

**Executive Director's Report to the 2006 Annual General Meeting of the Health Promotion Forum of New Zealand, Runanga Whakapiki ake i te Hauora o Aotearoa
17 October 2006, Ratana Pa**

Kia ora, Talofa lava, Kia orana. Malo e lelei. Fakalofa lahi atu, Taloha ni, Bula vinaka, Ni Hao, Namaste, Greetings

Introduction

It is an honour to be at Ratana Pa and present this report to the members of the Forum at this Annual General Meeting.

This report covers the year July 2005 to June 2006.

Some of the people who make our work possible

Many people who share our vision of Hauora as everyone's right, have generously given their expertise, energy and commitment to the Forum's work. Health promotion can be a tough sector to work in – the work is important and demanding, the causes we work for can be unpopular, and the organizations we work in are often under considerable pressure – and sometimes we can be tough on each other. One of the privileges of writing this report is it gives me an opportunity to acknowledge some of you, albeit too briefly, and with my plea for understanding that I haven't been able to acknowledge many of you because of the pre-Conference rush and because otherwise the AGM would finish after lunch rather than after breakfast.

Our Operations Team has deep respect for the governance, leadership, insight and wisdom of our Chair and the members of Council. We are honoured to have Richard Wallace as Kaumatua to both the Council and the Ops Team.

Our core Ops Team is Joanne Aoake (Health Promotion Strategist with the portfolio in Maori development who joined us last December), Fran Manahi (who has been doing a locum since February as Co-ordinator of Te Waipounamu Hauora Hui atu ki Wakapiki Te Waipounamu Health Promotion Coalition while Helen Rance is on sabbatical studying Te Reo, Marg Morrison (Business Manager), Sal Stevens (Administration and Events Co-ordinator), Helen Rance (Co-ordinator of Te Waipounamu Hauora Hui atu ki Wakapiki Te Waipounamu Health Promotion Coalition), Sione Tuītahi (Health Promotion Strategist with the portfolio in Pacific development) and Megan Tunks (Workforce Development Project Manager, whom the Forum has been subcontracting from Hapai Te Hauora Ltd from last December to early November), and myself. Noelene Rachinger joined us in a temporary Executive PA role in May.

This is an Ops Team with a wonderful combined breadth and depth of skills and knowledge about health promotion, the health promotion workforce, Maori health, Pacific

health, and the functions of a non-governmental organisation, and integrity, courage, compassion and commitment to Hauora as everyone's right. Most of us are part-time which has enabled our diversity. I continue to be especially appreciative of the Team's goodwill and forbearance for their Executive Director's foibles!

Avril Stott (our accountant), Margot Nicholson (our solicitor), Anne Ratliff (our human resources advisor) bring their commitment and considerable knowledge of non-governmental organisations, enabling the Forum's ongoing development as a non-governmental organisation. John Roger's care and consideration continues to mean that our information technology functions well, as does Net Sense's helpfulness and work on our website.

We are deeply appreciative to the people who teach on the Forum's courses, workshops and seminars. Debbie Hager continues to be the mainstay of the Manukau Institute of Technology (MIT) Certificate of Achievement in Introducing Health Promotion ("the short course"), and Raeleen De Joux has continued leading the Treaty of Waitangi and Maori health component of the Certificate of Achievement. They receive wonderful feedback from the students and are a pleasure to work with. We are very fortunate to work with Debbie Penlington and Sandy Wilkinson of the Department of Nursing and Health Studies at MIT - they are knowledgeable about both health and education, passionate about improving health, and willing and able to work across sectors. We are very appreciative to Maori SIDS for supporting Raeleen's contribution, Diana Burns for her highly regarded workshops on the media, Hine Martin for the fantastic work she did leading workshops on TUHA-NZ, and the other very knowledgeable and highly skilled people who have generously presented, facilitated and contributed to our workshops and seminars. You may also recall from my report last year the appreciation to Professor Mason Durie for the wonderful Te Pae Mahutonga hui held in July 2005 with great support from Kirikiriroa Marae, Te Kohao Health, Waikato District Health Board's Population Health Service and Te Puna Oranga. David Sinclair, Sylvia Bell, Nicki Jackson and John F Smith did superb work on theme based issues of *Keeping Up to Date*.

