

**PUBLIC HEALTH
ASSOCIATION OF
NEW ZEALAND INC**

**ANNUAL REPORT
2002**

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2001-2002 PHA Executive Council

Dr Fran McGrath, President
Annette Beasley, Treasurer (seconded)
John Waldon, Vice President

Trish Fraser, Auckland
Dallas Honey, Waikato
Ann Shaw, Manawatu-Wanganui
Iain Potter, Wellington
Vivien Daley, Canterbury

Maori Caucus

Marty Rogers, (Ngati Kahu me Te Rarawa ki Ahipara)
Chris Webber, (Ngati Toa/Raukawa, Te Atiawa)
Geoff Bristowe, (Ngati Awa, hapu Tai Whakaea)

Executive Committee (formerly Headquarters Committee)

Fran McGrath
Iain Potter
Annette Beasley
Helen Glasgow
Helen Bichan
Teenah Handiside

National Office

Dr Gay Keating, director
Noeline Holt, manager

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ANNUAL REPORT FROM THE PRESIDENT

PHA Mission is to improve the health of all New Zealanders by strengthening the organised efforts of society

The year in brief

Since I reported to you at our AGM in Auckland last year members, branch committees, our manager and director, and your Executive have had a full and productive year. Congratulations and our thanks to the Auckland Conference Committee for making the conference a highlight for us all. At the conference we celebrated the enormous contributions to public health, and to health equity of Drs Judith Reinken and George Salmond, acknowledging them as Public Health Champions.

Our main emphasis nationally, has been on policies to improve public health, especially those that aim to reduce health inequalities, on recognising the wider determinants of health, and on how PHA can best honour our commitment to the Treaty of Waitangi. New public health policies have been developed and extensive use made of existing policies in submissions and media statements on behalf of PHA nationally. PHA has supported four people who are now on DHBs or DHB committees, and on the Public Health Advisory Committee. We gave considerable support to making the Public Health Sector Project an effective forum for public health – a vision that needs continued collaborative effort.

We continue to meet and exceed performance expectations against our Ministry of Health Funding Agreement, which continues to September 2003. This is good value for the Ministry because of the multiplier of the large amount of time and expertise gifted through the PHA. Thanks to this agreement, the PHA is a stronger advocate for public health.

It is to the credit of us all that PHA's achievements mean PHA is often spoken of as if it were much larger. In addition to the expertise and time gifted by members, we employ a manager and director (totalling 1.7 fte) and contract communications expertise. Membership numbers have, however, remained flat at around 300. We need a growing membership as a firmer base for the future.

This year with the leadership of the Maori Caucus, the Executive has confirmed a Treaty checklist for use by PHA. We have reviewed some of our internal systems, streamlined and updated the guidance in the Conference handbook to incorporate lessons from recent conferences, and now have a draft sponsorship policy to guide the work of the Fundraising and Sponsorship Subcommittee.

Strategic Priorities

National priorities based on PHA's goals, have continued to:

- address the major factors related to health, including health inequalities
- strengthen the infrastructure for public health
- support the lead of the Maori Caucus to provide leadership in Maori public health
- respond to important public health issues
- build a stronger Public Health Association.

Gay's report as director covers the detail of PHA advocacy. We have continued to speak to the public health implications of economic and social policies, and to urge the government, DHBs, and other bodies to consider the health and other social impacts of policies. Our advocacy to strengthen the public health infrastructure has included supporting the

establishment of the Public Health Advisory Committee of the NHC, nominations for DHBs and DHB committees, and input into the Health Workforce Advisory Committee's work. Branches have supported local DHBs to deepen their understanding of public health. Branches also made submissions to the consultation on the Strategic Action Plan for Public Health, with the result that a Maori Strategic Plan is now being developed. PHA has contributed to the Public Health Sector Project, because of our vision of a forum to enable better communication and to strengthen relationships across the public health sector. This continues to be our vision, which we believe will be achieved collaboratively.

Visitors hosted by PHA this year included keynote speakers at the annual Conference in Auckland, and a delegation from the Swedish National Institute of Public Health who spoke of their vision of 'Health on Equal Terms'.

