



Health Coalition
Aotearoa

2023 ANNUAL REPORT AND AGM

Better health. Fairer outcomes. Protected children.

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AGM 2023 AGENDA

Date: Monday 11 September 2023

Time: 10.30am – 12noon

Venue: ZOOM Virtual AGM

Attendees: AGM is open to all Health Coalition Aotearoa (HCA) members and free to attend virtually.

Agenda

1. Karakia, welcome, opening remarks and acknowledgement of attendees
2. Checking of quorum and Zoom housekeeping
3. Receiving of minutes of previous (2022) AGM
4. Co-chairs' report
5. Treasurer's report and annual financial statements
6. Questions from members on chair and treasurer's reports
7. Rōpū Apārangi Waipiro (Alcohol Expert Panel) report
8. Food Expert Panel report
9. Public Health Infrastructure Expert Panel report
10. Smoke-free Expert Advisory Group report
11. Questions from members on expert panel reports
12. Membership update and fees 2024
13. Any other motions to be considered
14. General business
15. AGM speakers
 - Rob Campbell – Chancellor Auckland University of Technology and independent director
 - Selah Hart – Maiaka Hāpori | Deputy Chief Executive Public and Population, Health Te Aka Whai Ora
16. Karakia and close

Zoom codes will be sent to registered attendees by email prior to the meeting.



AGM 2022 MINUTES

MINUTES of the Annual General Meeting (AGM)

2:20pm Friday 5 August 2022

Present:

Jason Alexander – Hāpai Te Hauora	Jennifer Lawless – Health Coalition Aotearoa (Executive Director)
Robert Beaglehole – Individual	Sally Liggins – Individual (Treasurer)
Grant Berghan – Public Health Association of New Zealand	Warren Lindberg – Individual
Ruth Bonita-Beaglehole – Individual	Janine Luke-Taamaru – Cancer Society of New Zealand Central Districts Division
Linda Buxton – Individual	Barbara Lusk – Individual
Sally Casswell – Individual	Bonnie Lynch – Individual
Belinda Castles – Consumer NZ (Secretary)	Sally Mackay – Individual
Cristina Cleghorn – Individual	Catherine Manning – Individual
Rose Crossin – Individual	Dave Monro – National Heart Foundation
Angela Culpin – Individual	Cherry Morgan – Individual
Sarah Dalton – Association of Salaried Medical Specialists (ASMS)	Dario Penetito-Hemara – Toi Tangata
Katherine Daniel – Individual	Cassie Pui – Individual
Grant Dixon – Evidence Based Eating New Zealand	Steve Randerson – Individual
Richard Edwards – Individual	Emma Rawson-Te Patu – Individual
Victoria Egli – Individual	Elaine Rush – Individual
Benjamin Eitelberg – The Lentil Intervention	Claire Salter – Individual
Paulien Fa'atafa – Individual	Fa'sisila Savila – Individual
Bridget Forsyth – Individual	Matt Shand – Association of Salaried Medical Specialists (ASMS)
Sarah Gerritsen – Individual	Tania Sharkey – Individual
Melissa-Jade Gregan – Individual	Grace Shaw – Individual
Mike Jenkin – Individual	Fiona Sing – Individual
Cara Hafner – New Zealand Breastfeeding Alliance	Jaspreet Singh – Individual
Caitlin Haliburton – Individual	Boyd Swinburn – Individual (Chair)
Catherine Hall – Alzheimers New Zealand	Emmeline Taptiklis – Individual
Selah Hart – Hāpai Te Hauora	Lisa Te Morenga – Individual
Janet Hoek – Individual	Adrian Te Patu – Individual
Sally Hughes – Healthy Auckland Together	Heather Verry – Diabetes New Zealand
Catherine Humphrey – Individual	Karen Wright – Individual
Clare King – Individual	Leanne Young – Individual
Crystal Lau – Cancer Society of New Zealand Central Districts Division	



AGM 2022 MINUTES CONTINUED

The meeting commenced at 2:20pm.

Apologies

Janet Holborow – Open Forum for Health Information

1. Open and welcome

Boyd Swinburn opened the meeting and welcomed those present in-person and online. Boyd confirmed the quorum was met.

2. Minutes of previous meeting

Minutes of previous AGM (Friday 1 October 2021) were accepted as a true and accurate record.

Motion from the Chair that the previous minutes be accepted; All in favour.

3. Matters arising

The consideration of gambling as a public health issue: Boyd advised that HCA currently had no capacity to progress this issue.

Conflict-of-interest issues within public health agency governance appointments and government policy-making processes. Boyd advised this has not been progressed but would remain on HCA's agenda.

4. Chair's report

Boyd Swinburn tabled his Chair's report. Boyd thanked everyone for their contributions, including Board members and Expert Panel members. Boyd acknowledged the work of previous Board members Jennie Connor and Raawiri Ratuu as well as Warren Lindberg and Collin Tukuitonga who are both stepping down from the HCA Board. Boyd thanked Matt Shand, the Helen Clark Foundation's Health Equity Fellow funded by the MAS Foundation, and acknowledged the value of his communications expertise he brought to HCA. Boyd wished Matt all the best for his new role as

ASMS. Boyd acknowledged the huge contribution Jennifer Lawless Executive Director had made in the past year. Many structures are now in place and she has contributed to a number of campaign activities across all the Expert Panels. Boyd advised he was pleased to present to members two key proposals – the Te Tiriti Responsiveness Framework and membership fees proposal. Boyd advised a key priority for the year ahead was ensuring sustainable funding for HCA.

Motion from the Chair that the report be accepted; All members in favour.

