

HIAP & COVID IN NEW ZEALAND

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Canterbury District Health Board HiAP team

Part of local public health unit.

- Working on HiAP approach for over 15 years.
 The Unit restructured in 2011 to integrate HiAP approaches in ALL it's work
- 2010-2011 earthquakes led to increased recognition for collaboration among agencies and importance of community wellbeing.
- Canterbury HiAP Partnership
- Joint work plans with local government and regional government agencies
- Invited to be part of lots of intersectoral projects
- Submissions for District Health Board
- Publications: HPSTED, IRPG, IPG
- <u>https://www.cph.co.nz/your-health/health-in-all-policies/</u>

NZ Government direction before COVID

- Wellbeing Budget
- Treasury's Living Standards Framework
 - Committed to honouring the Treaty of Waitangi

THE FOUR CAPITALS

The Four Capitals of Treasury's Living Standards Framework are the assets that generate wellbeing now and into the future.

🕅 Natural Capital 👫

All aspects of the natural environment that support life and human activity. Includes land, soil, water, plants and animals, minerals and energy resources.

💑 Human Capital 🗳

The capabilities and capacities of people to engage in work, study, recreation and social activities. Includes skills, knowledge, physical and mental health.

፣ሽቹ፣ Social Capital ፈር

The norms, rules and insitutions that influence the way in which people live and work together and experience a sense of belonging. Includes trust, reciprocity, the rule of lawy, cultural and community identify, traditions and customs, common values and interests.

Financial & Physical <u> </u> Capital

Financial and human-made (produced) physical assets, usually closely associated with supporting material living conditions. Includes factories, equipment, houses, roads, buildings, hospitals, financial securities.

GO EARLY, GO HARD

"Everything you will all give up for the next few weeks, all of the lost contact with others, all of the isolation and difficult time entertaining children: it will literally save lives." WØRLD ECØNOMIC FØRUM

Jacinda Ardern Prime Minister of New Zealand

Coordinated effort Communication, Communication, Communication! PM daily stand-ups – with **Public Information** Key messages **Director-General of Health** Campaign Unite **OUR TEAM OF** against **5 MILLION HAS WORKED TO BEAT** COVID-19 **THE VIRUS** COVID19.GOVT.NZ Jacinda Ardern GETTING **'HRGUGI ALL RIGHT?** IGGETHE

Health sector response

Alongside standing up incident management structures for public health units to track and trace infections, wider health system responses initiated.



Increased ventilator capacity



Workforce categorised into risk levels All elective procedures stopped

Public health response = multi-sector response

HiAP in action if not in words



Hard lockdown

Alert levels



Wage subsidy

Living wage level

Extended wage subsidies for businesses affected to keep people employed



Essential services and workers i.e. supermarkets

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Homeless housed Housed in motels, etc.

Devices to school children To support remote learning for those without access

National welfare hotline Food, medication, other material needs



Risk factors

Burden of the pandemic did not fall equally across our society



Overcrowded housing





Education



Ethnicity

Primary care enrolment



Employment

Effects of social distancing measures on health

BMJ 2020;369:m1557 doi: 10.1136/bmj.m1557 (Published 27 April 2020)



Health impacts benefits

While effectively 'stamping out' the virus, direct and indirect health impacts of pandemic far-reaching

- Shovel ready infrastructure bike lanes
- Air quality improved in lockdown
- Some families did well
- No Influenza (500 lives saved)
- Lower road toll/accidents
- Neighbourhoods connected (socially)
- Increased activity families out together
- Supporting local businesses/organisations
- Less suicides

Health impacts negatives

While effectively 'stamping out' the virus, direct and indirect health impacts of pandemic far-reaching

- Shovel ready infrastructure not checked for wellbeing impacts
- Some families did not do well
- Alcohol and drug abuse increased for some (less in young) – but higher help seeking post lockdown
- Initial delays in accessing some medical treatment - Cancer treatment pretty much back on track

Local responses

Pandemic supplement to IPG

PANDEMIC SUPPLEMENT: INTEGRATED PLANNING GUIDE

For a healthy, sustainable and resilient future KEY OUESTIONS AND CONSIDERATIONS FOR RECOVERING FROM AND PREPARING FOR FUTURE PANDEMICS

The COVID-19 pandemic and the measures taken to mitigate its impact have highlighted the links between public health and the quality of our places, our incomes and the wider economy, transport choices, how our children learn, air guality, and social justice - and shown us clearly the existing inequities in our society.

The response to COVID-19 supports previous research showing how policies and actions outside of the health sector can protect wellbeing and foster resilience. We need to ensure that while planning the recovery from this pandemic, or preparing for future public health emergencies that we take into account three key priorities: health and equity: addressing climate sustainability: and incorporating wider social goals

HOW WE STRUCTURE OUR RECOVERY EFFORTS WILL DEFINE OUR CITIES FOR DECADES TO COME

This pandemic-specific supplement is a companion to the Integrated Planning Guide for a healthy, sustainable and resilient future (IPG) and is not intended to be used alone. Use these additional prompts when developing plans or projects for both pandemic recovery and to build ongoing resilience to public health emergencies

Centered around the building blocks (or determinants) of health, the IPG was developed in Canterbury in collaboration with local agencies to provide prompts to use in assessing plans, projects and decisions for their health and wellbeing implications. Its predecessor, the Integrated Recovery Planning Guide, is another

The need for physical distancing and fears about family/whānau and communities? Will the

spreading infection can exacerbate loneliness and levels of belonging, inclusion and participation



useful tool that was developed in response to the Canterbury earthquakes and reflects recovery from

a physical disaster The prompts here are not an exhaustive list and the existing questions in the IPG remain applicable It also remains important to consider the links between the different blocks. The page numbers

as links (with full addresses at the end of the document) BEFORE YOU BEGIN DOWNLOAD & COPY O

next to the blocks relate to corresponding section in the IPG. Examples of city responses are provided

THE INTEGRATED PLANNING GUIDE

Maintaining relationships

Kept in touch with contacts

Used existing Joint Work Plans to support BAU

Joint submissions

GCP2050

Disability advocacy

Collected Information on PWD and directly influencing decisionmakers to make positive change

https://www.cph.co.nz/wp-content/uploads/IPGPandemicSupplement.pdf https://www.cph.co.nz/wp-content/uploads/IntegratedPlanningGuideV3.pdf

Enabling factors for collaboration in a crisis

- Leadership
- Recognition and communication of shared goals – and that health contributes to economy
- Science and evidence-led approach
- At local level: Multi-sector pre-existing relationships firmly established



Moving forward

Applying lessons to future health crisis

- Invest in relationships especially with decisionmakers
- Show impact of collaborative action
- Need to continue momentum at national government level on addressing big problems (child poverty, climate change, inequity) to improve health and strengthen resilience
 - Political will
 - Funding at levels to allow change and innovation

THANKYOU

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- On behalf of the Health in All Policies team at CDHB 🔗

https://www.cph.co.nz/your-health/health-in-all-policies/