The reawakened Otago branch has made this year's conference its priority. Their collaboration with local organisations is contributing to a strong and friendly conference. During the year, members have been outspoken on issues, such as advocating a public health approach to gambling, promoting fluoridated water supplies, and increased funding for public health. We have supported action against smoking (smokefree environments, Quit Campaign, Framework Convention), and alcohol harm reduction through submissions and letters.

Treaty Hui

A Hui was held late last year in conjunction with the Executive Council meeting (with branch members invited also), to deepen our understanding and expression of the PHA's commitment to the Treaty of Waitangi. It was a great gathering facilitated by Jacob Tapiata, John Waldon and other members of the Maori caucus, which resulted in a checklist for PHA policy development and activities. One of the ideas that developed was that the Maori Caucus would consider organising a future PHA conference. We are pleased to support the Caucus which has announced that it will host the conference in 2003. Maori Caucus members are located throughout the country and will welcome assistance, particularly from local branch members, with organising the conference.

Financial Wellbeing

Financially we have operated prudently and ensured that our expenditure last year was within our lower annual income. Air fares have increased at the same time as numbers on Executive Council became larger (you will recall this was agreed to ensure representation from Maori Caucus). To reduce costs Executive Council plans to have only two face-to-face strategic meetings (November for review and planning; and at the time of the Conference and AGM), and has set up some subcommittees of Council members and other nominated PHA members:

- Executive Committee –administrative tasks and the staff support role of the Headquarters Committee
- Public Health Policy Committee
- Fundraising and Sponsorship Committee.
- Communications Committee and Conference Guidelines group, which can be called on as needed.

We have made less progress than we had hoped in moving from our historical financial position of living hand-to-mouth (year by year), to a financial position that will enable PHA to be confident that it can be a strong advocate for public health into the future. Achieving this will require us to raise funds over an 8-10 year timeframe with funding additional to our service funding, through donations and sponsorship from individuals and organisations. The

Fundraising and Sponsorship committee has taken on the role of making this a reality. If you have a contribution to make to this, I would be very pleased to hear from you.

What PHA offers to us as Members

Other organisations talk of services to members, but I believe that the main thing we each want from PHA, is a collective voice on public health issues, and the opportunity to make an impact to improve public health.

We each invest our annual subscription (and other donations) so that we have a voice on public health matters; sometimes through the branch or a Special Interest Group, sometimes through statements made on behalf of PHA as a whole.

The PHA News, website and email provide regular public health updates and members' views. PHA's website receives between 6,000-13,000 hits per month with the greatest interest being in our newsletter and policies with increased interest in the conference page as conference date approaches.

Looking Forward

Over the coming 12 months, we will launch our new Population Health Manifesto and use this and other policies to advocate effective action for health and to reduce inequalities. At all levels of the PHA our contribution as members, branches, officers and Executive is to speak out and encourage informed action on public health to support DHBs to be effective. Our new communications support is intended to better support this.

PHA will also be seeking ways to exchange views and deepen relationships across the public health sector.

Our membership base needs to grow, and we need your support and ideas on achieving greater financial autonomy, so that PHA can continue to be a robust evidence-based voice for public health, regardless of political vicissitudes.

PHA national priorities will continue to be addressing health determinants, especially inequalities, and finding more effective ways to have an impact, supporting alliances for health - between the community and public health workers, as well as across the public health sector, intersectoral alliances between central and local government, iwi, Pacific peoples, and other community organisations

Thank you

From me to each of you, from the whole Executive, and from each of us to one another - thank you for your involvement and your contributions, as members, on the branch committee, as Policy Champions or serving on Executive or its committees. We can draw strength from our collective knowledge, commitment and challenge to achieve better health and greater justice.

Dr Fran McGrath, President, Public Health Association of New Zealand

ANNUAL REPORT FROM THE DIRECTOR

The year has been full and interesting. We have continued to fruitfully direct our national efforts in line with the 1999-2004 strategic plan priorities, while being able to respond to some other public health issues as well.