5. Treasurer's report and Annual Financial Statements

Sally Liggins presented the Treasurer's report and annual financial statements for the 2021/2022 financial year. Sally advised the majority of our income had come from two large grants from the MAS Foundation (to fund a Health Equity Fellow) and Jasmine Social Investments (to assist employing an Executive Director). The remainder of income mainly comes from members making regular or one-off donations. Sally advised it was a challenging time for charitable organisations and at the end of this financial year HCA will have a \$40K real-terms gap below reserves. Sally advised this was not unexpected based on our projections but also because we have implemented a reserves policy. Sally advised to be sustainable we need more financial resources and a fundraising strategy will be a priority after the AGM. This will involve convening a fundraising sub-committee. Sally advised to sustain our activities and impact, we also need to employ more people, including a part-time fundraiser and are initially aiming to fundraise \$100K (for the projected deficit and fundraiser role). Sally thanked organisational members for their donations to date.

Motion from the Chair that the Treasurer's Report and Annual Financial Statements be accepted. Seconded by Lisa Te Morenga. All members in favour.



AGM 2022 MINUTES CONTINUED

6. Rōpū Apārangi Waipiro (Alcohol Expert Panel) report

Sally Casswell (chair) introduced members of the rōpū and thanked them for their contribution. Sally advised it was a crucial time for alcohol advocacy with regards to the Review of the Sale and Supply of Alcohol Act. The rōpū is working to ensure the review gives effect to Te Tiriti, regulates a complete ban on alcohol marketing, shorter trading hours, increases the drinking age, and replaces local alcohol policies and the reform licensing process. Sally acknowledged the work of Nicki Jackson getting councils to support the bill banning alcohol sponsorship in sports and a full evidence-based review of the Sale and Supply of Alcohol Act. Sally advised the rōpū will be working to ensure the alcohol levy is used for alcohol policy and that an alcohol unit is established within the public health agency. Other priorities include the claims currently before the Waitangi Tribunals and global initiatives such as the Global Alcohol Action Plan.

7. Food Expert Panel report

Lisa Te Morenga (co-chair) introduced members of the panel. Lisa advised it has been a very busy time for the panel. The panel's priorities have been supporting the alliance to protect children from exposure to unhealthy food and drink marketing, and supporting the work of the Aotearoa Circle in the development of a National Food Strategy. Lisa advised there has been a considerable number of submissions this year including FSANZ consultations and the healthy food and drinks submission. Lisa advised, with the help of Matt Shand, the panel has generated a significant amount of media. Lisa acknowledged the huge amount of work Jennifer Lawless, Fiona Sing and Angela Culpin had done in the junk food marketing space.

8. Smoke-Free Expert Advisory Group report

Sally Liggins (chair) introduced the members of the Panel including the Te Rōpū Māori within the group. Sally thanked the rōpū for supporting her as the chair. Sally advised the group was a large group with diverse views which lead to robust discussions. A key piece of work has been the submission on the Smoke-free 2025 Action Plan Discussion Document and the group was preparing to submit on the Smoke-free Environments and Regulated Products (Smoked Tobacco) Amendment Bill (submissions close on 24th August) and will be requesting an oral submission. Sally advised very low nicotine cigarettes, decreasing the retail supply and the Smoke-free Generation are pivotal strategies for tobacco harm reduction. Sally advised the panel would be supporting the implementation of the Bill, recommending the timeframes be tightened, ensuring Te Tiriti obligations are met and Tangata Whenua are consulted. Sally advised the panel does have some concerns about how vaping availability is addressed in the Bill and the lack of detail in the primary Bill, which is a vulnerability.

9. Public Health Infrastructure Expert Panel report

Grant Berghan (co-chair) introduced panel members. Grant advised it had been a busy year with the introduction of the Pae Ora Bill. The group took a lead role in developing a submission guide, which was widely used. Grant advised many of the panel's recommendations were taken up in the legislation. Grant advised the next step for the panel is to collaborate and respond to the New Zealand Health Charter and the health strategies that will come out of the Charter. Grant advised the panel will regroup in 2022/23 with new members and two new co-chairs.

Boyd Swinburn thanked the four Expert Panels for the huge amount of work they have undertaken in the past year, particularly with the number of submissions that have been submitted on behalf of HCA.



AGM 2022 MINUTES CONTINUED

10. Board nominations

Boyd advised the Board was nominating Grant Berghan and Tania Sharkey as new Board members.

Motion from the Chair that nominations are passed. All members in favour.

Boyd advised that with Sir Collin Tukuitonga stepping down from the Board we will be looking to secure a Pacific representative. Boyd advised the Board can co-opt an appropriate person for this position.

11. Te Tiriti Responsiveness Framework

Boyd advised that at last year's AGM a resolution was passed that HCA would embark on a process with members to define how it will promote and reflect Te Tiriti o Waitangi within its work. Boyd advised this process has been led by Lisa Te Morenga. Lisa presented the policy and outlined the background to its development. Lisa advised the committee was clear we are a Te Tiriti o Waitangi principles-led organisation, but not a Treaty partner. Lisa advised the principles of Te Tiriti o Waitangi were drawn on rather than the Treaty of Waitangi. Consultation meetings with Tangata Whenua and Tangata Tiriti members were held and these consultations shaped the document. Lisa advised the document has translated principles into actions which will guide how HCA operates such as having a Māori co-chair on the Board and expert panels but recognising Māori in public health positions are often stretched and alternatives may be necessary such as having a Māori rōpū to help guide decisions. Lisa advised this policy will sit under all our other policies such as the Expert Panel Terms of Reference. Jenn Lawless thanked Lisa and her rōpū for their considerable work on this framework. Boyd advised this is a live document we can adopt over time. Lisa welcomed feedback on the document.

