

# Healthier Lives National Science Challenge: Policy Inventory

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## 1. Executive Summary:

This report represents a 'landscape' of government health policy documents in Aotearoa New Zealand specific to the interests of the Healthier Lives National Science Challenge (HLNSC). After an environmental scan of 48 government outputs, we focused in on 15 based on their direct relevance to the work of Healthier Lives. The criteria for selection can be found preceding the inventory. In this report we provide a summary table and text of each of the listed policies, outlining in each the priorities and strategic goals outlined by the Ministry of Health and any potential gaps in the policy coverage.

Our analysis suggests there is a lack of cohesive Action Plans for all of the Healthier Lives target disease states, with the exception being cancer. In that case, the 2019-2029 Cancer Action Plan and concurrent establishment of the Cancer Control Agency has as its focus an objective to "*provide strong central leadership and oversight of cancer control*".

By contrast, the other disease targets of the Healthier Lives Projects have Action Plans that have now lapsed (diabetes); are lacking plans but have suggested action through the provision of guidelines (Obesity and Healthy Food and Drink Guidelines); or have no stated vision or plan of action (cardiovascular disease).

There is a strong focus across all New Zealand health policy documents on ensuring better health outcomes for Māori and Pacific peoples. In addition, the Ministry's Whakamaua: Māori Health Action Plan 2020-25 and Ola Manuia: Pacific Health and Wellbeing Plan address aspirations for bettering Māori and Pacific peoples' health outcomes, which are recognised as currently and historically inequitable. This suggests that the focus by Healthier Lives on culturally centred health interventions for Māori and Pacific peoples means that Healthier Lives research is well-aligned with health research in these strategies and across the Ministry.

Better provision of data and information, and increased utility of this data for patients, clinicians, and researchers is given a new focus in the Ministry of Health's Data and Information Strategy for Health and Disability. Published in 2021, the Strategy emphasises the goal of promoting patient use and access to health data alongside the ability to utilise macro data for research.

The current Health and Disability system restructure, a result of the Health and Disability System Review initiated by the current government (and chaired by Heather Simpson), provides a new opportunity for the provision of healthcare, as well as for research input into the system. This review appears to be a potential watershed moment in how healthcare is provided and organised in Aotearoa New Zealand. The final report notably asks for better alignment with the New Zealand Health Research Strategy, and a better influence of health research on policy and service.

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## 2. Introduction and Methodology

What follows are targeted analyses and summaries of fifteen policies identified as connected to the research ambitions of the Healthier Lives National Science Challenge. These summaries aim to capture the key elements that are relevant to Healthier Lives project topics and identify where opportunities for further research-policy engagement might be possible. These are complemented with tables to demonstrate where research themes and support platforms intersect with relevant policy documents.

The report's appendices include the full policy table and a summary of the budget, election, and policy cycles to indicate potential windows of opportunity for influencing policy.

The remainder of this section outlines the methodology for the report and includes criteria for eligibility for inclusion. These methods were developed from the Healthier Lives Report Brief and in consultation with the Healthier Lives National Science Challenge team at the Universities of Otago and Auckland.

The Report Brief provided the following terms of reference:

1. identify major relevant policies, strategies, and guidelines;
2. summarise and capture key information including department owner of policy, date introduced/revised, category (type of document), and online availability;
3. map them to the relevant Healthier Lives' research theme;
4. produce a list that is searchable by disease, research theme and category;
5. identify outdated policies or key policy gaps.

The scope of the report was set to focus on "official, publicly-available government policies" including high level strategy or guidelines. The relation of these policies to target diseases was important.

An environmental scan was conducted using the Ministry of Health website. This scan used keywords relating to the target diseases for the Healthier Lives National Science Challenge – specifically cancer, diabetes, obesity, and cardiovascular. Initial scoping of these reports for relevance was conducted, and additional policies that were referenced were also investigated. Strategies and Action Plans were prioritised for inclusion, with the knowledge that they provide the high-level vision, objectives as well as proposed implementation and timelines associated with the government's priorities. An initial scan was conducted in November 2021 with a follow up in February 2022.

