become mandatory in New Zealand and Australia. This decision was welcomed by a community of determined caregivers, families and professionals who have campaigned to raise awareness about the damaging effects of drinking alcohol during pregnancy.

The decision comes 14 years after the New Zealand Alcohol Advisory Council (ALAC) submitted an application to FSANZ in 2006 for pregnancy warning labelling on all alcoholic beverages. ALAC was disestablished in 2012 and its functions transferred to Te Hiringa Hauora (then known as the Health Promotion Agency).

Te Hiringa Hauora, along with many other organisations in New Zealand and Australia, continued to press for mandatory warning labels after evaluations showed the voluntary system implemented by the alcohol industry in 2011 was not working. Evaluations in 2014 and 2017 found that warning labels appeared on only 48% of alcohol products and were often small and had confusing messages.

Following public consultation, FSANZ put forward an effective warning label to be signed off by Australian and New Zealand Ministers. This was later amended to a pregnancy warning and in July this year the Australia and New Zealand Ministerial Forum on Food Regulation signed off on mandatory pregnancy warning labels on alcohol in New Zealand and Australia.

Alcohol producers will have three years to include the evidence-based label on their products and packaging, which is hoped to prevent many New Zealanders being born with fetal alcohol spectrum disorder (FASD). Alcohol

Background: Timeline of alcohol Health Warning Label Decision



bottles will have an image of the silhouette of a pregnant woman drinking with a red strike-through and the statement 'Alcohol can cause lifelong harm to your baby'. This was developed based on evidence, including World Health Organization principles, stakeholder views and public health advice.

The Pre-Testie Bestie social media initiative continued in 2019/20. Part of the Government's efforts to tackle FASD, the initiative aims to reduce alcohol consumption during early pregnancy by encouraging women to stop drinking if there is any chance they could be pregnant. It takes a humorous approach and also encourages young women to be a 'Pre-Testie Bestie' and support a friend to be alcohol-free if she thinks she might be pregnant.

Pre-Testie Bestie Awards from 2019/20:

- 2019 Effie Awards – Silver – Social Marketing/ Public Service
- 2019 Effie Awards – Silver – Most Effective Campaign
- 2019 Effie Awards – Bronze – Best Strategic Thinking
- 2019 NZDM Marketing Awards – Silver – Social Media and Digital
- 2019 NZDM Marketing Awards – Bronze – Excellence in Creative Innovation

Te Hiringa Hauora partnered with regional health promoters to develop customised resources for FASD Awareness Day on 9 September 2019. This included social media posts, resources for use by health sector workers, Pre-Testie Bestie themed cell phone card holders and an FASD Day digital toolkit on alcohol.org.nz.

Te Hiringa Hauora worked with the University of Auckland to extend the popular Healthy Start Professional Development programme to include modules on alcohol and tobacco. The online learning programme explores the science around how exposure to alcohol and/or tobacco during pregnancy affects lifelong health outcomes for the child and aims to help health professionals to talk confidently and deliver consistent, clear messages about alcohol/ tobacco use in pregnancy.

Alcohol-free teenagers

Keeping teenagers alcohol-free is a key focus for Te Hiringa Hauora and we want to increase the number of teenagers who choose not to drink. Another focus is to delay young people from starting to drink, and prevent the escalation of drinking.

Te Hiringa Hauora co-developed the Peer Crowd 360 tool, which was designed to help health professionals build empathy with young people

First review of voluntary.
38% of all products had labels.

2013

Second review of voluntary.
48% of all products had labels.

2017

Decision Regulatory Impact Statement (RIS).
Targeted consultation and Decision RIS.

2018

FOFR decision.
The FOFR allow industry further two years to implement labels.

Ministers decide.
Ministers vote for the mandatory application of labels.



Sponsorship support for the Festival for the Future 2019.



Te Waka Tūhono works with at-risk rangatahi.

from targeted peer crowds (peer crowds represent a shared culture of similar interests, lifestyles and influencers that transcend race/ethnicity and geography) by giving users an immersive experience. In 2019 we tested the tool at a workshop in Auckland with health professionals who work with young people. The workshop was hugely successful, with 100% of attendees identifying at least one action they would take to provide more relevant support for young people. Within two months of the workshop, 88% had shared the experience with others and implemented at least one action. Te Hiringa Hauora is continuing to support the further testing of this training and has co-funded 10 workshops with Counties Manukau DHB.

Te Hiringa Hauora sponsored Festival for the Future, an initiative of Inspiring Stories, a New Zealand-based charity with a bold vision to see young people realise their potential to change the world. Working collaboratively with the Department of the Prime Minister and Cabinet (DPMC), Oranga Tamariki and the Ministries of Youth Development and Social Development, we presented at two workshops to get direct input from young people on the DPMC's Child and Youth Wellbeing Strategy, Oranga Tamariki's Outcomes Framework and our work on mental health and youth wellbeing. More than 1,000 people from around the country attended, with most of the attendees aged 16 to 30 years.

Te Hiringa Hauora supported Ngā Kete Mātauranga Pounamu Charitable Trust in Southland to extend

its successful Te Waka Tūhono programme to work with younger rangatahi. The programme works with rangatahi who are at risk from alcohol and other drug issues and supports them to engage with their whakapapa and learn new skills, but was not funded previously to work with under-15-year-olds who were also experiencing problems. The expanded programme was expected to start March 2020 but was delayed due to COVID-19 and will now run in 2020/21.

Positive social norms and supportive environments

Te Hiringa Hauora worked with Māori wardens to identify what it could do to assist them in their roles, especially in terms of their specific alcohol-related powers and jurisdiction under the Maori Community Development Act 1962. Although the final report has been delayed because of COVID-19, Te Hiringa Hauora has completed consultation with partner agencies and other relevant stakeholders, and engagement with Wātene Māori across several districts. This engagement gathered insights into the alcohol-related harm issues they face in their roles and identified support that Te Hiringa Hauora could provide in the future.

Te Hiringa Hauora supported the roll-out of regional two-day workshops provided by New Zealand Police trainers to all regulatory staff across the country. The workshops were aimed at upskilling regulatory agencies' staff in their advocacy and prosecution roles in



Partnering with NZ Police trainers for industry workshops.



New messaging focused on swapping drinks for water or food.

alcohol licensing. The workshops were free to attend, with transport and accommodation also provided, and received very good verbal feedback from attendees.

The guide *Alcohol Licensing and Hearings: A Guide for District Licensing Committees* was published online in October 2019. It provides district licensing committee members with information to understand their roles and responsibilities, increase their confidence, and make legally sound decisions.

Te Hiringa Hauora confirmed a partnership with Counties Manukau Rugby Football Union (CMRFU) to gain access to hard-to-reach audiences experiencing significant harm. CMRFU is affiliated with 17 regional clubs across rural South Auckland and Franklin, with a total of more than 8,000 registered players. The partnership provides opportunities to reach a large target population and at a grassroots level (ie, local rugby clubs). Of all CMRFU's players, 69% are Māori or Pasifika, which is a similar percentage to its members and visitors.

Te Hiringa Hauora is in the final year of a three-year partnership with Community Law Centres of Aotearoa. The project has upskilled six Community Law Centres to support their communities disproportionately affected by alcohol-related harm to improve their engagement in local alcohol licensing processes. Initial indications suggest that increased community participation can influence the likelihood of licence applications being withdrawn or declined

or the application having specific conditions added to the licence. The project will be evaluated and our next steps are to work with Community Law Centres o Aotearoa to identify sustainable funding sources to continue and expand the project.

Department of Lost Nights

The Department of Lost Nights campaign ran from 28 November 2019 to 31 March 2020 with refreshed messages. Department of Lost Nights is the fifth phase of the successful Say Yeah, Nah campaign. Original research insights showed that many younger adults drink too much because they think it leads to a good time, and don't understand that in reality drinking can keep you from being part of the action and make you forget the good times. The new messaging focused on swapping the next drink for water, swapping the next drink for food and skipping the next round – this shifts the focus to actions that can be taken to prevent missing out. The videos and radio advertisements used tongue-in-cheek language and imagery to entice the audience (young adults aged 18 to 24 who drink at high-risk levels) into taking action. Placement was upweighted in communities with high concentrations of Māori and Pasifika populations. No results are available as the campaign monitor which measures the initiative was delayed because of COVID-19.



Alcohol, health and wellness

Te Hiringa Hauora works to help people understand the health and social risks associated with drinking, to think about their drinking, and to choose to drink at low-risk levels or not to drink. Our initial priority is Māori mid-life adults (aged 45 to 65 years) whose drinking is putting them at risk of experiencing alcohol-related health issues.

In 2019/20 Te Hiringa Hauora delivered nine regional hui designed to inform options for a new campaign aimed at helping mid-life Māori drinkers consider easing up. A key insight was the pervasive degree to which alcohol forms the basis of day-to-day social connection. The hui were held in Kaikohe, Auckland, Wairoa, Gisborne, Whanganui and Nelson in late July and early August 2019 and Te Hiringa Hauora staff engaged with Māori health providers, iwi and community leaders to help inform the campaign, which is expected to be in market during 2020/21.

Connection is important to facilitating conversations, preferably with a group rather than individual. [It makes people] more likely to talk with friends and family before health professionals

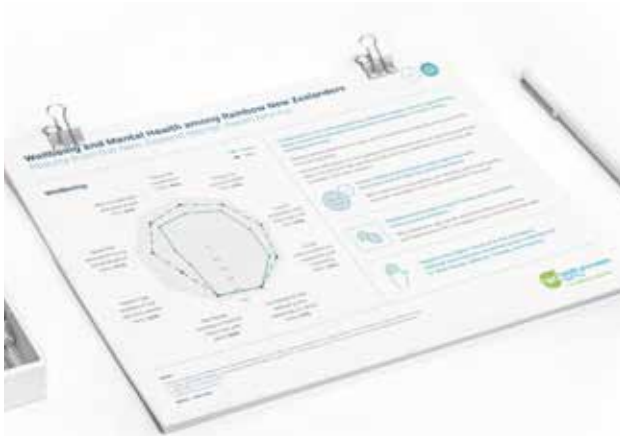
HUI PARTICIPANT

Te Hiringa Hauora developed a working prototype of an online self-help tool for mid-life Māori adults to assess their personal drinking/drug use. It features real stories of coming to terms with the role alcohol was playing in a person's life and their journey to put alcohol in its place. It also includes a range of options for listeners who want to have a conversation about their own alcohol use or get help to drink less.

Policy, advice and research

Our alcohol research work plan had a strong focus on equity this year, with a number of research projects undertaken to increase our understanding of the impact of alcohol and substance use on Māori, Pasifika and rainbow communities. We also published several reports on youth alcohol use, including a literature review exploring the relationship between alcohol use in adolescence and subsequent harms.

We have also focused on increasing the dissemination and use of our alcohol research findings. Infographics have been developed to highlight key facts about drinking in New Zealand, trends in hazardous drinking and Māori alcohol use. We have also published a technical document to support researchers to use the Integrated Data Infrastructure (IDI) to undertake research into substance and alcohol use.



Research projects increased understanding of alcohol impact.



Mandatory labelling warning of the risk to an unborn baby.

The Alcohol Use in New Zealand Survey went live in August 2019 and was in the field until March 2020. The survey covered alcohol consumption and behaviours, attitudes and beliefs about drinking and experiences of short-term harm from alcohol. The survey uses a seven-day drinking diary to improve the accuracy of information being collected on the volume of alcohol consumed within the last week. The survey included a boosted Māori sample to enable detailed analysis for Māori sub-groups. High-level results for the total population and for Māori only will be published in October 2020.

In 2019/20 Te Hiringa Hauora made the following submissions on issues related to alcohol:

- Māori Affairs Committee's inquiry into health inequities for Māori in relation to cancer – this submission addressed the need to enable Māori to better focus on wellness and to make lifestyle changes to reduce cancer risks, by focusing on tobacco smoking, alcohol consumption and diet and physical exercise.
- Health and Disability System Review – in May 2019 Te Hiringa Hauora put forward ideas and approaches to support the development of a cohesive, integrated health and wellbeing system that supports improved outcomes for all New Zealanders.
- Food Standards Australia New Zealand (FSANZ) – Te Hiringa Hauora supported the introduction of mandatory labelling of alcoholic beverages warning of the risk to the unborn baby of drinking alcohol during pregnancy.
- Gore Local Alcohol Policy (written submission).
- Kaikōura draft Local Alcohol Policy (written and oral submission).
- Palmerston North draft Local Alcohol Policy (written and oral submission).
- Christchurch City Council alcohol side-line ban at council-owned rugby league sports fields (written and oral submission).
- Southland/Invercargill draft Local Alcohol Policy (written and oral submission).



5

Awards for Pre-Testie Bestie campaign from 2019/20



8

Submissions by Te Hiringa Hauora on issues related to alcohol



9

Regional hui to inform a new campaign to help mid-life Māori

Mental wellbeing

Mental distress is common. Every year 20% of people will experience a diagnosable form of mental distress and half of us will experience it in our lifetime. If we don't experience it ourselves we will know someone who does.

Te Hiringa Hauora has responsibility for two main mental health programmes: Like Minds, Like Mine and Mental Wellbeing Promotion (formerly known as the National Depression Initiative). This year we also contributed to the Ministry of Health's psychosocial response to the COVID-19 crisis.

We run two mental wellbeing platforms and a self-help tool that offer help and advice to users: depression.org.nz, which is aimed at adults, and The Lowdown, which is aimed at youth. Both depression.org.nz and The Lowdown performed exceptionally well across 2019/20 and had a user approval of over 85% and 92% respectively. In 2019/20 these two sites combined had more than 630,000 unique visitors, who stayed on the site for, on average, more than two and a half minutes. Around 80% of all visitors are first time visits. Both sites saw a sharp increase in traffic throughout COVID-19 Alert Levels, particularly to COVID-19-specific content that provided advice to support people's wellbeing through uncertain times.

Our focus 2019/20

Depression.org.nz

During 2019/20 we made changes to the depression.org.nz website to support a broader wellbeing focus as part of the Ministry of Health's action plan response to the Christchurch shootings on 15 March 2019. Changes included shifting language to strengths-based wellbeing language, which doesn't assume that low mood

or struggle is necessarily an indication of depression. This softens the approach to be more inclusive of a range of psychosocial states.

Our Small Steps campaign was back in market in the lead-up to Christmas, which can be a stressful time for many. The campaign shows positive, simple actions that New Zealanders can take to support or recover their mental wellbeing. The number of users on the site increased by 41% while the campaign was in market.

The Lowdown

The Lowdown is a website to help young New Zealanders recognise and understand depression or anxiety. By encouraging young people to recognise it and seek help early, we're aiming to reduce the impact depression or anxiety has on young New Zealanders, now and throughout their adult lives.

In December 2019 The Lowdown partnered with two of the biggest youth radio stations in the country (Mai FM and The Edge) to develop a summer campaign looking to reach firstly 15 to 18-year-old Māori and Pacific and then all 15 to 18-year-olds. The purpose of the campaign was to increase awareness of The Lowdown – positioning it as a trustworthy, safe, socially acceptable place for young people to go for advice. We also wanted to normalise use of The Lowdown – creating a sense that lots of young people from all walks of life visit the website to get advice on life issues.

CASE STUDY



Psychosocial response to COVID-19

Te Hiringa Hauora has been supporting the Ministry of Health's psychosocial response to the COVID-19 focusing on the wellbeing of five priority groups, hapū mama; Māori; Pasifika; older people; and people with long-term health conditions.

Psychosocial support focuses on ensuring that the mental and social wellbeing needs of whānau and community are met and they are supported to recover, adapt and thrive despite challenges and disruption.¹

In the Pasifika space Te Hiringa Hauora sought to co-design an equitable approach that was both relevant and specific for Pasifika audiences and communities. Mana Pasifika was built on key Pasifika values of alofa (love), tautua (service/to serve), fa'aaloalo (respect), aiga (family) and vā fealoaloa'i (relationships).