Economic and social inequity and health impacts

The year began with a bang straight after conference when the PHA worked with Plunket to provide seminars for politicians, senior government and NGO managers and policy analysts in Wellington with Clive Hertzmann on the impact of early social conditions on child and subsequent adult health.

The Tax policy adopted at AGM 2001 was put to immediate use in the PHA submission on Taxation.

A regular activity is the PHA submission on the budget policy statement. It is evident that it is having an educational effect on the Members of Parliament who make up the committee. Building on last year's submission, the Members refreshed their knowledge of the linkages between economics and health, and this year discussed the role of health impact assessment of government policy. The budget itself was followed by the now-regular budget breakfast - a forum where a group of public health people analyse the health impacts of the budget.

The PHA exchanged information with members of the Swedish Institute for Public Health during their visit. They learned of the New Zealand approach to tobacco control and gambling control, and at seminars in Auckland and Wellington they shared their experience of reducing inequalities and involving other sectors in health improvement.

I hope many of you saw the PHA TV advertisement on child poverty *Look over your fence*. It was part of the package of free-to-air time on TVNZ, with Whybin TBWA donating their creative time. Most of the package concerned iron deficiency.

The PHA achieved a lot of media attention (including TV and radio) on housing. The two main areas were the healthy housing project in Manukau City, and the relationship of meningococcal disease with overcrowding. This was an area where PHA raised the profile of an issue even though few PHA spokespeople were involved.

Supporting Maori Caucus

There have been two key areas in the past year in PHA work supporting the Maori Caucus. The first is to continue to raise Maori health as an issue which needs attention, and which Maori need to be resourced to respond to. The second is the development by the caucus of a Maori responsiveness policy checklist. This was adopted by the Council and used in the development of draft policies this year. There is scope for wider use of the checklist and background in the PHA.

Action on public health issues

Tobacco control continues to be a focus of effort of the national office and concerned members. Our role is to support the agencies that are taking the lead here. We have done this through sharing information, developing submissions, supporting researchers, and working with others to lobby Commonwealth Ministers.

The PHA has continued to be active in relation to alcohol control, particularly supporting the activities of lead agencies in the area, by attending Select Committees, and writing letters to the media and politicians.

The Climate Change policy adopted at AGM 2001 has been used to formulate the PHA submissions on the Government consultations on the Kyoto Protocol. We are delighted at some of the principles adopted by Government, particularly the concern for low income New Zealanders which we raised in our submissions.

We were pleased to see Government come out with a Bill that met many of the concerns of the PHA policy on gambling. We made submissions on the responsible gambling Bill and on the racing Bill. The PHA extended the influence of the Problem Gambling Conference by actively working with media contacts to get good radio, TV and press coverage.

Members have continued to work collaboratively with others to support fluoridation, and a small amount of media coverage was obtained.

Other issues the PHA has contributed to in the past year were environmental sustainability, breastfeeding, nutrition, injury prevention, effective and accessible primary care, immunisation promotion (including hepatitis B), and Well Child Week.

Public Health infrastructure

The PHA continued to provide media training and media advice for PHA members and to other public health agencies. We have been active in making nominations for membership of DHBs, the National Health Committee, and other Government advisory bodies. We have contributed to the Health Research Council's review of priorities, and to the Health Workforce Advisory Committee reports. The themes of our submissions have been constantly Maori workforce issues, and increasing the training, knowledge, and structures of other health providers so that service can be oriented more to population health outcomes.

At national level and in branches, the PHA has also been working to influence the Ministry of Health and DHBs (both the Board members and key staff) on the future shape of the public health sector and the way that the DHBs carry out their role to improve health. In particular our work as part of the Public Health Sector Project has been significant in shaping Ministry thoughts on a national voice for public health services, and improving communication across the public health sector. In particular the PHA has sought funding to maintain and develop information sharing.