Documents were excluded for several reasons. Clinical guidelines were omitted as they did not signal government policy, rather they provide Ministry approved best practice guidelines. Evaluation reports were read to assess any relevance for the gap analysis, although these tended to focus on specific health programmes, rather than assessing whether the aims of a government's strategy or Action Plan were

achieved. Documents outside of government were excluded as they did not necessarily represent central governmental action.

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### **3. Policy Inventory**

This Policy Inventory provides a list of relevant policies identified for the Healthier Lives National Science Challenge. Each policy summary includes a hyperlink which links to the policy document on the Ministry of Health website. The areas/goals/aims of the policy are directly quoted.<sup>1</sup>

#### **Living Well with Diabetes (2015-2020, Ministry of Health Action Plan)**

The 'Living Well with Diabetes' Action Plan was in place between 2015 and 2020 and outlined key actions for people at high risk or living with diabetes. This plan primarily focuses on health services, and does not address wider sociocultural and economic drivers of diabetes. There are six priority areas:

1. Prevent high-risk people from developing type 2 diabetes
2. Enable effective self-management
3. Improve quality of services
4. Detect diabetes early and reduce the risk of complications
5. Provide integrated care
6. Meet the needs of children and adults with type 1 diabetes

This Action Plan recognises the unequal burden of Diabetes on Māori and Pacific peoples and in principle, seeks to reduce this disparity. The better use of data is suggested as a way to increase patient agency, and big data is included as a way of measuring outcomes. Wider policy aims refer to increased service provision and the ability to enable self-management.

This plan has now lapsed and at the time of this report being finalised, no public announcement had been made regarding renewal or replacement.

#### **Ola Manuia: Pacific Health and Wellbeing Action Plan (2020-2025, Ministry of Health Action Plan)**

Ola Manuia is currently active as an Action Plan to bettering Pacific health. The Action Plan promotes resilience, increases in life expectancy, and equitable health outcomes. There are three outcomes across the plan:

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<sup>1</sup> Note: Future research may involve a deep dive into the reference list and sources used for health policy documents so as to ascertain the level of influence by Healthier Lives National Science Challenge

Pacific peoples:

1. Lead independent and resilient lives
2. Live longer in good health
3. Have equitable health outcomes

This Action Plan places importance on empowerment of Pacific peoples to advocate for good health, have a responsive health system, and to be able to better access to health services.

Data is a prominent theme in the document. Big data is expected to assist with tracking the progress of this strategy, as well as to support decision-making and planning with the goal of improving Pacific health outcomes. Pacific data sovereignty is mentioned as essential to this.

This report ties to goals specified within the Ministry for Pacific Peoples report - [Pacific Aotearoa: Lalanga Fou](#). This report, while not included in here, is noteworthy with the aim of "Healthy Pacific Communities" – noting better health services are needed for Pacific families, especially children, and that Pacific leadership and involvement in the health workforce is crucial.

### **Whakamaua: Māori Health Action Plan (2020-2025, MoH Action Plan)**

Whakamaua builds on He Korowai Oranga: The Māori Health Strategy<sup>2</sup>, with an overall goal to achieving Pae Ora – envisioned healthy futures for Māori.

There are four main outcomes:

1. Iwi, hapū, whānau and Māori communities can exercise their authority to improve their health and wellbeing
2. The health and disability system is fair and sustainable and delivers more equitable outcomes for Māori
3. The health and disability system addresses racism and discrimination in all its forms
4. The inclusion and protection of Mātauranga Māori throughout the health and disability system

From this, there are four main objectives:

1. Accelerate and spread the delivery of Kaupapa Māori and whanau centred services
2. Shift cultural and social norms
3. Reduce health inequities and health loss for Māori

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<sup>2</sup> He Korowai Oranga refers to the ongoing iterations of the policy that has set strategic direction for Māori health development. The aims of He Korowai Oranga are considered each strategy, with the Māori health action plan then guiding the implementation of these aims.

