

# Healthy Auckland Together

## Regional Obesogenic Environments

Presentation to ANA Conference 2015

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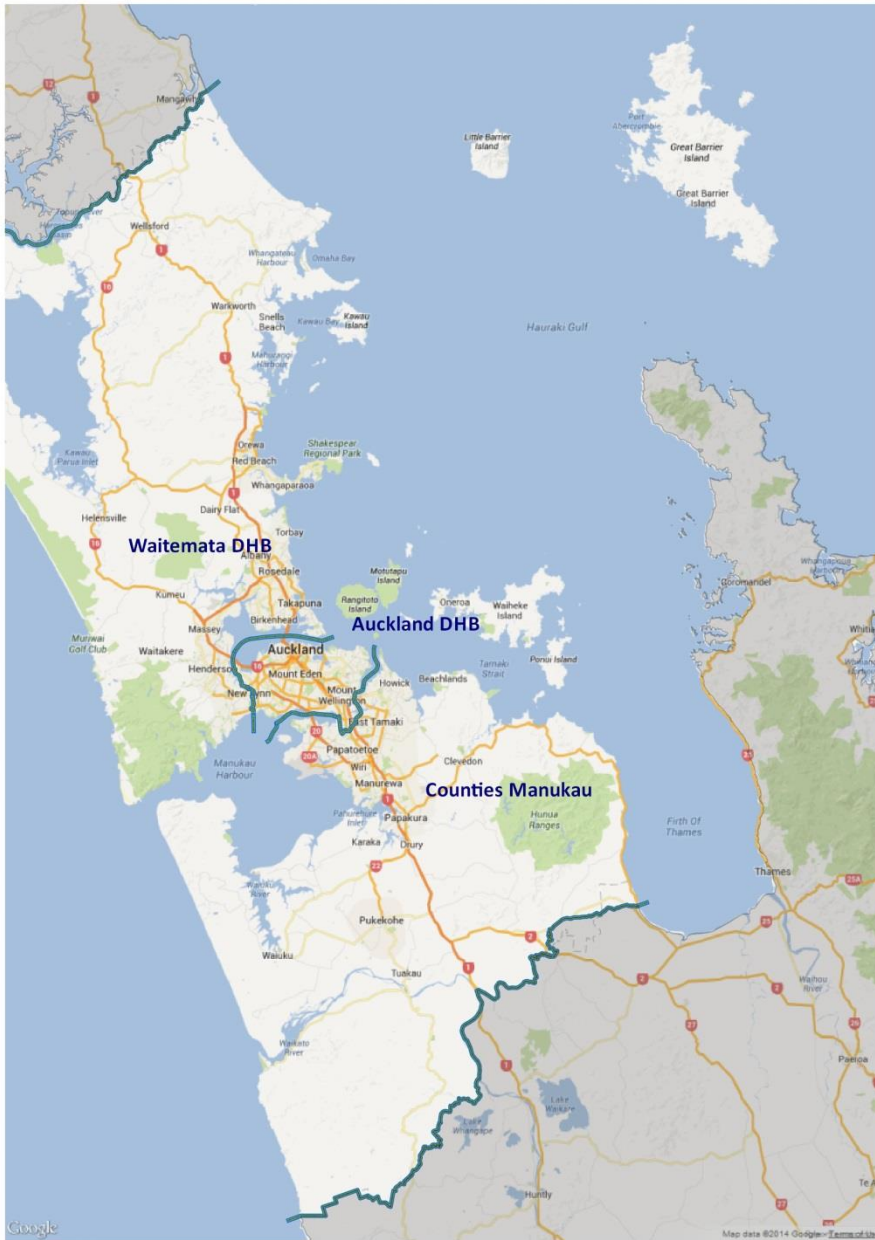


“The increasing weight of people worldwide is the result of a normal response, by normal people, to an abnormal environment”

*Lancet 2011;378:741*

# Scope of the problem

- Two thirds of Auckland adults and one third of children are either overweight or obese
- Almost half of Aucklanders are not physically active enough to keep healthy
- Recommended daily vegetable intake (3+ per day) in Auckland is 51% (nationwide 66.8%)
- Recommended daily fruit intake for Auckland (2+ per day) is 54.4% (national intake 57.5%)
- 48% of Māori adults, 19% of Māori children are obese in NZ
- 68% of Pacific adults, 27% of Pacific children are obese in NZ



## Population (2013)

Auckland DHB 460,000

Counties-Manukau DHB 496,000

Waitemata DHB 553,000

Auckland region 1,510,000

New Zealand 4,442,000

# Auckland region

■ Maori	11%
■ Pacific	15%
■ Asian	23%
■ European	60%
■ Born overseas	39%
■ Growth 2006-2013	9%
■ Rest of NZ 2006-2013	5%
■ AKL's proportion of growth	47%



# Background

- Changing political landscape in regard to nutrition, physical activity and obesity.
- Serious regional inequalities in overweight and obesity
- The Auckland Regional Public Health Service (ARPHS) requested by DHBs to “take the lead in coordinating and drafting a regional inter-sectoral action plan to address obesity in the Auckland region”
- ARPHS is the backbone agency and currently providing the funding for the project.