Gay Keating, director, PHA

TREASURER'S REPORT

It is good to be able to report a budget surplus for the 2001-2002 financial year. Despite this pleasing result however, the Association is facing the longer-term challenge of maintaining its current level of operations in the event of funding received for contractual services being withdrawn. The current level of PHA Operations includes administration, communication services etc, that are covered by our contract with the Ministry of Health. If the funding is not renewed, as well as loss of the director's position, the manager's time would return to half-time, and there would be a considerable reduction in the Association's level of functioning. The future financial viability of the Association is, therefore, a key issue confronting the Executive Council who are implementing measures to contain and decrease expenditure as well as examining strategies, which will move towards the longer term goal of funding independence.

Contractual services

The Public Health and Advocacy contract with the Ministry of Health which funds the activities of the director, media communications and its share of operational expenses and 30% of the manager's salary expires in September 2003. We will start discussions about continuing and expanding the current funding with the Public Health Directorate contract manager later this year.

The Public Health Sector project for which the Association acted as secretariat and budget holder finished at the end of February. Matthew Kuch was employed for twelve months under this contract.

Membership

Membership numbers have remained static over the past year and the earlier goal of doubling numbers by the year 2004 looks ambitious. The goal of increasing membership is significant if longer term funding independence is to be realised. The Executive Council recommended at its February meeting an increase of \$10 across all membership categories except the lowest to take effect in the 2002 financial year.

Conference

The Auckland Conference while a great success generated a lower than expected surplus. Although this result may be an aberration, it has signalled the need for more diversified sources of income for the Association. The recently formed Funding and Sponsorship Committee is exploring a number of options.

Reserves

A total of \$164,504 is currently invested in short-term deposits. These investments generated \$10,751 interest during the 2001/02 financial year. The goal of increasing the level of reserve funds is a key aspect in the move towards funding independence.

Acknowledgements

Since being co-opted into the Treasurer's position last September, I have found myself on an interesting and enjoyable learning curve. The support and assistance received from our President, Fran McGrath, members of the Executive Council, manager, Noeline Holt and Accountant, Anne Smith have been most appreciated. Thank you all.

Annette Beasley, Treasurer

MAORI CAUCUS REPORT

He mihi tenei ki a tatou te hunga ora. He tangi hoki ki nga tini mate kua wehe atu ra. No reira kia ora tatou katoa.

It has been a busy year for Maori in public health – this has included DHB nominations, He Korowai Oranga, Maori health strategy, Public Health Action Strategy consultation round and Te Puawaitanga the Māori Mental Health strategic framework input. Māori caucus made a commitment last year to set up an email tree of both Māori members and others to support good information flow and input by members into the workings of the PHA council. Hopefully we have managed to be relatively judicious in filtering mainly the high priority issues so members and affiliates are not overtaxed. Aside from the 'housekeeping' there are some wonderful developments on the go! If you have not been receiving the emails and information please feel free to contact any of us.

Tinorangatiratanga in Public Health....

The Maori Caucus will host the 2003 PHA Conference at Turangawaewae Marae, Ngaruawahia from 2 - 4 July 2003.

The Theme is 'Tinorangatiratanga in Public Health - working with Maori & indigenous values and principles'. Innovation, Leadership & Opportunities (moving from disparities models to wellness models).

The conference committee is exploring the possibility of using Te Pae Mahutonga - Mason Durie's conceptual framework for Maori Health Promotion as the framework for the conference strands.

Treaty hui workshops policy guidelines and checklist

Speaking of frameworks - PHA Executive and Maori Caucus ran a Treaty of Waitangi workshop at Tapu Te Ranga Marae in Wellington in October. Participation by Executive Council was enthusiastic and it was agreed by all, long overdue. It also set the tone for introduction by Maori Caucus of a checklist and guidelines, in developing effective public health policy –designed to encourage responsiveness and support for Maori health gains. Having been introduced, people are now showing interest in working with them! Tumeke!!

Look out for opportunities to participate at this year's conference in Dunedin. The Caucus working group will be meeting midday on the 25th (the day prior to conference) before conducting a full Maori Caucus session on the 26th.

With current members Marty Rogers (being nominated to PHA Vice president), and Geoff Bristowe moving out to focus on other work (Chris Webber is staying on), there are two vacancies to fill. This is a great opportunity to contribute to advancing Maori Public Health, supported by many committed PHA members and staff. Please contact either Chris Webber (cwebber@xtra.co.nz) or Marty Rogers (rogersm@waikatodhb.govt.nz).