There was a request that a glossary be added about where the terms come from and a disclaimer that this group does not need to be consulted on all issues as it may sometimes be more appropriate to consult with Mana Whenua (local iwi or rūnanga) organisations. There was a request that some of the definitions be revisited.

Motion from the Chair that there is general support for the framework but there is a need to revisit some of the issues raised. Seconded by Lisa. All in favour.

12. Membership Fee Structure Proposal

Boyd tabled the graduated membership fee structure proposal. For individuals, the fee was based on annual income, for organisations the fee was based on the number of employees up to \$3K with a disclaimer that large organisations in which improving health and health equity were core objectives may contribute higher amounts. There was also the opportunity for in-kind support for time or other resources on a case-by-case basis. Boyd advised the proposal would be undertaken this year and may assist us to secure additional grants or philanthropic funding.

Motion from the Chair that the membership fee structure proposal is accepted and implemented this year. Seconded by Lisa. All in favour.

13. Close of meeting

Boyd thanked Jenn Lawless for the huge contribution she has made as Executive Director. Boyd advised Jenn is a tremendous asset to HCA and thanked her for pulling this event together.

Boyd thanked members for their attendance and requested members donate to keep HCA sustainable.

Boyd closed the meeting at 3:33pm.



CO-CHAIRS' REPORT



Health Coalition
Aotearoa



Kia ora koutou katoa,

We are pleased to present the co-chair's report for Health Coalition Aotearoa (HCA) covering the period since our last AGM in September 2022. It has been another busy and productive year, with activity intensifying on all fronts as we approach the October election. We all sense the opportunity to advocate for evidence-based policies that will protect New Zealanders from preventable harm.

We want to acknowledge HCA staff in ensuring a smooth transition at a time of change. We have welcomed acting executive director Faye Langdon while Jenn Lawless is on parental leave. We've also welcomed Cate Macintosh to the role of senior communications lead.

We're very thankful for the incredible commitment of our board, expert panel members and HCA members to this important mahi. The achievements of each of our four expert panels are outlined in their reports. Of particular note are: the support and advice we are providing the Government for its world-leading tobacco control regulations; our strong advocacy to have the Sale and Supply of Alcohol Act reviewed; the release of the 4th Food-EPI report which measures government progress on the implementation of food policies and recommends the top priorities for the incoming government, and the project to address the lobbying power of harmful industries and achieve a fairer policymaking playing field with funding support from the Gama Foundation.

The considered, evidence-led expertise that HCA offers on key prevention policies is being increasingly recognised by politicians, officials, the media and the public. We were able to platform our collective power and voice in the Prevention Brief, outlining the top policy priorities for the next government, ahead of the election.

The Brief has provided an excellent springboard for discussion and has been picked up by national media. We hosted a political panel on prevention, in partnership with the University of Otago, Wellington and the Public Health Communications Centre, to discuss the priority policies in the Brief. This provided another key opportunity to generate debate on the best prevention policies to improve health and health equity, and a platform for the public health community to connect with politicians.

Our organisational systems have been improving. A new paid membership strategy came into effect from April, 2023 to support the growth of HCA's capacity and expertise. A progressive, three-level structure for organisational membership fees was introduced, based on full-time-equivalent (FTE) staff. Individual membership fees are based on income brackets. Our fundraising has improved but needs to increase substantially further if we are to reach our aspirations to run several simultaneous campaigns on priority prevention policies.

The board farewelled Professor Sally Casswell, and Tania Sharkey. We thank them both for their significant contributions and insights. Hāpai te Hauora chief executive Jason Alexander joined the board. He brings huge mana and expertise to the table. Steve Randerson from Massey University SHORE & Whariki Research Centre and Karen Wright, senior lecturer at University of Auckland Te Kupenga Hauora Māori (Māori Health) took up co-chair roles for the Rōpū Apārangi Waipiro (Alcohol Expert Panel). Hāpai te Hauora Tobacco Control Advocacy team lead, Leitu Tufuga, became chair of the Smoke-free Expert Advisory Panel.



Professor Boyd Swinburn



Associate Professor Lisa Te Morenga



TREASURER'S REPORT

This is a report on the financial activities of HCA for the 2023 financial year including income, expenditure, the 2023 annual surplus and current financial reserves. This summary is based on the un-audited accounts for the year ending 31 March 2023. HCA is a Tier 3 reporting organisation to the Charities Services.

Financial Accounts

The financial year being reported on is 1st April 2022 – 31st March 2023. All figures quoted in this report are in NZD and exclusive of GST. The comments below should be read in conjunction with the HCA 2023 Financial Accounts.

Highlights

- The 2023 accumulated surplus of \$102,201 enables HCA to meet projected budget for the next financial year presented to board YE 2022, and establish a fundraising plan with targeted donors and a goal of \$300,000 for the last two quarters of 2024 year.
- Tiered membership fee structure was approved at the 2022 AGM and a membership recruitment strategy has been implemented from April 2023 with \$19,800 received with a goal of \$30,000 for YE 2024.
- HCA income of \$307,426 was significantly higher from YE2022 of \$163,829 due to increased grants from MAS Foundation and Gamma Foundation.
- Expenses increased by 40% due to employment of another .5 FTE position to support HCA communications and research, and delivering a 2022 conference for members.

Income

- Compared to the 2022 financial year overall income was up by just over \$143,597 or 45%.
- HCA donation income of \$59,295 (\$78,829) was significantly down due to a one off significant donation YE 2021 however our “Pensioners to Preventioners” will be a donation strategy that we will grow as part of an HCA integrated fundraising plan.

Expenses

Employee related expenses were up by 40% with appointment of further .5 FTE staff member.

Forum expenses up significantly with the inaugural annual Forum delivered for members.

