



SYNERGIA

STAKEHOLDER REFLECTIONS ON THE FOOD ENVIRONMENT

**A report for the Public Health
Advisory Committee**

01 September 2023

Acknowledgements

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1. EXECUTIVE SUMMARY

The Public Health Agency Committee (PHAC), an independent statutory expert advisory group on public health was established as part of the Pae Ora health reforms in 2022. PHAC's major work programme for 2023 is food environments, specifically the identification of innovative and practical solutions to improve Aotearoa New Zealand's food environment; improvements that will lead to better health outcomes for those currently experiencing barriers to accessing healthy food.

PHAC is committed to hearing a wide range of voices from communities, academics, experts, government and industry in this process, and commissioned Synergia to complete interviews with a broad range of stakeholders. We spoke with 55 people from introductions to 29 individuals or organisations identified by the PHAC. Interviews were completed over five weeks ending 30 June 2023. This report is a summary of that feedback for the PHAC and will inform the next stage of their work programme.

Our interviews were semi structured discussions centred around the PHAC's vision of access to healthy food for all, and what had and what could move Aotearoa New Zealand towards that vision. The concepts of equitable access to healthy food and healthy food as a right were discussed and emerged as tightly interwoven in this vision.

Key messages from these stakeholder interviews

Poverty and structural inequity have resulted in an urgent need to take action.

- Food insecurity is experienced by an increasing proportion of society. Many people from populations that experience exclusion and inequity have limited access to healthy food.

There is support for the notion that healthy food is a right. Realising that right is complex.

- Article 2 of te Tiriti o Waitangi represents an existing right. If the promise of rangatiratanga was fully honoured, access to healthy food would improve for Māori.
- Healthy food for children was seen as essential to health, wellbeing, and development.
- Food manufacturers, suppliers, and retailers have a role to play but their values, priorities, and obligations do not always align with public health goals.

Leadership has emerged from the sector

- Many food collaborations exist, including cross-sector collaborations. Stakeholders are well networked and connected. Evidence based food strategies have already been developed.
- Stakeholders shared examples of national and local initiatives that are currently increasing access to healthy food. Most innovations remain fragmented or have limited impact in the current policy environment.

Central government action and a coordinated food strategy is required

- A whole of government approach that addresses the determinants of access to healthy food would involve whole of government action. There would be a long-term policy approach protected from political cycles and competing economic interests and lobbying.
- This top-down approach needs to be complemented with well-resourced bottom-up action, so that communities have agency and the ability to develop and deliver their own solutions. The meeting of top down and bottom-up approaches would foster stronger local food systems.

Current food environment

Access to healthy food was identified as an urgent issue by those concerned with population health and those working with whānau and communities experiencing food insecurity. In terms of equitable access to healthy food there was a sense from stakeholders with a public health perspective that **Aotearoa New Zealand is going backwards**. This was despite the successful initiatives or mechanisms they identified that have been shown to increase access to healthy food. The cost of living crisis was noted as exacerbating this urgency.

Perceptions were that the numbers of people experiencing food insecurity are increasing due to the cost of living and the cost of food. **There is no escaping the influences from beyond the food system and health sector**. Stakeholders discussed how these dimensions are intimately linked, particularly access to housing, threats to environmental sustainability, the influence of economic drivers and the commodification of food, as well as fragmented leadership on food policy in Aotearoa New Zealand. Access to healthy food is heavily influenced by the market economy and societal changes. Aotearoa New Zealand's colonial history has contributed to the erosion of local food systems. The goals of the current economic system conflict with the broader significance of food with its wellbeing, social, and cultural dimensions.

Food was identified as more than a nutrition source; **food is symbolic of deep connections to culture, values, and has special meaning**. Healthy food is generally understood as unprocessed food but the commodification of food and conflicting or misleading information about food makes identifying healthy food

more difficult.

Stakeholders identified a range of approaches and interventions across macro, meso and micro levels of the food environment that **have worked** to move towards healthy food for all. These included **evidence-based policies and practices from Aotearoa New Zealand and overseas, such as: school-based programmes, nutrition guidelines, the Health Star Rating on packaged food and reformulation** (less salt, fat and sugar) and the **Healthy Eating, Healthy Action strategy**. **The success of locally led initiatives and local networks, redistribution, and the work of the New Zealand Food Network** were also highlighted. Locally led initiatives based on **holistic, whānau ora approaches** were identified as successful because they are well **connected to their community, and are acceptable and responsive** to need.

Envisioning a future with access to healthy food for all

There was a strong feeling from the majority of those interviewed that **without stronger government leadership and intervention in partnership with Māori, access to healthy food will continue to be inequitable**. A rights-based approach to healthy food was strongly supported by stakeholders who took a public health perspective. The strongest theme emerging from those with a focus on public health and communities was the need for a whole of government approach to food, and a coordinated strategy to influence the system that affects how food is produced, distributed, and consumed.

Stakeholders with a public health perspective had **aspirations for Aotearoa New Zealand's food system and described a future where Te Ao Māori, and wellbeing and sociocultural perspectives on food drive change and help to reorientate the workings of the food system**. Most stakeholders wanted clear national leadership and coordination, a comprehensive strategy for moving forward, evidence to track progress, a shift to regional and local solutions, and a revitalisation of local food environments.

This work has already begun, and the stakeholders interviewed were themselves representative of the **existing strengths and resources that provide a platform for change**. It will be important for the PHAC to acknowledge and leverage these strengths going forward.

It's important to note that **stakeholders in the supply, manufacturing, and retail space did not feel it was their role to address human rights**. The right to healthy food resonated less with their organisational goals. Their supply of a range of foods including healthy foods, the contribution to the economy, and response to the market and consumer choice were identified as beneficial in their own right. The tension between the economic and health outcomes of Aotearoa- New Zealand runs throughout this report.

SECTION A — INTRODUCTION

The Public Health Advisory Committee (PHAC), an independent statutory expert advisory group on public health was established as part of the Pae Ora health reforms in 2022. The PHAC's major work programme for 2023 is food environments, specifically the identification of innovative and practical solutions to improve Aotearoa New Zealand's food environments that will lead to better health outcomes. Those experiencing the greatest barriers to healthy food are the main focus of this work programme.

Synergia was contracted to complete a series of interviews as part of the PHAC's policy research about New Zealand's food environment. We spoke with 55 individuals from 31 initial contacts with stakeholders (individuals, groups, organisations). This included those working in the community, academic, health, food industry, and government entities. Our discussions centered around the PHAC's vision of access to healthy food for all, what had, and what could move New Zealand towards that vision.

This report summarises that feedback so the PHAC can use it to inform its work programme and guide further stakeholder engagement in 2023. We have written this report for the PHAC with the understanding it may choose to publish this report publicly. The PHAC's recommendations on innovative solutions to improve New Zealand's food environments will be reported to the then Minister of Health in January 2024.

Reading this report

Findings are presented in two main sections of this report. Section B (from page 13) presents the overarching themes or paradigms that stakeholders used in their discussion of different aspects of the food environment. Section C (from page 24) categorises feedback on effective and potential interventions at the macro, meso, and micro levels of the food system. It also goes into the barriers and enablers of access to healthy food at each of these levels. Section D (from page 45) is forward looking, and it considers the positions taken by the stakeholders interviewed and their aspirations for a future where access to healthy food is more equitable.

2. PURPOSE OF THIS WORK

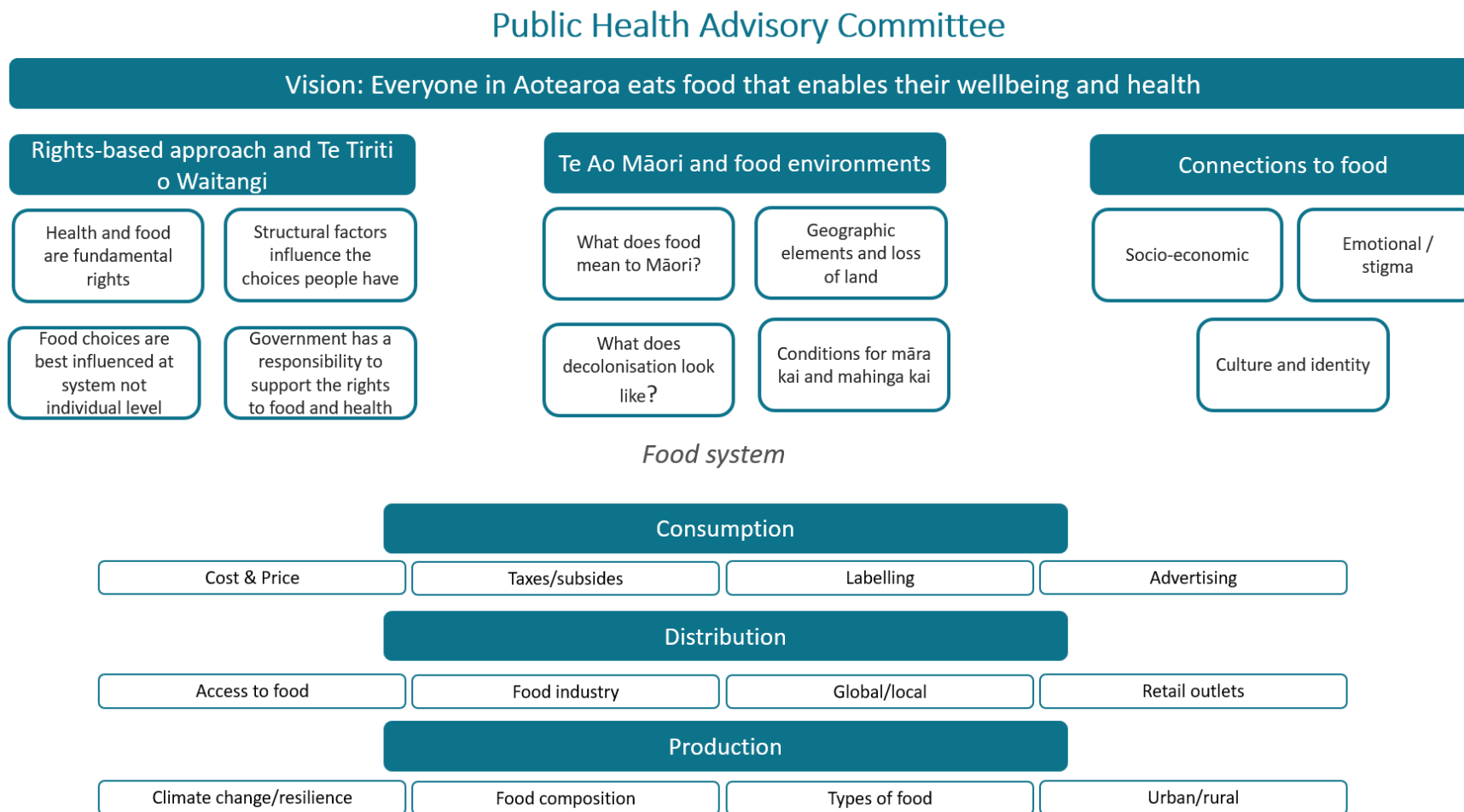
Synergia was contracted to complete semi-structured interviews with a range of stakeholders with an interest in the food environment in Aotearoa New Zealand.

The PHAC was committed to hearing a wide range of voices from communities, academics, experts, government, and the food industry. Interviews were an opportunity for us to explore the experiences and systems that influence access to healthy food.

The diversity of this food environment was captured in Figure 1 which shows a 'concept map' a diagram created by the PHAC to identify key aspects and systems related to its vision of healthy food as a right. Stakeholder suggestions on adjustments to this diagram are included in the Appendix of this report (Section E).

The PHAC is investigating a rights-based approach to providing positive food environments for better health outcomes, noting that successive New Zealand governments have affirmed rights to health and food. International statements from the United Nations have also described the right to health and the underlying determinants of health including "adequate supply of safe food, nutrition, environmental conditions, and access to health-related education and information".

Figure 1 The PHAC's vision and concept map (June 2023)



3. METHODOLOGY

This qualitative policy research is based on Synergia’s interviews with food sector stakeholders. In total, we engaged with 55 individuals and their experiences, reflections, and aspirations are captured in this report. These interviews, which represent 31 key contacts or organisations, were completed between 6 June and 7 July. One written response was received 2 August.