# Vision

A social and physical environment that supports people living in Auckland to eat well, live physically active lives, and maintain a healthy body weight within their communities

# Project Structure

- **Steering group:** ARPHS and DHB members
- **Internal working group:** Made up of ARPHS staff
- **Interagency group:** reduce obesity, raise visibility and profile of environmental issues, address upstream causes, opportunities for collective action - see next slide for membership
- **Wider sector stakeholders**

# Inter-agency Group Partners

National Institute for Health Innovation

Health Promotion Agency

Auckland Transport

Auckland Council

Ministry of Health

Aktive Auckland

Mana Whenua

DHBs

PHOs

Pacific Heartbeat

The Asian Network

Hapai te Hauora Tapui

Disability interest groups

Healthy Families New Zealand

New Zealand Heart Foundation

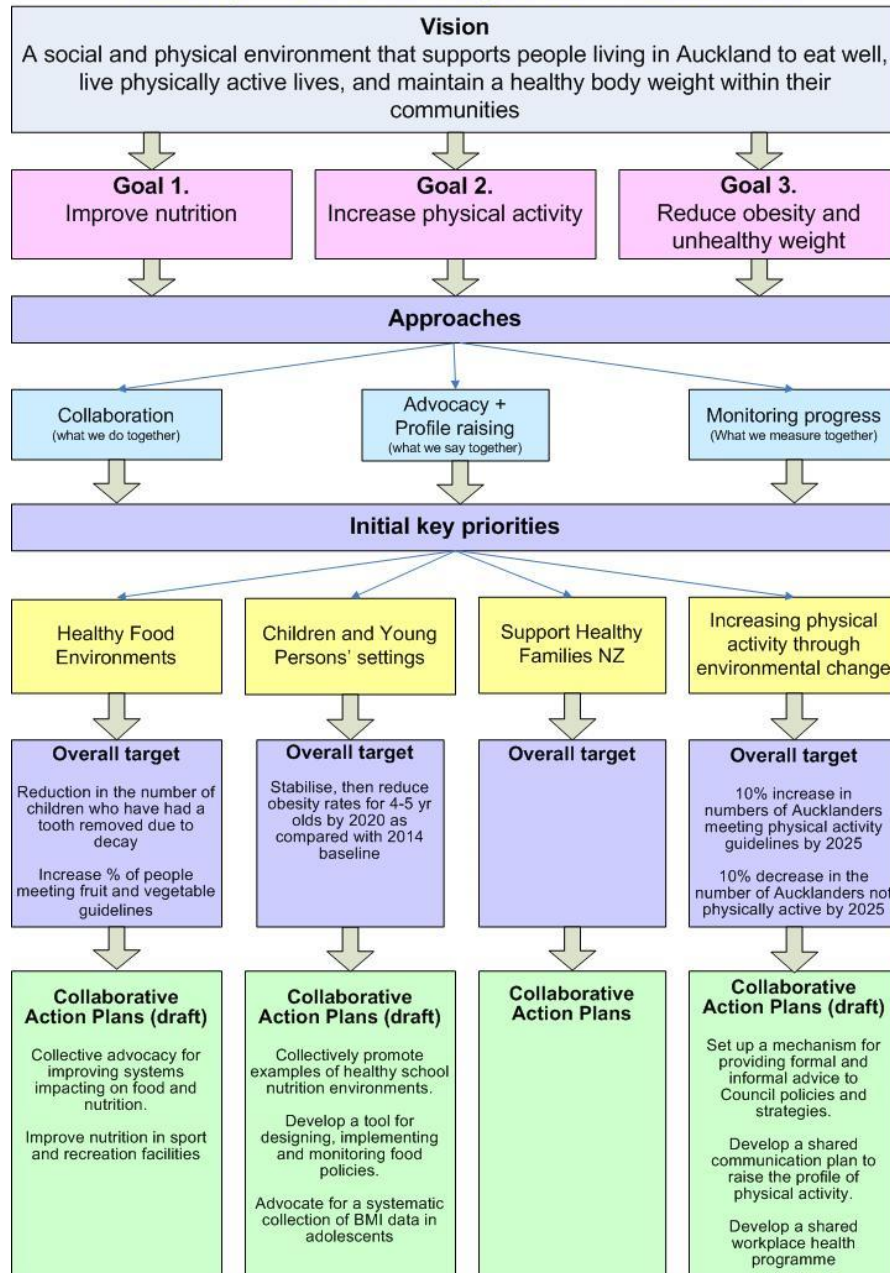
Auckland University School of Population Health