Project and research expenses increased with part of the MAS Foundation grant contracted role assigned to these areas.

IT and Phone expenses were up by 40% at \$2377 with appointment of a further staff member.

Our biggest expense category is salaries and contractors, which is about three quarters of all expenses and consumes over 50% of income. We expect expenses in this category will remain at this level for YE 2024 and continue to increase as we grow income and employ further staff to support the growth of HCA.

Surplus

- There was a surplus of \$102,201 more than the previous year's which was a deficit of (\$52,427). This surplus results from the above factors of increased grant income.



TREASURER'S REPORT CONTINUED

Financial Reserves

HCA has sufficient reserves to continue its operations for the foreseeable future. Having a financial reserve of \$127,500 places HCA in a good position to meet any unanticipated expenditure or drops in income for the next year. The focus is to grow the reserves to have one year's operating expenditure in reserves by YE 2025.

Future Funding

To be sustainable HCA needs to keep a focus on diversified income streams from foundations, high net worth corporate partners and increased financial support from its nearly 40-plus member organisations. HCA funders have an expectation that HCA members should be continuing to grow fiscal income and joint funding initiatives to support HCA collective activities.

Regulatory compliance

HCA will register for GST YE 2024 due to increased contractor and supplier expenditure that is GST Inclusive.

HCA is incorporated under the Incorporated Societies Act 1908 in Aotearoa New Zealand and is registered as an Incorporated Society by the New Zealand Companies Office (NZCO) The 2023 HCA Charities Service return is due to be completed by the 30th September 2023 and will be made following the AGM.

The Charities Amendment Bill, which passed in the Committee of the Whole House on 20 June 2023 will, if enacted, introduce new governance and reporting requirements for registered charities to remain qualified for registration, like the maintenance of charitable purposes, who is qualified to act as officers and the wording of rules document (constitution). The Executive is keeping abreast of these changes and any potential impact on HCA.

Thanks

As Treasurer I manage HCA finances through the contributions of many people. I'd like to express my appreciation to Jenn Lawless, Executive Director on maternity leave, Acting Executive Director Faye Langdon, Board Secretary Belinda Castles who is generous, quick to respond and completely dependable. I really enjoy working with her. Thanks, Belinda. I'd also like to thank Board Co-chairs Boyd Swinburn and Lisa Te Morenga who have kept HCA finances in order.

Motions

Annual Accounts – That the financial accounts for the year March 31, 2023, are accepted and approved.

David Galler, HCA Treasurer



ANNUAL FINANCIAL STATEMENTS YE 2023



Health Coalition
Aotearoa



Entity Information

Health Coalition Aotearoa

For the year ended 31 March 2023

'Who are we?', 'Why do we exist?'

Legal Name of Entity

Health Coalition Aotearoa

Entity Type and Legal Basis

Health Coalition Aotearoa is an Incorporated Society and a Registered Charity.

Registration Number

CC56881

Entity's Purpose or Mission

The main purpose of the Society is to benefit the community by promoting health for all New Zealanders, especially through the prevention of harm from the unhealthy products of tobacco, alcohol and unhealthy foods (as defined by the World Health Organisation). The Society will advance health education and promotion by using scientific analyses, a variety of communication approaches, and anything necessary or helpful to achieve its main purpose.

Entity Structure

Health Coalition Aotearoa is an Incorporated Society. There are two types of Society membership: organisational and individual. The members elect the Board at its AGM and the Board elects the positions of Chair, Secretary, and Treasurer. The Board is the governing body. Expert Panels provide advisory input.

Board Members

Belinda Castles, Secretary

Dr David Galler, Treasurer

Professor Boyd Swinburn, Chair

Jason Alexander

Sally Liggins

Tania Sharkey

Associate Professor Lisa Te Morenga

Professor Sally Casswell

Grant Berghan

Main Sources of Entity's Cash and Resources

Donations

Main Methods Used by Entity to Raise Funds

Donations and Grants

Additional Information

Contact Nos: Boyd Swinburn, 0221679636

Email Address

b.swinburn@healthcoalition.org.nz; secretary@healthcoalition.org.nz

Website Address

<https://www.healthcoalition.org.nz/>



Approval of Financial Report

Health Coalition Aotearoa

For the year ended 31 March 2023

Cash Basis

The Directors are pleased to present the approved financial report including the historical financial statements of Health Coalition Aotearoa for year ended 31 March 2023.

APPROVED



Name: Dr David Galler, Treasurer

Date: 4 August, 2023



Name: Professor Boyd Swinburn, Co-Chair

Date: 4 August, 2023

Statement of Service Performance

Health Coalition Aotearoa

For the year ended 31 March 2023

'What did we do?', 'When did we do it?'

Description of Entity's Outcomes

Health Coalition Aotearoa in the 2022-2023 financial year hosted its first ever Conference alongside the AGM in August, at Parliament Buildings in Wellington. HCA renewed the Jasmine Social investments grant for another financial year for provision of an ED, and renewed and extended the MASF Grant for a communications staffer, which was brought in-house. This allowed; the continuation of communications functions in the media to raise public awareness; new research into public attitudes to nutrition initiatives; an increase in member newsletters; the completion of HCA's internal policy suite, and moving to a quarterly cycle of Board meetings whilst welcoming three new Board members and a Board Co-Chair model. Membership fees were endorsed at the AGM for introduction in the 2023-2024 financial year. The Coalition's Expert Panels formalised their membership with Terms of Reference endorsed by the Board, and produced a number of expert submissions and a submission guide for members and the general public to engage in health determinant issues from a community perspective which were well-received and widely used.