3.1. Data collection

The PHAC identified an initial list of 20 stakeholder to approach for interview. This list was extended twice during the data collection period. The secretariat of the PHAC made the first contact with interviewees, sharing an information sheet Synergia had prepared to support informed consent. Interview arrangements were made by Synergia with each stakeholder.

The Appendix (Section 13) provides a complete list of interview participants. The following table provides a summary of these participants grouped by category. Note that nine engagements included at least one stakeholder who provided Māori and/or Pacific perspectives.

Table 1 Stakeholders providing feedback

Stakeholder type	Number engaged	Count of Individuals
Academic	3	3
Advocacy group	5	7
Community organisation	7	19
Government entity	3	7
Industry advocacy	3	3
Industry representative	3	3
NGO	4	9
Other	3	4
Total	31	55

Invitations were sent to a total of 42 individuals or organisations. Most of those who did not take part cited lack of availability within the timeframe. We had intended to use snowballing, a recruitment technique that asks stakeholders to identify and/or introduce us to others. This approach has generated useful contacts for further phases of the PHAC’s work programme, but it was not rapid enough to be used in this series of interviews.

The Synergia team completed background research on each stakeholder prior to interview, using publicly available sources of information. We developed a semi-

structured interview schedule with the PHAC to use in interviews. The interview schedule prompted exploration about the food environment in Aotearoa New Zealand and how to move to the vision of health food for all. Specifically, the schedule covered what has worked, the barriers and enablers of access to healthy food, and considerations in the pursuit of equitable access to healthy food. In many interviews we also shared and referred to the food environment “concept map” developed by the PHAC to support and expand the conversations. The interview schedule is included in the Appendix (Section 14).

The 55 people who engaged in the process did so in the following ways:

- Individual interviews – 17
- Joint organisation interviews – two: MBIE with Commerce Commission, and Freedom Farms with Eat NZ
- Group interviews – nine groups with two to eight people present
- Written submission – one from Woolworths New Zealand Ltd.

The majority of interviews were completed using Zoom and took around one hour. The larger group sessions took longer, up to two hours, and several of these were face to face.

Overall, stakeholders were enthusiastic about taking part in an interview. It was often framed as being a valuable opportunity to engage with the PHAC, and stakeholders grasped the opportunity to share their views and positions.

3.2. Approach to analysis

Four members of the Synergia team completed interviews for this project and all were involved in some or all aspects of analysis. Most interviews were recorded (with permission) and the notes made during and after interviews were used along with partial or complete interview transcripts. Interview coding used both inductive and deductive approaches, using the concept map and interview questions for the latter approach.

Discussions occurred among the project team while fieldwork was being carried out about emerging themes. This was followed by several internal sensemaking sessions. This created the framework for analysis that aligned with the concept diagram and main topics of the interview schedule. It was further refined by considering macro, meso, and micro levels of the food system. We considered what was working, barriers to action and progress, and aspirations expressed by stakeholders.

A sensemaking session with the PHAC on 17 July 2023 enabled initial findings to be shared and discussed. The draft report structure was subsequently agreed.

Stakeholders were asked if they could identify other people or resources (publications, grey literature etc) that may contribute to the PHAC's understanding of the food environment and what would work to move us toward equitable access to healthy food. These have been provided to the PHAC.

SECTION B —ACCESS TO HEALTHY FOOD AND THE OVERARCHING DIMENSIONS

Stakeholders viewed New Zealand's food environment and system as a highly relevant and current issue. The discussions we had incorporated interrelated and recurring themes, even when perspectives and values were different. There was a general consensus from most interviewees that not everyone is able to access to healthy food.

4. EXPLORING A RIGHTS-BASED APPROACH

The current social context has an increased emphasis on the “healthiness” of food. This was noted in terms of composition (e.g., fat, sugar, salt); dietary patterns (e.g., vegetarian, vegan, keto); so-called health-conferring ingredients and products; and ethical practices such as free range, less intensive animal rearing, and plant-based foods. There is a broad spectrum of food with new food products appearing regularly, and multiple dietary patterns being recognised and catered for.

Feedback on access to healthy food is prefaced with a reminder that there is a general understanding of healthy food, but this was not an easy definition for people to navigate. Interviewees acknowledged huge amounts of often conflicting information — presented to them in a range of ways from numerous sources, — some with vested interests. Science advances and knowledge about food and nutrition is growing and changing rapidly. Along with conflicting advice from credible sources, it can be difficult for people to keep pace with the latest evidence.

“Everyone's going to have a different definition of healthy food, right? But in real terms, we're talking fruit and vegetables, lean protein, unprocessed stuff that doesn't contain a lot of sugar and all of those things.” — Julie Chapman, KidsCan

Stakeholders predominantly spoke about unprocessed or minimally processed foods when referring to healthy food.

4.1. Healthy food as a right

The PHAC is exploring whether rights-based approaches to healthy food would provide a framework and platform which would result in significant change.

We begin this section with the feedback on the PHACs foundational perspective that access to healthy food is a right. The conversations we had with stakeholders about a rights-based approach to food environments and what this would look like in their world identified overarching dimensions that inform and influence the systems and mechanisms guiding access to healthy food.

Stakeholders noted that if healthy food was a right, it would affect and be affected by many aspects of our economy, society, infrastructure, and food system. Section C presents food specific mechanics involved in such a change.

Access to healthy food is an urgent issue

There was a sense of urgency from most stakeholders — particularly those working with communities — that change needs to occur **across** the food system. Changes are needed to make domestic and local food production and distribution more sustainable. Access to food and healthy food, particularly for people on lower incomes, needs to be guaranteed.

Beyond the health halo

Several stakeholders wondered how healthy food is understood by different people, and what it means in a society where a growing segment is affected by moderate food insecurity (or worse). It was acknowledged that those experiencing food insecurity are striving to obtain enough food regardless of nutritional value or health status. The food retail space was noted to be full of processed foods positioned as healthy and natural.

Support for a rights-based approach

Many stakeholders were positive that a rights-based approach would strengthen the platform of their kaupapa.

“I’m totally supportive of a rights-based approach. I do think it’s a fundamental human right and it should be the approach we take particularly with our children. A rights approach that’s child-centred will probably be embraced by all sectors of New Zealand. There sometimes tends to be — with respect to adults — some sectors of society [will say] children can’t make the

choices and that we should be wrapping support around them in particular.” — Professor Cliona Ni Mhurchu, Epidemiology and Biostatistics University of Auckland

A right to healthy food was seen by some interviewees as desirable in its own right. Arguments around the right to healthy food were identified as having strong foundations in Te Tiriti o Waitangi and protections deserved by children. One interviewee remarked that it was not obvious which levers currently existed in the health system to guarantee rights to healthy food.

What would this look like in practice?

One stakeholder perceived that the operation of more food outlets like supermarkets that provide a range of healthy food would be one way of opening up access to healthy food in local communities. This point resonates with other points about food deserts and the lack of healthy food access in some neighbourhoods and communities.

While many stakeholders expressed support for a rights-based approach, what this looks like in practice would benefit from further discussion.

“A rights based approach can be helpful to frame issues and promote new ways of operating. However, like other social and economic rights, it is important to clarify what it means in practice and how it is given effect. Issues of enforceability, expectations and balancing the right to property would be important to resolve. It may also be important to clarify if healthy food would encompass culturally appropriate food and sustainable supply that supports a healthy environment for future human development.” – Deb Sue, Woolworths New Zealand’s Nutritionist

In the case of stakeholders with more commercial interests, supermarkets for example cater to a range of tastes and **what sells tends to be what is supplied**. The legislative scope of a rights-based approach could be explored further.

Implementing approaches from a rights basis may be **more feasible in some settings** like schools, services, institutions, and public facilities that have wellbeing goals or operate with an ethic of care. Some stakeholders were interested in how this could look, the expectations involved, consideration of culturally appropriate food, sustainable food supply, balancing the rights of different groups, and monitoring/enforcement.

Barriers to using a rights-based approach

To some who are less used to rights-based approaches, it was a difficult concept to grasp. In particular, those interviewed in the supply, manufacturing, and retail space didn't feel it was their role to address human rights, or that there were conflicting rights important to society, especially around respecting people's autonomy and self-determination. There was also some suggestion that rights may be bigger than that of individuals, and rights could apply to organisations and companies too.

Tension between economic and health outcomes

The dynamics of New Zealand's food retail system created a sense that commercial interests are strong, and that food has to be purchased within a system that is not geared towards wellbeing. This included considerations such as exporting a high proportion of high-quality food items overseas.

Some felt that access to healthy food cannot be guaranteed in a conventional market economy and indicated a need for greater government intervention. The market economy functions within a legislative framework that has been described as "food agnostic", and it responds to the forces of supply and demand.

"There's no rights, you've lost your rights because consumerism or the big wigs control how products are distributed... They control the economy and the behaviour. There's not a rights-based approach now 'cause no one sits down with whānau or us kaimahi and says "is this what we should be charging, how do people access [food] where they live". There's none of those conversations, only at a local/regional level [feeling disconnected from national political process]" — Tu Kotahi Māori Asthma Trust

The role of industry in terms of a rights-based approach and as major providers of food needs further discussion. By developing a deep understanding of the drivers of industry, it may be possible to identify leverage points while also working towards the public good.

The role of government

As expected, there was a range of views on the role of Government intervention. Some stakeholders viewed government intervention as key to ensuring a right to healthy food was realised, and this required genuine partnership with Māori and leadership. Other stakeholders felt that the role of Government was less clear, which can be expected given recent changes to legislation and regulations around retail food environments.

The PHAC is providing policy advice to the Minister of Health, but the message from those interviewed who supported government intervention centred around **the need for an all-of-government approach to healthy food access**. There was

support for the Ministry of Health to lead this kaupapa because it is seen as an influential Ministry concerned with population health.

Stakeholders highlighted that major determinants of health such as employment, education, and housing have lead government agencies and yet 'food' lacked coordinated, central government leadership. It was noted that current elements of food policy and strategy exist in a range of government agencies but that no agency has overall responsibility for both food security and sustainable food systems.

These interviews took place at a time when many stakeholder's communities were recovering from cyclones and extreme weather events that have damaged their natural environment, crops, and infrastructure. The climate crisis, environmental impacts, and concerns around sustainability were issues that have added to the vulnerability of many populations around Aotearoa New Zealand, particularly those in Te Tai Tokerau and Te Tai Rāwhiti.

The need for government leadership and enablement is a recurring theme in this report and it features strongly in the sections that describe many stakeholders' aspirations for the future.

5. TE TIRITI O WAITANGI

From a Te Tiriti o Waitangi perspective, Māori models of health, wellbeing, and leadership can guide strategy and action and increase the decision-making power of tangata whenua. We heard about approaches like Pā to Plate, the work of Toi Tangata, Hua Parakore within the Papawharitorito Charitable Trust (for example), and marae around the country with programmes and initiatives underway.

Some iwi such as Ngāti Hauā in the eastern Waikato have critically reviewed their local food systems and much more will be happening around the country. It is evident that organisations and approaches are active in addressing the shortcomings of food systems.

Mātauranga Māori is a valued source of indigenous knowledge. The approach of Hua Parakore (Māori organic farming)¹ championed by Dr Jessica Hutchings was referred to by several stakeholders. The work of the Papawharitorito Charitable Trust seeks to advance Māori food sovereignty and tino rangatiratanga through kaupapa Māori and indigenous models.

¹ See <https://jessicahutchings.org/papawhakaritorito-charitable-trust/>

Begin from a Te Ao Māori perspective

Starting from a Te Ao Māori base was seen by many stakeholders to be essential if access to healthy food is to be improved. This would prevent the simple “over-laying” of a Te Ao Māori lens that often occurs in initiatives; a process that one stakeholder described as “shoehorning” Māori into western ways of seeing and understanding the world.

Colonisation has had a range of negative impacts. In terms of the food system, access to the whenua of one’s hapū and iwi has reduced, and Māori housing ownership has declined significantly. Values around sharing and living in close relationship with one’s neighbours have also been eroded. From a Te Ao Māori view, manaakitanga, sharing, and whānau-based economies are desirable and valid. The connections between kai and important concepts from Te Ao Māori within a Te Tiriti o Waitangi framework were common themes.

