

27 March 2017

annualbudget@aucklandcouncil.govt.nz

Submission to Auckland Council's 2017/2018 Annual Budget consultation

Thank you for the opportunity for Auckland Regional Public Health Service (ARPHS) to provide a submission on Auckland Council's Annual Budget 2017/2018.

The following submission represents the views of ARPHS and does not necessarily reflect the views of the three District Health Boards it serves. Please refer to Appendix 1 for more information on ARPHS.

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Yours faithfully,

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1. ARPHS acknowledges the priority that Auckland Council has placed on quality public open spaces, community wellbeing and the future for children and young people in New Zealand's largest city. This is reflected by Council's Long Term Plan (2015-2025) and more broadly, the strategic directions of the Auckland Plan.
2. Given this, and in relation to the 2017/2018 annual budget, ARPHS wishes to emphasise:
 - the importance of continuing action in tobacco control, and
 - the need for strengthening and effective implementation of Auckland Council's Smoke-free Policy – which aims to increase smoke-free public outdoor spaces across the region.
3. The current public health agenda takes an integrated approach, addressing disease prevention within the broader context of promoting and encouraging healthy living. This is particularly salient in the urban environment, where quality open and public spaces are a critical component for supporting healthy lifestyles.
4. Significant and consistent evidence clearly demonstrates that comprehensive smoke-free policies reduce exposure of workers and the general population to second hand smoke and have high public support and compliance levels – without negative economic effects on business. Rather, benefits that accrue to businesses include increased productivity, reduced maintenance and cleaning costs and health care savings. These policies also generate reductions in prevalence and consumption among smokers and support improved health outcomes.¹²³
5. Exposure to second hand smoke from burning tobacco products causes disease and premature death. There is no risk-free level of second hand smoke, and even brief exposure can cause immediate harm.⁴ Ongoing action is necessary to ensure that favourable trends in reducing smoking prevalence continue; and that tobacco control remains a high priority for action by government, local councils, the private sector and the community.
6. Auckland Council's 2016 review of its Smoke-free Policy highlighted areas for further improvement, and strengthening resources for local boards. The Regional Strategy and Policy Committee's commitment to honour these recommendations and support an equitable approach to policy implementation, and commencement of a smoke-free by-law process is pleasing. It would therefore seem reasonable to allocate an implementation budget to the smoke-free policy and that it be included in baseline budgets from 2017/2018 onward, presenting a consistent and integrated approach to sustaining this important activity.
7. We know that while much has been achieved in tobacco control, there is still a great deal to be done. ARPHS would very much like to see Auckland Council continue its leadership role in keeping tobacco control high on the public health agenda. Equally, ARPHS intends to support this project and continue working collaboratively with Auckland Council and other government and non-government partners to build further constituent support for its implementation.
8. Thank you for the opportunity to submit on Auckland Council's Annual Budget 2017/2018.

¹ International Agency for Research on Cancer (IARC). [IARC Handbooks of Cancer Prevention, Tobacco Control, Vol. 13: Evaluating the Effectiveness of Smoke-Free Policies](#). Lyon, France: WHO, 2009

² Goodman PG, Haw S, Kabir Z, Clancy L. Are There Health Benefits Associated With Comprehensive Smoke-Free Laws?. *International Journal of Public Health* 2009; 54:367–78

³ U.S. National Cancer Institute and World Health Organization. [The Economics of Tobacco and Tobacco Control. National Cancer Institute Tobacco Control Monograph 21](#). NIH Publication No. 16-CA-8029A. Bethesda, MD: U.S. Department of Health and Human Services, National Institutes of Health, National Cancer Institute; and Geneva, CH: World Health Organization; 2016.

⁴ U.S. Department of Health and Human Services. [The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General](#). Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006

Appendix 1 - Auckland Regional Public Health Service

Auckland Regional Public Health Service (ARPHS) provides public health services for the three district health boards (DHBs) in the Auckland region (Counties Manukau Health and Auckland and Waitemata District Health Boards).

ARPHS has a statutory obligation under the New Zealand Public Health and Disability Act 2000 to improve, promote and protect the health of people and communities in the Auckland region. The Medical Officer of Health has an enforcement and regulatory role under the Health Act 1956 and other legislative designations to protect the health of the community.

ARPHS' primary role is to improve population health. It actively seeks to influence any initiatives or proposals that may affect population health in the Auckland region to maximise their positive impact and minimise possible negative effects on population health.

The Auckland region faces a number of public health challenges through changing demographics, increasingly diverse communities, increasing incidence of lifestyle-related health conditions such as obesity and type 2 diabetes, infrastructure requirements, the balancing of transport needs, and the reconciliation of urban design and urban intensification issues.

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