Description and Quantification of the Entity's Outputs

HCA expert panel submissions on health evidence included the Food Policy Expert Panel's evidence brief to the Ministry of Education's consultation on healthy drinks in schools, alongside a public submission guide to help parents, health practitioners, teachers and children engage in the consultation by explaining the issues in appropriate language. This submission guide was downloaded by over 100 individuals and organisations and we believe was used by around 1/3 of submitters to the consultation. The food panel launched a petition to double investment in the Ka Ora Ka Ako Healthy School lunches programme following new research commissioned by the group showing high concerns around the cost of healthy food and support for the programme. Research was also conducted by focus groups into the attitudes of parents towards protecting kids from junk free marketing and appropriate language for whānau in this space. The Smokefree Expert Advisory Group submitted to the Ministry of Health's Proposals for the Smoked Tobacco Regulatory Regime, and to the Submission on Smokefree Environments and Regulated Products (Smoked Tobacco) Amendment Bill, including presenting to Select Committee. This group also promoted the Cancer Society's submission guides on the Bill, Hāpai te Hauora's community engagement stalls and did media around te ao Māori research and concerns on youth vaping. The Roopuu Apaarangi Waipiro alcohol expert panel provided a submission to the Sale and Supply of Alcohol (Community Participation) Amendment Bill and made this available to members and the public online. The HCA Conference in August was delivered in hybrid format to around 170 members and guests, including the Minister and Associate Minister of Health and leading experts nationally and internationally in the fields of preventing harm from commercial determinants of health. This was an opportunity to share research and open dialogue amongst the public health community on priority issues facing communities in Aotearoa grappling with the impact of tobacco, alcohol and unhealthy food. Members endorsed at the Conference HCA's Te Tiriti Responsiveness Framework following a series of hui with members. This Framework is also publicly available and provides a model for public health organisations wishing to develop equity interventions which constitutionally honour Aotearoa's bicultural commitments to hauora. In March 2023, HCA launched a policy document outlining recommendations for regulating lobbying and increasing policy-making transparency in Aotearoa, after conducting a workshop and consultation with domestic experts thanks to a small grant from the GAMA Foundation. This work aims to provide greater regulation and transparency over the harmful impact of commercial industry's involvement in alcohol and unhealthy food policy in Aotearoa in particular, as is already the case for tobacco industry involvement which is regulated by international conventions.

Additional Output Measures

HCA produced a number of news updates for members, including events from member organisations, news, action alerts and education opportunities. Database contacts increased to around 4000 entries thanks to active campaigns. Panel members and chairs engaged in numerous media interviews, and HCA began development of a media training package specific to health professionals needing to communicate complicated public health information to the public in a compelling and effective way.



Statement of Financial Performance

Health Coalition Aotearoa

For the year ended 31 March 2023

'How was it funded?' and 'What did it cost?'

Account	Notes	2023	2022
Revenue			
Donations, fundraising and other similar revenue	1	307,426	163,829
Revenue from providing goods or services	1	-	-
Other revenue	1	-	-
Total Revenue		307,426	163,829
Expenses			
Volunteer and employee related costs	2	164,009	115,857
Costs related to providing goods or service	2	41,216	25,399
Grants made - The Helen Clark Foundation	2	-	75,000
Total Expenses		205,225	216,256
Surplus/(Deficit) for the Year		102,201	(52,427)

This statement has been prepared without conducting an audit or review engagement, and should be read in conjunction with the attached Compilation Report.



Statement of Financial Position

Health Coalition Aotearoa

As at 31 March 2023

'What the entity owns?' and 'What the entity owes?'

Account	Notes	31-Mar-23	31-Mar-22
Assets			
Current Assets			
Bank Accounts	3	380,602	211,025
Total Current Assets		380,602	211,025
Total Assets		380,602	211,025
Liabilities			
Current Liabilities			
Sundry Accruals		-	3,464
Employee Related		4,711	5,709
Visa Accounts		366	-
Deferred Grants	4	171,472	100,000
Total Current Liabilities		176,549	109,173
Total Assets less Total Liabilities (Net Assets)			
		204,053	101,852
Accumulated Funds			
Accumulated surpluses or (deficits)	5	204,053	101,852
Total Accumulated Funds		204,053	101,852

This statement has been prepared without conducting an audit or review engagement, and should be read in conjunction with the attached Compilation Report.



Statement of Cash Flows

Health Coalition Aotearoa

For the year ended 31 March 2023

Account	2023	2022
Cash Flows from Operating Activities		
Donations, fundraising and other similar receipts	379,264	263,830
Cash receipts from other operating activities	-	-
Payments to suppliers and employees	(209,687)	(132,084)
Grant Payments	0	(75,000)
Total Cash Flows from Operating Activities	169,577	56,746
Cash Flows from Investing and Financing Activities		
Operaitng Reserve	127,500	
Trasnfer from retianed earnings to operaitng reserve	(127,500)	
Total Cash Flows from Investing and Financing Activities	0	
Net Increase/(Decrease) in Cash	169,577	56,746
Bank Accounts and Cash		
Opening cash	211,025	154,279
Net increase/(decrease) in Cash	169,577	56,746
Closing cash	380,602	211,025

This statement has been prepared without conducting an audit or review engagement, and should be read in conjunction with the attached Compilation Report.



Statement of Accounting Policies

Health Coalition Aotearoa

For the year ended 31 March 2023

'How did we do our accounting?'

Basis of Preparation

The entity has elected to apply PBE SFR-A (NFP) Public Benefit Entity Simple Format Reporting - Accrual (Not-For-Profit) on the basis that it does not have public accountability and has total annual expenses equal to or less than \$2,000,000. All transactions in the Performance Report are reported using the accrual basis of accounting. The Performance Report is prepared under the assumption that the entity will continue to operate in the foreseeable future.