No reira e hoa ma, kia kaha ki te whai nga huarahi tika mo to tatou hauora.

Regards - PHA Maori Caucus (Marty Rogers, Chris Webber, Geoff Bristowe)

AUCKLAND BRANCH REPORT

The branch is vibrant (89 members). It is unconventional but enthusiastic. The small group of members who attend meetings are keen to participate in activities on an occasional basis but are keen not to organise branch meetings. At the 2001 AGM Tord Kjellstrom accepted the role of Treasurer but the roles of Chairperson and Secretary were not filled, and following discussions the branch decided not to operate formally. However there is enthusiasm in the branch membership to come together periodically to promote or support local events and activities. The tradition of holding regular meetings with conventional committee positions is not a viable option in a large city with considerable problems for already very busy people. Also these issues plus the development of other public health action arenas has changed the environment for organising regular seminars with speakers. Email has opened the opportunity for other forms of advocacy and participation.

Concern about public health issues in Auckland saw a small group of Auckland members meet several times to organise a half day seminar on 21 March 2002 in association with the Health Promotion Forum on Regional and Local Government and Health Agency Partnerships for Public Health: the Swedish experience. A Swedish delegation from the National Institute of Public Health was visiting New Zealand and the seminar combined their visit with presentations from local government and district health board representatives. The seminar was very successful with a good attendance of around 60 people. Further involvement with local government and district health boards is on the agenda for the future.

In April this year Tord Kjellstrom moved to Canberra and Liz Stewart volunteered to take on the role of Treasurer. At a meeting held 24 May 2002 discussions were held on the following:

- Financing student(s) to the PHA Conference in Dunedin in June 2002 but it was decided it was too late to adequately consult with members and organise scholarships for the 2002 conference.
- Financing a public health advocate for a period of time to advocate for public health issues in the Auckland region. It was decided funding needed to be ongoing and this should be further discussed in the future.

Looking into the future

One suggestion, which will be discussed further within the branch, is to have a public health advocate in Auckland whom the media can contact and who can attend public health-related meetings, liaise with local government etc. This would have to be a paid position. There are a number of public health issues that are emerging in Auckland including:

- Lack of public transport and traffic problems
- Motorway extensions
- Water privatisation
- Air/water pollution
- A rapidly growing diverse population
- Crime
- Poverty

The branch will be canvassed on the support for a public health advocate after the PHA Conference and the AGM.

Trish Fraser, branch representative Executive Council 2001/02.

WAIKATO BRANCH REPORT

Because of the very broad catchment of the branch contact is maintained through the email service. The branch enjoys the contribution of several long-standing members and this year has welcomed new members – a trend the branch is keen to continue.

I have continued to support the policy subcommittee along with Daniel Williams of Canterbury, Chris Laursen, formerly of Waikato and lately Wellington, and PHA director, Gay Keating. Other work has included being involved in the Public Health Sector Project.

The branch was well represented by members, either as individuals or within other organisations, in the consultation process of the SAAPPH document (Strategic and Action Plan for Public Health).

The Maori Caucus is looking at holding a conference in our region and the Waikato branch has pledged to support them.

Dallas Honey, Waikato branch representative Executive Council 2001/02.

Thanks to all the members who have supported the Waikato branch this year. PHA looks forward to a time of growth and success for the branch in 2002/03. *Dallas Honey.*

MANAWATU/WANGANUI BRANCH REPORT

Manawatu-Wanganui branch is in good heart and can already look back on the success of this year's public health seminar series and last year's build up to the election of the DHBs. The branch secured funding from the Health Sponsorship Council to cover some of the costs. All speakers were most generous with their time and we have managed to host excellent presentations on a very modest budget.

The Seminar Series

A seminar series was held to assist with informed debate of public health issues leading up to the elections of the District Health Boards in October 2001. The Palmerston North City Council, Mid Central Health, the Cancer Society and other NGOs provided welcome support-in-kind.