“When you’re looking and thinking about Te Tiriti o Waitangi, while we’re talking about kai, I mentioned also it’s about kai, kāinga, and korero. Thinking about Te Tiriti, it’s about better exercising our rangatiratanga in relation to our kāinga and our whenua but then also the taonga aspect – this is all in Article Two – is the knowledge as well. That’s the kōrero. It’s a bit of an easy way to remember, kai, kāinga, and kōrero. That is very much inherently part of that focus in Article Two.” — Professor Merata Kawharu, University of Otago, Centre for Sustainability

“What I have heard in the community, is a lack of trust, in the current NZ Health system and Manatū Hauora (Ministry of Health). Irrespective of the development and implementation of Pae Ora Act, Te Pae Tata, and WAI2575 report, the later document offers recommendations to the current NZ health system and “how” improving the equity gap will address the poor health outcomes for Māori. One of the many things we miss in our attempt to capture relevant data, is the value of mātauranga Māori and the understanding of kai whenua, and kai moana practices, along with, other wonderful Māori systems we could utilise, if only true consultation with whānau, hapori, hapū and iwi received the investment. What we see in the media is not reflective of all Māori. Instead, what is being perceived is the generalised representation of “Māori”, who continue to be compared with other privileged communities who have not experienced nor are they likely to experience the inequalities and inequities Māori face on a daily basis”. — Sande Mareroa-Gates, Auckland Regional Public Health

Across a range of stakeholders from different agencies and backgrounds, the following principles were mentioned which highlight the cohesion provided by a Te Ao Māori lens:

- kaitiaki and respect for the natural environment and the planet
- the interconnectedness of people, plants, animals, water sources, and other parts of the natural environment
- food as a way of upholding people's mana and an expression of manaakitanga
- iwi want to provide manaakitanga and feed their people
- wanting to know where your food comes from, and the added significance of it coming from a place that is important to you (e.g., marae)
- the rights of people, whānau, hapū, iwi, and tangata whenua need to be upheld
- growing and production of food in the local area provides employment for people and creates an economic base
- autonomy and sovereignty are desirable at a range of levels: iwi, community, as well as whānau and the individual (e.g., māra kai).

“For whānau it's very localised what it means for us to be well. It's interconnected with our environments. It's interconnected with our communities and how we are a part of that community. Obviously, it's also interconnected with how we access food locally, and if it even comes locally or not. And our socioeconomic positioning, this is all stuff that's been researched through and through.” — Haylee Koroī, Toi Tangata

Those in the supply, manufacture, and retail space did not mention how culture and Te Ao Māori could be involved in making food environments healthier, with these values being less prominent in their decision making and business models.

6. IT'S ABOUT MORE THAN FOOD

6.1. Broader determinants of health

In response to the first major question ‘*what, if anything, has successfully moved us towards healthy food for all?*’, many stakeholders involved in health promotion or public health advocacy expressed disappointment that little significant progress had been made in the last decade or so. While the interviews were geared towards identifying what works and could work, as well as how to close the equity gap, many stakeholders (particularly those working towards public health aims) started with talking about the problem itself. Often, Aotearoa New Zealand’s food system was described as a complex issue with a range of problems and solutions that reach beyond the influence of the health sector. Current societal concerns such as the climate crisis, the ongoing impact of the COVID-19 pandemic, and the rising cost of living were all seen as highly relevant.

“...largely their ability to do that [have adequate food, including gathering] is limited by all of those things and having the money, having the time, having safe warm housing. There’s a lot of compounding factors.” — Haylee Koroi, Toi Tangata

The broader socioeconomic, cultural, and environmental conditions are unique in Aotearoa New Zealand as a small, multicultural island country. A Te Ao Māori perspective on the food environment and broader cultural perspectives that place value on food beyond its nutritional value are important dimensions that are discussed in this section.

Other commonly mentioned determinants of health that prevented equitable access to healthy food included: the fragmentation of leadership and policy, threats to environmental sustainability, the commodification of food, and the housing crisis.

6.2. Inequitable access to food

Those experiencing the greatest barriers to healthy food are the main focus of the PHAC’s work programme. Many stakeholders based their conversations within the people and communities lacking access to food of sufficient quantity, quality, or variety (food insecurity). Those working in communities were well aware of the growing segment of the population who experience some degree of food insecurity. This can mean having insufficient resources for a healthy diet,

experiencing uncertainty about accessing enough food, and skipping meals or running out of food².

The following concerns were raised in relation to food insecurity:

- recent increases in the cost of living and trends in consumer behaviour gear people to seek value-for-money
- negative trends have been sustained since the global financial crisis of 2008
- there is increased and sustained demand for emergency food in the Auckland region since the COVID-19 pandemic
- food insecurity is a problem that is drifting towards individuals and families on middle incomes
- the availability of poor quality “readymade” food (including a range of fast food) detracts from having a healthy diet
- the formalisation of emergency food provision in the last 30 years with criteria that need to be met, “queueing” (which draws attention to a person’s need and may invite stigma), and limited food types is undergoing change and needs to have mana at the centre
- emergency food provision needs to be highly cognisant of family composition, culture, and food tastes — more attention needs to be given to protein sources and meat protein (for those who eat meat)
- time constraints to cook meals from healthy ingredients (a particular barrier for lower-income families where caregivers may work multiple jobs).

6.3. Connections to food

What and who was valued was touched on by several interviewees. Most stakeholders described food in ways that showed it was seen as “more than fuel”. As well as being a necessity for life, food was described as an expression of culture and identity, intertwined with social relationships and daily routines, and well as significant events.

“Pacific communities are often transnational communities. Understanding what is happening for Samoans in Auckland requires understanding of what’s happening in Brisbane and Apia and LA [Los Angeles]. If you look at the new connections, moving beyond churches and things to a range of social and

² See details of the Food Insecurity Experience Scale which is described in the Appendix. It is a measure used by the Food and Agriculture Organisation of the United Nations: <https://www.fao.org/hunger/en/>

family networks – actually, all of our grandmothers are on social media – that’s where recipes are being shared... When you look at migrant communities, they often have their own shops that they go to and they’re accessing food from their home countries.” — Dr Debbie Ryan, Pacific Perspectives

Food is about more than nutrition

It was clear from the interviews that food has a deep connection to values and identity which goes beyond nutritional value for many in our communities. The symbols and values associated with food were seen as highly relevant in terms of improving people’s nutrition. It is important when understanding food environments, to understand communities and their value systems.

“Link in with the person’s culture. Personalise it and contextualise it, then they own it. A story need to be told authentically and genuinely.” — Mafi Funaki-Tahifote, health strategy and clinical dietetics

Food is deeply intertwined with worldviews, social relationships, everyday encounters, special encounters, and the natural environment. Throughout the interview narratives was a sense that people relied on the environment for good food, and that it was important to be in balance with the environment.

A few stakeholders were wary of messaging that, “no treats are allowed”. Food is pleasurable and it is an important part of celebrations and social life. Stakeholders were aware of the celebratory nature of food and eating, and they were cautious about imposing a set of potentially rigid values on people.

“[Endorsing that healthy food in schools is a great thing to do] I know that kids will probably go down the road buying ice cream on the way home that’s not the point. They’ll do that anyway. We just need to get over ourselves and modify those environments one can.” — Jane Cartwright, New Zealand Breastfeeding Alliance

“Part of the reframing we’ve been working through as well is food is not just this functional material. More to the point, our bodies aren’t just things to work and produce labour. Food is something that’s about being in relation with other people and being in relation with the environment.” — Haylee Koroi, Toi Tangata

Providing food can be an expression of positive regard and respect,

kindness/caring, and a vital part of providing hospitality. Stakeholders with knowledge of Māori and Pacific perspectives described intimate connections to the land and sea, and to one's shared origins and sense of home.

SUMMARY OF SECTION B

The dimensions described in this section have highlighted how the food environment is intimately linked with other determinants of health, particularly access to housing, threats to environmental sustainability, the dominance of the economic model and the commodification of food, as well as fragmented leadership on food policy in New Zealand. Access to healthy food is heavily influenced by the market economy, and societal changes and New Zealand's colonial history have contributed to the erosion of local food systems. The goals of an economic system conflict with the broader significance of food with its wellbeing, social, and cultural dimensions. Without stronger government leadership and intervention in partnership with Māori, access to healthy food will continue to be inequitable. A rights-based approach to healthy food was strongly supported by many stakeholders which would effectively bypass people's individual ability to afford healthy food.

SECTION C — HEALTHY FOOD FOR ALL

This section brings together the feedback about what was working, and enablers and barriers to action and progress. As well as commenting on strategies, interventions, and programmes, many stakeholders remarked on the level of intervention, and we progressed that theme in our analysis. The section is presented at three levels of the food environment: macro, meso, and micro.

Stakeholders were asked what they considered to be successful initiatives in the last decade. This was expanded to include older initiatives and stakeholders were invited to share overseas examples as relevant. There was a sense that the situation has gotten worse rather than better, despite the efforts of many.

“So, children in lower socioeconomic areas now, the school food programmes that are in there have become, in many cases, their main source of nutrition. The cost of healthy food, vegetables, lean protein — all of those things — are just completely out of reach for many families... So, I don't actually think the access to healthier food has become easier at all. And in fact, I think we've gone backwards.” — Julie Chapman, KidsCan

It was clear that national direction and coordination is important, and several stakeholders emphasised the need for meso and micro coordination of local solutions. Across stakeholders, the aspirations for both top-down direction and support, and bottom-up design of solutions and delivery, were shared.

7. MACRO LEVEL INFLUENCERS

We are using the term **macro** level to include broad market and system forces, and this could include factors that are nationally significant. For example, we describe perspectives about food composition, national strategy/policy and funding, national coordination, advertising, as well as monitoring and evaluation that directly relate to food. These include policy levers and efforts to make the environment more conducive to accessing healthy food.

7.1. What stakeholders say has worked

When considering what has worked to move us towards healthy food for all, the

stakeholders identified the following food specific examples that align with a macro level perspective.

Public policy that promotes healthy food through legislation and evidence based national initiatives

The Oranga Kai - Oranga Pumau Healthy Eating Health Action (HEHA) Strategy was launched in 2003 to address poor eating habits and low levels of physical activity with the intent of reducing obesity and associated morbidity and mortality. The incoming National government disestablished this initiative in 2009. We heard from several stakeholders how this complex, integrated, and inter-sectoral approach was beginning to show positive results. It was not given the chance to mature nor was the evaluation of HEHA completed.

The legacy of HEHA was said to be living on in communities, and we heard of examples such as schools that have continued their gardens and churches that are “fizzy free” to this day. Some stakeholders expressed significant disappointment at the disestablishment of HEHA saying that real progress (e.g. a slight decrease in childhood obesity) was being made largely due to its comprehensive approach.

National nutrition guidelines were supported as effective mechanisms, but only if monitored and mandated in environments such as schools and hospitals. One stakeholder commented that guidelines still apply to hospitals but that implementation and adherence to them is not clear.

Evidence based strategies and actions have been researched and strongly promoted by **Health Coalition Aotearoa**. This work outlines policy actions occurring in Aotearoa New Zealand against what has worked overseas. A number of domains have been considered such as leadership, governance, policy in relation to food labelling and composition, food marketing, and food retail. The New Zealand Healthy Food Environment Policy Index (Food-EPI) provides evidence that supports the expansion of healthy school lunches (Ka Ora Ka Ako), and the extension of the Health Star Rating on foods. The generation and use of evidence is a focus of this group in terms of the demand for evaluation of major programmes and development of methods for a national nutrition survey.

In relation to breastfeeding, favourable employment conditions (provision of maternity leave; often not a feature of part-time roles), family and social support, and intergenerational patterns support breastfeeding to the recommended minimum of six months.

On the whole, **regulation** in the form of accepted or enforceable guidelines and standards (e.g. food labelling) and setting features that promote health, for example, received notable support.

Industry actions

Industry salt and sugar reformulations, which have often been employed to improve health star ratings (discussed next), were seen as positive changes to processed foods and drinks, particularly breakfast cereal and bread. The Heart Foundation was acknowledged by several interviewees as providing valued support and coordination.