#### 4. Strengthen system accountability settings

Target diseases named are diabetes, with equitable – and ultimately reduced – rates of diabetes as a named outcome measure of this action plan. Other outcome measures are targeted at better mental health support, more timely and accessible healthcare, and increased representation of Māori in leadership, governance, and health research. There is otherwise a broader focus on Māori health outcomes. Priority Area 7: Insights and Evidence is directly relevant to Healthier Lives research – with a named focus on designing and implementing a Māori health and disability research agenda that contributes to achieving pae ora in partnership with Māori. This includes a named focus on design and implementation of an approach that upholds Māori data sovereignty.<sup>3</sup>

### **Data and Information Strategy for Health and Disability (2021, MoH Strategy)**

The Data and Information Strategy for Health and Disability strategy lays out the development required in the health sector for a fully functional and integrated health data framework. The strategy acknowledges the ad hoc nature of the current system, and the need for coordination to better both patient access and utility of data, as well as for administration, governance, research, and clinical purposes.

There are five priorities for improvement:

1. Data Foundations
2. Equity and Data Sovereignty
3. Consumer Participation
4. People and Leadership
5. Data and Information Accessibility.

The strategy recognises the need for better data access for health research, while maintaining privacy and ethical concerns. The strategy is largely underpinned with values placed on equity, and ensuring Māori Data Sovereignty.

This strategy feeds into Healthier Lives focus on big data. While there is a large focus on patient data access, the use of data on a macro level for research and analytics appears also of prime interest within this strategy, and innovation is largely encouraged.

The [Roadmap](#) for implementing this strategy relays practical steps in a multi-year timeline. In this timeline, there is a target to “develop a new national data service to support research, analytics, and innovation”. The Ministry seek to develop a multi-disciplinary team to steward this, and also to further develop data services requirements, and data governance processes.

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<sup>3</sup> Māori Data Sovereignty refers to the inherent rights and interests that Māori have in relation to the collection ownership and application of Māori data (Te Mana Raraunga: Māori Data Sovereignty Network, 2018: [Download PDF](#))

## **New Zealand Cancer Action Plan (2019-2029, MoH Action Plan)**

The New Zealand Cancer Action Plan is a recent Action Plan that aims to improve cancer care across many different domains. There are four overarching principles:

1. Equity-led
2. Knowledge-driven
3. Outcomes-focused
4. Person and Whānau centred.

There are four key outcomes:

New Zealanders:

1. Have a system that delivers consistent and modern cancer care
2. Experience equitable cancer outcomes
3. Have few cancers
4. Have better cancer survival, supportive care, and end-of-life care

The focus for this Action Plan is broad, and many goals are centred around improvement of service provision. There is a stated aim to develop a detailed Cancer Data and Information Plan, and to partner with government, the health sector, academia, and international experts to collaborate and coordinate information.

Furthermore, there is an outcome targeted on 'Research and Innovation', which speaks to having well-informed cancer research priorities, coordination of New Zealand-wide cancer research, and an improved capacity for Kaupapa Māori and Pacific research and evaluation.

This outcome seeks to place cancer research as a complement to the broader New Zealand health research strategy, and for the coordination of research to improve clinical practice and the impact of cancer specifically for Māori, Pacific peoples, and 'other priority populations.' This suggests a potential research-to-practice pathway is desired, though the action to this is not stated.

This outcome has a strong equity component, which ties to Healthier lives target of culturally centred health interventions for Māori and Pacific peoples.

Lastly, there is a recognition of the broader factors that contribute to elevated risks of cancer, this includes physical activity, nutrition, and obesity. These factors are common across the Healthier Lives target diseases. As this is a relatively recent Action Plan it is not yet possible to identify impacts.

## **Ministry of Health and Cancer Control Agency Annual Report 2020-2021 (to June 30, 2021) [MoH, Report]**

The 2020/21 Annual Report for the Ministry shows a pronounced focus on COVID-19, with the vaccine rollout being a significant undertaking for the Ministry. Meanwhile, equity is discussed significantly with regard to implementation of Whakamaua, and general preparatory work for the implementation of policy plans for Māori health provision.

There is mention of Health and Disability data, with its' use being primarily being for the development of online tools.