This year has seen our Reference Groups take off. Their expertise, wise and informed counsel and advice is proving invaluable. The current membership of the Maori Reference Group is Kathrine Clarke (Chair), Wendy Dallas-Katoa, Hana Harawira, Pauline Hopa, Mary McCulloch, and Kirsten Rei. The Pacific Reference Group is Lita Foliaki, Aumea Herman, Ida Isaáko, Teuila Percival, Manu Sione, and Margaret Southwick. The Academic Reference Group is Louise Signal (chair), Shanthi Ameratunga, Helen Moewaka Barnes, Sitaleki Finau, Greg Hamilton, Glen Laverack, Kate Morgaine, Pat Neuwelt, Debbie Penlington (whose alternate is Sandy Wilkinson), Mihi Ratima (on leave), Papaarangi Reid and John F. Smith (whose alternate is Nicki Jackson).

The ThinkTank of the Te Waipounamu Health Promotion Coalition 9TWHPC) – currently Raeleen de Joux, Wendy Dallas-Katoa, Vivien Daley, Maria Glanville, Ripeka Houkamau, Gail McLachlan, Kate Morgaine (on leave), Sue Price, Danielle Smith, and Adrian Te Patu – continue to guide the fantastic work of TWHPC.

Other people to whom we are indebted include Dame Silvia Cartwright, Judi Clements, Ruth De Souza, Riripeti Haretuku, Cindy Kiro, Warren Lindberg, Mary McCulloch, Philip Patston, Teuila Percival, Mihi Ratima, Shae Ronald and Adrian Te Patu, for their many

and wonderful contributions to last year's Symposium; Warren Lindberg for his counsel and expert involvement in our developing and teaching about a human rights approach; Mary McCulloch and more recently Karen Evison for their important work and commitment as our Ministry of Health contract managers; Maggie McGregor, Viv Head and others for their exciting and essential work on the Ministry's public health workforce development plan; Gay Keating and Sue Sewell in the Public Health Association for the work on competencies and the collegial enjoyment of working with them; Heather Gifford, Gill Pirikahu and Whakauae Research Services for their very helpful research on the use of TUHA-NZ; Kathrine Clarke, Gay Keating, Braden Leonard, Kumanan Rasanathanan, John Raeburn, Mihi Ratima and others for the hard work and strong co-ordinated advocacy we did about the Bangkok Charter; Anton Blank for the brilliance and creativity he contributed to our Newsletters and communications; Waitangi Wood for the superb work and able multi-tasking that she has been doing with the organisation of *Te Wero*.

There are many other people whose contributions have made a real difference. I apologise for not including you all by name. I will doubtless wake up each day for the next week thinking "Oh No! I should have mentioned ... and ... and ... and ..."

It continues to be a great privilege to work with and for you, the members of the Health Promotion Forum. The wonderful work that you do towards making Hauora everyone's right, inspires, supports and encourages us. Thank you very much.

Strategic Plan Goal One: Develop and offer leadership

Te Wero! This is a challenging time for health promotion with a rapidly changing context which brings new opportunities - and also challenges gains that have been made in health and equity.

In line with our vision of Hauora – everyone's right, we make the hard choices about what to do, and what not to do, by endeavoring to prioritise activities which will most benefit people and communities whom are least advantaged.

Maori development The Forum has a constitutional commitment to Te Tiriti O Waitangi, and the Council includes Te Komiti Maori. Richard Wallace is our Kaumatua. There is a Maori Reference Group. A team member (Joanne Aoake) holds the portfolio in Maori development among her responsibilities, and is looking at how the Forum can strengthen the Maori health promotion workforce and develop Maori health promotion – for example, through the workshops we are doing on Maori models of health promotion. Joanne is also a member of Te Taumata Roopu, the Maori advisory group to the Public Health Directorate. We have been participating in the Indigenous Caucus planning for the 2007 International Union of Health Promotion and Education conference to be held in Vancouver.

Pacific development: We have a Pacific Reference Group. A team member (Sione Tu'itahi) holds the portfolio in Pacific development among his responsibilities, and is looking at how the Forum can strengthen the Pacific health promotion workforce and develop Pacific health promotion - for example, through the workshops we are doing on Pacific models of health promotion.

Health promotion and human rights As reported to the last AGM, I was fortunate to attend the WHO 6th Global Conference on Health Promotion in August 2005. The efforts of the people named above, and our work with others in the People's Health Movement and at Bangkok meant we influenced what was in the final version of the Bangkok Charter, especially the recognition that the first action for health promotion in a globalised world is to advocate for health based on human rights and solidarity, the recognition of indigenous peoples, the greater focus on advocacy and equity, and reference to children and disabled people.