Mana Pasifika, founded during alert level 4 lockdown, is an ongoing working collaboration and partnership between Te Hiringa Hauora, Vaka Tautua, Mapu Maia, the Mental Health Foundation and Pasifika health leaders.

Mana Pasifika is based on talanoa/storytelling – through the narrative of Our Voice, Our Community and having a range of individuals/organisations across Pasifika demographics speak directly about their experiences.

- The first story is with rugby league legend, Ruben Wiki, who talks about destigmatising help seeking around mental distress; debunking the narrative of not having to be a “tough gladiator” all the time.
- Next is a poem by Grace Iwashita-Taylor. The poem speaks to Pasifika with alofa, aroa, ofa, loloma, and love about Pasifika and the importance of kaiga, aiga, whānau and family.
- Ema and David Toailoa talk about the loss of their baby during the country's alert level 4 lockdown and how they navigated through the grief together with a positive outlook on their strength.
- Pauline, an essential worker, shares her story of working on the front line. The video reminds essential workers to look after themselves, keep an eye on their mental health and take time to talk to somebody if they are feeling stressed or down.

¹ Ministry of Health. 2020. *Kia Kaha, Kia Maia, Kia Ora Aotearoa: COVID-19 Psychosocial and Mental Wellbeing Recovery Plan*. Wellington: Ministry of Health.



The pilot brought eCoaching services alongside The Journal.



Good4Work is a tool to help businesses review their practice.

eCoaching pilot with The Journal

Te Hiringa Hauora partnered with HealthTRx to deliver a year-long pilot supporting people with depression and/or anxiety. The pilot launched in May 2019 across selected primary health care sites in Auckland, Waikato, Hawke’s Bay and Gore and used peer coaches through our partnership with mental health service provider Ember – Korowai Takitini. The eCoaching pilot added phone and text-based peer support to the existing online tool The Journal. The Journal is an online, personalised support programme set up to help people experiencing mild to moderate depression or anxiety. Bringing eCoaching services alongside The Journal provided additional support, guidance and encouragement to clients progressing through the online tool.

The pilot recruited 254 clients experiencing depression and anxiety. Over the course of the pilot, clients reported a significant reduction in the severity of their depression.² Both referrers and client interviewees valued the flexibility and accessibility of eCoaching. Clients especially valued being able to access the service at a time and place that suited them.

It's like she's behind you, and you're climbing these stairs and you're climbing the biggest mountain that you've ever had to climb, and she is holding you at the back, pushing you and supporting you, that's how it feels when you have that back, that person that's supporting you. And to me it's crucial.

PARTICIPANT IN THE PILOT

The Knowledge Institute is conducting an independent evaluation of the pilot.

Workplace wellbeing

Te Hiringa Hauora sees the workplace as a key environment for intervention in both delivering wellbeing messages and advice, and helping respond to mental distress. Part of this work includes Wellplace.nz, an online hub for all things related to workplace wellbeing, including resources, advice and case studies. In 2019/20 there were almost 60,000 visitors to the site and a 50% increase in visitors outside of main centres, showing more uptake of information in the regions.

Good4Work is a partnership between Toi Te Ora Public Health, Auckland Regional Public Health Services and Te Hiringa Hauora. Good4Work is a tool for businesses to review their practice against the World Health Organization’s definition of mentally healthy work. Using a short quiz, businesses can see their position in relation

2 As measured by PHQ-9 scores (a clinical measure of depression).



The campaign targets family, whānau and friends.



Kāhui Tū Kaha and Te Hiringa Hauora working in partnership.

to comparable industries and make a plan to implement changes to their policy and practice. In the last financial year, nearly 5,000 people used Good4Work, with more than 1,000 businesses completing the quiz, primarily working in health care and social assistance, education and training, and manufacturing.

Like Minds, Like Mine

Like Minds, Like Mine (Like Minds) aims to uphold the mana and human rights of people with mental distress. We do this through campaigns, community projects and research. Like Minds is focused on people who experience severe distress and are also subjected to the most social exclusion. Discrimination is one of the biggest barriers to recovery.

The Just Ask, Just Listen campaign was in market for a month between October and November 2019. The campaign targets family, whānau and friends of people experiencing mental distress, by showing them ‘what not to do’ in a thought provoking, humorous way. The evaluation findings showed the campaign was having a positive impact – 73% of people agreed

that it made them more aware of their own or others’ behaviour and 67% agreed it made them more aware of ways they could better include people experiencing mental distress. Of those who saw the campaign, 49% said they felt motivated to change their behaviour – and even more so for Māori (59%) and Pasifika (65%).

Like Minds, Like Mine has a new strategic direction, developed with, and supported by, stakeholders. The new direction includes a kaupapa Māori approach, more centralised coordination, and more emphasis on research and evaluation. Transition work includes the development of a kaupapa Māori strategy, a brand refresh and the development of an equitable and inclusive procurement process.

Working with partners

Te Hiringa Hauora led the help-seeking support for the Muslim community in wider New Zealand. This work involved supporting Kāhui Tū Kaha, a not-for-profit provider of housing and mental health services, to run focus groups with 18 to 24-year-old Muslims to find out what support they needed.



of those surveyed agreed the campaign made them more aware of their own or others behaviour



of those surveyed agreed the campaign increased awareness to include people experiencing mental distress



of those surveyed said they felt motivated to change their behaviour

CASE STUDY

Case study – The mental wellbeing of New Zealanders during and post-lockdown

Aotearoa New Zealand’s ‘go hard and go early’ approach meant that we were one of the first countries in the world to ease our COVID-19 lockdown restrictions. But the re-emergence of community transmission in Tāmaki Makaurau/Auckland showed that the recovery from COVID-19 will be a marathon rather than a sprint. By highlighting people’s experiences during and following Alert Level 4 lockdown we hope to provide assurance that most people found positive aspects to the lockdown, while also highlighting inequitable experiences and ongoing mental health concerns.

Te Hiringa Hauora asked New Zealanders about their wellbeing during Alert Level 4 lockdown and post-lockdown (during Alert Level 1). Almost nine out of 10 people reported at least one positive experience during lockdown. During lockdown more people reported pride in their ability to cope, more time for hobbies and exercise, a heightened sense of community, increased family resilience and a stronger personal commitment to Aotearoa New Zealand than they did post-lockdown.

Importantly, Māori and Pasifika reported several notable positive experiences post-lockdown. More Māori were proud of their ability to cope and reported higher whānau resilience than non-Māori. Likewise, more Pasifika had a renewed appreciation for life and spent more time with family and friends than non-Pasifika.

But we also identified some inequities. Although fewer people reported severe experiences of depression and anxiety post-lockdown (5% compared with 8% during lockdown), this reduction mostly occurred among non-Māori/non-Pasifika people. Of those who completed both during and post-lockdown surveys, over

half reported no experiences at both time points, while 22% had improved experiences and 13% had worsening experiences post-lockdown.

Experiences of depression and anxiety were common for young people both during and post-lockdown. Almost 60% of young people had some experience of depression or anxiety post-lockdown (57%), with 10% being severe. The recent *Protecting and Promoting Mental Wellbeing: Beyond COVID-19* report by Koi Tū, highlighted the persistently inequitable and worsening state of youth mental health. In addition, the impacts of COVID-19 on youth mental wellbeing are likely to be extensive and enduring. Action is required to reduce adverse life course consequences. Te Hiringa Hauora supports young people by providing digital mental health support at thelowdown.co.nz. Both thelowdown.co.nz and depression.org.nz have been updated to provide COVID-19-specific mental health advice for those seeking help.

Innovative and collaborative community-led responses have been an integral part of the Ministry of Health’s Psychosocial and Mental Wellbeing Recovery Plan response to COVID-19.



22%

of those surveyed reported improved experiences of depression and anxiety post-lockdown



50%

of those surveyed reported no experiences of depression and anxiety during or after lockdown.



13%

of those surveyed reported worsening experiences of depression and anxiety post-lockdown



Te Hiringa Hauora surveyed people's wellbeing during lockdown.



Mana Pasifika sought to destigmatise help-seeking.

Government and non-government organisations have changed the way they work to adapt to a rapidly changing environment. To support those in the Pasifika community experiencing mental distress, Te Hiringa Hauora worked in collaboration with Mapu Maia, Vaka Tautua, the Mental Health Foundation and Pasifika health leaders Phil Siataga, Stephanie Erick and Tui Tararo. Together, we launched Mana Pasifika, a campaign to encourage and destigmatise help-seeking for depression and anxiety in Pasifika communities. This strengths-based and story-driven approach is by Pasifika, for Pasifika and with Pasifika.

Economic stressors also went hand in hand with mental distress. Experiences of depression and anxiety were twice as common for people without enough money to meet their everyday needs than for those with enough money. One in seven people reported not having enough money (14%); however, this rises to more than one in five for Pasifika people (22%). Those who did not have enough money were also less able to cope with everyday stresses.

Post-lockdown, one in 10 people reported loss of their main source of income. Income loss was higher for Pasifika and Asian New Zealanders than it was for New Zealand Europeans. Likewise, almost three in 10 people reported a reduction in income. This rate was higher for Asian New Zealanders than for New Zealand Europeans. Unexpectedly, a small number of people's income increased post-lockdown (5%). However, increased income did not mean they were better off. People whose income had increased were more likely to have severe experiences of depression or anxiety than people with no change in income. This unexpected finding may reflect the increased stressors experienced by those who had increased work hours or greater responsibility in the COVID-19 response, such as supermarket and other essential workers. Consideration of the impact of economic stressors on mental health is important as the economic implications of COVID-19 are likely to be long-term.

**14%**

of those all of those surveyed reported not having enough money to meet everyday needs

**22%**

of Pasifika people surveyed reported not having enough money to meet everyday needs

**10%**

of those surveyed reported loss of their main source of income

Tobacco Control

Smoking is the leading preventable cause of early death in Aotearoa New Zealand. Te Hiringa Hauora is one of the key organisations working toward the Government's goal that New Zealand be smokefree by 2025, with a smoking prevalence of less than 5% of the population.

While overall smoking prevalence rates are trending downwards, there are groups that have significant inequities. Te Hiringa Hauora contributes to Smokefree 2025 by focusing on key population groups, particularly Māori (with a focus on Māori women) and Pasifika, people in lower-socio-economic areas, and young adults (17 to 24 years).

Our focus 2019/20

Smokefreerockquest and Smokefree Tangata Beats

Smokefreerockquest and Smokefree Tangata Beats are New Zealand's only nationwide, original live music, youth events that provide opportunities for secondary school students to showcase their musical talents in their regions and, if successful, at the national final competitions.

Te Hiringa Hauora continues to support the events as they help build confident, competent and connected young people. The events help students make protective connections to their schools, other students, and their communities, and develop new skills and aspirations for their future. We know that providing young people with

the opportunity to perform on stage and enjoy meaningful relationships with their band members increases their self-worth and resilience. Research shows that young people who have these opportunities are less likely to smoke or to suffer from mental health issues and are more likely to be open to achieving their full potential.

Analysis of both competitions showed that 2019 was one of the highest years of participation, particularly with our priority audience of young Māori and Pacific students. A total of 2,688 musicians (from 819 acts) entered Smokefreerockquest, from 263 secondary schools across 21 regions; 13,428 people attended the regional events. Māori made up 19.4% of entrant numbers and Pasifika made up 9.7%.

For Smokefree Tangata Beats, a total of 515 musicians entered (from 107 acts), from 62 secondary schools across 18 regions; 1,060 people attended the Smokefree Tangata Beats events. Māori made up 54.6% of entrant numbers and Pasifika made up 54.9%. Approximately 330,000 people viewed a set of videos used to celebrate and promote the events and embed our messaging.



2,688

musicians from 819 acts entered the 2019 Smokefreerockquest



330,000

people viewed a set of videos used to celebrate and promote the Smokefree Tangata Beats events



13,428

people attended the regional events for Smokefreerockquest 2019



Kuīni chatbot

Kuīni is a chatbot that provides users with a digital friend who supports them on their quit journey. It is delivered via Facebook Messenger and is aimed at wāhine Māori, who typically have some motivation to quit smoking and want to do so on their own terms. As a population group, adult wāhine Māori have the highest daily smoking rates in New Zealand – 32% compared with the prevalence rate of 12.5%.

Te Hiringa Hauora engaged an indigenous design team, who collaborated with wāhine Māori smokers aged 18 to 35 years and the Takiri Mai te Ata stop smoking service to understand the quit smoking journey for wāhine Māori. A team of Māori women creatives, including a screenwriter and artist, designed and assisted in the development of a prototype chatbot. The Papakura Marae Health Clinic partnered with Te Hiringa Hauora to recruit people to trial the tool, in terms of its use and efficacy. In the initial pilot, 17 women were enrolled in the 30-day trial and all completed the full 30 days of conversations. The results from our 30-day test showed:

- Self-efficacy
 - For those already motivated – Kuīni supported their motivation and focus
- All but one participant made some behavioural change
 - Quit completely: 32% (6/17)
 - Cut down significantly: 59% (10/17)
- A single participant reported no behavioural change, but was more motivated to quit in the future

Participants said they valued receiving supportive and encouraging messages every day. The interactive nature of Kuīni was seen as very positive, and many felt a sense of connection to the chatbot. Feedback showed that the tips for not smoking and for managing cravings were popular, and the use of te reo Māori was highly valued by many participants. There was evidence of an influence on health behaviours other than smoking, and on general health and wellbeing. Te Hiringa Hauora is now designing a roadmap for the further development of the chatbot, including stakeholder engagement, improving the robustness of the platform, and enhancing the product in line with feedback from the participants.

- The kete was extremely helpful for managing my cravings and feeling like I had a sense of control
- It's nice that Kuīni messages at certain times, keeping me accountable
- The quiz option helped me take my mind off having a smoke almost instantly

Research and resources

Te Hiringa Hauora delivered a significant refresh of a key resource for those who are quitting smoking, formerly known as The Quit Book and now known as Becoming Smokefree. The Quit Book has been New Zealand's leading cessation resource and has been well used over the years by stop smoking practitioners across the health sector. Becoming Smokefree contains new, fresh photography, imagery and content. It is designed to engage our priority audiences and is receiving good feedback from the sector.

CASE STUDY

Quit for your Pets

In partnership with Homecare Medical, Te Hiringa Hauora launched Quitline's Quit for your Pets campaign on 31 July 2019. In partnership with Homecare Medical who run Quitline, Quit for your Pets was an evidence-based campaign that took a unique angle to motivate people to quit smoking – highlighting the harm that smoking can cause their pets, and encouraging animal-loving smokers to think about quitting smoking not just for themselves but for their pet too.

New Zealand is a nation of animal lovers and pets are part of our whānau. One out of 10 New Zealanders smoke, and three out of five households have a pet. That's around 4.6 million companion animals. Our pets are at risk of many health issues if they're exposed to tobacco smoke: dogs and cats are twice as likely to get cancer if their owners smoke around them and other animals too – including birds and guinea pigs – are susceptible to a range of health issues.

The campaign used a short video that focused on the relationship between an owner and his dog, showing that dogs are fiercely loyal and will follow their owners anywhere – even if it makes them ill. The story is told from the point of view of the dog. As we watch moments play out between the dog and his human companion, the dog is always just a few steps behind, following his human through life with complete trust, never questioning where the owner is leading him.

We see them around home, at the beach, on walks, at work, socialising with mates. On many of these occasions the owner is smoking cigarettes and exposing his pet to second-hand smoke. What isn't as easily seen is the third-hand smoke that the dog is also exposed to, which attaches to his fur as well as his owner's clothes and household fabrics that could cause harm later on. The story paints a picture of what that smoking could mean for a pet.