Te Aho O Te Kahu: The Cancer Control Agency is a newly established independent departmental agency hosted by the Ministry of Health but reporting directly to the Minister of Health<sup>4</sup>. It is essentially in a growth phase, with the Cancer Action Plan aims being continued and developed. There is discussion of data intelligence capability, with the CanShare programme leading to better ability to use data. There has also been a contribution by the Cancer Control Agency to supporting research grants, specifically for lung cancer, and for patient experience research among Māori and Pacific peoples.

### **Cancer Control Agency: Cancer Prevention Report (2022, Report)**

The Cancer Prevention Report identifies six domains where cancer prevention can be targeted:

1. Tobacco
2. Alcohol
3. Poor Nutrition and Excess Body Weight
4. Insufficient Physical Activity
5. Excessive exposure to ultraviolet radiation (sun)
6. Chronic infections (*Helicobacter pylori*, human papillomavirus, hepatitis B, hepatitis C, human immunodeficiency virus)

The prevention report largely notes the role of these factors in cancer development. The report also discusses policy actions that are evidence-based best practice and compares with those currently in action in the New Zealand context. The report does not explicitly identify gaps in evidence, nor does it seek to question research deficits, but in the comparison between evidence and policy does suggest deficits in policy action. It is not a policy document in terms of setting out action, rather it appears as a Research and Evidence report, with a collation of current knowledge and action.

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<sup>4</sup> <https://teaho.govt.nz/about>

## **Healthy Eating – Healthy Action: Oranga Kai – Oranga Pumau: A strategic framework (MoH, Strategy, 2003)**

Healthy Eating – Healthy Action: Oranga Kai – Oranga Pumau is the health strategy addressing physical inactivity and poor nutrition. This action plan is now significantly outdated, with no publicly available renewal or replacement strategy.

This plan specifically targets the diseases of interest to Healthier Lives, including diabetes, obesity, cancer, and cardiovascular disease. There are three goals and six approaches to these goals.

Goals:

1. Improve Nutrition
2. Increase Physical Activity
3. Reduce Obesity

Approaches:

1. Build healthy public policy
2. Create supportive environments
3. Strengthen community action
4. Develop personal skills
5. Reorient services and programmes
6. Monitor, research, and evaluate.

This strategy does discuss research as being an important cornerstone into understanding whether interventions are working, and how to target services to both increase and promote physical activity, and healthy diets.

Notably, the [Strategy's implementation plan](#) does seek to develop a research agenda relevant to policy development and service delivery, for this research to be targeted to priority populations (including Māori and Pacific peoples), and for dissemination of this research. The [implementation plan](#) also prioritises this research by the Health Research Council and specific research on:

- Mechanisms for behavioural change with a population-based approach
- Prevention of obesity
- Interventions for Māori communities

It appears that an evaluation of this strategy was not completed.

## **New Zealand Health Strategy, 2016 (MoH, Strategy)**

The last published New Zealand Health Strategy is from 2016. It speaks broadly to aspirations for the health sector across five strategic themes:

1. People-powered
2. Closer to home
3. Value and high performance
4. One team
5. Smart system

Integrated health systems that achieve positive outcomes for patients are given focus in this strategy. Research is considered necessary and ideally would be publicly accessible and easily disseminated.

The current status of this strategy is not clear, and we were unable to source an evaluation report, nor an indication of whether these themes remain priorities. The impending Health and Disability sector reform that is underway as a result of the Health and Disability System Review (2020) is likely to reset the strategic themes for the health sector (see below).

## Other Notable Documents:

These documents outline areas of priority for the Government. They give context to overarching plans, but are not strictly related to priority areas for Healthier Lives. These policies have potential for research impact.

### **Health and Disability System Review Final Report: (MoH 2020)**

The Health and Disability System review has been a large project for the current government which has culminated in upcoming systemic changes to the provision of health care in New Zealand. This represents a shift in the way that health care is structured. In particular, this review brings renewed focus to new means of achieving health equity, particularly for Māori and Pacific peoples.

There is a stated aim for the health and disability system to link with the Health Research strategy, and for an investment in health research. Significantly, the report calls for the Health and Disability system to **"Build and Strengthen pathways for translating research findings into policy and practice"**. This suggests that Healthier Lives' aim to better translate research to policy is a shared aim.