“We approach the leading companies in a food category (for example bread, breakfast cereals or processed meats). Initially we engage at a one to one level with the company to understand some of the technical constraints, market factors and any learnings they have had from salt or sugar reduction in the past. Once we have canvassed all the major food companies individually and we feel we are in a good position to set a target we then bring all the key companies together (a round table discussion) to agree on a target and timeframe for reformulation. The targets are designed to be workable and relevant for industry and hence drive reformulation for where current market levels are sitting. There is also an emphasis on food reformulation in the highest volume, leading selling and lower cost products. The time frames for the targets tend to be four or five years, but we do monitor industry progress on a yearly basis.” — Dave Monro, Heart Foundation

And in turn, the Heart Foundation praised the efforts of industry in food reformulation efforts.

“[Discussing their work around food reformulation] There have been some really good successes with salt reduction since we developed the programme 15 years ago (in 2007). More recently, since 2016, sugar reduction have also been set for a range of food categories. We are now starting to see some excellent progress in the area of sugar reduction in products like breakfast cereals, yoghurt and flavoured milk. While the Heart Foundation coordinates the process of setting the targets and monitoring progress – it’s the food companies that deserve the credit as they’re the ones actually doing the salt and sugar reduction.”
Dave Monro, Heart Foundation

The Health Star rating (HSR) is a voluntary industry initiative that uses a rating scale of 0.5 to 5 stars on packaged food. The more stars, the healthier the food. A few stakeholders felt there were merits to the approach because it had led to some reformulation, and it provides some guidance to consumers. This aligned well with views from those interviewees who felt consumer choice should be at the forefront of food provision. Those from the supply, manufacture, food retail also

spoke of the large amount of effort that had been undertaken by the food industry to implement the HSR (especially around home brand products) and there was a sense of achievement in this.

Discussions about the HSR identified some downsides too because it applies to packaged (processed) food, it can be costly to update labels and reformulate foods, the system is voluntary, the inclusion of healthy ingredients can mask unhealthy ingredients such as high sugar, and it does not directly address food insecurity.

“I do think the Health Star Rating in terms of front of pack labelling is a good start. I think it’s very problematic that it’s voluntary because it’s being used very selectively by industry and isn’t [as effective as it could be] because of that.” — Professor Cliona Ni Mhurchu, Epidemiology and Biostatistics University of Auckland

Supermarkets providing choices

Supermarkets are responsive to consumer demand and offer a large range of foods and consumer goods that provide consumer choice. Awareness of food composition and demands for value for money were trends noted by supermarkets.

Supermarket home brands were identified as providing good value for money and nutritionally equal or superior to comparable branded goods.

“We’re here to provide a service for our customer and we provide range of product options to cater for different preferences. Customers don’t want to be preached to, but we ensure there is a range of healthy options available and we’re striving to help our customers be well informed and make good choices through mechanisms such as health star ratings, and marketing communications.” — Melissa Hodd, Foodstuffs

Action on food waste

Food waste minimisation improves access to food (including healthy food) by redistributing food that would not otherwise end up on a plate. It could be incentivised by broader ecological goals. Reference was made to the supermarket and retail sectors collaboration with waste minimisation entities.

“There’s a lot of work that goes on in what we call food rescue, that’s food which is unable to be sold for various reasons but is safe to eat and is recovered and redistributed for charitable purposes. We’re working towards being zero food waste and food rescue is a key component of delivering that. Food donation is another element of our ESG strategy. We have partnerships

with a raft of food banks across New Zealand. Foodstuffs contributes funding and our members support these locally by donating product and/or funding.” — Melissa Hodd, Foodstuffs NZ

The New Zealand Food Network was identified as a particular success in this area. The network was established to prevent food waste and improve food security. It acts as a central hub or clearinghouse, bringing the benefits of scale to the redistribution of food.

7.2. Barriers and enablers of success

This section identifies the factors that were said to promote and hinder progress towards healthy food for all at this macro level. Some aspects can be both barriers and enablers, depending how the influence is used and experienced.

Food is big business without a wellbeing incentive

The commodification of food was seen by most stakeholders as a barrier to accessing healthy food. Several stakeholders remarked about how healthy food is an economic product, noting that the drive for profit in commercial food markets can be at odds with wellbeing goals and providing sustenance for people. Goals around economic growth and unconstrained economic growth were seen to be at odds with health and wellbeing goals, with unconstrained growth not being possible while ensuring access to healthy food to support health.

*“There is an elephant in the room – the GDP [gross domestic product] economy. We “talk” about wellbeing economy and healthy food, health environments, but we “walk” the GDP economic model... We cannot rely on the corporations that supply our food system, we should leave them to do the GDP their work for the economy but what comes back to this the community? How can we benefit from that (economic growth)?”
— Julio Bin, Healthy Families South Auckland*

“I think they [the food industry] see themselves as offering a service as opposed to producing something that we all have a right to consume. I think they seem themselves more as service providers.” — Professor Cliona Ni Mhurchu, Epidemiology and Biostatistics University of Auckland

Other stakeholders acknowledged that food corporations are responding to the market economy, and these same corporations are incentivised and regulated by government policy which makes them an easy target.

“Some groups of the food system believe that our export-oriented focus causes inflated price and inaccessible food for the domestic population. Whereas other groups believed that food unaffordability is being unfairly attributed to the agriculture industry, when the fault lied in inequities across other parts of society such as education, housing, and income. The latter is justified by an opinion that we produce really high-quality food across the country that’s significantly accessible with most of the population living within a few kilometres of a supermarket, and thus, the fault isn’t actually within the food system at all, but those societal inequities. So, there’s potential truth in both of those [perspectives].” — Jack Keeyes, Mana Kai Initiative

The supermarket duopoly often referred to as the retail market dominated by Foodstuffs and Woolworths NZ was felt to be in a unique position of power in this country. Recent analysis by a New Zealand economist interviewed for this project showed these two organisations control upwards of 80% of the market. In contrast, the two biggest supermarkets in Australia, Canada, the UK, and the US, control only around half of their respective markets. The report’s author, Paul Clark, wrote about significant structural shift being needed in the grocery sector (breaking up the supermarket duopoly) in order to foster lower prices, increase competition and innovation, and improve the quality and range of groceries.

The Grocery Industry Competition Bill passed its third reading while these interviews were taking place. Once this Bill becomes law, it will establish a new role of **Grocery Commissioner at the Commerce Commission**. This role will have legislative backing to oversee the grocery sector, restore some balance in the market, and make market entry feasible for new and smaller players.

The **potential weakening of the supermarket duopoly** with the market comprising a greater range of independent grocers along with possible digital expansion would reduce the influence of the supermarket duopoly. This would influence vertical separation (reducing their power over producers) and horizontal separation (reducing the number of their existing stores) could also help where retail stores would be shed from the big grocery retailers. While this may engender a more competitive grocery market in the long term, it was noted that consumers may experience increased prices as the supermarkets reduced their economies of scale.

The power and influence of the supermarket duopoly is felt across the distribution chain from consumers to the producers of food. Concerns were also raised about the lack of succession planning to ensure there is a **sustainable supply of horticulture businesses and workers**.

The **commodification of food and advertising of food** were identified as current barriers to the promotion of healthy food. Advertising of unhealthy foods, and

foods with a 'health halo' were seen as negative influences on the consumption of healthy food, particularly when these were targeted at children.

“There is often criticism that unhealthy foods are promoted to a greater extent than healthy food. Processed foods are packaged and branded, and food manufacturers have marketing budgets to promote their brands to encourage consumers to choose their brand over others. Market gardeners, horticulturalists, and protein farmers are generally supplying unbranded commodities, have limited means for marketing, and limited opportunity to differentiate their product.” — Melissa Hodd, Foodstuffs NZ

Legislative changes were not discussed with the food retailers in interviews.

Retailers and food venues offer a range of choices including healthy food but consumer autonomy reigns

Supermarket representatives pointed out that they are responsive to consumer demand and a wide range of foods are made available. Consumers demand for value and a greater awareness of food composition were trends noted to be influencing consumer behaviour.

Supermarket home brands were identified as providing good value for money and nutritionally equal or superior to comparable some equivalent branded goods. Supermarkets buying into the supply chain (to produce home brands) was raised by several stakeholders as disruptive.

Consumer choice can be influenced by supermarkets through restrictions, such as not selling energy drinks to those under 16, and the provision of information, such as recipe ideas. Examples of the promotion of healthy food (or less unhealthy food) were special prices for bulk bought produce and the prominence of sugar free drinks over their counterparts.

“We’re here to provide a service for our customer and we provide range of product options to cater for different preferences. Customers don’t want to be preached to, but we ensure there is a range of healthy options available and we’re striving to help our customers be well informed and make good choices through mechanisms such as health star ratings, and marketing communications.” — Melissa Hodd, Foodstuffs

Catering to demand

Stakeholders with knowledge of food venues such as restaurants and cafes commented on the focus on the consumer in terms of tastes, trends, and needs (e.g. dietary patterns and patterns in allergies). These businesses tend to have small profit margins which means they tend to focus on what consumers will buy.

Food can get lost in the political cycle and government silos

New Zealand's **three yearly political cycle limits opportunity for changes that require years to embed and evolve**, especially if those changes represent values that differ from the left and right of the political spectrum. Stakeholders had witnessed this disruptive cycle several times.

Even with stable government, the silos between government departments was felt to limit the potential for an integrated response to promoting healthy food.

There are information gaps

The lack of current evidence about dietary consumption patterns (i.e., a recent nutrition survey) was seen as a barrier to understanding the breadth and depth of barriers to healthy food. Particular concern was raised about the lack of knowledge about children's nutrition. Stakeholders were disappointed that the last systematic survey of children's nutrition status occurred in 2002 and adults' nutrition status was last measured in 2009. Where data does exist (e.g., dental caries in children and rates of breastfeeding) there has been no attempt to synthesise data at a population level (and stratify by subpopulations).

Lack of evaluation evidence was raised by stakeholders when asked about what has worked in moving us towards healthy food for all with the sentiment of "how do we know what is working?".

Information on food types and products can be confusing when there isn't clear information that is accessible and trusted. Consumers can experience challenges in understanding what they are eating – for example, new technologies including genetically modified organisms (GMO) or food.

"We currently have non-GMO labelling of different sorts in New Zealand which are claims made voluntarily. We also have a mandatory but outdated GM labelling standard. This system sets up consumers to be misinformed. Many foods both imported and grown in New Zealand have been produced through chemical or radiation mutagenesis – a very uncontrolled method of genetic modification, and these aren't required to be labelled, or subject to the same safety standards. However, a modern gene-edited food product with precise and targeted changes — which may decrease food waste, or increase nutrition — would have mandatory GM labelling, and in New Zealand can't even be produced. It's a politically sensitive and publicly sensitive area, but the current system and structure only makes it worse and leads to poorer health outcomes, with consumers being confused and very misinformed". — Jack Keays, Mana Kai Initiative

Cross-sector collaborations are leading the way

Lack of cross government leadership has left a space that **cross sector collaboration is attempting to fill. Collaborations such as Mana Kai**, which represents a range of stakeholders across the food system (including those with commercial interests) developed a framework relating to the purpose and values of our food system. This framework is based in Te Ao Māori principles, and its focus spans the natural environment to consumption. Its members focus on common ground, despite individual perspectives and priorities. **The Health Coalition Aotearoa** has a membership from non-governmental health and consumer organisations alongside population health academics.

7.3. Aspirations for the future

This is a summary of macro level aspirations for the future. They are discussed in detail in Section D and represented in this colour in the diagram in Section 11.

- A central government agency would have a wellbeing focus on food, and it would coordinate with other government agencies with specialty interests in food.
- One coordinated national food and nutrition strategy would be created.
- Improved information and evidence would guide strategy and current information would inform action at regional and local levels.

8. MESO LEVEL INFLUENCERS

We have used the term **meso** level to include regional and local layers of the food environment. This included local networks and communities as well as coordination of activity at a mid-level scale. For example, we describe the dynamics and experiences of settings (e.g., schools, workplaces), institutions, local organisations, partnerships, and community leadership.

8.1. What stakeholders say has worked

When considering what has worked to move us towards healthy food for all, the stakeholders identified the following food specific examples that align with a meso

level perspective. This includes specific initiatives, settings-based approaches, and support for community action.