After showing smokers the affect they're having on their pets, we remind them it's never too late to change direction and to quit smoking – getting support from a service like Quitline increases the chances of quitting and staying quit.

The campaign's key message is: *Your best mate will follow you anywhere, so lead them well. When you smoke around your pets, they are twice as likely to get cancer. Start your quit journey today.*

The campaign was delivered across various channels including online video, radio, social media and digital activity, and was ranked in the top five YouTube ads New Zealanders chose to watch in 2019. Recognised internationally, the campaign won gold at the 2020 Caples Awards (an international advertising and marketing communications awards show) in the Not For Profit section and picked up silver for Radical New Strategy.

I wanted to let you know this ad is the reason I quit smoking after 14 years! I quit cold turkey and I'm never looking back! I love my two doggos more than anything in this world, so this was a genius move! Thank you so much!

ONLINE COMMENT

The statistics



1.7M

people reached in New Zealand



4.5M

minutes watched globally



20,198

Facebook engagements



850,000

people reached on social media



1M

views of the video across Quitline-controlled brand channels – YouTube/Facebook/Instagram



50

websites featured the campaign globally, including in China, Germany and the Netherlands



500,000

views on the UNILAD Facebook page



240M

visitors to the Daily Mail online where the campaign was featured



19%

increase in the number of Quitline online registrations during the campaign duration



21,883

unique users to the Quitline website (171% increase over baselines)

Minimising Gambling Harm

Māori, Pasifika, Asian and low-income New Zealanders are disproportionately affected by gambling harm and are the focus of our work in this area. Our strategies target not only the gambler and those concerned about them, but also the settings where harmful gambling occurs and where there is significant opportunity for intervention.

Our focus 2019/20

Choice Not Chance

The aim of the Choice Not Chance programme is to increase the quality of life of New Zealanders by strengthening society's response to gambling and preventing and reducing gambling harm. The programme also focuses on implementing targeted strategies to change behaviours that place people and communities at risk of gambling harm.

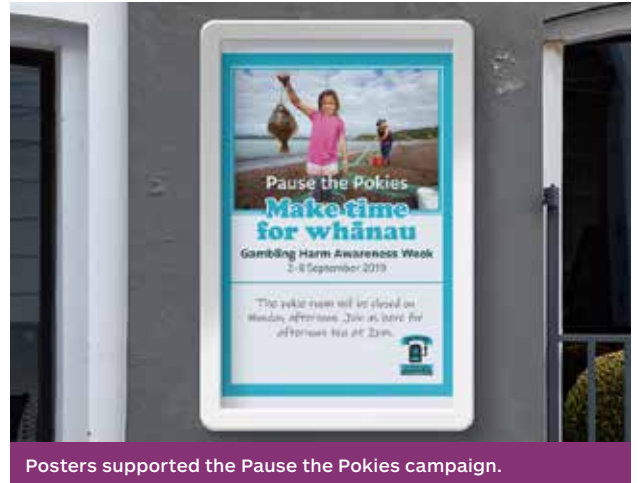
Māori and Pasifika South Auckland campaign

The Māori and Pasifika South Auckland campaign focused on encouraging help-seeking by promoting free, local and confidential gambling help services based within South Auckland. Te Hiringa Hauora worked with Mapu Maia and Raukura Hauora O Tainui to develop culturally relevant and engaging messaging to promote help-seeking behaviour to local gambling services in the South Auckland area. This campaign was supported by several gambling trusts and societies and was a good example





Take Time Out From Gambling – Put Time Into Whānau posters.



Posters supported the Pause the Pokies campaign.

of Te Hiringa Hauora bringing together the gambling help sector with the industry to reduce gambling-related harm in a high-needs community. Both gamblers and the sector participated in creating the messaging.

The results and findings from the post-campaign analysis identified the importance of having help services at the forefront of this initiative, as well as the resonance of the campaign creative and the strength of the online messaging, which showed the numbers of users on the Choice Not Chance help services page increased from 1,770 to 19,247. Phase two of this campaign, which built on the strengths of the first phase and included a focus on community activation, launched in March 2020 but was paused due to COVID-19. The campaign was then reoriented at the end of the fourth quarter to be an online campaign and was expanded to key areas across the country with significant numbers of Māori and Pasifika, including South Auckland. The key messaging continued to encourage Māori and Pasifika to reach out to local gambling help services, while also acknowledging the new post-COVID-19 environment.



17,477

the increase in the number of users on the Choice Not Chance help services webpage

Gambling Harm Awareness Week

Gambling Harm Awareness Week takes place each year in the first week of September. The sector-wide initiative helps raise awareness of gambling harm and encourages people to adopt other positive approaches and seek help early.

The theme for 2019 was 'Take Time Out From Gambling – Put Time Into Whānau'. Te Hiringa Hauora provided resources (posters and digital assets) to regional minimising gambling harm services to support and promote local community events through the Choice Not Chance website, Facebook geo-targeted posts and online competitions. We also developed posters to support the Problem Gambling Foundation's Pause the Pokies campaign.

During 2019/20 Choice Not Chance had increased online advertising and social media presence in the lead-up to and during Gambling Harm Awareness Week. Te Hiringa Hauora worked in partnership with Lotto and the Racing Industry Transition Agency (RITA/TAB) to develop tailored messaging and creative to promote through their online platforms and retail stores. TAB contributed free placement of the Choice Not Chance ads ('Girls' night out' and 'Racing') during Gambling Harm Awareness Week on their Trackside TV channels that play in venues and on Sky TV.

Health Education Resources

HealthEd is New Zealand’s largest collection of prevention-focused public health information and is available for health professionals and the public to access free of charge.

The HealthEd website (healthed.govt.nz) features more than 500 health resources covering 44 topic areas in a range of formats including print, HTML, audio, video and New Zealand sign language.

Our focus 2019/20

Key areas of focus for the year have included:

- replatforming the HealthEd website
- streamlining the content review process
- ensuring resources are current, clinically accurate, engaging and fit for purpose.



2,505,865

resource units distributed



688,753

healthed.govt.nz website visits



582

titles in the HealthEd catalogue

TOP THREE ORDERS



Having a mammogram
193,578 ordered



Cervical screening: what women need to know
97,475 ordered



Immunise your child on time (English)
92,453 ordered

TOP THREE VIEWS



BCG Vaccine: Information for parents
96,135 views



BCG Vaccine: After care for parents
42,483 views



Eating for Healthy Pregnant Women/Ngā Kai Totika mā te Wahine Hapū
39,741 views

TOP THREE DOWNLOADS



Homai kia rima mō ngā ringa mā! (High five for clean hands)
5,918 downloads



Eating for Healthy Pregnant Women/Ngā Kai Totika mā te Wahine Hapū
4,722 downloads



After Your Child is Immunised
3,340 downloads

Child and Family Health

The child and family health area includes nutrition and physical activity, skin cancer prevention and immunisation.

Nutrition and physical activity

Good nutrition, regular physical activity and adequate sleep are key for pēpē, tamariki and whānau wellbeing, both now and in the future.

The Ministry of Health's *Eating and Activity Guidelines* provide Te Hiringa Hauora with the evidence base for the nutrition and physical activity programme.

Through the Healthy Kids website (www.healthykids.org.nz), *Quick Bites* newsletter and Facebook page, Te Hiringa Hauora encourages families to eat well, be active and sleep well. Food ideas and suggested activities are designed for low-income, Māori and Pasifika families with young children. Our focus this year has been on the first 1,000 days of life (from conception to age two).

Our focus 2019/20

Sleep workshops

In December 2019 Te Hiringa Hauora commissioned Malatest International to conduct qualitative sleep research with Māori and Pasifika whānau. Participants discussed their awareness of, experiences with, and barriers to following commonly promoted infant sleep messages.

A series of stakeholder workshops on sleep health took place in Wellington, Auckland, Christchurch and Hawke's Bay in February 2020. The workshops provided evidence-based scientific and cultural advice and information

to health professionals on sleep health, and gained insights about how Te Hiringa Hauora can support optimal sleep health in New Zealand.

A participant survey showed that 87.5% of respondents agreed the workshop was useful to their work. Next year Te Hiringa Hauora plans to develop a toolkit of resources to support sleep for whānau with young children, using consumer and stakeholder insights to inform this mahi.

Non-communicable diseases: wellbeing through prevention

Te Hiringa Hauora has established a wellbeing through prevention working group with a focus of reducing non-communicable diseases (NCDs). The working group consists of representatives from Te Hiringa Hauora and the Ministry of Health, and Chief Executives from relevant health non-government organisations. The group decided to develop a Māori framework to guide the work, and initially focus on type 2 diabetes prevention. The final framework will be used to inform the development of a shared wellbeing through prevention community approach.



The sugary drinks infographics were updated after review.



Some of the 18 Behind the Hype factsheets.

Physical activity

New play content has been developed for the Healthy Kids website, and we have published videos and articles with tips and practical ideas for getting whānau playing together. Te Hiringa Hauora worked with Australian parenting website Raising Children to adapt their information for a New Zealand audience.

Te Hiringa Hauora is part of a cross-agency group tasked with developing a coordinated action plan to promote physical activity to all New Zealanders. This work is led by the Ministry of Health and Sport New Zealand.

Working with partners

Te Hiringa Hauora entered into a partnership with Raising Children to provide evidence-based information on play and child development, with low- or no-cost practical ideas for families. This new content is on the Healthy Kids website. In April 2020 Te Hiringa Hauora contributed to the development of a paper, led by the Department of the Prime Minister and Cabinet (DPMC), on the ways play can act as a theme to achieve some of the outcomes in the Child and Youth Wellbeing Strategy.

Te Hiringa Hauora worked in partnership with Toi Tangata, and took a kaupapa Māori approach to promote healthy kai to whānau in the first 1,000 days of life. This work identifies themes of barriers and enablers to healthy kai consumption. The themes align with the six aspects of Te Pae Mahutonga, and the results and proposed

solutions are structured using this Māori model of health. He kai kei aku ringa means 'providing food by my own hands'.

Te Hiringa Hauora assisted the Heart Foundation's Pacific Heartbeat team to package insights from their successful three-year project to promote better quality and reduced quantity of foods in Pacific communities. The Pacific Heartbeat team created a new Pacific engagement tool, the Kato Kakala: Pacific Engagement Model, which describe 22 concepts that can help provide context and understanding for effective and meaningful engagement with Pasifika communities. These insights can help organisations/individuals to be more respectful, flexible and culturally aware in their Pasifika engagements. The launch of this model was postponed to later in 2020 due to COVID-19.

Research and resources

Eighteen *Behind the Hype* fact sheets have been published on our nutrition and activity website (nutritionandactivity.govt.nz). The new fact sheets support the first 1,000 days and non-communicable diseases areas of our work, and help health professionals and other sector workers to decipher fact from fiction.

In partnership with the New Zealand Dental Association, the popular sugary drinks infographics have been updated using feedback from the nutrition and physical activity sector resource review. These are available in both English and Te Reo.



Skin cancer prevention

Skin cancer is by far the most common cancer in New Zealand, estimated to account for just over 80% of all new cancers diagnosed annually. An estimated 90,000 people are diagnosed with skin cancer every year.

Currently New Zealand and Australia have the highest rates of melanoma in the world. Evidence suggests that one of the best avenues for reducing the burden of skin cancer is prevention of exposure to ultraviolet radiation (UVR) which causes harm. Around 90% of melanoma skin cancers can be prevented by reducing exposure to UVR which causes harm.

The key objective of this programme is to reduce the number of avoidable skin cancers caused by UVR by encouraging people to be SunSmart. To encourage SunSmart behaviour, we work with the public, sports and recreation organisations, health professionals, councils and key sector organisations including the Cancer Society of New Zealand, the Melanoma Network of New Zealand Incorporated (MelNet) and Melanoma New Zealand.

Our focus 2019/20

Our work in 2019/20 focused on motivating higher-risk groups to protect themselves from UVR and to support the early detection of skin cancer. This included young people aged 18 to 24 years and outdoor workers.

Te Hiringa Hauora worked alongside MelNet, Cancer Society and Melanoma New Zealand to compile an early detection information and resources toolkit for PHOs to distribute to primary care practices and to the skin cancer sector. The toolkit brings together a selection of free resources to make it easier for primary care practices to access and promote the information. It aligns with a key action in the Ministry of Health's *New Zealand Cancer Action Plan 2019-2029*, to strengthen our focus on prevention and screening – fewer cancers, earlier detection.

Outdoor workers

Outdoor workers are identified as at risk because of the long periods of time spent outdoors. Te Hiringa Hauora has developed a suite of resources featuring celebrities Manu Vatuvei (rugby league) and Josh Kronfeld (rugby union) to help businesses promote SunSmart practices for outdoor workers. These resources have been promoted to the sector via the Wellplace.nz website and include tools to communicate messages on busting myths and encouraging workers to self-check their skin or see a GP or skin specialist if they have concerns.



The campaign focussed on social and workplace areas.



The campaign posters featured on outdoor billboards.

#DumbBurn campaign


A refreshed extension of the #DumbBurn campaign targeting 18 to 24-year-olds was in market from 10 January to 8 March 2020. It aimed to motivate young people to protect against UV damage by focusing on the pain and inconvenience to their life, embarrassment, and unattractive tan lines and peeling that result from sunburn. The campaign focused areas where young people work and socialise, including beaches and festivals, and aimed to increase SunSmart behaviours for this audience.


The campaign used a variety of social media channels including a Facebook page, Instagram, snapchat, TikTok and YouTube developed in-house, as well as outdoor billboards. Digital activity suggested the approach was very successful, with 6,663,792 impressions overall, 1,914,473 video plays and 826,832 completed videos. The campaign saw a 227.8% increase in website users in the 18 to 24-year age group in comparison with the previous year.

Immunisation

Te Hiringa Hauora supports the Ministry of Health with communications and marketing to increase awareness of immunisation. The National Immunisation Programme recommends immunisation as the best protection against some serious but preventable diseases, helping to protect children, families and the community.

The National Immunisation Programme provides free immunisations to whānau across their lifespan. Immunisations for babies, children, adolescents and adults were promoted throughout the year and in response to disease outbreaks.


33,268
views on TikTok


227.8%
increase in website users in the
18 to 24-year age group


16,217
clicks to the website



The campaign was in market May-July 2020.



The campaign was in market May-July 2020.

Our focus 2019/20

In 2019/20 Te Hiringa Hauora developed promotions and resources to support the school-based immunisation programme, which focuses on encouraging parents/caregivers to enable their Year 7 and 8 children to get immunised at school.

An eight-week immunisation COVID-19 response campaign was in market from May to July 2020 to remind parents that, even if we can't immunise against COVID-19, we can protect against other infectious diseases and to stay up to date with

children's routine immunisations. The aim of the campaign was to help normalise immunisation and support parents to continue to immunise their tamariki on time during all COVID-19 Alert Levels. The campaign included promotion across a range of channels such as national and digital radio, social media, video and OnDemand. Dame Valerie Adams, Tamati Ellison and Dr Siouxsie Wiles supported the kaupapa of the campaign as social ambassadors.

Wellbeing Initiatives

In recent years Te Hiringa Hauora has undertaken work to develop a wellbeing approach, with a primary outcome that New Zealanders lead healthier lives. A couple of examples are:

Rugby league

Te Hiringa Hauora worked with a range of partners to support the Canterbury rugby league community. The aim was to ensure that young people in distress could be well supported by trusted adults within the community. A number of options were developed and tested, with early indications of significant system change. With the support of Te Hiringa Hauora, in 2020/21 Canterbury Rugby League, Southern Zone Rugby League and Sport Canterbury are leading the implementation of successful options into other South Island communities. Results included the formation of a youth council, adoption of Le Va's LifeKeepers training, and co-designers championing a wellbeing approach beyond the project. Other codes, sports and areas are looking to adopt similar approaches.