Last year Dr. Don Matheson (Director General of Public Health, Ministry of Health) spoke on *The World Health Assembly 2000 and its Implications For New Zealand*. Dr Matheson described the WHO assembly as the bureaucracy of the WHO. The theme for 2001 was mental health. Deinstitutionalisation was widely discussed in the assembly. Dr Matheson said that the NZ Minister of Health, Annette King, described the good progress made in NZ based on the work done in the community by people with mental illness. The Minister used this to show how a combined approach worked. Before the assembly at *The Meeting of Commonwealth Ministers* the major topic was the recruitment of health professionals. Rules for recruitment were seen as crucial to the management of tobacco control programmes and other public health issues and health services where skilled people are rare.

AGM welcomes guest speakers

At the AGM held August 2001, special guest, Jill White, (Mayor of Palmerston North) spoke on *Public Health Aspects of The Mayoralty*. The Mayor introduced herself as an ex-public health nurse and said it was a good grounding for local body politics. Local government had much it could do in terms of housing and community development. The Mayor also noted that many in need did not have a voice, nor know that they had a right to a voice.

The May 2002 AGM invited Dr Donald Campbell (Medical Officer Of Health/Director of Public Health - MidCentral Health) who spoke on the role of primary healthcare organisations and new roles for nursing in public health using Bloom's suggestion that "Major gains in health have been from Public Health rather than Medical Interventions". Dr Campbell described a number of national and regional public health issues where joint projects would best meet needs in a new era for public health that required re-orienting of provider services.

Treasurer, Prof Nan Kinross attended the Primary Health Care Conference in Wellington.

A copy of the *Health for All Booklet* was sent to all DHB members and local government.

The future

Activities planned for the remainder of the year include organising a public forum to inform the community about Public Health. We are planning fewer but bigger events for this year so watch this space.

Noho ora mai ra.

John Waldon, chairman, PHA (Manawatu/Wanganui branch)

WELLINGTON BRANCH REPORT

The main theme of the Branch's activities this year has been adding value to, and supporting the National Office. Focus has been on:

- supporting the PHA at a national level through the development of PHA policies and advocacy for public health goals ; and
- providing educational and social opportunities at the branch level for members through seminars and other activities.

Submissions

Both as a branch, and through individual members, the Wellington PHA Branch has completed several major pieces of work as a basis for national PHA submissions. Of particular importance were:

- Taxation Review 2001, and a follow up appearance at the Select Committee
- Smokefree Environments (Enhanced Protection) Amendment Bill
- Responsible Gambling Bill, (and appearance at the Select Committee).

Branch and Committee membership

At the Branch's annual general meeting Louise Delany stepped down as chairperson. Eileen Brown and Barbara Langford have taken over as co-chairpersons and Mavis Duncanson continues as Treasurer. Membership is strong at 87.

International advocacy

The Wellington branch followed up its submission on the World Health Organisation's draft Framework Convention on Tobacco Control with participation at the NGO forum at the Commonwealth Health Ministers conference on behalf of the PHA, the Smokefree Coalition, and four other health groups. This involved preparation of a backgrounder on the Draft Framework Convention, development of a set of draft recommendations, and assistance with running the NGO seminar. Our thanks to Louise Delany for her sterling contribution.

Local Advocacy

The Branch organised a Budget Breakfast on the day after the 2002/2003 Budget was released. The event was to provide a public health perspective on the Budget, focusing on the impact of the budget on disadvantaged groups and consequences for socio-economic determinants of health. The event attracted a diverse range of people from unions, community groups, non-governmental organisations, and public health.

At the annual general meeting in November 2001 a seminar was held with guest speakers Margot Mains and Winn Bennett from Capital Coast Health, who gave an interesting and informative talk on their vision of health for the Wellington area. In March this year the Branch assisted the National office with organising a visit from a group from Sweden's National Institute of Public Health.

For the rest of 2002, and beyond, the Branch aims to build on its activities in policy development and advocacy at the local and national levels and, in particular, to begin planning for this year's general election. The branch proposed that PHA provide a monitoring service of upcoming relevant public health legislation, which has been appreciated. It is clear that advances in public health in the widest sense will depend on political initiative.