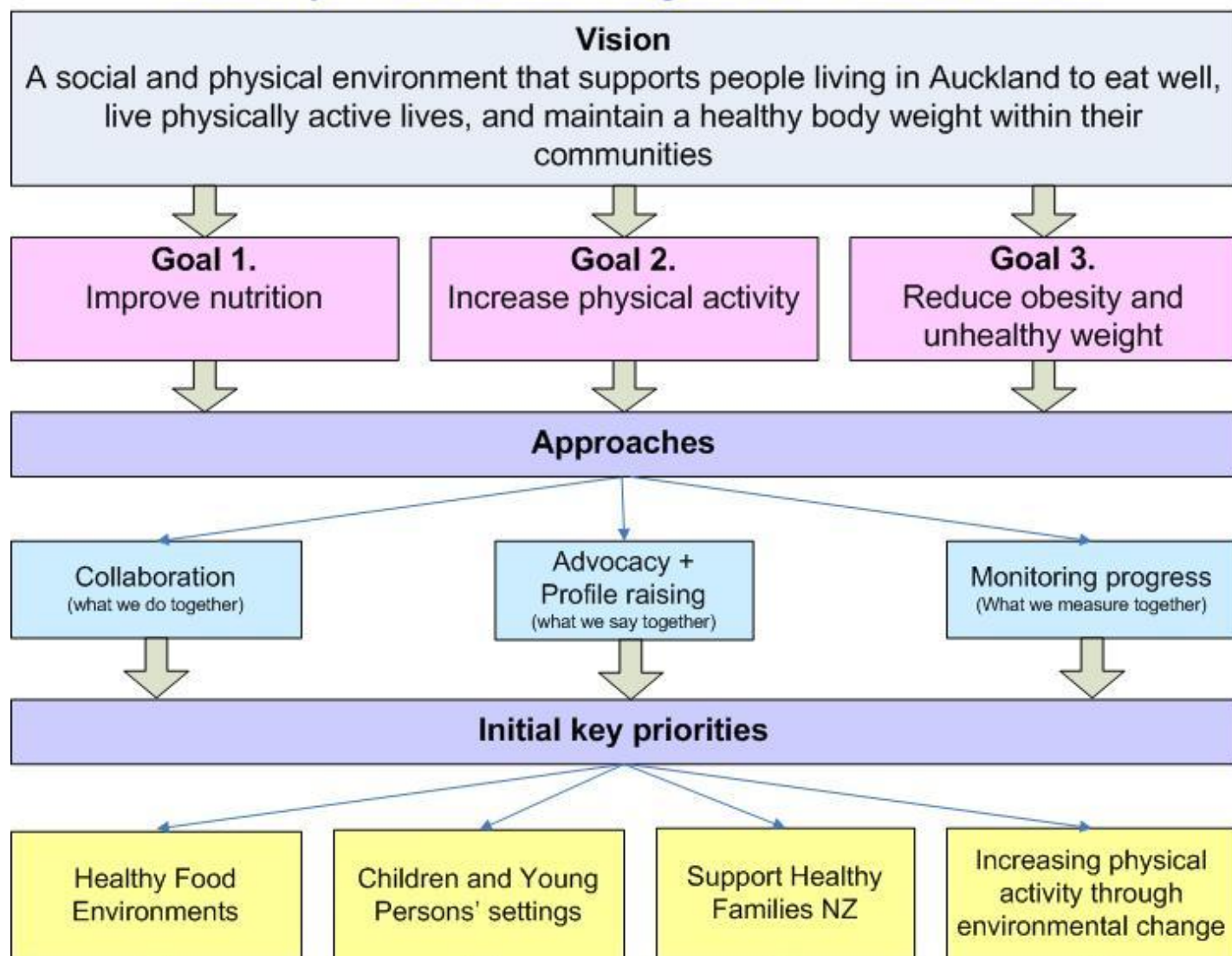
# Healthy Auckland Together framework development principles