Ngāti Whātua Ōrākei

Te Hiringa Hauora partnered with Ngāti Whātua Ōrākei to co-design the Mental Wellbeing Framework that clearly sets out a model of care to deliver to iwi and the community. The framework draws from other indigenous and mainstream mental health models, such as Te Whare Tapa Wha, Waka Haurua and Atua a Mahi, which are underpinned by kaupapa Māori ways of doing and being. Ngāti Whātua Ōrākei has implemented and tested the mental wellbeing strategies identified in the development of the Mental Wellbeing Framework.



Digital Capability

During 2019/20 Te Hiringa Hauora continued to improve its digital capability so that more New Zealanders can access information and support where and when they need it.

We migrated 60% of our 22 websites over to Amazon Web Services, which has enabled us to do more work in-house. This has significantly reduced costs and allowed us to use a more modern, scalable and futureproof infrastructure. We also deployed a number of tools to ensure our digital assets are accessible, readable and fit for purpose.

Zero-rated data

A small scale pilot project by Te Hiringa Hauora in 2019/20 to offer free mobile phone access to select websites has now been up-scaled by the Ministry of Health to ensure Kiwis won't incur mobile data charges when they access essential COVID-19 information, health information and resources, and eligible online health services.

Te Hiringa Hauora, working in partnership with the Ministry of Health and WellSouth and three telecommunication companies – Spark (including the Skinny brand), Vodafone, and 2degrees, completed an initial three-month pilot giving users free mobile phone access to our key mental health and gambling harm websites and two of WellSouth's patient portals. Te Hiringa Hauora played a significant part in the initial trial.

The project showed that people with no data (and therefore no other way to access the websites from a mobile network) did access the project websites. There was direct feedback by general practices and other health providers that data cost and availability is a fundamental access barrier, particularly for those experiencing the most inequity.



The Ministry of Health has now expanded this initiative and taken over the data cost (it was previously sponsored by the telcos) with a review date of June 2021, with six monthly reviews to confirm extensions to the initiative.

A number of new sites have come on board, and there is a possibility for more sites to apply to the Ministry to be part of this initiative. Current sites include three Te Hiringa Hauora sites – The Lowdown, Choice not Chance and the Depression websites – which were all involved in the initial pilot.

Additional Projects – Non-baseline funding

As well as activities in the work programme that are included in our Statement of Performance Expectations for 2019/20, Te Hiringa Hauora leads and supports other projects with external agencies, usually the Ministry of Health, throughout the year.

These are non-baseline-funded projects that may be completed within a financial year, or may carry over from one year to the next.



CASE STUDY

Give Your Cervix Some Screen Time

In Aotearoa, cervical cancer kills about 50 women every year. If detected early, most cervical cancer can be successfully treated, but the number of young women being regularly screened for cervical cancer is declining – between 2013 and 2019 it fell from 62% to 52%. In particular, Māori and Pasifika women are less likely to be screened. This is concerning as wāhine Māori are twice as likely to develop cervical cancer as non-Māori women.

Our challenge was to get those most at risk (Māori and Pasifika women) to be screened for the first time and to normalise the importance of regular cervical checks.

The Give Your Cervix Some Screen Time campaign launched on 20 February 2020. The campaign was only in its infancy before it was interrupted by the COVID-19 global pandemic but initial results from its five weeks in market were very promising.

The campaign introduced New Zealanders to their cervix, a mysterious thing hidden away and not talked about. It brought the cervix into the spotlight and made it the hero and helped empower women to take action and give their cervix some screen time.

The primary audience for this campaign was anyone with a cervix, including transgender or non-binary people, aged 25 to 29 years.

The campaign was designed to resonate with those population groups who are most impacted by cervical cancers, while remaining accessible to all who wish to engage with the cervical screening journey (including those aged 30 to 35 years).



The campaign was promoted on social media, online, and on outdoors media.

Key messages included:

- Don't ignore your cervix, give it some screen time
- Your cervix is out of sight but it shouldn't be out of mind
- Most cervical cancer can be prevented with regular cervical screens
- A healthy cervix is key to a healthy pregnancy
- Your cervix is the lifeline to your whakapapa and future whānau
- If you're 25 and over, book your cervical screen or for more information visit starttoscreen.nz.

With only five weeks in market, the campaign's online activity delivered 1.6 million impressions, nearly 14,000 website visits and more than 350,000 completed advert video views. Informational video views exceeded 9,000.



14,000

visits to
starttoscreen.nz



350,000

campaign advert
views



1.6M

online
impressions

Research and Evaluation

Te Hiringa Hauora has a specific statutory function to provide research on alcohol-related issues.

The first Alcohol Use in New Zealand Survey, also known as What you think about drink, was undertaken in 2019/20, with results due in 2020/21. The survey collected nationally representative information on alcohol attitudes and behaviour in New Zealand. Other alcohol-related research activities include trend measurement, expansion of the evidence base for alcohol-related harm, support for legislation change requirements, and operational and programme support.

Te Hiringa Hauora undertakes a range of research that is used internally and externally to inform policy, practice and future research. Apart from alcohol, research areas include wellbeing, smoking, vaping, mental health, and gambling. Te Hiringa Hauora publishes its research on its corporate website, with 36 new research products published in 2019/20. A particular focus was drinking and smoking behaviours of young people, using the Youth Insights Survey (YIS), and adult gambling behaviour, using the Health and Lifestyles Survey (HLS). Another focus was understanding the impact of the COVID-19 Level 4 lockdown on alcohol and tobacco use, gambling, and mental health and wellbeing.

The HLS is a national in-home survey that measures New Zealanders' behaviours, attitudes and knowledge on a range of health and lifestyle topics including food and drink, smoking and vaping, gambling, and being out in the sun. This biennial monitor has been carried out since 2008. The next survey, delayed by COVID-19, is expected to be in the field in 2020/21. Kupe is the online data explorer used by Te Hiringa Hauora to make HLS data available. It contains key indicators from the 2006/07 Gaming and Betting Activities Survey and the 2008-2018 HLS.

Te Hiringa Hauora regularly sends out stakeholder updates to over 900 people, promoting recently released research.

We regularly monitor and/or evaluate our programmes and campaigns. For example, we carry out pre- and post-campaign surveys to ensure that the campaigns have had their intended impact and to help improve campaign design and messaging in the future. An example is the evaluation of the national Stroke FAST campaigns run in 2017 and 2018. This found an increase in the number of people calling 111 for stroke, which was related to the campaigns and improvement in awareness of typical stroke symptoms (Gordon, Bell, & Ranta, 2019).³

3 Gordon, C., Bell, R., & Ranta, A. (2019). Impact of the national public 'FAST' campaigns. *New Zealand Medical Journal*, 132(1507), 48-56. <https://www.nzma.org.nz/journal-articles/impact-of-the-national-public-fast-campaigns>

Organisational People, Culture and Capability

Te Hiringa Hauora continues to seek opportunities to improve its organisational health and capability and implement good employer strategies.

Culture and engagement

We are one of the top 10 most trusted public sector agencies.⁴ This is reflected in our high engagement with our values – agile, approachable, inspiring and trusted.

In October 2019 we conducted our first employee engagement survey, Te Hiringa Kōrero, which achieved 81% participation.

Areas of strength identified that staff:

- enjoy working for Te Hiringa Hauora
- are proud of the beneficial impact Te Hiringa Hauora has on New Zealanders and of the quality of advice provided to Ministers
- understand how the things they do affect the ability of others in their team to do their job.

Areas for potential improvement have been identified:

- Performance development is an area of concern with the lowest score in this survey of 35% to the statement 'Poor performance is managed effectively at Te Hiringa Hauora'.
- As reflected by the low score, the lack of clear and effective systems for dealing with intimidating behaviour and workplace bullying is an issue.

- Staff don't feel empowered or are not consistently asked for feedback on how to improve the work environment at Te Hiringa Hauora.

Bullying and harassment

During the year we reviewed our systems for dealing with intimidating behaviour and workplace bullying and conducted training in February on acceptable behaviour, using Ngā Kete Wānanga. Ngā Kete Wānanga encourages all staff: "In all that we do, do it with grace kindness and respect. Let's do it in mana enhancing and mana enriching ways. Ngā Kete Wānanga is a behaviour and a spiritually uplifting model"⁵. The first two kete are mana enhancing, and the third kete should be avoided.

1. Kete Aronui is based on humanities and supportive behaviours, building healthy relationships.
2. Kete Tuauri is focused on values-based processes and is driven by a spiritual heart.
3. Kete Tuatea is the kete of harm and is mana belittling.

⁴ Colmar Brunton Public Sector Reputation Index 2020.

⁵ Quote from Te Hiringa Hauora Matua Tau Huirama



We are committed to zero tolerance of any form of intimidating behaviour and workplace bullying within our organisation. As part of this commitment our goals are to:

- ensure that all Te Hiringa Hauora staff feel safe and supported in their work
- review our systems and processes for handling these matters, and developing policies of best practice
- support our leaders to implement best practice through specific learning and development opportunities
- work with staff to identify appropriate behaviours that align with our values
- work with staff to call out inappropriate behaviours, at all levels, to promote and reinforce a safe and supportive culture.

Flexible working arrangements policy

As a response to the COVID-19 pandemic, we created a successful flexible working arrangements policy, which was adopted in July 2020. While we didn't have a formal policy during the first lockdown period, employees have commented that they felt supported and trusted.

All-staff hui

As part of our quest to continue connectedness, we introduced a weekly all-staff hui. This was to allow effective communication, task-focused mindsets and connection to the organisation. A key feature of the hui is the inclusion of external guest speakers, to keep our people informed.

Employee-led networks

Ngā Mokopuna ā Maui

The recently formed Ngā Mokopuna ā Maui acknowledges collective identities, genealogies, roles and heritage within the organisation. The group provides tautoko and advice for one another both professionally and personally.

Rainbow Roopu

The Rainbow Roopu is our most recently formed employee-led network. The Roopu is a way to support each other, to support a culture within the organisation underpinned by diversity and inclusion, and to raise awareness of the rainbow community and rainbow health issues. The Roopu aims to create a wide, deep and sustainable shift in strengthening the participation and representation of, and respect for, LGBTTQIA+ (Lesbian, Gay, Bisexual, Transgender, Takatāpui, Queer/Questioning, Intersex, Asexual, and others) people throughout Te Hiringa Hauora.



Sustainability/Kaitiakitanga Group

The sustainability group has been in place for several years and has been focusing on improving our sustainability practices through maintaining and increasing current sustainable practices such as recycling and reduction of plastic consumption as well as introducing and maintaining new practices over time.

Talent attraction and retention

It has been identified that our recruitment process could be improved to increase the diversity of our organisation. This is an area of focus for the 2020/21 financial year with our People, Culture and Capability team and our Te Tiriti of Waitangi teams working together to identify different approaches that we can use to ensure we attract and retain our talent.

The on-boarding process is effectively managed by the People, Culture and Capability team to ensure new employees have a positive journey during their first days and weeks. The induction process establishes meaningful relationships, provides key practical information on their role and the functions of the organisation, and ensures a high standard of health, safety and wellbeing information.

Our vision is to create a remuneration policy that will drive equity and fairness across all role levels and ensure transparency and equal employment opportunities.

Learning and development

During the 2019/20 financial year we recognised the need to work on creating a learning and development framework to enable us to deliver on our strategy. Specific areas we identified that we need to focus on are building our cultural competency, addressing bias and discrimination, and leadership development.

Health, safety and wellbeing

We have a specific budget for health, safety and wellbeing that we use for the following initiatives:

- Support for sports including indoor football, netball and local running events
- Flu injections and vision allowance
- Life and trauma insurance
- Employee assistance service
- Celebration of events such as Mental Health Awareness Week and Te Wiki o te Reo Māori.

Organisational diversity and inclusion

We aspire to be a Te Tiriti dynamic organisation. We are looking to address bias and discrimination, strengthen our cultural competency, build inclusive leadership, and develop relationships, both internally and externally, that are responsive and build on our current employee-led networks.



Gender pay gap

Our workforce is predominantly female (75%). The difference between the average salaries of male and female employees is 16.1%, which reduces to 8.1% when you exclude the Chief Executive. This gender pay gap is due to 39% of our wider leadership team being male (26 FTE).

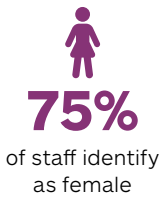
Staff profile

Te Hiringa Hauora employs 92 staff (87.2 FTE) located in Wellington, Auckland, Christchurch and Napier.

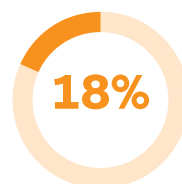
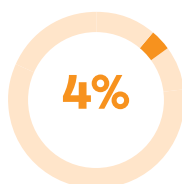
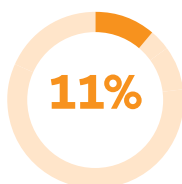
Procurement

Te Hiringa Hauora uses All-of-Government suppliers for procured services, including advertising and travel.

GENDER



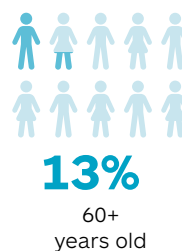
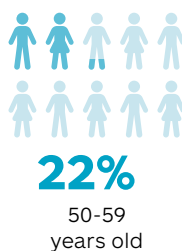
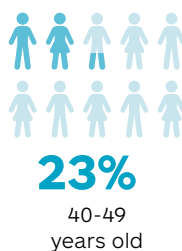
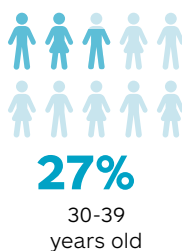
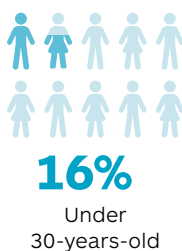
ETHNICITY



DISABILITIES



AGE



Statement of Responsibility

We are responsible for the preparation of the Te Hiringa Hauora financial statements and Statement of Performance, and for the judgements made in them.

We are responsible for any end-of-year performance information provided by Te Hiringa Hauora under section 19A of the Public Finance Act 1989.

We have responsibility for establishing and maintaining a system of internal control designed to provide reasonable assurance as to the integrity and reliability of financial reporting.



Jenny Black
Chair
Te Hiringa Hauora

18 December 2020

In our opinion, these financial statements and statement of performance fairly reflect the financial position and operations of Te Hiringa Hauora for the year ended 30 June 2020.



Dr Mataroria Lyndon
Board Member
Te Hiringa Hauora

18 December 2020

Independent Auditor's Report

AUDIT NEW ZEALAND
Mana Arotake Aotearoa

To the readers of the Health Promotion Agency's financial statements and performance information for the year ended 30 June 2020

The Auditor-General is the auditor of the Health Promotion Agency (the Agency). The Auditor-General has appointed me, Stephen Usher, using the staff and resources of Audit New Zealand, to carry out the audit of the financial statements and the performance information, including the performance information for the appropriations, of the Agency on his behalf.

We have audited:

- the financial statements of the Agency on pages 64 to 87 that comprise the statement of financial position as at 30 June 2020, the statement of comprehensive revenue and expense, statement of changes in equity and statement of cash flows for the year ended on that date and the notes to the financial statements including a summary of significant accounting policies and other explanatory information; and
- the performance information of the Agency on pages 51 to 59.

Opinion

Unmodified opinion on the financial statements

In our opinion:

- the financial statements of the Agency on pages 64 to 87
 - present fairly, in all material respects:
 - > its financial position as at 30 June 2020; and
 - > its financial performance and cash flows for the year then ended; and
 - comply with generally accepted accounting practice in New Zealand in accordance with Public Benefit Entity Reporting Standards.