Effective programmes reaching children

Ka Ora Ka Ako (Healthy Foods in Schools programme which provides school lunches)³ was praised by many stakeholders as one of the most significant steps forward in the last decade. Stakeholders were positive about the “blanket approach” taken in this programme of providing food for every child in the school which mitigated shame or stigma. There was also support from many stakeholders we interviewed for this programme to be expanded, either to more schools or all schools (which would also help reduce stigma).

Healthy Families NZ is a community collective approach to health promotion and prevention that was launched in 2015. Local leaders engage people where they live, work, and play. We interviewed some representatives from Healthy Families NZ, and other stakeholders felt this initiative was effective in terms of supporting access to food and healthy food through its dynamic systems approach and local focus.

Project Energize and Under-5 Energize were also identified as successful approaches which have since gained international attention⁴. Staff known as “Energizers” work with local schools, early childhood settings, and communities to improve child nutrition (including family food practices), increase physical activity, and enhance overall health. The results of an earlier evaluation were positive.

“We’ve published a lot about Project Energize and from the National Health Survey we were able to show that there was a decrease in body size of children in the Waikato – because it takes a long time. The other thing was Under-5 Energize whose messages were water and milk are the best drinks – using B4 School check data that there was a reduction of dental decay in children attending an Under-5 Energize early childhood centre.”
— New Zealand Nutrition Foundation

The active participation and educational aspects of initiatives such as HEHA, Healthy Families, and Project Energize were endorsed as effective because knowledge and skills were spread to whānau, households, and the wider community.

KidsCan is a programme providing food to thousands of children in early childhood settings and low decile schools. The foods provided in this programme are guided by Heart Foundation advice, and there is an emphasis on providing

³ See <https://www.education.govt.nz/our-work/overall-strategies-and-policies/wellbeing-in-education/free-and-healthy-school-lunches/>

⁴ See <https://cyhrc.aut.ac.nz/our-research/energize-project>

food that is appealing to children. KidsCan provides food for before and out of school, and in 2023 it will be providing food parcels over Christmas for the first time (a time when food insecurity increases). Shoes and raincoats are also made available which help with children's participation in learning and play.

Local food production and (re)distribution

Community food production and distribution includes places like marae, schools, community gardens, and churches. Stakeholders identified these sites as successful examples of local effort that have improved healthy food access. The Ministry of Social Development has invested in infrastructure to support these community efforts.

The Ministry of Social Development works with those supporting communities and whānau experiencing food insecurity. It funds the provision of emergency food, invests in distribution infrastructure, and self-sustainability initiatives such as social enterprises and māra kai. Successes around distribution were identified in terms of the national network of foodbanks forming, the New Zealand Food Network established with three centres, and work to make local food environments more resilient in the emergence of the COVID-19 pandemic.

Local growing collaborations were talked about in terms of improving people's knowledge, skills, and social cohesion as well as providing access to healthy, homegrown foods. While "local gardens" were not held up as ways of supplying food on a larger scale, people referred to the benefits of community-building, personal skill development, and social connectedness. They felt that local growing improved access to healthy food directly and indirectly. Investment in local economies was also held up as improving economic, social, and educational outcomes in those communities.

"When we invest in local economies, we actually invest in healthy local food frames, and we actually increase food security across the board. It's kind of an international thing that's easily proven: the closer you are to the source of your food, the more likely you are to be food secure." — Kore Hiakai Zero Hunger Collective

Pā to Plate is a specific example of local production and distribution; one that provides connections for Māori to produce grown at their papa kāinga. Pā to Plate provides food for those who live in neighbouring areas to papa kāinga, and they plan to expand their distribution to reach Māori living in urban areas who would like food from their distant papa kāinga.

"You pop down to the supermarket and you may have no idea where the food comes from. But wouldn't it be much more filling and fulfilling if you had kai from home?" — Professor Merata

Settings based policies, particularly for schools

Altering settings and environments was a significant subtheme. This ranged from regulating or limiting the provision of unhealthy foods in environments such as schools, churches, and healthcare settings to building or enhancing food production and provision at key community settings like schools, marae, and churches. Multifaceted approaches that focus more broadly on health and wellbeing were also endorsed.

Settings-based food policies such as the healthy food and beverages policy in hospital settings were held up as considered policies based on sound evidence. It was felt that the impact of such policies can be improved if they are made compulsory and if implementation is supported more strongly. It was evident to one of the academics we interviewed that food service providers need support with implementing the policy.

Schools providing healthy food environments was one of the strongest messages from stakeholders, in terms of what worked and what should be done.

Food that is acceptable is a feature of efforts to improve access to healthy food. Across a range of stakeholders, it was emphasised that people's connections to food are important, and they want to eat food that is palatable and fits with their tastes and cultural backgrounds.

A group conversation with kaimahi Māori about trying out a Mediterranean diet via a meal bag approach felt like a drastic change from their typical diets.

“Didn't feel full on the Mediterranean diet. You needed to start somewhere, but straightaway you got this much meat and then all these vegetables. It was like, what a shock! ...You've got 12 weeks to get used to that kai and it stops, and you can't afford it anymore...I don't think the Mediterranean diet works for us. For Māori it's got too much carbs or whatever. We need different foods... They make it sound like meat is bad for you.” — Tu Kotahi Māori Asthma Trust group discussion

Providing food that children would like was seen as especially important.

“We have a Youth Council that actually advises us on things – it's really important. Otherwise, we don't want to “do to” kids, we want the kids' voices. We want them to tell us what they would like.” — Julie Chapman, KidsCan

8.2. Barriers and enablers of success

A range of factors that have been barriers and enablers at the macro section are experienced further downstream at the level of community or specific populations.

Local food deserts

Stakeholders' comments often returned to people's local environments where they go about work, school, or leisure. **Having a range of affordable food available within a reasonable distance to home, school, or work is valued.**

While a few stakeholders perceived that the structure of supermarket retail needed to be addressed, supermarkets were often positioned as valuable to communities for the range of foods available at prices that are more affordable than dairies for example. It was noted though that some towns and rural areas had a lack of supermarkets which severely limited residents' food choices, and that local markets and farmers' markets do not exist in many places.

Those from the supermarket industry articulated that the placement of supermarkets was complicated by a range of factors, again controlled by different areas of government. This included land use and zoning, and other factors that differed depending on whether the supermarkets were part of a collective model or central model.

Concerns were raised about the concentration of food outlets selling foods that are generally less healthy such as fast-food outlets, takeaways, and dairies. The prevalence of these near schools and in low socio-economic areas was of particular concern especially when there was lack of access to healthier foods in these locations.

Community initiatives needs sustainable funding

While community led initiatives were seen as successful players in the promotion and supply of healthy food, they were **highly dependent on short term and often retrospective, insufficient, or uncertain funding.** These organisations are often competing with each other for funding from the same sources or for the same contracts. This pattern depletes initiatives carried out by individuals and collectively.

The importance of scale

Local food systems are difficult for small and medium-sized producers to access. There are issues related to shelf space and brand visibility in larger supermarkets, as well as meeting what are perceived to be high regulatory standards. There is also competition and economic incentives that influence what supermarkets in particular stock.

“There is a disintegration of local food systems. It’s an incredibly difficult environment for small and medium sized food producers in this country. By placing all our emphasis and resources on exporting our food, we’ve forgotten to ensure we have the ability to produce good food for New Zealanders.” — Angela Clifford, Eat New Zealand

Lifting very small-scale production and distribution to the next level was seen as a huge step for smaller initiatives and one that is not easily navigated. Reference was made to the lack of business acumen, contacts, and limited guidance to make the transition.

Examples of **legislation around food production** identified home kill and cheese making as two specific examples that limited local food production and distribution. Home kill was noted to be a traditional way of accessing health food for rural communities, but the new requirements add to the direct and indirect cost of that food source.

“People who are local food producers, the regulations that they have around them sometimes make it really expensive to be able to sell their food locally. The same small cheese operator has the same regulations put on them as Fonterra does. You know, the ability to compete with someone like that is really difficult”. — Kore Hiakai Zero Hunger Collective

Collaborations between community and business

Collaboration with business was an enabling factor for many community organisations. This was mostly referred to in terms of sponsorship and provision of food or discounted food. The Ministry of Social Development, among others, identified an opportunity for more local partnering between community organisations and businesses. KidsCan has gone further than other organisations in its industry partnerships by providing opportunities for industry staff to get involved in the packing and distribution of food. This provides labour and enables the business to contribute in a more meaningful way.

*“We will send food out to around 600, 700 schools and that will be around 400 palletised. Logistically, that’s a huge exercise but we harness the power of our corporate supporters to come in and pack that food because it offers them corporate volunteering activities as well. Nowadays, they don’t just want to write you a cheque. They want to become involved, and they want to physically contribute in some way to the programme.”
Julie Chapman, KidsCan*

Just providing emergency food isn't enough

Pockets of community organisations were described as more acceptable places to seek emergency food when the need was accepted, and the response was provided without having to prove one's worthiness for support.

“A lot of food banks that were community run, volunteer run, sometimes social service run, there was a sense of “come, prove your need, we will tell you what the criteria is, and we will prescribe what we give you”. Probably the mid-2000s, a lot of organisations are realising that they have become a control system... This is meant to be [about] compassion. When compassion leads us, how we frame that model rather than a model based on criteria... Some of that was driven by funding sources. Some of that was driven by the fact that as soon as you had a Work and Income [WINZ] system, referring people for food parcels rather than self-referring, there became a sense of criteria to prove yourself.” — Kore Hiakai Zero Hunger Collective

Emergency food sources also need to be **culturally appropriate and cater to diets** which are becoming more common in New Zealand such as halal food. More providers of emergency food are aware of the need to have protein sources other than meat protein available.

Both the Fono and KidsCan referred to having youth input/co-design in their processes to ensure their responses are relevant and acceptable. Given the level of support from stakeholders for making sure children have access to healthy food, this may warrant further consideration.

The **quality of emergency food** was also identified as an issue because poor quality food isn't healthy food which reinforces the stigma associated with needing emergency food. One stakeholder remarked that we should be giving our “best to those who have the least” and that there is a societal impact if this inequity is not addressed.

Emergency food and donated food must also be acceptable and palatable to those receiving it. We heard about the mismatch of providing unfamiliar ingredients to people who did not know how to cook them or did not enjoy them. While some palate adjustments were seen as beneficial, this should not come at the cost of leaving people hungry.

“But the one thing that I've learned over 18 years of doing this is you still have to make it palatable for the kids to eat. The top of our list comes taste followed by nutrition... Some people are of the view that if they're hungry enough, they'll eat it. But my view is, why should they, if they don't like it, give them something that they like and that they'll eat.... We don't have to go overboard on

the health side when what we're actually talking about is people who are going hungry.” — Julie Chapman, KidsCan

Support by invitation and don't assume

Well-meaning assumptions that groups of people need support and advice about healthy food can backfire. Providing opportunities for support without evangelising and seeing the strengths in local communities was seen as a successful engagement approach. This acknowledges strengths and prevents people feeling judged or 'saved'. The example of people whose main income is a benefit as amazing budgeters was offered; they needed to be acknowledged for what they were achieving, rather than criticised for not eating healthily.

“Quite a few years ago, I had the privilege of developing a Community Nutrition programme, which has been modified and adopted by the Heart Foundation for their Pacific community nutrition certificate. Applying a Māori co-design approach required us to engage with the local community, which included a gang headquarters. I was interested in the kai that was on offer to their children. While we were there, the kaitunu kai (chef) was preparing a boil up, which consisted of a wide variety of vegetables. The meat was cooked in a separate pot. The kaitunu kai (chef) didn't cook it together because some of the kids preferred to eat their vegetables separately from their meat. The general assumptions are that this community wouldn't understand how to cook kai in a healthy way, and that they would need professional advice to show them how to do it. My research contradicts this ideology. This community knew exactly what their whānau nutritional needs are and they have the knowledge to apply this.” — Sande Mareroa-Gates, Auckland Regional Public Health.

Education and information we can trust

The minimal education of health professionals in terms of basic nutrition was seen as a barrier and missed opportunity to promote sound messages about diet.