*Eileen Brown, Barbara Langford Co-Chairpersons PHA (Wellington branch) 2001/02
Louise Delany, Chairperson (2000/01)*

CANTERBURY BRANCH REPORT

Firstly I would like to express thanks Sue Dewe, Daniel Williams and Mary Richardson, the committee members who have decided to stand down. They have all been active members of the Committee. Sue has put endless hours of effort into the PHA, and in her years as local Chairperson and Executive committee member, initiated reviews of organisational and constitutional processes, some of which are only now coming to fruition. Daniel was particularly active on the policy front, writing submissions for the branch and participating in the national Policy Sub-committee. Mary has strengthened our ties with the Christchurch City Council and has been very active in organising public meetings both for the PHA and in collaboration with the council. The highlight was a public meeting where Ichiro Kawachi spoke and there was standing room only.

Review of internal processes

Like all voluntary organisations, our branch activity is often constrained by workplace pressures, increasing workloads and limited 'disposable' time. Despite this, we continue to maintain a reasonable level of activity, some of which is not obvious to the membership. This year we have reviewed some of our internal processes, have set criteria for awarding the conference sponsorship, and have developed a package to send out to new members. We are in the process of developing more effective relationships with the Maori community, and are providing support for a day seminar on Maori public health. This reflects the shift the PHA has made nationally in supporting the Maori Caucus at Executive level, and we are hoping that our local Maori committee members will be able to support the caucus. We have also established further links with the Canterbury District Health Board through a meeting with Jean O'Callaghan. Thanks to both Jean, who is very generous with her time, and Alison Wilkie for being pro-active in setting up the meeting. The branch committee also met with representatives from the Healthy Christchurch initiative and has offered support for the initiative in whatever way we can, given the voluntary nature of the organisation.

Health Promotion Award

During 2001-2002 we ran the Health Promotion Award, which again was successful with high quality applications. It is quite humbling to discover the level of activity in the community, much of it unacknowledged. The award was won by Avonside Girl's High School for their innovative and positively focused Smokechange programme.

Branch sponsorship to conference

The Canterbury branch again provided sponsorship for a community person to attend the 2001 PHA conference in Auckland. Sharon Tortensen from the Council of Social Services received the sponsorship. She found the experience very valuable. Sharon and Adrian Te Patu ran some networking meetings in Christchurch to pass on information from the conference to other community workers.

Our final event for the year was an informal trip to Quail Island one Sunday in April. It was a beautiful sunny day and we had a great time and lots of good conversations. We intend to have more of these 'self-care' networking days, and hope that some of you can join us occasionally.

My thanks to all committee members who have supported the work of our branch, and to you the members, who are the essential part of the organisation.

Vivien Daley, Chairperson, PHA (Canterbury)

Notes

OTAGO/SOUTHLAND BRANCH REPORT

The Otago/Southland branch of the PHA is in very good heart with 32 members and growing.

Panel discussion

At the end of last year a panel presentation on DHB involvement with public health was held. Louise Croot chaired and with Koa Mantell, Ken Buckingham and Warwick Brunton on the panel a lively discussion took place.

Conference team providing valuable support

A small but enthusiastic team is working on organising the National Conference, People and Place, to be held in Dunedin June 26-28th. There has been huge interest in this conference from people wishing to present papers, contribute poster presentations and other conference activities. There has been excellent support from PHA membership and those from other organisations around the country so that we anticipate over 300 delegates will attend the conference.

Our involvement with conference organisation has been the number one priority so that comment on wider policy issues to PHA National Executive has not been possible. We anticipate being able to become more involved in this aspect of PHA work after conference is over.

Branch on its feet

Financially the Branch is in a sound position. We are looking at ways of using this money to continue to raise the profile of public health in the community. Two people have received full sponsorship to conference. The branch committee is unchanged from last year and we are delighted to have Louise Croot representing us on National Executive.

Marion Poore, Secretary, PHA (Otago/Southland)