Modified opinion on the performance information because the Agency was unable to report on the impact of its alcohol moderation marketing

In our opinion, except for the matter described in the Basis for our modified opinion section of our report, the performance information of the agency on pages 51 to 59:

- presents fairly, in all material respects, the Agency's performance for the year ended 30 June 2020, including:
 - for each class of reportable outputs:
 - > its standards of delivery performance achieved as compared with forecasts included in the statement of performance expectations for the financial year; and
 - > its actual revenue and output expenses as compared with the forecasts included in the statement of performance expectations for the financial year; and
 - what has been achieved with the appropriations; and
 - the actual expenses or capital expenditure incurred compared with the appropriated or forecast expenses or capital expenditure.
- complies with generally accepted accounting practice in New Zealand.

Our audit was completed on 18 December 2020. This is the date at which our opinion is expressed.

The basis for our modified opinion is explained below, and we draw attention to the impact of Covid-19 on the Agency. In addition, we outline the responsibilities of the Board and our responsibilities relating to the financial statements and the performance information, we comment on other information, and we explain our independence.

Basis for our modified opinion

The Agency seeks to increase the percentage of the target audience who have seen its alcohol moderation marketing and report it has helped

or encouraged positive behaviours. This is an important part of the Agency's work to reduce alcohol consumption through raising awareness. As explained in page 17 of the annual report, the Agency ran its Department of Lost Nights campaign from 28 November 2019 to 31 March 2020. The Covid-19 pandemic meant it was unable to run its campaign monitor. As a result, the Agency was unable to report against the performance measure "increase in the percentage of the target audience who have seen our alcohol moderation marketing and report it helped or encouraged at least three positive behaviours" this year.

We carried out our audit in accordance with the Auditor-General's Auditing Standards, which incorporate the Professional and Ethical Standards and the International Standards on Auditing (New Zealand) issued by the New Zealand Auditing and Assurance Standards Board. Our responsibilities under those standards are further described in the Responsibilities of the auditor section of our report.

We have fulfilled our responsibilities in accordance with the Auditor-General's Auditing Standards.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our modified audit opinion.

Impact of Covid-19

Without further modifying our opinion, we draw attention to the disclosures about the impact of Covid-19 on the Agency as set out in note 16 of the financial statements and pages 8 & 9 of the annual report.

Responsibilities of the Board for the financial statements and the performance information

The Board is responsible on behalf of the Agency for preparing financial statements and performance information that are fairly presented and comply with generally accepted accounting practice in New Zealand. The Board is responsible for such internal control as it determines is necessary to enable it to prepare financial statements and performance information that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements and the performance information, the Board is responsible

on behalf of the Agency for assessing the Agency's ability to continue as a going concern. The Board is also responsible for disclosing, as applicable, matters related to going concern and using the going concern basis of accounting, unless there is an intention to merge or to terminate the activities of the Agency, or there is no realistic alternative but to do so.

The Board's responsibilities arise from the Crown Entities Act 2004 and the Public Finance Act 1989.

Responsibilities of the auditor for the audit of the financial statements and the performance information

Our objectives are to obtain reasonable assurance about whether the financial statements and the performance information, as a whole, are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit carried out in accordance with the Auditor-General's Auditing Standards will always detect a material misstatement when it exists. Misstatements are differences or omissions of amounts or disclosures, and can arise from fraud or error. Misstatements are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of readers, taken on the basis of these financial statements and the performance information.

For the budget information reported in the financial statements and the performance information, our procedures were limited to checking that the information agreed to the Agency's statement of performance expectations.

We did not evaluate the security and controls over the electronic publication of the financial statements and the performance information.

As part of an audit in accordance with the Auditor-General's Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. Also:

- We identify and assess the risks of material misstatement of the financial statements and the performance information, whether due

to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- We obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Agency's internal control.
- We evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Board.
- We evaluate the appropriateness of the reported performance information within the Agency's framework for reporting its performance.
- We conclude on the appropriateness of the use of the going concern basis of accounting by the Board and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Agency's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements and the performance information or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Agency to cease to continue as a going concern.
- We evaluate the overall presentation, structure and content of the financial statements and the performance information, including the disclosures, and whether the financial statements and the performance information represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Board regarding, among other matters, the planned scope and timing of the audit and significant audit findings,

including any significant deficiencies in internal control that we identify during our audit.

Our responsibilities arise from the Public Audit Act 2001.

Other information

The Board is responsible for the other information. The other information comprises the information included on pages 2 to 46 and 60 to 63, but does not include the financial statements and the performance information, and our auditor's report thereon.

Our opinion on the financial statements and the performance information does not cover the other information and we do not express any form of audit opinion or assurance conclusion thereon.

In connection with our audit of the financial statements and the performance information, our responsibility is to read the other information. In doing so, we consider whether the other information is materially inconsistent with the financial statements and the performance information or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If, based on our work, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Independence

We are independent of the Agency in accordance with the independence requirements of the Auditor-General's Auditing Standards, which incorporate the independence requirements of Professional and Ethical Standard 1: International Code of Ethics for Assurance Practitioners issued by the New Zealand Auditing and Assurance Standards Board.

Other than in our capacity as auditor, we have no relationship with, or interests, in the Agency.

Stephen Usher
Audit New Zealand
On behalf of the Auditor-General
Wellington, New Zealand

Statement of Performance 2019/20

Te Hiringa Hauora activities in 2019/20 contributed to our strategic intentions. While we do not report on every activity we undertake, we measure the success of key activities against what we set out to achieve, as shown in the following tables.

Output Class One Performance Measures

Promoting health and wellbeing – education, marketing and communications

Te Hiringa Hauora designs and delivers a range of education, marketing and communications strategies, including national media campaigns that inform, motivate and enable New Zealanders to lead healthier lives. Our work is based on an in-depth understanding of our audience, helping us to ensure our messages and tools work for them.

Alcohol

Activity: Say Yeah, Nah alcohol moderation marketing

PERFORMANCE MEASURES	COMPARATIVE DATA	RESULTS
<p>Increase in the percentage of the target audience who have seen our alcohol moderation marketing and report it helped or encouraged at least three positive behaviours:</p> <ul style="list-style-type: none"> to say 'no' to drink water between drinks to start drinking more slowly to think about their own drinking to accept others who say 'no' to encourage others to ease up. 	<p>Baseline 74% (2016/17)</p> <p>2018/19 results:</p> <ul style="list-style-type: none"> Total 68% Māori 72% 	<p>Not measured.</p> <p>A second flight of the "Department of Lost Nights" campaign was planned for April/May.</p> <p>This was pulled from market because of COVID-19 as it related to nights out which was not relevant during lockdown.</p> <p>Because the campaign did not go ahead the monitor was not run.</p> <p>As a result the SPE measure was not able to be measured.</p>
	<p>SOURCE</p> <p>Campaign Monitor</p>	

Tobacco Control

Activity: Actions to support Smokefree Aotearoa 2025

PERFORMANCE MEASURES

Deliver a campaign to raise public awareness of vaping as a way to stop smoking by the end of 2019.

2

COMPARATIVE DATA

New campaign –
Baseline

SOURCE

Evaluation completed
by June 2020

RESULTS

Not achieved.

The Ministry of Health made a decision on 2 September 2019 to pause the campaign delivery until the parliamentary process for new vaping legislation is complete.

As a result the SPE measure was not met.

Mental Health

Activity: Digital tools to help New Zealanders experiencing depression and/or anxiety

PERFORMANCE MEASURES

Maintain the proportion of visitors to depression.org.nz and thelowdown.co.nz that report they found the websites useful.

3

COMPARATIVE DATA

2016/17

91% depression.org.nz

2017/18

95% depression.org.nz

88% thelowdown.co.nz

2018/19

95% depression.org.nz

- Māori – 94%
- Pasifika – 92%

87% thelowdown.co.nz

- Māori – 85%
- Pasifika – 87%

SOURCE

User survey

RESULTS

Achieved – thelowdown.co.nz

Not achieved – depression.org.nz

2019/20

93% depression.org.nz

- Māori – 91%
- Pasifika – 89%

The survey on depression.org.nz was completed by 7,610 users.

87% thelowdown.co.nz

- Māori – 91%
- Pasifika – 82%

The survey on thelowdown.co.nz was completed by 845 users.

Activity: Like Minds, Like Mine works towards a socially inclusive New Zealand that is free of stigma and discrimination towards people with lived experience of mental distress

PERFORMANCE MEASURES

Improvement in recognition (by the public) that people with mental distress are discriminated against.

4

COMPARATIVE DATA

49% in 2018

SOURCE

Campaign tracking
survey

RESULTS

Not achieved

The latest 2019 tracking survey, carried out in December 2019, is 47%. Proportion is similar to 2018 (the difference is not statistically significant).

Minimising Gambling Harm

ACTIVITY: Choice Not Chance gambling campaign

PERFORMANCE MEASURES

Maintain or increase the number of people experiencing gambling harm who are using our self-help tools.

5

COMPARATIVE DATA

New measure.
No comparative data.

SOURCE

Choice Not Chance website analytics

RESULTS

Achieved.

At year end 30 June, 10,958 at-risk users have used our self-help tools in 2019/20.

	ACTUAL \$000	BUDGET \$000		ACTUAL \$000	BUDGET \$000		ACTUAL \$000	BUDGET \$000
Revenue	14,550	13,409	Expenditure	13,295	13,409	Surplus/(deficit)	1,255	0

Output Class Two Performance Measures

Enabling health promoting initiatives and environments – advice, resources and tools

Te Hiringa Hauora provides advice, resources and tools to a wide range of individuals, groups and organisations interested in improving the health and wellbeing of New Zealanders. Our ability to inspire New Zealanders to lead healthier lives is greatly extended if we work with and through others.

Cross-Programme Work

ACTIVITY: Professional development of health and other relevant workforces.

PERFORMANCE MEASURES

At least 85% of survey respondents who attended Te Hiringa Hauora-supported professional development events⁶ report it was useful for their work.⁷

6

COMPARATIVE DATA

2018/19

A survey of attendees at the 'Alcohol use in the mid-older years' seminar found that:

- 85% were satisfied/very satisfied with the seminar
- 92% found the research presentations to be relevant/very relevant.

Source: Survey of seminar attendees via Survey Monkey. (13 responses out of 21 attendees.)

Research with participants of the Smashed 'n Stoned facilitator training found that:

- 100% said they would be able to apply the knowledge and skills they had learned
- 97% said the content was organised and easy to follow
- 99% said the materials distributed were useful
- 100% said the training was good quality
- 98% stated that the training met their expectations.

Source: Evaluation of training participants by Odyssey.

The Melanoma Summit took place in November 2018.

Results from research undertaken with attendees shows:

- 92% of respondents found the information presented by plenary speakers useful
- 85% of respondents reported that they are likely to attend the next Summit
- 86% of respondents are likely to recommend attending the next Summit to a colleague.

Source: Survey of Summit delegates via Survey Monkey. (91 responses out of 213 delegates.)

SOURCE

Evaluation reports/participant survey.

RESULTS

Achieved.

A survey of Sleep seminar attendees found that:

- 87.5% of respondents agreed the workshop was useful to their work.

The survey was sent to 95 people, with 32 responses.

Note: Smokefree seminars were postponed due to COVID-19.

A survey of Cutting Edge conference attendees found that:

- 87% of respondents agreed the conference was useful.

The survey was sent to 565 people with 302 responses.

Source: Survey conducted via Survey Monkey.

6 For example, Smokefree seminar series.

7 Top two categories of a five-point scale.

Cross-Programme Work, *continued*

ACTIVITY: Provision of advice, resources and tools to enable local health promotion and other community-based activities.

<p>PERFORMANCE MEASURES</p> <p>At least 85% of a sample of those who have received resources, tools⁸ or advice from Te Hiringa Hauora report satisfaction with the service they received.⁹</p> <p>7</p>	<p>COMPARATIVE DATA</p> <p>87% of sample satisfied or very satisfied with the resources, tools or advice they received.</p> <p>A survey of recipients of nutrition and physical activity advice, resources and tools found that 97% agreed or strongly agreed that they were useful.</p> <p>SOURCE</p> <p>User survey.</p>	<p>RESULTS</p> <p>Achieved.</p> <p>A survey of those who had accessed Te Hiringa Hauora tools and resources found that 95.98% said they were satisfied or very satisfied with the tools and resources they accessed.</p> <p>The survey was sent to 2,973 people, with 765 responses.</p>
<p>PERFORMANCE MEASURES</p> <p>At least five new or revised resources or tools are developed across Te Hiringa Hauora work programmes to enable local health promotion activities.</p> <p>8</p>	<p>COMPARATIVE DATA</p> <p>Fifty-four new or revised resources or tools were developed during 2018/19.</p> <p>SOURCE</p> <p>New or revised tools or resources.</p>	<p>RESULTS</p> <p>Achieved.</p> <p>41 new or revised resources or tools were developed across Te Hiringa Hauora work programmes to enable local health promotion activities.</p>

	ACTUAL \$000	BUDGET \$000		ACTUAL \$000	BUDGET \$000		ACTUAL \$000	BUDGET \$000
Revenue	13,385	12,383	Expenditure	11,742	12,383	Surplus/(deficit)	1,643	(0)

8 For example Sleep resources and alcohol self-help digital tool.

9 Top two categories of a five- point scale.

Output Class Three performance Measures

Informing health promoting policy and practice – policy advice and research

Te Hiringa Hauora provides policy, advice and research to inform decision making on best practice and policy to improve New Zealanders' health and wellbeing and injury and other harm. This includes monitoring health indicators, behaviours and attitudes. Te Hiringa Hauora offers specialist knowledges and expertise in developing and delivering successful, nationally integrated health promotion and harm reduction strategies.

Research

ACTIVITY: Provide high-quality and relevant research, Te Hiringa Hauora monitors, data analysis and outputs to support programme and external stakeholders.

PERFORMANCE MEASURES	COMPARATIVE DATA	RESULTS
<p>At least seven alcohol-related products are produced by 30 June 2020, including three focusing on Te Hiringa Hauora priority populations.</p> <p>9</p>	<p>Eleven alcohol-related products published by June 2018.</p> <p>Seventeen products, including five infographics, produced by June 2019.</p>	<p>Achieved.</p> <p>Twelve alcohol-related products produced in 2019/20 (including three focusing on Te Hiringa Hauora priority populations).</p>
	<p>SOURCE</p> <p>Published reports.</p>	
<p>At least one product based on analysis of the HLS 2018 is produced by 30 June 2020.</p> <p>10</p>	<p>One product from HLS 2016 published by 30 June 2018.</p> <p>Alcohol-related attitudes – results from the 2018 Health and Lifestyles Survey infographic. Published on hpa.org.nz 10 May 2019.</p> <p>Reports on 2018 data on seven topics (alcohol, eating, gambling, cultural connectedness, mental health and wellbeing, sunburn, tobacco) available on the Kupe website (kupe.hpa.org.nz)</p>	<p>Achieved.</p> <p>Eleven products produced from HLS 2018 in 2019/20.</p>
	<p>SOURCE</p> <p>Published products.</p>	

Research, *continued***PERFORMANCE MEASURES**

At least two mental health products based on analysis of the Mental Health Monitor (MHM) 2018 are produced by 30 June 2020.

11

COMPARATIVE DATA

Two products from MHM 2016 published by June 2018.

Wellbeing and mental health among rainbow New Zealanders infographic published 14 June 2019.

SOURCE

Published products.

RESULTS**Achieved.**

Two products from MHM 2016 published in 2019/20.

PERFORMANCE MEASURES

Tobacco product (using Youth Insights Survey [YIS] 2018 data) is completed by 30 June 2020.

12

COMPARATIVE DATA

One product from YIS 2016 published by June 2018.