“Medical students and nursing students and others are not taught this... If Auckland and Otago medical schools were both to commit themselves to actually teaching decent nutrition, the importance of food environments etc, then the public would be more likely to hear about it... We haven't actually got the health professionals sufficiently on board.” — Professor Sir Jim Mann, Department of Medicine, University of Otago

The Heart Foundation is mentioned here because it emerged so strongly during the analysis process as a contributor to others' success. The Heart Foundation has extensive networks at national, regional, and local levels. It is an organisation that brings incomparable credibility to educating and advising on a range of food related activity.

8.3. Aspirations for the future

We discuss these in more detail in Section D. They are represented in this colour in the diagram in Section 11.

- Moves to decentralise the food system ignites local food systems taking account of diverse communities and parts of the food system.
- Schools and early childhood settings would feed more children providing children with a positive start in life, reducing pressure on families, and providing a foundation for other environmental change in these settings.
- There would be greater understanding of community strengths and current initiatives as well as needs.

9. MICRO LEVEL INFLUENCERS

We have used the term **micro** level to include the experiences of individuals and whānau including attitudes, norms, and skills. Small-scale locally led initiatives, and other activity such as local partnerships are considered also at this micro level.

9.1. What stakeholders say has worked

As identified at the meso level of the food environment, stakeholders described local food environments and coordination as effective.

Locals working with locals

The following points summarise what works, and we go further into some points:

The genuine, local connections that locally led responses benefit from. Local people and organisations are in tune with local needs. This was said to be particularly relevant for Māori and Pacific communities for whom whānau-based approaches, such as Whānau Ora, were identified as effective approaches. The Fono is an example of a community agency that ensures any door is the right door

to connect people to the information, support, and resources they need, be that advice dealing with cellulitis or food scarcity. People coming in for their COVID-19 vaccinations were provided with food or vouchers too. When it comes to individual or family intervention around healthy eating, the conversation needs to be relevant to the person's circumstances and culture.

“Link in with the person's culture. Personalise it and contextualise it, then they own it. A story needs to be told authentically and genuinely.” — Mafi Funaki-Tahifote, healthy strategy and clinical dietetics

The agility to respond quickly to needs was demonstrated by local initiatives in the COVID-19 pandemic, and more recently in the adverse weather events impacting across the country (and most severely in Northland and the East coast).

Local collaborations were referred to that included partnerships with local business. Local partnerships with businesses boost local action.

Organisations such as the Fono partner with local tertiary colleges and take interns (social workers, nurses, and other clinicians). This grows interns' understanding of the communities' cultures and realities of life so they can respond effectively to opportunities that relate to food as well as other matters.

Local economies were mentioned only a few times, but examples of local networks were also important in sharing food, particularly food that is considered special to one's culture. For example, people were using social media channels like Facebook to notify social contacts that fish had been caught and that so many fish could be purchased for \$20.

Starting with the children is the micro perspective of the broader support for school-based programmes that has been identified as successful. Intervening early to educate, introduce a range of foods, and teach skills around cooking and gardening to children were all viewed as useful.

9.2. Barriers and enablers of success

Moving further downstream, barriers and enabler of access to healthy food are experienced at the level of individuals, whānau, and individual communities.

Access to healthy food varies and comes with a side of judgment

Access in terms of proximity to, and affordability of healthy food varied considerably. People on lower incomes received more judgement around their experience of food scarcity, and assumptions were made that they were simply making poor choices or were unable to manage their budget.

These negative attitudes towards people assumed to “make poor choices” were said to have created barriers to building relationships, reaching those in need, and affirming people’s rights to dignity and choice.

“As soon as you start removing relationship from kai, this is where people don’t get access to what they need but it’s also where you get a system, systems-based approach which means this regulation [comes in] and in this way the criteria creeps in.”

— Kore Hiakai Zero Hunger Collective

The volunteer workforce is the backbone of many local initiatives, but it is vulnerable

At the community-level, there is an **over-reliance on volunteers to gain funding and deliver initiatives**. A few stakeholders mentioned that this limits scale and sustainability, and that while volunteers may still be needed (and desirable to include especially if it is about community spirit and social cohesion) there needed to be funded roles that would provide coordination and continuity.

Smaller initiatives often relied on a few key volunteers and local leaders which could be challenging to sustain if people’s availability and commitment waned. Community gardens are an example of an initiative that can work well but which relies heavily on volunteer commitment.

“If we’re going to ask members of our community who’ve got a huge amount to add value and support others, we need to start actually acknowledging them financially. They need to be paid.

They need to have their expenses reimbursed. I think there’s been an awful lot of “we’ll set up this volunteer programme” and people might want to [help] but it’s very unusual for people to have the capacity to say yes, I can throw myself into that.”

— New Zealand Nutrition Foundation

Personal skills are in decline

Many stakeholders perceived that there had been a **decline in personal knowledge and skills around growing, preparing, and cooking healthy food**. This was noted across cultural groups, and the value of this was seen to extend past health into a sense of belonging, history, and connection.

Nutrition and diet information can be complex and difficult to understand, and the presence of social media could increase access to information that is helpful and also inaccurate. A few stakeholders noted that home economics short courses or classes have declined in New Zealand’s school system, contributing to a decline in personal skills.

Growing interest in where food comes from

A few stakeholders identified the trend that **more people are interested in where their food comes from, and that more people are trying to purchase from local businesses and “ethical producers”** (for example, organic or free-range products).

Locally produced food was seen to support the consumption of healthy food for individuals and whānau. While the shift towards plant-based diets and products is at one pole of the continuum, the increasing interest in local and domestic produce, and knowing the province of food items was noted to drive interest in healthier food choices for people who could afford to make these choices.

Not everyone has a place they can grow food at home. The Fono began providing grow boxes as a solution to this, inspired by a UK initiative.

9.3. Aspirations for the future

We discuss these in more detail in Section D. They are represented in this colour in the diagram in Section 11.

Positive changes at the macro and meso levels would be felt by individuals and whānau.

- Communities would have increased purchasing options for healthy foods.
- Fresh food would be more available at home and in gathering places.
- Local needs and tastes would be catered for in any initiatives.

SUMMARY OF SECTION C

Stakeholders identified a range of approaches and interventions across macro, meso and micro levels of the food environment that **have worked** to move towards healthy food for all. These included **evidence-based policies and practices from New Zealand and overseas, school-based programmes, nutrition guidelines, the Health Star Rating on packaged food, reformulation** (less salt, fat, and sugar) and the **Healthy Eating, Healthy Action strategy. The success of locally led initiatives and local networks, redistribution, and the work of the New Zealand Food Network** was also highlighted. Locally led initiatives based on **holistic, whānau ora approaches** were identified as successful

because they were well **connected to their community, were acceptable and responsive** to their needs.

Stakeholders who mentioned the same approach or initiative did not always agree on the extent of its success or effectiveness.

SECTION D — TOWARDS HEALTHY FOOD FOR ALL

In this section, we bring together major themes from stakeholders' aspirations for the future. We use the term aspirations because their views reflected evidence-based approaches, their values, and what they hoped could be realised. These aspirations are firstly described as they relate to the macro, micro and meso levels of the food environment. These are translated into diagram form, with views represented proportionally in Section 11 along with reflection on the stakeholder mix that has contributed to this future vision. The section and the report ends with a summary of the strengths and resources that provide a strong platform for change.

10. MAKING THE VISION A REALITY: STAKEHOLDER ASPIRATIONS FOR THE FUTURE

A mixed approach was felt to be necessary, including both top down and bottom-up interventions. Many of the interviewees called for strong national leadership to guide activity across the different levels. Stakeholders tended to discuss influences at the macro and meso levels which would influence the experience of individuals and whānau (at the micro level). Underlying values around food could go beyond seeing food as a “fuel” to being a source of health and wellbeing, and intimately tied with identity and social interactions.

Stakeholders felt a strengthened national vision would lead to strengthened regional and local levels with their unique geographies and population composition. Recognition of community leadership and community-driven solutions would ensure that local realities are catered for. This would entail more locally led and funded initiatives over a longer timeframe to ensure that they were sustainable. Local initiatives often rely on volunteer goodwill, and while there were still benefits to this approach, funding would recognise people's efforts and sustain initiatives.

10.1. Change at the macro level

Stakeholders found it natural to describe macro level shifts that would enable healthy food for all. Their aspirations for the future draw on the paradigms

described in Section B, and the realisation of approaches that work or are needed at the macro level.

Before going into specifics, it is important to comment on underlying values and principles:

- Stakeholders identified the strengths of Te Ao Māori in making a positive way forward. It provides a culturally appropriate foundation for Aotearoa New Zealand's food environment and values indigenous rights and knowledge.
- Te Ao Māori also encompasses a range of connections among people, plants, animals, whenua, and awa/moana. Within Te Ao Māori, consideration can be given to leadership and sovereignty, the natural environment and planetary health, as well as wellbeing goals and sociocultural values.

At the macro level, stakeholder discussion focused on central government leadership, a clear strategy for the future, and improved information and evidence.

A central government agency with a wellbeing focus on food

A **central government agency which focuses on how food ensures the health and wellbeing** of Aotearoa New Zealand's people would provide central leadership. A multidisciplinary approach would be needed including an economic focus, public health, agricultural perspectives and so forth. Coordination could happen across government entities such as the Ministry of Business, Innovation, and Employment (MBIE) and the Ministry for Primary Industries (MPI), which would retain specialty portfolios. Sentiments were made that government-led activity works and that the last 15 years or so is testament to this with only small peripheral gains achieved in recent years.

The Ministry of Health was thought to be in a strong position to lead this work. It is viewed as a powerful ministry with strong links to the Finance Minister and Prime Minister. It was seen as well-placed to provide leadership consistent with a wellbeing focus. Health "levers" would help with rights-based arguments about access to (healthy) food. If access to healthy food was framed as a health issue, this could activate stronger measures to ensure individuals and whānau can access healthy food.

Stronger central government leadership was endorsed by stakeholders with mandates at the macro level and those working directly with communities as these selected quotes illustrate.

"[Relating to extensive consultation] Those involved in food insecure communities... discussed that any solution other than

providing a more coordinated equitable society was essentially an ambulance at the foot of the hill or a sticking plaster solution. Their focus and intention was on the need for a national food strategy in New Zealand. And to continue what we've started — use what we've spent time to develop that national food strategy, and also ... a code of commitment that any and every New Zealand food system business could align with and, voluntarily sign up to, and that would commit them to completing food system actions, connected with the framework that would deliver positive outcomes, socially, economically, environmentally, for communities.” — Jack Keeyes, Mana Kai Initiative

“A local food system agency should be under Health... we need a Minister for Community Resilience or Wellbeing, and I think food resilience should be the core of this entity or agency.” — Julio Bin, Healthy Families South Auckland

It was suggested that the **roles and requirements of local councils and governing bodies would become more explicit** under this approach. We note that interviewees did not include any council representatives.

At present, the Ministry of Social Development (MSD) plays a key role in individual and family support in terms of case management support, assistance with food grants, and helping people return to employment and be independent of financial assistance. Their scope includes more work at a community level and they highlighted how the government's future role needs consideration.

“It's a good question – what's the government's role in this space particularly for MSD it has traditionally been through financial assistance... [our greater focus on communities] is changing that up. It's recognising that there is a lot of pressure on different parts of communities. It's not an equitable space... There's been a role [for government], and the question then goes, is this an enduring role? And I think this is where the government has some difficult decisions to make.” — Ministry of Social Development

One coordinated national food and nutrition strategy

Many stakeholders, including those working in national organisations, **supported the development of a national strategy created in partnership with Māori**. All layers of implementation would include working with Māori. It could include foundational statements on what is considered good nutrition. Attention would also be given to domains such as access and food security, sustainability, food distribution, and local food systems.

Some stakeholders considered the benefits and risks of working with parties that have commercial interests. It is important to explore the best ways of working with industry so that their drivers are understood and can be catered for, while not overwhelming goals around the public good and population health.

We describe key components below.

Central government would lead the strategy while fostering local solutions. A comprehensive strategy would extend down to regional, local government, and community levels.

Healthy food would be sustainable and accessible with measures to sustain farming and growing sectors, support these sectors to comply with reasonable regulations, and navigate current issues such as extreme weather events and supply chain problems.