### **Child and Youth Wellbeing Plan: (Department of Prime Minister and Cabinet, 2019)**

This aligns with child wellbeing as well as Child Poverty Reduction. The Department of Prime Minister and Cabinet contains the Child Poverty Unit and Child Wellbeing Unit. Actions taken in childhood can have significant impact on reducing adult incidence of Healthier Lives target diseases. Therefore, research into preventative measures would be of interest to the goals of this Plan.

## Strategic Intentions 2021-2025 (MoH, Report)

This document outlines the strategic planning for the ministry for 2021-2025. Notably, this document outlines ongoing policy work in Equity, and in the upcoming Health and Disability system review. This report signals new intentions will be forthcoming at the end of 2022 with the new implementation of the Health and Disability system. It can be suggested that a more generative area of influence for Healthier Lives could be the new Strategic Intentions upon their publication in 2022.

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### 4. Gap Analysis

This section outlines identified gaps in policy coverage. In this report a “gap” refers to either missing or inactive policy, or policies that appear to omit potential items of interest. These gaps can be connected to Healthier Lives research themes, target diseases or general gaps that appear of interest in terms of data, equity, and substance. The objective is to identify potential avenues for research input and impact. However, we do not provide recommendations on how to achieve this. We do provide some reflections and additional information regarding the context for policy impact in Appendix Two.

#### **Broad Overview:**

Primarily, there is a policy gap for several target disease states of Healthier Lives. Cardiovascular disease and obesity do not currently have National Action Plans, despite the known burden of these illnesses on New Zealanders. There is an identified gap in Diabetes policy as the latest Action Plan has now lapsed. The latest Cancer Action Plan provides a focus on prevention, which may overshadow other objectives, which some research experts might view as a gap.

#### **Cardiovascular Disease:**

Cardiovascular disease has no Action Plan nor history of policy, though it is addressed in other health policies for disease risk factors (e.g. tobacco smoking, healthy eating, physical activity). There is therefore, a gap in the creation of a coordinated policy response and strategy for cardiovascular disease.

#### **Obesity:**

Obesity has been discussed in policy as early as in the 2001 New Zealand Health Strategy, but there is no coordinated action plan to address obesity. Secondary policy such as the Eating and Activity Guidelines address the importance of a healthy diet and adequate physical activity, and the previous Healthy Eating – Healthy Action strategy was designed with a focus on obesity prevention and treatment, but patients who have progressed to obesity are currently addressed via clinical guidelines, and there is no overarching strategy for how to reduce obesity rates, despite knowledge of the widespread socioeconomic determinants. Prevention of obesity therefore has a policy gap.

## **Diabetes:**

The Diabetes Action Plan: Living Well with Diabetes lapsed in 2020, with no public announcement yet made (at the time of writing) regarding its replacement or renewal. This leaves uncertainties about whether these stated aims have been renewed, whether future strategies around diabetes will be influenced by the Living Well with Diabetes plan, and what action will be advanced to ensure positive diabetes outcomes.

## **Cancer:**

The latest Cancer Action Plan and the establishment of the Cancer Control Agency indicates a renewed policy focus for cancer. As a new agency, there appears to be an opportunity to align research with the Agency's objectives, and with targets identified in the Cancer Action Plan including:

- Increasing involvement in benchmarking opportunities and building collaborative and coordinated information
- Facilitating research that is relevant and innovative to cancer control and identifying areas where specific research is needed in a timely manner
- Develop and support Kaupapa Māori research, monitoring, and evaluation
- Develop and support Pacific research, monitoring, and evaluation
- Better understand and implement evidence based supportive and palliative care research.

Furthermore, relating to precision medicine, the Cancer Action Plan seeks to develop national processes for research to inform evidence-based interventions, including pathways for personalised medicine, and a focus on research into rurality on cancer outcomes.

The Cancer Action plan notes the long-lead times in translating research into policy, and the detriment of this for the future wellbeing of New Zealand.

## **Health Research and Data:**

A common theme across multiple policies is the need for better accessibility and utility of health research, and the need for better research-to-evidence pathways. This signals a recognised gap in this area, and one that Healthier Lives may have the opportunity to contribute to.