Second-hand smoke exposure among 14 and 15-year-olds fact sheet published 17 June 2019.

SOURCE

Published products.

RESULTS**Achieved.**

Five products produced from the YIS data in 2019/20.

Across Te Hiringa Hauora topics

ACTIVITY: Develop and deliver a multi-faceted health and wellbeing programme targeting priority populations.

PERFORMANCE MEASURES

At least two wellbeing initiatives are delivered.

13

COMPARATIVE DATA

Two initiatives delivered in 2017/18.

SOURCE

Te Hiringa reports or evaluations.

RESULTS

Achieved.

Rugby league

Te Hiringa Hauora worked with a range of partners to support the Canterbury rugby league community. The aim was to ensure that young people in distress could be well supported by trusted adults within the community. Several options were developed and tested, with early indications of significant system change.

Ngāti Whātua Ōrākei

Te Hiringa Hauora partnered with Ngāti Whātua Ōrākei to co-design a Mental Wellbeing Framework that clearly sets out the model of care to deliver to iwi and the community. The Framework draws from other indigenous and mainstream mental health models, such as Te Whare Tapa Wha, Waka Haurua and Atua a Mahi, which are underpinned by kaupapa Māori ways of doing and being.

eCoaching with The Journal Service

Te Hiringa Hauora partnered with HealthTRx, Ember NZ and primary health care sites from across the country to pilot a peer support approach to The Journal online tool via primary care referral. Independently evaluated, this pilot offers insight into delivering a multimodal support service for people experiencing depression and anxiety.

	ACTUAL \$000	BUDGET \$000		ACTUAL \$000	BUDGET \$000		ACTUAL \$000	BUDGET \$000
Revenue	2,828	2,620	Expenditure	2,584	2,620	Surplus/(deficit)	244	(0)

Non-baseline Funding

ACTIVITY: Research, plan, develop and implement health promotion initiatives to meet emerging needs identified by the Minister of Health and/or other agencies.

PERFORMANCE MEASURES

Te Hiringa Hauora delivers against the objectives of the initiatives.

14

SOURCE

Project or evaluation reports.

RESULTS

Achieved.

Quit for your Pets

The Quitline campaign 'Quit for your Pets' launched on 1 August 2019 and took a unique angle in motivating people to quit smoking – by highlighting the negative impacts of smoking on pets, particularly for Māori, who have the highest rate of pet ownership in New Zealand. Research shows that our pets are at risk of many health issues if they're exposed to tobacco smoke. The campaign was aimed at Māori (31% smoking rate) and Pasifika (20% smoking rate). As a result of the campaign Quitline had the highest month of users ever recorded, a 29% increase in the number of online registrations during the campaign duration, overall uplift of 19% in registrations (people going to quit.org.nz to register) and 21,883 unique users of Quitline (171% increase over baseline).

Cervical screening campaign

We delivered a campaign to help empower women to take action and give their cervix some screen time (get a smear test). Key messages included: Don't ignore your cervix, Give it some screen time, Your cervix is out of sight but it shouldn't be out of mind, Most cervical cancer can be prevented with regular cervical screens. The campaign was aimed at anyone with a cervix but in particular Māori and Pacific women as they are less likely to be screened, which is concerning as Māori women are twice as likely as non-Māori women to develop cervical cancer. With the disruption to screening services, we were unable to access uptake data but we saw an overwhelmingly positive response from the sector and our audiences.

COVID-19 response

Starting in April 2021, Te Hiringa Hauora is delivering both national and local activities for five priority groups – Māori, Pasifika, those with long-term health conditions, older people, and pregnant and new parents. This is an ongoing initiative and has not been finalised.

Strategic Intentions

Te Hiringa Hauora has two strategic intentions and three output classes set out in the Statement of Intent 2017-2021.

The strategic intentions guide our activities, and output classes are categories used to account for our expenditure on activities. Our strategic intentions overlap and strengthen each other, and both contribute to the New Zealand Health Strategy.

Strategic Intention One – People are more aware, motivated and able to improve and protect their own and their family’s health and wellbeing.

Strategic Intention Two – Physical, social and policy environments and services better promote and protect health and wellbeing.

Progress on our outcomes is reflected in our SPE measures reported on pages 51 to 59.

PROGRAMME	STRATEGIC INTENTION 2017-2021	OUTCOMES FOCUS TO 2021
Alcohol	<ul style="list-style-type: none"> • People are more aware, motivated and able to drink at low-risk levels or choose not to drink. • Physical, social and policy environments and services support New Zealanders to drink at low-risk levels or not drink. 	<ul style="list-style-type: none"> • Build social permission for people to drink at low-risk levels or not drink. • Make it easier to seek and find help early. • Influence policies, practices and the management of drinking environments to support people to drink at low-risk levels or not drink. • Contribute to strengthening protective factors that support low-risk drinking or not drinking.
Tobacco	<p>People are more aware, motivated and able to change their smoking behaviours.</p> <p>Environments and services better promote and protect New Zealanders from tobacco-related harm.</p>	<p>Contribute to strengthening protective factors that influence 17 to 24-year-olds to be smokefree.</p> <p>Support stop smoking services and other stakeholders with quality advice, evidence and resources to support New Zealanders to be smokefree.</p>

PROGRAMME	STRATEGIC INTENTION 2017-2021	OUTCOMES FOCUS TO 2021
Minimising Gambling Harm	<p>People are more likely to check whether their gambling is OK.</p> <p>People are more aware and motivated to use self-help approaches and seek professional help.</p> <p>Gambling environments increase the implementation of appropriate harm minimisation practices.</p>	<p>Make it easier for gamblers and people affected by someone else's gambling to seek and find help early.</p> <p>Support the minimising gambling harm sector and gambling industry with quality advice, evidence and resources to minimise harm.</p>
Nutrition and Physical Activity	<p>Support New Zealanders to eat healthy foods.</p> <p>Increase opportunities for New Zealanders to be active.</p>	<p>Motivate and support communities to eat well, move more and sit less.</p> <p>Support the nutrition and physical activity sector with quality advice, evidence and resources to support New Zealanders to eat healthy foods and be active.</p>
Mental Health National Depression Initiative	<p>People recognise anxiety and depression and know where and how to get help, including self-help.</p> <p>Communities and social environments are supportive of people who experience anxiety and depression.</p>	<p>Provide quality advice, information and resources to promote self-help and early intervention for depression and anxiety.</p> <p>Provide reliable information to influence communities to support people who experience depression and anxiety.</p>
Mental Health Like Minds, Like Mine	<p>New Zealanders demonstrate respectful attitudes and inclusive behaviours towards people with mental distress.</p>	<p>Support stakeholders with tools and resources to provide policies, structures and cultures that are inclusive and supportive of people with mental distress.</p> <p>Support communities with resources and tools to take action to increase social inclusion.</p>
Skin Cancer Prevention	<p>People are more aware, motivated and able to increase behaviours that protect from excessive ultraviolet radiation (UVR) exposure.</p> <p>Environments and services better protect New Zealanders from UVR exposure which causes harm.</p>	<p>Increase knowledge of risk (and benefits) of UVR among the public, health professionals and policy makers in order to increase individual behaviours that protect them from UVR which causes harm.</p>

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Statement of Comprehensive Revenue and Expense

For the year ended 30 June 2020

	NOTES	ACTUAL 2020 \$000	REFORECAST BUDGET 2020 \$000	SPE BUDGET 2020 \$000	ACTUAL 2019 \$000
Revenue					
Non-exchange revenue					
Alcohol levy revenue		11,151	11,530	11,530	11,522
Funding from the Crown – baseline		16,048	16,048	16,048	16,048
Exchange revenue					
Funding from the Crown – additional		1,411	1,261	–	1,760
Interest revenue		234	225	130	270
Other revenue	2	1,919	260	–	682
Total revenue		30,763	29,324	27,708	30,282
Expenditure					
Personnel expenses	3	9,868	10,022	10,267	9,673
Depreciation and amortisation expense	8,9	71	86	82	82
Other operating expense	4	1,813	1,962	1,841	1,659
Programme expense		15,869	16,342	15,518	19,478
Total expenditure		27,621	28,412	27,708	30,892
Surplus/(deficit)		3,142	912	–	(610)
Total comprehensive revenue and expense		3,142	912	–	(610)

Explanations of major variances against budget are provided in note 18.

The accompanying notes form part of these financial statements.

Statement of Comprehensive Revenue and Expense

For the year ended 30 June 2020

Restated by Revenue Source:

	ACTUAL 2020 \$000	REFORECAST BUDGET 2020 \$000	SPE BUDGET 2020 \$000	ACTUAL 2019 \$000
Alcohol				
<i>Revenue</i>				
Levy	11,151	11,530	11,530	11,522
Interest revenue	54	52	30	62
Other revenue	95	95	–	17
Total revenue	11,300	11,677	11,560	11,601
Total expenditure	11,107	11,677	11,560	11,552
Surplus/(deficit)	193	–	–	49
All other				
<i>Revenue</i>				
Funding from the Crown	17,459	17,309	16,048	17,783
Interest revenue	180	173	100	208
Other revenue	1,824	165	–	690
Total revenue	19,463	17,647	16,148	18,681
Total expenditure	16,514	17,647	16,148	19,340
Surplus/(deficit)	2,949	–	–	(659)
Grand total revenue	30,763	29,324	27,708	30,282
Grand total expenditure	27,621	29,324	27,708	30,892
Grand total surplus/(deficit)	3,142	–	–	(610)

Explanations of major variances against budget are provided in note 18.
The accompanying notes form part of these financial statements.

Statement of Financial Position

As at 30 June 2020

	NOTES	ACTUAL 2020 \$000	SPE BUDGET 2020 \$000	ACTUAL 2019 \$000
Assets				
Current assets				
Cash and cash equivalents	5	4,787	250	3,110
Receivables	6	5,731	2,200	2,530
Investments	7	3,750	4,000	5,500
Prepayments		11	–	28
Total current assets		14,279	6,450	11,168
Non-current assets				
Property, plant and equipment	8	292	230	205
Property, plant and equipment (WIP – not yet capitalised)		32	–	–
Total non-current assets		324	230	205
Total assets		14,603	6,680	11,373
Liabilities				
Current liabilities				
Payables	10	4,287	3,422	6,025
Employee entitlements	11	691	600	554
Revenue in advance	10	2,848	–	1,157
Total current liabilities		7,826	4,022	7,736
Non-current liabilities				
Employee entitlements	11	105	–	107
Total non-current liabilities		105	–	107
Total liabilities		7,931	4,022	7,843
Net assets		6,672	2,658	3,530
Equity				
Contributed capital		3,424	2,658	3,424
Accumulated surplus/(deficit)		3,248	–	106
Net assets	13	6,672	2,658	3,530

Explanations of major variances against budget are provided in note 18.

The accompanying notes form part of these financial statements.

Statement of Changes in Equity

For the year ended 30 June 2020

	NOTES	ACTUAL 2020 \$000	SPE BUDGET 2020 \$000	ACTUAL 2019 \$000
Balance at 1 July		3,530	2,658	4,140
Total comprehensive revenue and expense for the year		3,142	–	(610)
Balance at 30 June	13	6,672	2,658	3,530

Explanations of major variances against budget are provided in note 18.
The accompanying notes form part of these financial statements.

Statement of Cash Flows

For the year ended 30 June 2020

	NOTES	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Cash flows from operating activities			
Receipts from levy		11,264	11,569
Receipts from the Crown		17,671	18,652
Receipts from other revenue		(100)	720
Receipts from interest revenue		241	280
GST (net)		177	311
Payments to suppliers		(19,403)	(22,737)
Payments to employees		(9,733)	(9,648)
Net cash flow from operating activities		117	(853)
Cash flows from investing activities			
Receipts from sale of investments		15,500	20,000
Purchase of property, plant and equipment		(190)	(45)
Acquisition of investments		(13,750)	(16,500)
Net cash flow from investing activities		1,560	3,455
Net increase (decrease) in cash and cash equivalents		1,677	2,602
Cash and cash equivalents at the beginning of the year		3,110	508
Cash and cash equivalents at the end of the year	5	4,787	3,110
Reconciliation of net surplus/(deficit) to net cash flow from operating activities			
Net surplus/(deficit)		3,142	(610)
Add/(less) non-cash items			
Depreciation and amortisation expense		71	82
Total non-cash items		71	82
Add (less) movements in Statement of Financial Position items			
(Increase)/decrease in receivables		(3,183)	863
Increase/(decrease) in payables and revenue in advance		(48)	(1,214)
Increase/(decrease) in employee entitlements		135	25
Net movements in working capital items		(3,096)	(326)
Net cash flow from operating activities		117	(854)

Explanations of major variances against budget are provided in note 18.

The accompanying notes form part of these financial statements.

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Note: 1 Statement of accounting policies

Reporting entity

Te Hiringa Hauora/Health Promotion Agency (“Te Hiringa Hauora”) is a Crown entity as defined by the Crown Entities Act 2004 and is domiciled and operates in New Zealand, with offices in Wellington, Auckland and Christchurch. The relevant legislation governing the operations of Te Hiringa Hauora includes the Crown Entities Act 2004 and the New Zealand Public Health and Disability Act 2000. The ultimate parent of Te Hiringa Hauora is the New Zealand Crown.

Te Hiringa Hauora has an overall function to lead and support activities for the following purposes:

- promoting health and wellbeing and encouraging healthy lifestyles
- preventing disease, illness and injury
- enabling environments that support health and wellbeing and healthy lifestyles
- reducing personal, social, and economic harm.

It also has functions specific to providing advice and research on alcohol issues.

Te Hiringa Hauora does not operate to make a financial return.

Te Hiringa Hauora has designated itself as a public benefit entity (PBE) for financial reporting purposes.

The financial statements for Te Hiringa Hauora are for the year ended 30 June 2020, and were approved by the Board on 18 December 2020.

Basis of preparation

The financial statements have been prepared on a going concern basis, and the accounting policies have been applied consistently throughout the year.

Statement of compliance

The financial statements of Te Hiringa Hauora have been prepared in accordance with the requirements of the Crown Entities Act 2004, which includes the requirement to comply with generally accepted accounting practice in New Zealand (NZ GAAP).

The financial statements have been prepared in accordance with Tier 1 PBE accounting standards.

The financial statements comply with PBE accounting standards.

Presentation currency and rounding

The financial statements are presented in New Zealand dollars and all values are rounded to the nearest thousand dollars (\$000).

Standards issued and not yet effective and not early adopted

Standards and amendments, issued but not yet effective, that have not been early adopted are:

PBE IPSAS 41 Financial Instruments.

The XRB issued PBE IPSAS 41 Financial Instruments in March 2020. This standard supersedes PBE IFRS 9 Financial Instruments, which was issued as an interim standard. It is effective for reporting periods beginning on or after 1 January 2022. Although Te Hiringa Hauora has not assessed the effect of the new standard, it does not expect any significant changes as the requirements are similar to PBE IFRS 9.

PBE FRS 48 Service Performance Reporting

PBE FRS 48 replaces the service performance reporting requirements of PBE IPSAS 1 and is effective for reporting periods beginning on or after 1 January 2021. The amendments now defer the effective date until 1 January 2022. Te Hiringa Hauora has not yet determined how application of PBE FRS 48 will affect its Statement of Performance.

Summary of significant accounting policies

Significant accounting policies are included in the notes to which they relate.

Significant accounting policies that do not relate to a specific note are outlined below.

Foreign currency transactions

Foreign currency transactions are translated into New Zealand dollars (the functional currency) using the spot exchange rates at the dates of the transactions. Foreign exchange gains and losses resulting from the settlement of such transactions are recognised in the surplus or deficit.

Goods and services tax (GST)

Items in the financial statements are presented exclusive of GST, except for receivables and payables, which are presented on a GST-inclusive basis. Where GST is not recoverable as input tax, it is recognised as part of the related asset or expense.