We held a national Symposium on *Hauora: Health and Wellbeing – Everyone's Right* at Waipapa Marae on 31 October, with speakers being Dame Silvia Cartwright, Judi Clements, Ruth De Souza, Riripeti Haretuku, Cindy Kiro, Warren Lindberg, Philip Patston, Teuila Percival, Mihi Ratima, and myself, and Adrian Te Patu as facilitator. We have continued to promote understanding of the contribution of health promotion to all people being able to enjoy their right to Hauora through workshops and presentations, the *Newsletters*, and *Keeping Up to Date*.

Promoting evidence-based practice *Te Wero* and other continuing education activities provide opportunities for people to learn about evidence based practice and models of best practice. *Keeping Up to Date* has been reoriented and provides user friendly succinct literature reviews on key and emerging issues. The Academic Reference Group recently became the editorial advisory committee and each issue is now peer reviewed. We worked with the Health Promotion Journal of Australia to have two New Zealanders (Louise Signal and Mihi Ratima) appointed to their Editorial Advisory Committee. We want to hold a Symposium in 2007 on evidence and ethics in health promotion. We also became involved in pandemic planning in order to advocate for an equity driven approach informed by health promotion knowledge; two members of the Ops Team are on the Ministry's Pandemic Influenza Reference Committee.

Advocacy for the health promotion workforce. We have continued to advocate for increasing equity within the workforce and the development, education and training of the workforce through our involvement with the Ministry's public health workforce project, writing a "think piece" on health promotion workforce development from the perspectives of health promotion practitioners, and contributing to other "think pieces"¹, our submission to the Select Committee Inquiry into obesity and diabetes, etc. We remain concerned about "the advocacy issue" because – as the Bangkok Charter says - ethical advocacy is a core action for improving health.

Information and communication. We have an extensive database of over 2, 600 people, and communicate through our quarterly *Newsletter*, website, *Keeping Up to Date*, and emails about educational and other opportunities. We have developed an information and communication strategy – the new logo is part of this – and are planning an expansion of our website and other communications.

Te Wero – Challenging health promotion As participants at the Conference you are experiencing the work we have done!

¹ These were commissioned by the Ministry. They will shortly be available for release and we will put them on the website.

Strategic Goal Two: Develop strategic partnerships and relationships

We continue to take a collaborative approach to our work, as seen in our partnership with the ThinkTank of Te Waipounamu Hauora Hui atu ki Wakapiki Te Waipounamu Health Promotion Coalition, and with the Manukau Institute of Technology in the delivery of the Certificate of Achievement in Introducing Health Promotion. You will have seen the widening base of people and organizations contributing and involved in the Forum's activities in the Symposium last year and now at *Te Wero*, our work at Bangkok, the Reference Groups, and our continuing education activities, etc.

Some of you will know the difficulties that came about for the short course because of the changed rules in the tertiary education sector. We are pleased to tell you that MIT has agreed to an interim arrangement which means, if there is Ministry of Health support and sufficient funding, the Forum and MIT will be able to offer an increased number of short courses next year.

We continue to value the ongoing collegial and supportive relationships that we have with Hapai te Hauora Tapui – you can see this in action through their support for *Te Wero* – and the Public Health Association.

Strategic Goal Three: Strengthen and build the capacity of the health promotion workforce

We have in partnership with MIT, delivered short courses in Auckland, Wellington, Palmerston North, and Rotorua². In late 2005 we worked with MIT on how the short course could lead into a national Certificate and Diploma in health promotion with a staircased approach, multiple entry and exit points, flexibility, and interactive learning, and be aligned to the health promotion competencies and supported by peer mentoring and supervision. MIT and the Forum were about to consult with the sector when the rules around tertiary education funding were changed - and so we have had to prioritize ensuring the short courses would continue to be held. The development of a pool of tutors will be essential to increasing the number of available short courses. We will continue working for the establishment of a nationally available Certificate and Diploma, and hope that the forthcoming public health workforce development plan prioritises this work.

We organized the *Te Pae Mahutonga* hui with Mason Durie at Kirikiriroa Marae in July 2005, the Symposium, *Hauora: Health and Wellbeing – Everyone's Right* in October 2005, and delivered 32 workshops, seminars, meetings and presentations on key and leading edge health promotion issues (including health promotion and human rights, Maori models of health promotion, Whanau Ora and He Korowai Oranga, Pacific models of health promotion, TUHA-NZ, the Bangkok Charter, understanding primary health, healthy public policy, pandemic planning and equity, use of the media, community development, contracting issues, legal issues, governance issues and the public health workforce development plan. The majority were done through the contract we have with the Ministry for services in the northern region – we would like to be able to do more continuing education in the rest of the country. We are developing a bank of workshops and seminars.