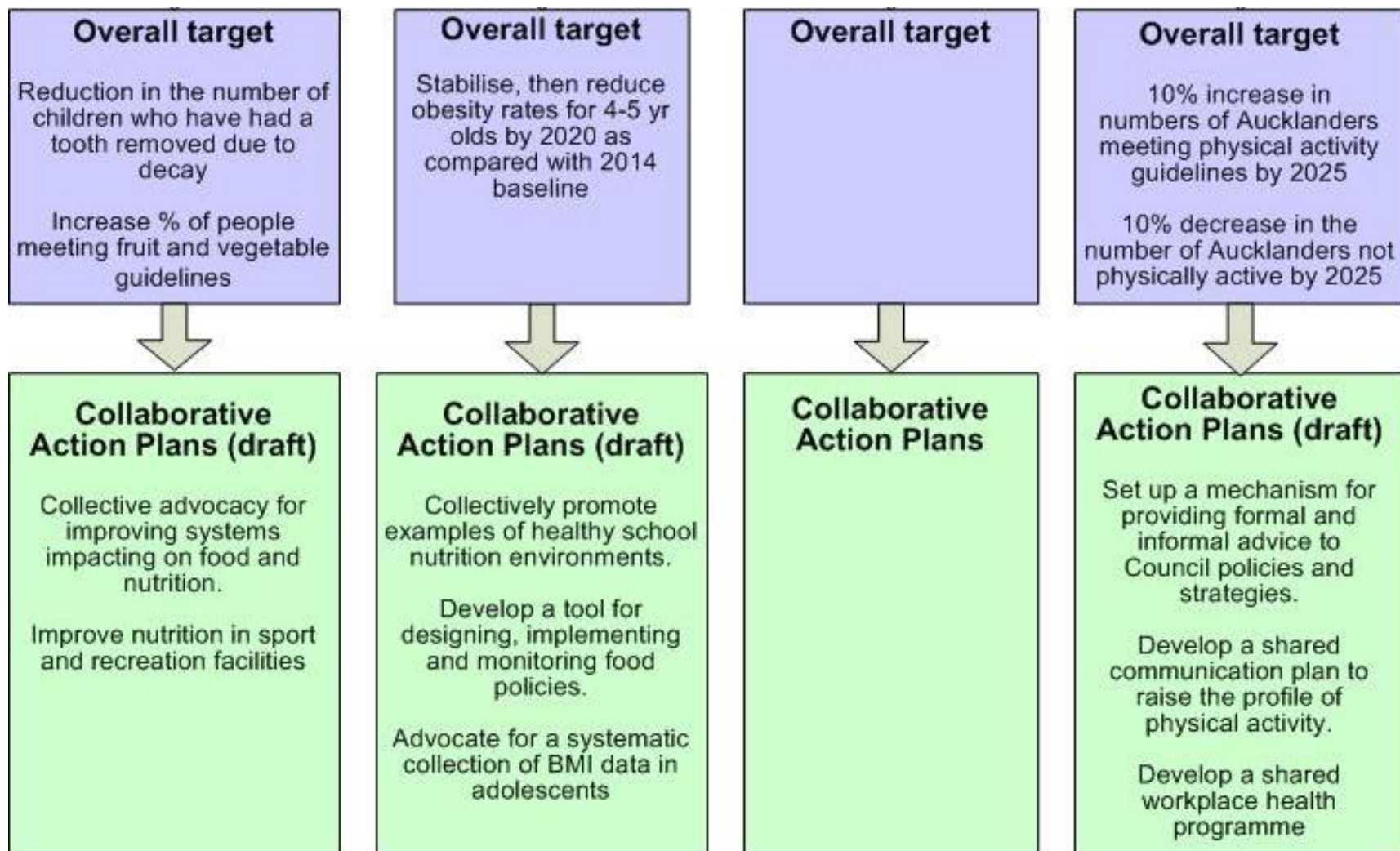
- Equitable outcomes
- Effective community engagement
- Evidence based
- Critical periods in the life course prioritised
- Effective coordination and collaboration
- Overall health gain prioritised, including mental health

# Healthy Auckland Together Framework



# Healthy Auckland Together Framework





# What's on the go at present

- Developing a Healthy Auckland Together action plan for implementation by end of June 2015
- Working on a stair climbing campaign with selected HAT member organisations
- Submitting on all key regional policies
- Meeting senior executives of HAT member organisations
- Extending Healthy Auckland Together network

# Questions?



# Principles of system-wide change for good health

- **Implementation at scale** (population health)
- **Collaboration for collective impact** (common agenda, long term commitment, mutually reinforcing activities, multiple partners from different sectors, a backbone organisation)
- **Transformation** (operate differently with stakeholders in the system)
- **Experimentation** (underpinned by evidence and experience, monitored and designed to be amplified across the system)  
Safe to fail experiments.
- **Adaption** (constant reflection and learning)
- **Equity** (equal outcomes)
- **Leadership** (at all levels of the system)

# Obesity: Determinants and actions (Swinburn, Lancet 2011)