There is a gap in the mention of how the IDI could be utilised to support health research and contribute to better analytics and evaluation, with macro data often mentioned, but no pathways to utilisation suggested.

The Data and Information Strategy notes the need for implementation of data standards as well as assistance in developing guidance on storing and accessing data with respect to data sovereignty and consumer rights.

## **Culturally centred health interventions for Māori and Pacific Peoples:**

Whakamaua seeks to reduce the disparity between the health of Māori and non-Māori. It is a document with outcome measures targeted at bettering Māori health in multiple domains and across different sectors. With the new Māori health agency in development, and this action plan in relative newness, it is currently hard to

assess the level of progress towards these aims. It can be suggested that review of the outcome measures for evaluation and any gaps in translating policy to practice are best completed following the new Health and Disability system setup and implementation, with the new Māori health authority providing potential opportunities for funding, and development of new Māori specific health services and provision.

Notably, disease states mentioned are gout and diabetes, with no mention of obesity, or cardiovascular disease. The action plan does reference cancer care, but delegates this responsibility into the Cancer Action plan.

Ola Manuia notes a need for identification of the gaps in service provision, and a better understanding of where service delivery and health need is failing for Pacific peoples. The health inequities are well documented and recognised – the action plan asks that a deeper understanding of these gaps is gained.

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## 5. Conclusion and Reflections

This report has identified relevant policies to the work of the Healthier Lives National Science Challenge and provided a landscape of the policy for non-communicable disease in Aotearoa New Zealand. Gaps have been identified in policy coverage, and also gaps of interest to Healthier Lives as potential spaces of influence.

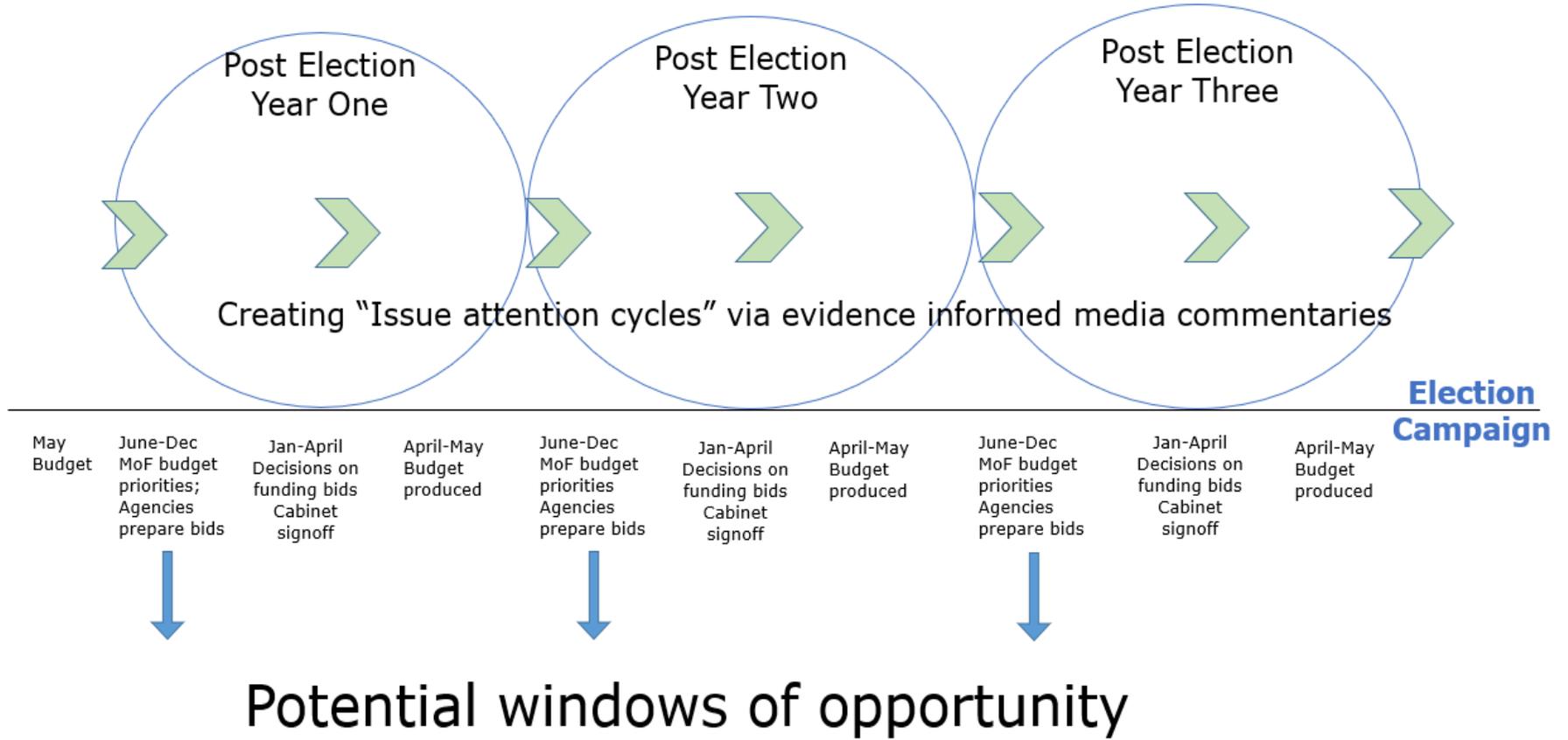
There remains a lack of cohesive action plans for a number of diseases, all of which have a burden on the lives of New Zealanders. Alongside this there is an absence of Health Strategies for several intersecting population groups (including women, the Rainbow community, and those living outside urban centres). This suggests there remain opportunities for researchers involved in the Healthier Lives National Science Challenge to continue to mobilise, translate and disseminate their evidence to specific sections of the policy community, and more broadly, through the media and other channels, to secure issue attention.