“The idea of being a food producer or a farmer at the moment, or a fisher, is deeply unsexy. And we have got a real big problem coming where if we don’t start celebrating food again, if it’s not a thing that brings people joy, if it’s not a thing that people feel connected to, then we’re not going to have a next generation of food producers in this country. We’re already starting to see the wheels come off with a lack of succession planning in farming where a lot of farmers see selling their farms, either for forestry or for regional development, as their exit strategy.” — Hilary Pearson, Freedom Farms

Longer-term funding of initiatives: Packages that take a longer-term view would support the longevity of good initiatives to have impact. This also flows down to greater certainty for the people and agencies that put the initiatives in place. A focus on the longer-term would reduce the inefficiency and uncertainty of competing for funding. Monitoring and evaluation would be incorporated in these initiatives.

The strategy would support the achievement of the following outcomes:

Restrictions on advertising would make unhealthy food less visible and attractive. Other measures could affect the placement of food outlets. These were seen as very helpful measures and especially beneficial to children and people living in lower income communities so that they are not exposed in any environment – online included.

“Children need to be exposed to the right messages. And they’re not because our food environment is rubbish. The advertisements for sugary drinks and unhealthy foods. The way

supermarkets are laid out at eye level with cheaper, not so good foods, and more expensive not so good foods. Whole aisles dedicated to alcohol and sugary drinks. A quick whisk through the vegetable and fruit section.” — New Zealand Nutrition Foundation

Healthy food is affordable: A number of stakeholders encouraged a review of how the large export market impacts on prices in the domestic market. There was a sense that our people, children in particular, are missing out.

Stakeholders identified several approaches that would combine to bring healthy food within reach:

- Intervention to address higher domestic food prices resulting from so much food being exported.
- The economist we spoke with discussed the potential for unbundling the grocery sector and introducing greater competition and innovation to benefit consumers. They noted that significant unbundling would not happen voluntarily, may increase costs and barriers to healthy food in the short term, and that a long-term plan would be needed.
- No GST on foods like fruit and vegetables was endorsed by some stakeholders so that healthy food would be more affordable. On the other hand, some stakeholders found this policy to be less equity-serving than it seems at face value. It was noted that wealthier households would find a product they could afford even more affordable.

“There is actually a piece of work needed, analytical economic work [is] needed on what the opportunities are to change those relative prices using taxes on the one hand for sugary drinks and unhealthy foods. And on the other hand, providing subsidies, or take GST off, or funding other opportunities to get cheaper, healthier food to people. So that is actually a piece of policy work that actually needs to be done.” — Health Coalition Aotearoa

An innovative approach was floated by Mana Kai to give producers the opportunity to assign a percentage of their product to the domestic food supply chain at a discount, the government would add a further subsidy to that product and make it available at a heavily discounted price through approved food networks.

Healthy food is easier to choose through better food labelling: Some stakeholders wanted stronger promotion of healthy food options and clear national guidelines. One way to achieve this would be through improving and expanding the Health Star Rating.

“The voluntary Health Star Rating – making that mandatory because I think anything that’s voluntary led or voluntary

reformulation doesn't tend to work.” — Cancer Society of New Zealand

Food health literacy is improved: This refers to increasing the system capacity and the health literacy of individuals. A small number of those interviewed felt that health professionals such as general practitioners, practice nurses, could increase the focus on nutrition in health consultations if they were equipped with key nutrition messages and/or resources. Comparisons with the “diffuse” ABC model of tobacco smoking assessment and advice which advocates brief advice reaches a large segment of the target population was made; a potentially effective approach that would also address the “limited” dietitian workforce.

*“We push food insecurity into a social development frame, into a welfare frame so it becomes MSD’s problem and then it becomes a social services problem. Be we often have speculated, what would it be like if as a country we said, if you have food related poverty you go to the doctor and you get a Green Prescription, you get a prescription for good food. It becomes a health issue because actually the dollars spent on the consequences of food related poverty actually ends up in the health system or the criminal justice system or on the education system. What if we treated this as a health issue?” — Kore Hiakai
Zero Hunger Collective*

*“How do they have four or five key messages [about healthy food and diet] which they give consistently from all their team? And the days of pamphlets and information in only this form are over. It’s different ways of communicating stuff using different forms of media that give people confidence.” — Jane Cartwright,
New Zealand Breastfeeding Alliance*

Improved information and evidence

We know what is working: It was felt that the current information void could be filled with evidence on the dietary patterns of Aotearoa New Zealand’s adults and children and an ongoing commitment to keep this information up to date. Information down to regional and community levels would empower communities and support appropriate action. The overarching food strategy could include a monitoring and evaluation framework for synthesising, interpreting, and learning from evidence across the food system. The use of evidence-based action and intervention would embrace kaupapa Māori as well as traditional western methods.

10.2. Change at the meso level

Stakeholders wanted to see flourishing regional and local food environments. Accessing food from regional and local suppliers was seen to be more affordable and less prone to distribution challenges. The emphasis on regional/local reflected values around having more knowledge about food origins, as well as wanting to support smaller businesses and local suppliers. Food producers and retailers were also in favour of supporting local suppliers and many felt their current buying practices reflected this. The vitality of meso food environments would need to be supported by coordination, and solid information at this level about community resources and needs.

Supporting local food systems

As well as having an overall national strategy, the **link with regions and local communities** was seen as vital. Greater local government involvement is needed, and this could have a powerful impact on how land can be used. A regional layer to a future approach could take account of the diverse geography of Aotearoa New Zealand cities and towns and the variance in local growing and production.

“Enable regions to identify ways forward for creating healthier, productive food environments. You pull it away from the big dynamics of national politics... Give them some national mandate, give them funding to try things, to test things, to get things out there. Set up a national conference every year.”

Health Coalition Aotearoa

It was felt that sustainability goals would be met with **greater coordination around food recovery and redistribution**.

Healthy food would be more affordable with **lower cost or no-cost shopping solutions where needed**. Revival of local economies would boost local food production resulting in lower costs to consumers.

Community settings like marae, churches, and parks could include more community gardens which could inspire communities, build social cohesion, and build people's skills and knowledge. Some stakeholders added caution around the level of support for community gardens noting that these cannot provide food at scale. Their importance may be more symbolic and provide a bridge to building up personal skills.

The provision of emergency food with **donations from large retailers, and greater coordination of recovered and redistributed food** (particularly from large retailers) could be expanded. Both large retailers interviewed talked about their ongoing commitment to these programmes, with one retailer describing a goal to support around one dozen more social supermarkets in the next few years.

Growth in social supermarkets⁵ provides strong avenues for food to reach pockets of need in the community while shoppers have a more normal shopping experience of choosing items they need and want. Additional support is also available to shoppers who need it.

By locating emergency food and low-cost food provision more locally, existing relationships can be leveraged, and new relationships can be developed which could improve the futures of people needing to use such services. A stronger community approach which is based less on criteria, and more on relationship and holistic support was seen to be consistent with the highly personal and relational nature of food.

More distribution channels for small- and medium-sized producers should be available in communities. This would also expand consumer choice. Other advantages were identified:

- locally sourced produce would be fresher
- distribution would be opened up for “ethical food producers” who may find it difficult to sell through large supermarkets (for example, competing with home brands in the same niche)
- reassurance is gained from knowing where food comes from.

“If we wanted to realistically deliver equitable outcomes that are at a larger scale, then there’s significant investment that’s going to be needed. Impactful change will require transformational infrastructure investment, policy change, and innovative thinking, with centrally coordinated but locally delivered solutions, and appropriate strategic resourcing for the implementation and scaling of initiatives.” — Jack Keeys, Mana Kai Initiative

Schools and early childhood settings feed more children

Many stakeholders praised the **Healthy Food in Schools programme Ka Ora Ka Ako**, and they wanted eligibility expanded. Settings-based approaches can provide direct support and reach and support whānau.

“So, we’d like to see at least 50% of schools covered and secured. From a rights-based approach, [we’d like it to be] expanded to

⁵ For example, Wellington City Mission operates a social supermarket (see [article](#)). Foodstuffs is partnering to support more social supermarkets (see [article](#)).

all schools and secured.” — Cancer Society of New Zealand

“Whereas if it's a universal system, then it's just an investment for all of our children.” — Kore Hiakai Zero Hunger Collective

Schools were identified as not just a setting to provide food, but to wrap that round with education, skill development, and community involvement.

Schools and early childhood settings were described as hubs and access points to whānau and communities. Stronger food and beverage policies in schools would make these environments healthier, and these would shape norms for young people in their formative years. Schools often have land that can be used for food production which could directly benefit learners, be used in education sessions, and also be treated as a community resource.

“If you ask me now, what is the thing we need most? It's a school-based approach, we need to go back to that. Not just a school-based approach that has to do with free school lunches... But it should be part of a school programme. And the advantage of a school programme is it actually goes way beyond the schools. It goes to the parents, and it goes to the grandparents. It permeates the community.” — Professor Sir Jim Mann, Department of Medicine, University of Otago

“When we talk about schools and supporting students with nutrition it's always 5 to 12 ...we need that support but in reality the most significant outcomes happen from zero to five – the first 2000 days.” — Steph Shen, Auckland Regional Public Health

Greater understanding of community strengths, existing approaches, and needs

Consistent with greater coordination, approaches and initiatives coming into communities would be adjusted based on needs and existing strengths. Stakeholders with knowledge of Māori and Pacific communities identified a need to better understand and draw on local, Māori, and Pacific worldviews in the development of solutions. This was consistent with calls for understanding local environments more and enabling solutions to be developed more locally.

“There is much more local mapping of what is the food system... It (HEHA) was seen as world leading their whole, comprehensive approach, dealing with advertising, the composition of food, the schools and getting sugar out of schools and drinking water etc. But my sense was we didn't have a good understanding of what was actually happening in local communities and especially for

more diverse communities. For Pacific people we know people have very strong associations with social groups like churches. And so how is that food system operating? Who are the key influencers?... Understanding what some of those patterns are and then designing programmes that respond to those [and which do] not come over the top.” — Dr Debbie Ryan, Pacific Perspectives

10.3. Change at the micro level

Many of the approaches that would improve the experiences of individuals and families would be driven from the macro and meso levels. Individuals and whānau would have access to more local food sources, and personal food production would become more common (e.g., māra kai, allotments). People in communities would have increased purchasing options for healthy foods and this could include more community markets.

Local needs and tastes would be catered for

As well as local activity, changes at the macro and meso levels would have a positive impact on people’s overall lifestyles. This foundation would **help to build people’s personal skills and revive the transfer of family and traditional knowledge** around food production and preparation.

“People love the JUST COOK course, and they go and cook with their families and the outcomes are great.” — New Zealand Nutrition Foundation

Local approaches were described as needing to cater to people’s tastes and ensure that food has good nutritional value, is culturally appropriate, and palatable.

Many interviews referred to individuals and families having greater access to fresh food. Fresh food could be peppered throughout public spaces, and there was a desire to revive home gardening, address barriers for people in social housing or rented accommodation to having personal gardens, and increase people’s access to allotments.

“We used to have a māra kai kind of course and that was awesome. They went in and started a garden for you, and you just carried it on.” — Tu Kotahi Māori Asthma Trust

11. PREFERRED APPROACHES TO BRING ABOUT CHANGE

We start this section by offering reflections on interacting with stakeholders through the interviews and broader reflections on this topic. Then we report on an exploratory analysis of preferred approaches to bring about change. We close with summarising the strong foundations that exist for change, and drawing together stakeholder aspirations at the macro, meso, and micro levels.

The majority of stakeholders who participated are currently working to address shortcomings of the food system and are aligned with public health goals. While there was variation in the preferences and priorities of action to be taken, there was broad support for government led change, and variations under that overall approach.

Figure 2 (page 56) summarises the common themes of stakeholder reflections in terms of what works at the macro, meso and micro levels, the ways of working that are required to help realise the aspirations they have for Aotearoa New Zealand's food environment.

Following the figure, Table 2 (page 57) illustrates the source of support for a range of approaches that stakeholders felt were required to improve access to healthy food. The approaches most frequently identified were a central strategy, monitoring, community leadership, and Māori perspectives. As a contrast, approaches such as fiscal measures (e.g., discussion of tax and removing GST) and approaches to reformulate food or change food labelling received less attention from this group of stakeholders.