² Unfortunately the changes meant that the course planned for Invercargill had to be postponed but has now been held.

We ran a three day introductory course on health promotion for people working in problem gambling and have done several other activities to support the problem gambling workforce. We are shortly doing a five day course introducing health education for people working with Counties Manukau District Health Board on *Let's Beat Diabetes*.

Whakauae Research Services did a thoughtful and useful review of TUHA-NZ which went to our Maori and Academic Reference Groups. Hine Martin led five TUHA-NZ workshops and also advised us on the development of TUHA-NZ. We will be developing a kete to support the increased use of TUHA-NZ.

We have been part of the work on generic public health competencies that is led by the Public Health Association, and contribute to the advisory group Te Rau Matatini on Maori public health workforce development. The consultation and discussions around generic public health competencies, and the work of Te Rau Matatini, will inform the work we will soon be doing with our Reference Groups about the possible development of kaupapa Maori competencies, the possible development of health promotion standards, and the ongoing development of the health promotion competencies.

The Forum's ongoing contracts are for national services, services in the northern region and as the contract holder for Te Waipounamu Health Promotion Coalition. If the funds for the national contract are distributed according to the population, then half our activities would go to benefit the northern region, a quarter – including the work of Te Waipounamu Health Promotion Coalition – would be for the southern region, and the remaining quarter would be distributed through the midlands and central regions. This is why the workforce in the midlands and central regions don't get as many Forum workshops and seminars. We hope to explore how the Forum can develop regionally based services in the midlands and central regions.

The Forum is the legal entity holding the contract for the work of Te Waipounamu Hauora Hui atu ki Wakapiki Te Waipounamu Health Promotion Coalition (TWHPC), and employs the Coalition's Co-ordinator. It continues to be a privilege to be working with the Coalition's ThinkTank, have the Co-ordinator as part of our team, and learn from their work. The Coalition has in collaboration with other organizations, a very strong focus on community and regional development. TWHPC has a membership of over 400 members consisting of District Health Board Public Health Services, many NGOs, community organisations, local authorities, Maori health providers, and PHOs. This membership comprises people at the governance, management, and "grass roots" health promotion worker levels. It recognizes the isolation and geographical issues which impact on the ongoing work of health promotion. It is a model which TWHPC believes should be replicated in other areas to enhance the wellbeing of many communities, by empowering local solutions to local health issues, and the strengthening and development of key workers.

The Forum's Strategic Plan and interim workforce development strategy outline other exciting work we would like to do – including piloting mentoring and supervision, making stronger links with PHOs and local government, reviewing the ethical guidelines, and exploring the development of a collective identity for the health promotion workforce. We will value your responses to the discussion paper on a collective identity that is being distributed at this Conference.

As the Strategic Plan point out, “The health promotion workforce is growing, and there is increasing recognition of the value of health promotion from new areas, including primary health care and local government. Many people who use, or would like to use, health promotion approaches have not been recognised as part of the health promotion workforce, often work without payment, and have had even less opportunities for learning – but can and do make a substantial contribution to improving health and wellbeing within their communities and society.” The Forum has focused on the core public health workforce. One of the challenges is how we can support people beyond the core workforce to use health promotion frameworks and approaches to ensure all people enjoy their right to Hauora.

Strategic Goal 4: Develop as a healthy and sustainable organisation

Our Chair has reported about the substantial work that the Council has done on all Constitution and Strategic Plan.

The Forum continues to be heavily reliant on the Ministry of Health for ongoing funding. We need to diversify our funding base, especially in the changing environment.

We are increasingly appreciating the value of our involvement in Te Wana Quality Programme. We are reviewing our policies, improving our planning and want to strengthen the evaluation of our activities. We had a routine Ministry of Health audit at the end of September and look forward to learning from the findings to improve what we do. The Conference evaluation form ask for people who would be willing to give us advice and feedback on improving our services and we would value you volunteering to help us this way.

You will have noted the ongoing development of the Forum’s operations team, Reference Groups, and our better financial position. We have well established and excellent financial systems. We are working on being a health promoting, equal employment and family friendly workplace.

We still have many gaps and a lot to do to be a truly healthy and sustainable organisation, but we are on the way.

Thank you very much for your consideration of this report.

Alison Blaiklock
Executive Director
16 October 2006