The net amount of GST recoverable from, or payable to, the Inland Revenue Department (IRD) is included as part of receivables or payables in the Statement of Financial Position.

The net GST paid to, or received from, the IRD, including the GST relating to investing and financing activities, is classified as a net operating cash flow in the Statement of Cash Flows.

Commitments and contingencies are disclosed exclusive of GST.

Income tax

Te Hiringa Hauora is a public authority and consequently is exempt from the payment of income tax. Accordingly, no provision has been made for income tax.

Budget figures

The budget figures are derived from the Statement of Performance Expectations as approved by the Board at the beginning of the financial year. The budget figures have been prepared in accordance with NZ GAAP, using accounting policies that are consistent with those adopted by the Board in preparing these financial statements.

Cost allocation

Te Hiringa Hauora has determined the cost of its three output classes using the cost allocation system outlined below.

Direct costs are costs directly attributed to an output class. Indirect costs are costs that cannot be identified to a specific output class in an economically feasible manner.

Direct costs are charged directly to output classes. Indirect costs are charged to output classes based on cost drivers and related activity or usage information. Personnel and other indirect costs are assigned to output classes

based on the proportion of direct programme costs within each output class.

Critical accounting estimates and assumptions

In preparing these financial statements, Te Hiringa Hauora has made estimates and assumptions concerning the future. These estimates and assumptions may differ from the subsequent actual results. Estimates and assumptions are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are:

- useful lives and residual values of property, plant, and equipment – refer to Note 8
- useful lives of software assets – refer to Note 9
- retirement and long service leave – refer to Note 1

Note 2: Revenue

Accounting policy

The specific accounting policies for significant revenue items are explained below:

Funding from the Crown

Te Hiringa Hauora is primarily funded from the Crown. This funding is restricted in its use for the purpose of Te Hiringa Hauora meeting the objectives specified in its founding legislation and the scope of the relevant appropriations of the funder – Ministry of Health.

Funding is recognised as revenue when it becomes receivable unless there is an obligation in substance to return the funds if conditions are not met. If there is an obligation, the funding is initially recorded as deferred revenue and recognised as revenue when conditions of the funding are satisfied.

The fair value of revenue from the Crown has been determined to be equivalent to the amounts due in the funding arrangements.

Alcohol levy

Te Hiringa Hauora is also funded from a levy imposed for the purpose of recovering the costs it incurs in:

- addressing alcohol-related harm
- its other alcohol-related activities.

This levy is collected by New Zealand Customs acting as the agent of Te Hiringa Hauora.

Levy revenue is recognised as revenue in the accounting period when earned and is reported in the financial period to which it relates.

Interest revenue

Interest revenue is recognised by accruing on a time proportion basis the interest due for the investment.

Breakdown of other revenue and further information

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Other revenue includes:		
Programme revenue – third party contracts	1,910	643
Other revenue	9	39
Total other revenue	1,919	682

Note 3: Personnel expenses

Accounting policy

Superannuation schemes

Defined contribution schemes

Employer contributions to KiwiSaver and the ASB Group Master Trust are accounted for as defined contribution superannuation schemes and are expensed in the surplus or deficit as incurred.

Defined benefit schemes

Te Hiringa Hauora makes contributions to the ASB Group Master Trust Scheme (the scheme). The scheme is a multi-employer defined benefit scheme.

Insufficient information is available to use defined benefit accounting, as it is not possible to determine from the terms of the scheme the extent to which the surplus/deficit in the plan will affect future contributions by individual employers, because there is no prescribed basis for allocation.

The scheme is, therefore, accounted for as a defined contribution scheme.

Breakdown of personnel costs and further information

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Salaries and wages	9,118	9,015
Temporary and contract staff	162	151
Increase/(decrease) in employee entitlements	135	25
Defined contribution plan employer contributions	220	266
ACC	9	1
Recruitment expenses	118	66
Other	106	149
Total personnel expense	9,868	9,673

Employee remuneration

	ACTUAL 2020	ACTUAL 2019
Total remuneration paid or payable:		
\$100,000 – 109,999	10	14
\$110,000 – 119,999	8	8
\$120,000 – 129,999	6	6
\$130,000 – 139,999	2	2
\$150,000 – 159,999	2	2
\$160,000 – 169,999	1	–
\$190,000 – 199,999	1	4
\$200,000 – 209,999	2	–
\$290,000 – 299,999	1	1
Total employees	33	37

During the year ended 30 June 2020, two employee/s (2019, 1) received compensation and other benefits in relation to cessation totalling \$51K (2019, \$4K).

Board member remuneration

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Total remuneration paid or payable:		
Jenny Black (appointed Chair January 2019)	30.0	12.9
Dr Monique Faleafa (appointed Deputy Chair June 2017)	19.3	19.3
Dr Mataroria Lyndon (appointed June 2017)	15.5	15.5
Professor Boyd Swinburn (appointed January 2019)	15.5	6.4
Mafi Funaki-Tahifote (appointed January 2019)	15.5	6.4
Dr Teuila Percival (appointed January 2019)	15.5	6.4
Karaitiana Tickell (appointed September 2019)	12.9	–
Catherine Abel-Pattinson (retired September 2018)	3.9	15.5
Dr Lee Mathias (Chair) (retired December 2018)	–	15.5
Professor Grant Schofield (retired December 2018)	–	7.8
Jamie Simpson (retired December 2018)	–	7.8
Tony O'Brien (retired December 2018)	–	7.8
Total Board member remuneration	128	121

The Chair made a voluntary salary sacrifice of \$1K during Covid-19 (2019, \$0).

There have been no payments made to committee members appointed by the Board who are not Board members during the financial year.

Te Hiringa Hauora has not provided any deed of indemnity to Directors nor taken out Directors'

and Officers' Liability and Professional Indemnity insurance cover during the financial year in respect of the liability or costs of Board members and employees (2019 \$0).

No Board members received compensation or other benefits in relation to cessation (2019 \$0).

Note 4: Other expenses

Accounting policy

Grant expenditure

Discretionary grants are those grants where Te Hiringa Hauora has no obligation to award the grant on receipt of the grant application. For discretionary grants without substantive conditions, the total committed funding over the life of the grant is expensed when the grant is approved by the grants approval panel and the approval has been communicated to the applicant. Discretionary grants with substantive conditions are expensed at the earlier of the grant payment date or when the grant conditions have been satisfied. Conditions can include either:

- specification of how funding can be spent with a requirement to repay any unspent funds
- milestones that must be met to be eligible for funding.

Te Hiringa Hauora provides grants to community-based organisations to enable them to work in partnership with Te Hiringa Hauora or to progress messages or outcomes that Te Hiringa Hauora and the community has in common.

Te Hiringa Hauora makes a large number of small grants in each financial year, across a range of health topics, for purposes that include:

- activities to support national projects
- delivering an event, activity or services to promote Te Hiringa Hauora messaging
- specific one-off projects.

A letter to the recipient of each grant specifies the purpose of the grant and the requirements for the recipient to provide reports to Te Hiringa Hauora. Reports are required at project milestones, and/or on completion of projects.

In 2019/20, Te Hiringa Hauora provided funding for a wide range of groups, totalling \$233,253 (2019 \$184K).

Operating leases

An operating lease is a lease that does not transfer substantially all the risks and rewards incidental to ownership of an asset to the lessee.

Lease payments under an operating lease are recognised as an expense on a straight-line basis over the lease term. Te Hiringa Hauora leases office equipment and premises.

Critical judgements in determining accounting policies

Grant expenditure

Te Hiringa Hauora has exercised judgement in developing its grant expenses accounting policy above as there is no specific accounting standard for grant expenditure. The accounting for grant expenditure has been an area of uncertainty for some time, and, as a result, there have been differing accounting practices by entities for similar grant arrangements. With the recent introduction of the new PBE Accounting Standards, there has been debate on the appropriate framework to apply when accounting for grant expenses, and whether some grant accounting practices are appropriate under these new standards. A challenging area in particular is the accounting for grant arrangements that include conditions or milestones. Te Hiringa Hauora is aware that the need for a clear standard or authoritative guidance on accounting for grant expenditure has been raised with the New Zealand Accounting Standards Board. Therefore, we will keep the matter under review and consider any developments. Further information about grants awarded by Te Hiringa Hauora is disclosed above and in the Statement of Performance on pages 51-59.

Breakdown of other expenses and further information

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Fees to Audit New Zealand for audit of financial statements	58	58
Operating lease expenses	628	591
Other expenses	1,127	1,010
Total other expenses	1,813	1,659

Operating leases as lessee

The future aggregate minimum lease payments to be paid under non-cancellable operating leases are as follows:

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Office rental leases		
Not later than one year	610	590
Later than one year and not later than two years	610	610
Later than two years and not later than five years	271	870
Later than five years	33	48
Total office rental leases	1,524	2,118
Office equipment leases		
Not later than one year	9	8
Later than one year and not later than two years	9	8
Later than two years and not later than five years	11	11
Later than five years	-	-
Total office equipment leases	29	27
Total non-cancellable operating leases	1,553	2,145

Te Hiringa Hauora leases three properties – its main office situated in Wellington and two regional offices in Auckland and Christchurch.

A significant portion of the total non-cancellable operating lease expense relates to the lease of three floors of the Wellington office building. The lease expires in October 2025, with an option to renew as at 31 October 2022.

The office equipment that Te Hiringa Hauora leases are printers. The lease expires on 19 October 2023.

Te Hiringa Hauora does not have the option to purchase any of these assets at the end of any of the lease terms.

There are no restrictions placed on Te Hiringa Hauora by any of its leasing arrangements.

Note 5: Cash and cash equivalents

Accounting policy

Cash and cash equivalents includes cash on hand and deposits held on call with banks with original maturities of three months or less.

Breakdown of cash and cash equivalents and further information

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Cash at bank and on hand	1,787	3,110
Term deposits with maturities of three months or less	3,000	–
Total cash and cash equivalents	4,787	3,110

Note 6: Receivables

Accounting policy

Short-term receivables are recorded at the amount due, less an allowance for credit losses.

Te Hiringa Hauora applies the simplified expected credit loss model of recognising lifetime expected losses for receivables.

In measuring expected credit losses, short-term receivables have been assessed on a collective basis as they possess shared credit risk characteristics. They have been grouped on the days past due.

Short-term receivables are written off when there is no reasonable expectation of recovery. Indicators that there is no reasonable expectation of recovery include the debtor being in liquidation.

Previous accounting policy for impairment of receivables

In the previous year, the allowance for credit losses was based on the incurred credit loss model. An allowance for credit losses was recognised only when there was objective evidence that the amount due would not be fully collected.

Breakdown of receivables and further information

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Receivables (gross)	5,731	2,530
Less: Allowance for credit losses	–	–
Receivables	5,731	2,530
Receivables comprise:		
Receivables from the sale of goods and services (exchange transactions)	5,731	2,530
Receivables from grants (non-exchange transactions)	–	–

No allowance for credit losses given the short period of credit risk exposure and the insignificance of the impact of macroeconomic factors.

Note 7: Investments

Accounting policy

Bank term deposits

Bank term deposits are initially measured at the amount invested. Interest is subsequently accrued and shown as a receivable until the term deposit matures. A loss allowance for expected credit losses is recognised if the estimated loss allowance is not trivial.

Breakdown of investments and further information

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Current portion		
Term deposits	3,750	5,500
Total investments	3,750	5,500

Te Hiringa Hauora considers there has not been a significant increase in credit risk for investments in term deposits because the issuer of the investment continues to have low credit risk at balance date. Term deposits are held with banks that have a long-term AA- investment grade credit rating, which indicates the bank has a very strong capacity to meet its financial commitments.

The carrying amounts of term deposits with maturities less than 12 months approximate their fair value.

Note 8: Property, plant and equipment

Accounting policy

Property, plant and equipment consists of four asset classes, which are measured as follows:

- Leasehold improvements, at cost less accumulated depreciation and impairment losses.
- Furniture and office equipment, at cost less accumulated depreciation and impairment losses.
- Motor vehicles, at cost less accumulated depreciation and impairment losses.
- Computer equipment, at cost less accumulated depreciation and impairment losses.
- Books and films, at cost less accumulated depreciation and impairment losses.
- Artwork at cost.

Additions

The cost of an item of property, plant and equipment is recognised as an asset only when it is probable that future economic benefits or service potential associated with the item will flow to Te Hiringa Hauora and the cost of the item can be measured reliably.

In most instances, an item of property, plant and equipment is initially recognised at its cost. Where an asset is acquired through a non-exchange transaction, it is recognised at its fair value as at the date of acquisition.

The costs of day-to-day servicing of property, plant and equipment are expensed in the surplus or deficit as they are incurred.

Disposals

Gains and losses on disposals are determined by comparing the proceeds with the carrying amount of the asset. Gains and losses on disposals are reported net in the surplus or deficit.

Depreciation

Depreciation is provided on a straight-line basis on all property, plant and equipment, at rates that will write off the cost (or valuation) of the assets to their estimated residual values over their useful lives. The useful lives and associated depreciation rates of major classes of property, plant and equipment have been estimated as follows:

Leasehold improvements*	3 years	33%
Furniture	10 years	10%
Office equipment	5 years	20%
Motor vehicles	5 years	20%
Computer equipment	3 years	33%
Artwork, books and films		0%

* Leasehold improvements are depreciated over the unexpired period of the lease or the estimated remaining useful lives of the improvements whichever is the shorter.

Impairment of property, plant and equipment and intangible assets

Te Hiringa Hauora does not hold any cash-generating assets. Assets are considered cash-generating where their primary objective is to generate a commercial return.

Non-cash-generating assets

Property, plant and equipment held at cost that have a finite useful life are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount may not be recoverable. An impairment loss is recognised for the amount by which the asset's carrying amount exceeds its recoverable service amount. The recoverable service amount is the higher of an asset's fair value less costs to sell and value in use.

Value in use is the present value of an asset's remaining service potential. It is determined using an approach based on either a depreciated

replacement cost approach, a restoration cost approach or a service units approach. The most appropriate approach used to measure value in use depends on the nature of the impairment and availability of information.

If an asset's carrying amount exceeds its recoverable service amount, the asset is regarded as impaired and the carrying amount is written down to the recoverable amount.

The total impairment loss is recognised in the surplus or deficit.

The reversal of an impairment loss is recognised in the surplus or deficit.

Critical accounting estimates and assumptions

Estimating useful lives and residual values of property, plant and equipment. At each balance date, the useful lives and residual values of property, plant and equipment are reviewed. Assessing the appropriateness of useful life and residual value estimates of property, plant and equipment requires a number of factors to be considered such as the physical condition of the asset, expected period of use of the asset by Te Hiringa Hauora, and expected disposal proceeds from the future sale of the asset.

An incorrect estimate of the useful life or residual value will affect the depreciation expense recognised in the surplus or deficit, and carrying amount of the asset in the Statement of Financial Position. Te Hiringa Hauora minimises the risk of this estimation uncertainty by:

- physical inspection of assets
- asset replacement programs
- review of second-hand market prices for similar assets
- analysis of prior asset sales.

Te Hiringa Hauora has not made significant changes to past assumptions concerning useful lives and residual values.