Goods and Services Tax (GST)

The entity is not registered for GST. Therefore all amounts are stated inclusive of GST (if any).

Income Tax

Health Coalition Aotearoa is wholly exempt from New Zealand income tax having fully complied with all statutory conditions for these exemptions.

Bank Accounts and Cash

Bank accounts and cash in the Statement of Cash Flows comprise cash balances and bank balances (including short term deposits) with original maturities of 90 days or less.

Changes in Accounting Policies

There have been no changes in accounting policies. Policies have been applied on a consistent basis with those of the previous reporting period.



Notes to the Performance Report

Health Coalition Aotearoa
For the year ended 31 March 2023

	2023	2022
		\$
1. Analysis of Revenue		
Donations, fundraising and other similar revenue		
Grants - Jasmine Charitable Trust	100,000	100,000
Grants - Medical Assurance Society NZ	170,000	85,000
Grants - Hapai	8,695	-
Grants - The Gama Foundation	17,000	-
less Deferred Grants	(71,472)	(100,000)
Donations	59,295	78,829
Event Funders and registrations	23,908	-
Total Donations, fundraising and other similar revenue	307,426	163,829
Revenue from providing goods or services		
		-
Other revenue		
Other Income		-
Total Other revenue		-
2. Analysis of Expenses		
Volunteer and employee related costs		
Recruitment Expenses	1,165	-
Salaries	162,404	115,857
ACC Levy	440	-
Total Volunteer and employee related costs	164,009	115,857
Costs related to providing goods or services		
AGM and Forum	14,236	4,600
Bank Fees & Interest	25	14
Board Meetings	-	535
Catering External Meetings	-	223
Contractors	4,250	6,893
Subs and Compliance Expenses	98	1,131
Office Operating Costs	0	203
Professional Services	4,664	4,878
Project Expenses	8,530	-
Research and role support MAS position	5,507	-
Small Office Equipment	-	1,675
Telephone & IT Services	2,377	1,499
Training and Development	300	1,486
Travel (ED)	21	1,202
Website	1,208	1,060
Total Costs related to providing goods or services	41,216	25,399
Grants made		
Grants made	-	75,000
3. Analysis of Assets		
Current Assets		
Health Coalition Aotearoa - 00	372,694	211,025
Health Coalition Aotearoa - 01	7,908	-
Total Current Assets	380,602	211,025
4. Deferred Income		
Jasmine Foundation	100,000	100,000
MAS Grant	56,667	-
Hapai Grant	4,445	-
The Gama Foundation	10,360	-
Total Deferred Income	171,472	100,000
5. Accumulated Funds		
Accumulated Funds		
Opening Balance	101,852	154,279
Accumulated surpluses or (deficits)	102,201	(52,427)
Transfers to Reserves	(127,500)	0
Operating Reserve	127,500	0
Total Accumulated Funds	204,053	101,852
6. Commitments		
There are no commitments as at 31 March 2023 (Last year - nil).		
7. Related Parties		
There were no transactions involving related parties during the financial year.		
8. Events After the Balance Date		
There were no events that have occurred after the balance date that would have a material impact on the Performance Report (Last year - nil).		



EXPERT PANEL REPORTS



Health Coalition
Aotearoa



SMOKE-FREE EXPERT ADVISORY GROUP



The Smoke-free Expert Advisory Group has been focused on making written and oral submissions to the [Smokefree Environments and Regulated Products \(Smoked Tobacco\) Amendment Act](#) and on firming up our position on vaping.

The amendments to the Smokefree Environments and Regulated Products (Smoked Tobacco) Act – which became law in November, 2022 – included many of the recommendations from our panel, and the wider sector of tobacco-control NGOs. The Bill's passing was celebrated by members of the panel as world-leading legislation, and a huge achievement for Aotearoa's smoke-free movement.

The amendments included limiting smoked tobacco retailers to no more than 600, preventing tobacco from being sold to anyone born on or after January 1, 2009, and reducing the nicotine levels in tobacco products.

These measures will help to reduce health inequities and reach the Smoke-free 2025 goal of less than 5 per cent smoking for all population groups. The panel will be working to ensure the laws come into effect as soon as possible.

While continuing activism to achieve Smoke-free 2025, the panel has responded to the alarming growth in youth vaping. Between January and March 2023, the panel prepared written recommendations to the Ministry of Health's consultation on proposed regulations to tighten restrictions on vaping products. The intention of the regulations was to improve product safety and halt and reverse the rapidly rising rates of youth vaping.

Among the measures called for by the HCA Smoke-free Expert Advisory Group were: Strengthening the approvals process for specialist vape retailers (SVRs); SVR approval to include consideration of proximity to schools, kura kaupapa, ECE centres, kohanga reo and other venues where children and youth gather; robust age verification processes and reducing the upper limit of nicotine to 20mg/mL across all vaping products.

The recommended measures were largely absent from the new smoked tobacco and vaping policies announced by Minister of Health Ayesha Verrall on June 6, 2023.

Concerns about the issue have escalated with widespread media coverage of groups calling for urgent action to strengthen vaping regulations.

The Smoke-free Expert Advisory Group supports the banning of disposable vapes, which are used mainly by young people. The Ministry responded to the outcry by further amending the original regulations, but we are concerned provisions are still too weak to provide adequate protections, especially for tamariki and rangitahi. We are also calling for additional funding to ensure high compliance, as it appears most public health units do not have capacity to monitor and enforce R18 restrictions.

The expert panel is developing a media strategy to balance advocacy for vaping regulations that ensure supply for cessation from smoking while also better protecting youth from vaping addiction.