The importance of the research-policy interface is reflected in current work by MBIE for the “Te Ara Paerangi Future Pathways” Green Paper and is likely to be a feature of the next PBRF round. However, achieving research impact is not straight forward. Windows of opportunity for research engagement with policy makers are bounded by different rationalities, opaque channels of communication, competing cycles (see Appendix Two), and different schedules and requirements (in terms of deadlines, ethics, grant-funding and so on). Nevertheless, engagement in research for policy is critical for good policy strategy and implementation and is in the public interest.

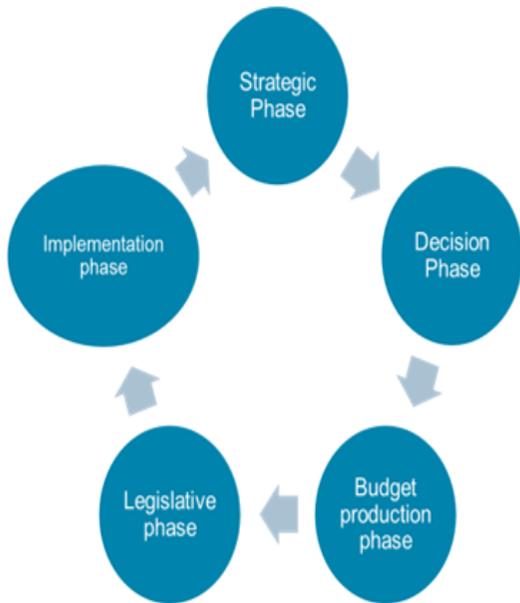
## Appendix 1: List of Policy Documents

Name of Policy	Policy Agency	Date Published	Category	Association	Link to Policy	Status
Living Well With Diabetes	Ministry of Health	2015-2020	Action Plan	Stand alone	<a href="#">Download PDF</a>	Inactive
Ola Manuia: Pacific Health and Wellbeing Action Plan 2020-2025	Ministry of Health	2020-2025	Action Plan	Stand alone	<a href="#">Download PDF</a>	Active
Child and Youth Wellbeing: Current Programme of Action	Department of Prime Minister and Cabinet	2019	Programme of Action	Part of cross-government work on child wellbeing and poverty)	<a href="#">Download PDF</a>	Active
Whakamaua: Maori Health Action Plan	Ministry of Health	2020-2025	Action Plan	Connected to He Korowai Oranga: Māori Health Strategy	<a href="#">Download PDF</a>	Active
New Zealand Cancer Action Plan 2019-2029	Ministry of Health	2019-2029	Action Plan	Stand alone	<a href="#">Download PDF</a>	Active
Cancer Prevention Report	Cancer Control Agency	2022	Report	In conjunction with work of Cancer Control Agency	<a href="#">Download PDF</a>	N/A