Breakdown of property, plant and equipment and further information

Movements for each class of property, plant and equipment are as follows:

	ARTWORK, BOOKS AND FILMS \$000	FURNITURE AND OFFICE EQUIPMENT \$000	COMPUTER EQUIPMENT \$000	LEASEHOLD IMPROVEMENTS \$000	MOTOR VEHICLES \$000	TOTAL \$000
Cost or valuation						
Balance at 30 June 2018/1 July 2018	100	337	332	45	22	836
Additions	–	–	45	–	–	45
Disposals	–	–	(59)	–	–	(59)
Balance at 30 June 2019/1 July 2019	100	337	318	45	22	822
Additions	–	–	147	12	–	159
Disposals	(92)	(1)	–	–	–	(93)
Balance at 30 June 2020	8	336	465	57	22	888
Accumulated depreciation and impairment losses						
Balance at 30 June 2018/1 July 2018	(92)	(191)	(269)	(24)	(17)	(593)
Depreciation expense	–	(20)	(45)	(13)	(4)	(82)
Loss on disposal	–	–	–	–	–	–
Elimination on disposal	–	–	59	–	(1)	58
Balance at 30 June 2019	(92)	(211)	(255)	(37)	(22)	(617)
Depreciation expense	–	(20)	(45)	(6)	–	(71)
Loss on disposal	–	–	–	–	–	–
Elimination on disposal	92	–	–	–	–	92
Balance at 30 June 2020	–	(231)	(300)	(43)	(22)	(596)
Carrying amounts						
At 30 June 2018	8	146	63	21	5	243
At 30 June 2019	8	126	63	8	–	205
At 30 June 2020	8	105	165	14	–	292

Restrictions

There are no restrictions on the property, plant and equipment of Te Hiringa Hauora.

Costs associated with maintaining computer software are recognised as an expense when incurred.

Note 9: Intangible assets

Accounting policy

Software acquisition

Computer software licences are capitalised on the basis of the costs incurred to acquire and bring to use the specific software.

Staff training costs are recognised as an expense when incurred.

Costs associated with the development and maintenance of the Te Hiringa Hauora website are expensed when incurred.

Amortisation

The carrying value of an intangible asset with a finite life is amortised on a straight-line basis over its useful life. Amortisation begins when the asset is available for use and ceases at the date that the asset is derecognised. The amortisation charge for each financial year is expensed in the surplus or deficit.

The useful lives and associated amortisation rates of major classes of intangible assets have been estimated as follows:

Acquired computer software	3 years	33%
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Impairment of intangible assets

Refer to the policy for impairment of property, plant and equipment in Note 8. The same approach applies to the impairment of intangible assets.

Critical accounting estimates and assumptions

Estimating useful lives and residual values of intangible assets

In assessing the useful lives of software assets, a number of factors are considered, including the:

- period of time the software is intended to be in use
- effect of technological change on systems and platforms
- expected timeframe for the development of replacement systems and platforms.

An incorrect estimate of the useful lives of software assets will affect the amortisation expense recognised in the surplus or deficit, and the carrying amount of the software assets in the Statement of Financial Position.

Breakdown of intangible assets and further information

Movements for each class of intangible asset are as follows:

	TOTAL \$000
Cost or valuation	
Cost	
Balance at 30 June 2018	243
Balance at 30 June 2019	195
Balance at 30 June 2020	195
Accumulated depreciation	
Balance at 30 June 2018	(243)
Amortisation expense	–
Elimination on disposal	48
Balance at 30 June 2019	(195)
Amortisation expense	–
Elimination on disposal	–
Balance at 30 June 2020	(195)
Carrying amounts	
At 30 June 2018	–
At 30 June 2019	–
At 30 June 2020	–

Restrictions

There are no restrictions over the title of intangible assets belonging to Te Hiringa Hauora, nor are any intangible assets pledged as security for liabilities.

Note 10: Payables

Accounting policy

Short-term payables are recorded at the amount payable.

Breakdown of payables and deferred revenue and further information

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Payables and revenue in advance under exchange transactions		
Trade creditors	4,038	5,345
Accrued expenses	246	559
Total payables under exchange transactions	4,284	5,904
Deferred revenue (Crown revenue)	2,848	1,157
Total deferred revenue under exchange transactions	2,848	1,157
Payables under non-exchange transactions		
Taxes payable (RWT/PAYE)	3	121
Total payables under non-exchange transactions	3	121
Total payables and deferred revenue	7,135	7,182

Note 11: Employee entitlements

Accounting policy

Short-term employee entitlements

Employee entitlements that are due to be settled within 12 months after the end of the year in which the employee provides the related service are measured based on accrued entitlements at current rates of pay. These include salaries and wages accrued up to balance date, annual leave earned but not yet taken at balance date, and sick leave.

A liability and an expense are recognised for bonuses where there is a contractual obligation or where there is a past practice that has created a constructive obligation and a reliable estimate of the obligation can be made.

Long-term employee entitlements

Employee entitlements that are due to be settled beyond 12 months after the end of period in which the employee provides the related service, such as long service leave, have been calculated on an actuarial basis. The calculations are based on:

- likely future entitlements accruing to staff, based on years of service, years to entitlement, the likelihood that staff will reach the point of entitlement, and contractual entitlement information
- the present value of the estimated future cash flows.

Presentation of employee entitlements

Sick leave, annual leave and vested long service leave are classified as a current liability. Non-vested long service leave expected to be settled within 12 months of balance date is classified as a current liability. All other employee entitlements are classified as a non-current liability.

Critical accounting estimates and assumptions

Measuring long service leave obligations

The present value of long service leave obligations depends on a number of factors that are determined on an actuarial basis.

Two key assumptions used in calculating this liability include the discount rate and the salary inflation factors. Any changes in these assumptions will affect the carrying amount of the liability.

Expected future payments are discounted using forward discount rates derived from the yield curve of New Zealand government bonds. The discount rates used have maturities that match, as closely as possible, the estimated future cash

outflows. The salary inflation factor has been determined after considering historical salary inflation patterns and after obtaining advice from an independent actuary. A weighted average discount rate of 1.58% (2019 2.25%) and a salary inflation factor of 1.63% (2019 1.72%) were used.

If the discount rate were to differ by 1% from that used, with all other factors held constant, the carrying amount of the long service leave liability would be an estimated \$8K higher or \$7K lower (2019 \$9K higher or \$8K lower). If the salary inflation factor were to differ by 1% from that used, with all other factors being constant, the carrying amount of the long service leave liability would be an estimated \$8K higher or \$7k lower (2019 \$8K higher/lower).

Breakdown of employee entitlements

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Current portion		
Accrued salaries and wages	173	110
Annual leave	495	408
Long service leave	23	36
Total current portion	691	554
Non-current portion		
Long service leave	105	107
Total non-current portion	105	107
Total employee entitlements	796	661

Note 12: Contingencies

Contingent liabilities

There are no contingent liabilities at balance date (2019 \$0).

Contingent assets

There are no contingent assets at balance date (2019 \$0).

Note 13: Equity

Accounting policy

Equity is measured as the difference between total assets and total liabilities. Equity is disaggregated and classified into the following components.

- contributed capital
- accumulated surplus/(deficit).

Breakdown of equity and further information

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Contributed capital		
Balance at 1 July	3,424	3,424
Balance at 30 June	3,424	3,424
Accumulated surplus/(deficit)		
Balance at 1 July	106	716
Surplus/(deficit) for the year	3,142	(610)
Balance at 30 June	3,248	106
Total equity	6,672	3,530

Capital management

The capital of Te Hiringa Hauora is equity, which comprises accumulated funds. Equity is represented by net assets.

Te Hiringa Hauora is subject to the financial management and accountability provisions of the Crown Entities Act 2004, which imposes restrictions in relation to borrowings, acquisition of securities, issuing guarantees and indemnities, and the use of derivatives.

Te Hiringa Hauora has complied with the financial management requirements of the Crown Entities Act 2004 during the year. Te Hiringa Hauora manages its equity as a by-product of prudently managing revenues, expenses, assets, liabilities, investments and general financial dealings to ensure that Te Hiringa Hauora effectively achieves its objectives and purpose, while remaining a going concern.

Note 14: Related party transactions

Te Hiringa Hauora is controlled by the Crown.

Related party disclosures have not been made for transactions with related parties that are:

- within a normal supplier or client/recipient relationship
- on terms and conditions no more or less favourable than those that it is reasonable to expect Te Hiringa Hauora would have adopted in dealing with the party at arm's length in the same circumstances.

Further, transactions with other government agencies (for example, government departments and Crown entities) are not disclosed as related party transactions when they are on normal terms and conditions consistent with the normal operating arrangements between government agencies.

Key management personnel compensation

	ACTUAL 2020	ACTUAL 2019
<i>Board members</i>		
Remuneration	\$129,000	\$121,000
Full-time equivalent members	0.48	0.48
<i>Executive management team</i>		
Remuneration	\$1,050,000	\$1,090,000
Full-time equivalent members	5	5
Total key management personnel compensation	\$1,179,000	\$1,211,000

The Executive management team remuneration figures include KiwiSaver employer contribution.

An analysis of Board member remuneration is provided in Note 3.

Note 15: Financial instruments

15A Financial instrument categories

The carrying amount of financial assets and liabilities in each of the financial instrument categories are as follows:

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Financial liabilities measured at amortised cost		
Payables (including deferred revenue and taxes payable)	7,135	7,182
Total financial liabilities measured at amortised cost	7,135	7,182
Financial assets measured at amortised cost (2019: Loans and receivables)		
Cash and cash equivalents	4,787	3,110
Receivables	5,731	2,530
Investments – term deposits	3,750	5,500
Total financial assets measured at amortised cost	14,268	11,140

15B Fair value hierarchy

For those instruments recognised at fair value in the statement of financial position, fair values are determined according to the following hierarchy:

- Quoted market prices (level 1) – Financial instruments with quoted prices for identical instruments in active markets.
- Valuation techniques using observable inputs (level 2) – Financial instruments with quoted prices for similar instruments in active markets or quoted prices for identical or similar instruments in inactive markets and financial instruments valued using models where all significant inputs are observable.
- Valuation techniques using significant non-observable inputs (level 3) – Financial instruments valued using models where one or more significant inputs are not observable.

All financial instruments for Te Hiringa Hauora are Level 1 – quoted market prices.

There were no transfers between the different levels of the fair value hierarchy.

15C Financial instrument risks

The activities of Te Hiringa Hauora expose it to a variety of financial instrument risks, including market risk, credit risk, and liquidity risk. Te Hiringa Hauora has policies to manage these risks and seeks to minimise exposure from financial instruments. These policies do not allow transactions that are speculative in nature to be entered into.

Market risk

Fair value interest rate risk

Fair value interest rate risk is the risk that the fair value of a financial instrument will fluctuate due to changes in market interest rates. The exposure to fair value interest rate risk for Te Hiringa Hauora is limited to its bank deposits that are held at fixed rates of interest. Te Hiringa Hauora does not actively manage exposure to fair value interest rate risk.

Cash flow interest rate risk

Cash flow interest rate risk is the risk that the cash flows from a financial instrument will fluctuate because of changes in market interest rates. Investments and borrowings issued at variable interest rates expose Te Hiringa Hauora to cash flow interest rate risk.

The investment policy of Te Hiringa Hauora requires a spread of investment maturity dates to limit exposure to short-term interest rate movements. Te Hiringa Hauora currently has no variable interest rate investments.

Sensitivity analysis

As at 30 June 2020, if the 90-day bank bill rate had been 50 basis points higher or lower, with all other variables held constant, the surplus/deficit for the year would have been \$6K higher or \$2K lower (2019 \$4K higher or \$4K lower).

Credit risk

Credit risk is the risk that a third party will default on its obligation to Te Hiringa Hauora, causing it to incur a loss. Te Hiringa Hauora is exposed to credit risk from cash and term deposits with banks and receivables. For each of these, the maximum credit exposure is best represented by the carrying amount in the Statement of Financial Position.

Risk management

For receivables, Te Hiringa Hauora reviews the credit quality of customers prior to the granting of credit. It continues to monitor and manage receivables based on their ageing and adjusts the expected credit loss allowance accordingly. There are no significant concentrations of credit risk.

Due to the timing of its cash inflows and outflows, Te Hiringa Hauora invests surplus cash with registered banks with a Standard and Poor's credit rating of at least A2 for short-term and A for long-term investments. Te Hiringa Hauora limits the amount of credit exposure to any one financial institution for term to no more than 25% of total investments held. Investments by Te Hiringa Hauora in term deposits are considered to be low-risk investments. The credit ratings are monitored for credit deterioration.

Security

No collateral or other credit enhancements are held for financial instruments that give rise to credit risk.

Impairment

Cash and cash equivalents (Note 5), receivables (Note 6), and term deposit investments (Note 7) are subject to the expected credit loss model.

The notes for these items provide relevant information on impairment.

Credit risk exposure by credit risk rating grades, excluding receivables

The gross carrying amount of Financial assets, excluding receivables, by credit rating is provided below by reference to Standard and Poor's credit ratings.

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
<i>Cash at bank and term deposits</i>		
AA-	4,787	3,110
Total receivables	4,787	3,110

All instruments in this table have a loss allowance based on 12-month expected credit losses.

Liquidity Risk

Management of liquidity risk

Liquidity risk is the risk that Te Hiringa Hauora will encounter difficulty raising liquid funds to meet commitments as they fall due. Prudent liquidity risk management implies maintaining sufficient cash and the ability to close out market positions.

Te Hiringa Hauora manages liquidity risk by continuously monitoring forecast and actual cash flow requirements.

Contractual maturity analysis of financial liabilities, excluding derivatives

The table below analyses financial liabilities (excluding derivatives) into relevant maturity groupings based on the remaining period at balance date to the contractual maturity date.

The amounts disclosed are the undiscounted contractual cash flows.

	ACTUAL 2020 \$000	ACTUAL 2019 \$000
Payables		
Carrying amount	7,135	8,403
Contractual cash flows	7,135	8,403
Less than six months	7,135	8,403
Total payables	7,135	8,403

Note 16: Impact of COVID-19

On 11 March 2020, the World Health Organisation declared a global pandemic as a result of the outbreak and spread of COVID-19. Following this, on Wednesday 25 March 2020, the New Zealand Government raised the Alert Level in NZ to Level 4 (full lockdown of non-essential services) for an initial four week period. Te Hiringa Hauora was deemed an essential service which enabled us

to carry on our work, but we did so with all staff working from home. As part of the New Zealand Governments response to the pandemic, Te Hiringa Hauora was contracted by the Ministry of Health to work on the psychosocial response.

As assessment of the Impact of COVID-19 on the Financial Statements of Te Hiringa Hauora is set out below, based on the information at the time of preparing these financial statements.

Revenue	<ul style="list-style-type: none"> Approximately 60% of our revenue is from Crown which is not considered to be at significant risk Approximately 40% of our revenue is from the Alcohol Levy. Alcohol was deemed an essential item during Alert Level 4 and therefore this revenue stream continued.
Cash and cash equivalents	<ul style="list-style-type: none"> No impact to the carrying value of cash and cash equivalents.
Receivables	<ul style="list-style-type: none"> No impact to the expected recoverability of the receivable balances taking into account the current state of the economy.
Investments	<ul style="list-style-type: none"> No impact to the carrying value of our investments (term deposits).
Prepayments	<ul style="list-style-type: none"> No impact to the carrying value of our prepayments.
Property, Plant and Equipment	<ul style="list-style-type: none"> No impact on the impairment of these assets.
Payables	<ul style="list-style-type: none"> No accrued costs related to the expected impact of COVID-19 have been made.

Management will continue to monitor the impact of the pandemic on the results of the organisation and manage the business

accordingly to best ensure Te Hiringa Hauora continues to meet its financial and other objectives.

Note 17: Events after the balance date

There were no significant events after the balance date.

Note 18: Explanation of major variances against Statement of Performance Expectations budget

Statement of Comprehensive Revenue and Expense

Crown revenue

Crown revenue is higher than budget following additional service requests and funding agreements with the Ministry of Health during the year.

Programme expenditure

Programme expenditure is higher than budget following execution of agreed additional service requests.

Statement of Financial Position

Working capital

Working capital (current assets less current liabilities) is higher than budget and follows from the agreed additional service requests and funding agreements with the Ministry of Health.

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