Our top priorities for HCA's Prevention Brief are: Full implementation of the Smokefree Environments and Regulated Products Act (1990), including monitoring and enforcement of the measures, and evaluation of their impact; fully funding Māori-led initiatives to reduce smoking; effective regulations to ensure that rangatahi and young adults are better protected from vaping-related harms.

Leitu Tufuga
Chair, Smoke-free Expert Advisory Group



RŌPŪ APĀRANGI WAIPIRO (ALCOHOL EXPERT PANEL)



Key solutions proven to minimise alcohol harm have been clearly identified and largely unchanged over recent decades. Policies to reduce affordability, restrict exposure to advertising, and limit the availability of alcohol remain largely unadopted in Aotearoa.

The Sale and Supply of Alcohol Act (SSAA) 2012 remains central to alcohol licensing, and changes to enhance community participation and strengthen Local Alcohol Policies (LAPs) are proposed in the SSAA 'Community Participation' Amendment Bill 2023.

Of concern, Te Tiriti o Waitangi remains a notable omission in alcohol law, limiting the involvement and self-determination of Māori over alcohol environments. The Waitangi Tribunal Claim Wai 2624 brought by David Raawiri Ratu, which focuses on alcohol harm to Māori whānau, hapū, iwi, and hapori, remains a critical development. Central to this claim is the disproportionate impact of alcohol on Māori communities, including Fetal Alcohol Spectrum Disorder (FASD), and the inadequate policy response.

Rōpū actions are therefore centred around pro-equity policy interventions including amending the SSAA to embed Te Tiriti o Waitangi, increasing alcohol taxes to reduce affordability, banning alcohol marketing, and stronger action to prevent FASD and support affected families.

Update on policy actions

Following calls for a wider review of the SSAA we celebrated the Government's December 2022 announcement of a process to review marketing, price, licensing structures and procedures and LAPs. Although most of the review scope was later deferred, the Community Participation Bill is set to remove the special appeals process through which many LAPs were challenged by the alcohol industry. The bill will also remove some of the barriers to participation for those who object to alcohol licences.

Rōpū members supported consistency in community and organisational submissions to the Community Participation Bill in sector hui, in addition to media advocacy and **written** and oral submissions. The Justice Select Committee report took up suggestions advocated by the rōpū, but did not adopt specific actions to embed Te Tiriti in the SSAA.

The panel continued its advocacy for change this year in Health Coalition Aotearoa (HCA) **media releases** and press interviews, with particular emphasis on continuing the **alcohol law review**, **local government policy** and regulation of lobbyists. The rōpū is actively developing and implementing a communications strategy to support community mobilisation for further reform of the SSAA and wider policy measures to reduce alcohol harm.

The rōpū made a recent submission to the Department of Internal Affairs online platforms consultation, calling for a complete ban of online alcohol marketing backed by an independent regulator with enforcement powers.

The alcohol levy (approximately \$11.5 million annually) is under review, and rōpū members are advocating for this to be spent on activities that minimise alcohol-related harm and increase health equity.

Current membership

This year we have had some changes to the rōpū membership and leadership. Steve Randerson and Karen Wright became co-chairs in February, 2023. Antonia Lyons (UoA), Emma Shields (Cancer Society), Sarah Sneyd (Alcohol Health Watch) and Rebecca Williams (Alcohol Healthwatch) all joined as members in 2023.

The rōpū farewelled Sally Casswell (Massey University), Nicki Jackson (Alcohol Healthwatch), Sally Liggins (Massey University) and Valerie McGinn (FASD Can) in 2023. We thank them for their huge contribution to this mahi.

Steve Randerson and Karen Wright

Co-chairs, Rōpū Apārangī Waipiro (Alcohol Expert Panel)



FOOD EXPERT PANEL



Our panel continues to grow, and we now have 15 members, of whom five are Tangata Whenua with one also representing a tangata whenua organisation. Two members are Tangata Te Moana Nui a Kiwa. Members have extensive expertise in public health nutrition and health working for NGOs, Government, Public Health Units and academia.

Our major focus over the last year has been the school food environment, in particular advocating for the expansion of Ka Ora, Ka Ako – the Government’s free healthy school lunch programme, and for a healthy food and drinks-only policy in all schools. Ka Ora, Ka Ako is available to one-quarter of students and while the criteria is socioeconomic need, many children living in food insecure households do not attend eligible schools. We ran a petition to have Ka Ora, Ka Ako expanded to provide lunch for at least 50 per cent of children. The petition was signed by more than 850 individuals and 100 schools and handed to MP Camilla Belich at Parliament on June 29, 2023, accompanied by children from Ngāti Toa School (Porirua).

The Ministry of Education consultation on ‘Proposed changes to the promotion and provision of healthy drinks in schools’ was a good opportunity to express the collective voice and expertise of the panel in a submission. HCA made an OIA request for all submissions and these were publicly released. A majority of submitters called for a healthy foods and drinks only policy for all schools, however the Government limited regulations to a healthy drink only policy for primary schools. The Government signalled they will gather evidence on the impact of a healthy drink-only regulation on secondary schools.

The Food-Epi report is a benchmarking tool to assess government policies and actions on healthy food environments. The fourth Food-Epi, involving 60 experts, was conducted this year as a joint initiative with the University of Auckland with the assistance of University of Otago MAppSc (nutrition) student Hinako Percival. The Food-Epi showed that there has been little progress by Government. We recommended a food

systems and nutrition strategy guided by an updated national nutrition survey, and mandatory restrictions on marketing of unhealthy food to children, school food provision, fiscal levers to make healthy food accessible for those who can’t afford it and food composition targets. The proposed actions were presented to the Public Health Advisory Committee and to Minister Verrall and gained media attention.

We have been involved in a trans-Tasman working group advocating for Food Standards Australia and New Zealand (FSANZ) to develop added sugar labelling. Progress is slow, but strong relationships built within the working group will support continued advocacy.