Health and Disability System Review: Final Report	Independent Report for Ministry of Health	2020	Report	Stand alone	<a href="#">Download PDF</a>	In progress
Data and Information Strategy for Health and Disability	Ministry of Health	2021	Strategy	Stand alone	<a href="#">Download PDF</a>	Active
Healthy Eating - Healthy Action: Oranga Kai-Oranga Pumau	Ministry of Health	2003-2010	Strategy	Stand alone	<a href="#">Download PDF</a>	Inactive
Ministry of Health: Annual Report (Year end 2021)	Ministry of Health	2021	Report	Stand alone	<a href="#">Download PDF</a>	Retro-spective
New Zealand Health Strategy: Future Direction	Ministry of Health	2016	Strategy	Cross-sector	<a href="#">Download PDF</a>	Unknown
Strategic Intentions 2021-2025	Ministry of Health	2021-2025	Strategy	Cross-sector	<a href="#">Download PDF</a>	Active

## Appendix Two: Cycles for Policy Impact in Aotearoa New Zealand

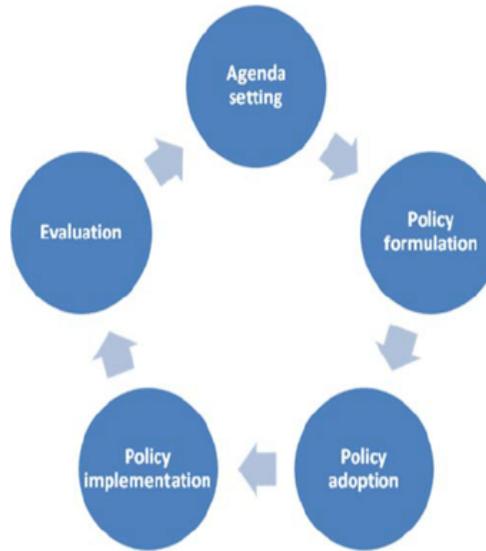


## Budget cycle



<https://www.treasury.govt.nz/publications/guide/guide-budget-process>

## Bureaucracy-government policy cycle



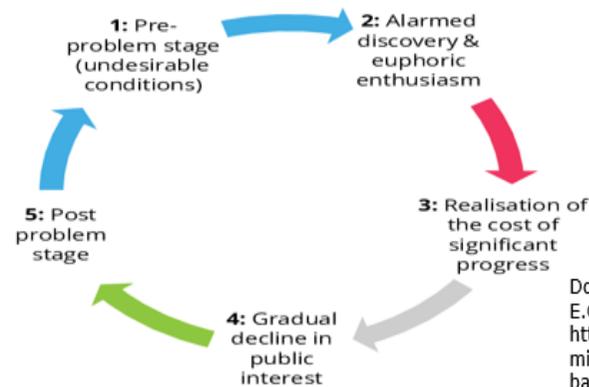
Knill and Tosun (2008) cited by Sherman (2016)  
<https://slideplayer.com/slide/7870266/>

## Policy development cycle for advocacy



<https://community.net.nz/resources/community-resource-kit/communicating-with-central-government/>

## Issue attention cycle



Downs, (1972), *Public Interest*, 28: 38-50, illustrated by E.Cook in *Resource Futures* and Nextek (2018),  
[https://www.researchgate.net/publication/325877420\\_Eliminating\\_avoidable\\_plastic\\_waste\\_by\\_2042\\_a\\_use-based\\_approach\\_to\\_decision\\_and\\_policy\\_making/figures?lo=1](https://www.researchgate.net/publication/325877420_Eliminating_avoidable_plastic_waste_by_2042_a_use-based_approach_to_decision_and_policy_making/figures?lo=1)