Food expert panel members have been busy with media, particularly Lisa Te Morenga highlighting the Ka Ora, Ka Ako petition and speaking on general food environment issues. Food-Epi received good coverage with Sally Mackay. We are getting increasing pick-up in Maori and Pacific media, which reflects on our application of the HCA Te Tiriti Policy.

Our top three food policy priorities for the next three years were published recently in the HCA Prevention Brief.

1. Develop and implement a package of fiscal levers by 2025 as part of a wider strategy to reduce the absolute and relative cost of healthy food
2. Expand Ka Ora, Ka Ako to reach at least 50 per cent of school children by 2025 and introduce a duty on schools and kura to provide only healthy food and drinks
3. Legislate to protect children from exposure to all forms of unhealthy food marketing in the places they learn, live and play

Sally McKay and Lisa Te Morenga
Co-chairs, Food Expert Advisory Panel



PUBLIC HEALTH INFRASTRUCTURE EXPERT PANEL



Public health infrastructure is the systems, resources and institutions that support and promote the health and well-being of populations, prevent diseases and respond to public health emergencies. The rōpū has focussed on promoting strong collaboration between governmental and non-governmental sectors which we believe is fundamental to achieve effective public health infrastructure.

The Pae Ora health reforms have launched major changes to the management of public health, making it a challenging policy and advocacy landscape. The National Public Health Service, has replaced twelve public health units. The Health Promotion Forum, Te Hiringa Hauora is managed by Te Whatu Ora, but also provides services to Te Aka Whai Ora (Māori Health Authority). An independent Public Health Advisory Group has been established to provide advice to the government.

Amidst this time of change, members of the panel attended the inaugural meeting of government public health agencies and representatives of the public health NGO sector in Wellington on July 3, 2023. NGO sector representatives, including HCA, were updated on the public health sector reform process, and the hui provided a much-needed starting point for knowledge exchange between the groups.

The rōpū took significant steps to address the lobbying power of harmful industries and achieve a fairer policymaking playing field with funding support from the Gama Foundation. This included a workshop with policy and health experts and development of the key policy changes required. In July, HCA signed another funding contract with the foundation, for a concerted campaign over 12 months to achieve the strongest protection for public policymaking as possible.

We believe there will be many more opportunities in the local government space over the next 12 months, especially if recommendations by an independent review of the sector are adopted. This includes an expanded mandate, and aspiration, for local authorities to improve the social and environmental determinants of health. This intersects with the work of HCA to reduce harm from alcohol, tobacco, and junk food. These changes give new possibilities, to strengthen influence and impact in local communities. This will also be the case with Te Whatu Ora locality groups and Iwi Maori Partnership Boards.

The rōpū's priority policies for public health infrastructure are:

1. Strengthening the management of commercial conflicts of interest
2. Protecting the right of public sector employees to publicly advocate for evidence-based policy change
3. Building a stronger public health ecosystem to improve health equity, especially by protecting the mandate of Te Aka Whai Ora
4. Strengthening relationships between government public health agencies and external agencies including NGO's, academia, and health unions

Our infrastructure rōpū has nine members, with Dr David Galler and Grant Berghan co-chairing. We will be seeking a representative from Local Government New Zealand to join the panel before the end of the year.

David Galler and Grant Berghan
Co-chairs, Public Health Infrastructure Expert Panel



HOW YOU CAN SUPPORT HEALTH COALITION AOTEAROA

Our mahi is only as strong as the communities and organisations that we work alongside. Here are ways that you can amplify our kaupapa and advocate for a healthier, more equitable Aotearoa New Zealand:

- Write to your MP and local councillors about how these products impact on you, your whānau, and local community.
- Identify opportunities for harm prevention in your community. Take the idea of junk-free and kid-safe zones free from harmful advertising to your local school board, to community leaders and health and neighbourhood organisations.
- Sign up as a member of Health Coalition Aotearoa, other public health groups or your health union and professional colleges to make your voice count. Share this brief and other HCA news and submissions with your colleagues and networks, and connect interested organisations.
- Share with HCA the work and new research you're doing on public health prevention and make it available to our expert panels – info@healthcoalition.org.nz
- Be a voice for public health in your community and in the media. If you are willing to speak out for health equity and prevention, drop a line to media@healthcoalition.org.nz
- Health Coalition Aotearoa chooses not to be government funded so we can be an independent voice for the community. With the centralisation of health services, we are one of the few strong, evidence-based voices left for public health in Aotearoa.
- This means we need your support to keep running effective events, publications, and campaigns that put health evidence and the needs of our communities before the interests of health-harming industries.

Here's how you can support:

Membership

You can sign up as an individual member, or get your organisation to sign up as an HCA member. Being a member allows you to attend member-only events, display an organisational logo on our website and yours, vote at our AGM, and most importantly connects you with other champions for health equity and public health.

Preventioners

Financial donors are our 'Preventioners' – the life-blood of our prevention effort. Without them, we could not operate to create healthier environments for current and future generations. We especially welcome super-annuitants who are willing and financially able to donate some or all of their superannuation to Health Coalition Aotearoa and become our Super-Preventioners. To learn more please email your contact details to b.swinburn@healthcoalition.org.nz to arrange a personal phone call.

Direct donations

Alternatively, you can make a one-off direct donation to:

Kiwibank, Health Coalition Aotearoa Incorporated,
38-9020-0796051-00, ref 'donation'.

Visit our donation page for more information about becoming a preventioner or donor.



All members support the mission and goals of the Health Coalition Aotearoa but maintain their independent voice on the details of recommended actions.





Health Coalition
Aotearoa

Contact | Email: info@healthcoalition.org.nz