Figure 2 Preferred approaches for moving towards healthy food for all

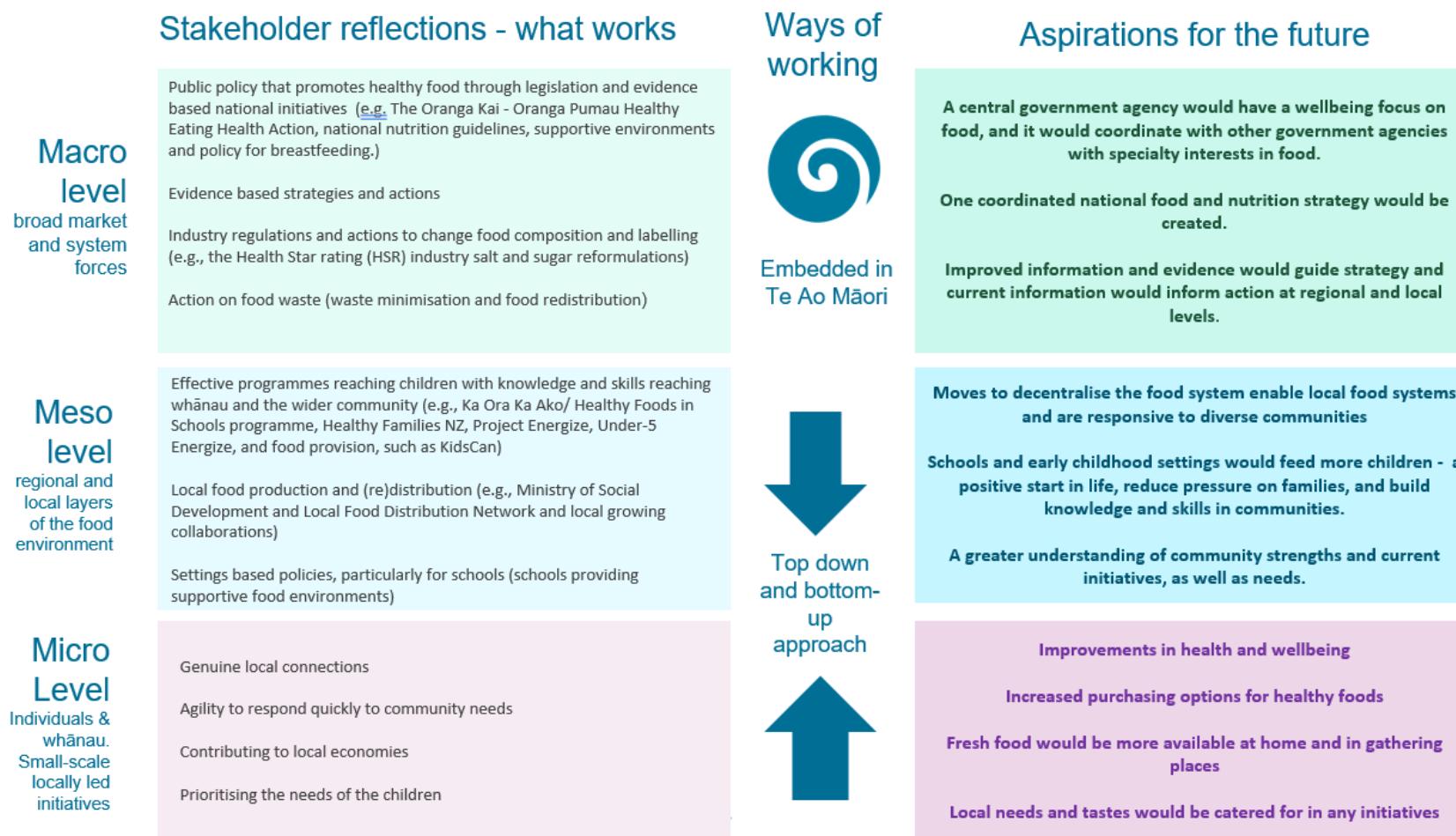


Table 2 Stakeholder support for the priority actions

FUTURE PRIORITIES FOR ACTION	NATIONAL FOOD & NUTRITION STRATEGY	COMMUNITY LEADERSHIP	MĀORI PERSPECTIVES, KNOWLEDGE & LEADERSHIP	INVESTING IN LOCAL FOOD SYSTEMS	HEALTHY FOOD IN SCHOOLS + SCHOOL POLICIES	EDUCATION & PERSONAL SKILLS	FOOD LABELLING & REFORMULATION	FISCAL MEASURES (E.G. TAX)
Stakeholders supporting this priority	Academics	Academic	Academics	Academic	Academic	Academic	Academics	Academics
	Advocacy groups	Advocacy group	Advocacy groups	Advocacy groups	Advocacy groups	Advocacy groups	Industry advocacy	Advocacy groups
	Community organisations	Community organisations	Community organisations	Community organisations	Community organisations	Community organisations	Industry representatives	Community organisation
	Government entities	Government entities	Government entities	Government entities	NGO	Government entities		
	NGOs	NGOs		Industry representative	Other stakeholders	Industry advocacy		
	Other stakeholders	Other stakeholders		NGOs		Industry representative		
				Other stakeholders		NGOs	Other stakeholders	

It is important to remember that these views were not gathered as part of structured interviews therefore they are only indicative and come from those who participated. The pattern of findings could be quite different if we had directly asked stakeholders about the relative importance of approaches such as partnering with Māori, community led initiatives, specific legislative and fiscal measures, and so forth, or included more disparate community representatives.

Different perspectives

Interviews included four individuals who represent manufacturers, suppliers, or major retailers and one written response from a major retailer. Feedback from this group tended to focus more on the food distribution system and consumer choice than the role of government and Te Ao Māori perspectives. This group promoted education and information, labelling, product reformulation, and small adjustments to advertising and product placement in stores (e.g., making lower sugar beverages more visible). To a lesser degree, concerns were raised about the availability of land for growing, and the future viability of businesses of growers (including succession planning). Concerns around the survival of farming and growing sectors were also voiced by a few other stakeholders that had a range of interests.

11.1. Hearing other voices

The stakeholders involved in this work held knowledge about many parts of Aotearoa New Zealand's food environment and could talk to a range of approaches, interests, and values that influence how the food system does and could work. The mix of perspectives helped with highlighting synergies, existing connections, and gaps, and provided an in-built helpful contrast to stakeholder views.

Drawing on what we heard, future engagement about this topic may benefit from including Ministry of Education and local council perspectives as a priority. Other types of stakeholders could potentially add value to the PHAC's work programme.

- Dental expertise — providing insights into nutrition patterns inferred from teeth removal and caries.
- Coordinators of farmer's markets — acceptability of farmer's markets and insights into their role in local food systems.
- Representatives from fisheries — seafood and indigenous perspectives.
- Local government — land use, support of local food systems, and links with central government entities.
- Climate change — issues facing New Zealand in the short-to long-term.
- Schools and kura kaupapa Māori.

- Experts in the psychology of consumer behaviour in food retail environments.

Stakeholder feedback focussed on populations experiencing barriers to healthy food, and the perspectives of those with the means to access healthy food who chose not to, were not considered. There would be value in including evidence from people from non-professional backgrounds, who don't have health knowledge to provide a more balanced perspective.

One of our conclusions from this process is that future work of the PHAC will need to be carefully scoped and clearly positioned in order to advance discussions, develop solutions, and retain stakeholder willingness to be involved. Stakeholders have been heavily invested in change and the next section identifies the key strengths to build on.

12. FOUNDATIONS FOR CHANGE EXIST

In the absence of central government leadership, other components provide a platform for change. This may best be supported by the nation's commitment to Te Tiriti o Waitangi, increased emphasis on the climate crisis and sustainability, commitments of government agencies to address inequity, and a common desire to protect children and provide them with the best start in life. There are strong foundations to build on for whatever change occurs.

Drivers around fostering wellbeing and protecting children's health provide part of the foundation on which to build further change. As discussed earlier, Article 2 of Te Tiriti o Waitangi provides a strong platform for protection and intervention.

A changing landscape

In this report, we have noted societal shifts in terms of encouragement for people to buy local, the growth of community gardens and interest in local food production, diversifying of diets and greater inclusion of plant sources in diets, and heightened interest in climate change and sustainability. In terms of large-scale food retail, the appointment of the Grocery Commissioner at the Commerce Commission would be expected to improve competition in the grocery sector. Further analysis from Westpac Institutional Bank argues for less centralisation of supermarket retail in New Zealand and encouragement of greater innovation, and this could spark further analysis and discussion.

Existing evidence and other frameworks

Through this process, we heard about stores of public health evidence such as the

INFORMAS work on benchmarking Aotearoa New Zealand's food environment, and frameworks like Mana Kai which has brought together a range of stakeholders (some took part in the current interviews) including people representing food production and retail.

“There’s no shortage of big frameworks. This [Mana Kai] is a good one and it’s starting in the right place. You could spend quite a lot of time trying to work on what’s the labels and things that are in the boxes which is not necessarily a productive use of time. I think the challenge with all of these frameworks is – okay we get it, that’s the overall aim, everybody’s on board. It’s a framework combined but the challenge is bringing it down to implementation.” — Health Coalition Aotearoa

“In the Mana Kai initiative that I’ve been a part of, the whole framing of it, we very quickly got to the point where we said the unique framing we have here in Aotearoa New Zealand is the fact that we actually have a tangata whenua framework. So, if we were going to build a national food strategy, we would have to do that through an indigenous lens. We spent time exploring that even further, the framework that was developed was a Māori-based framework because when you put mana at the centre, when you understand the dynamic of what mana does and what mana is, then you’re going to be able to honour and environmental framework that puts Papatūānuku in that framework. You can’t have mana without considering Papatūānuku. It also allows us to value the kai that travels through that system, the water, the land, everything that’s contributed to creating that kai.” — Kore Hiakai Zero Hunger Collective

Interviewees shared research articles and documents which can be used by the PHAC. **Desktop research will be useful in the framing of advice to government. A lot is known about what to do, and stakeholders’ views converged on key areas.** Having strong leadership, an overall strategy with strong vertical coordination (central and local government, national to regional to local levels), and greater support for sustainable community action would be strong steps forward.

As noted, there is strong support for producing up to date evidence for adult and children’s diet and nutrition in Aotearoa New Zealand. We understand that a methodology for an updated survey has been developed and could be undertaken. A stakeholder also referred to child dental data around caries and teeth extractions which could also be drawn on to infer trends in nutrition.

Stakeholders are very knowledgeable and well connected

Stakeholders had deep knowledge of their respective sectors and communities. Several stakeholders appear to have a significant breadth of knowledge of what is happening in Aotearoa New Zealand's overall food environment as well as internationally.

It was evident that significant networking and collaboration is already occurring among the stakeholders we talked to. Opportunity exists for even greater coordination. A comprehensive system map of Aotearoa New Zealand's food system could result from further engagement with this group.

Some stakeholders seemed especially well connected to others. It was evident, for example, that numerous collaborations are occurring with the Heart Foundation, and this spanned work with community organisations, NGOs, and entities involved in food production and retail. Members of Mana Kai and Health Coalition Aotearoa in particular have considerable individual and organisational networks.

Significant programmes and infrastructure exist

The Healthy Food in Schools programme has been implemented across Aotearoa New Zealand schools. This provides a strong base for other changes to occur in these settings, and there is potential for schools to play broader roles in local food environments and the potential to educate and benefit whānau connected to schools.

A number of stakeholders talked about Healthy Eating Healthy Action (HEHA), and it was touted as world leading. There is a desire for comprehensive strategies like this again. Comments were made that approaches like HEHA could be improved with a stronger Te Ao Māori foundation, and if a focus on creating changes to the environment took greater account of existing community activity.

Gains have been made in food recovery and waste minimisation. The provision of emergency food is undergoing change with a national network of foodbanks, and distribution of surplus and donated bulk food items via the New Zealand Food Network⁶. The COVID-19 pandemic drew attention to food insecurity and local food systems, and work was done locally and regionally to improve food security and sustainability. This planning and infrastructure can be built on.

Community knowledge and activity is strong

A range of organisations and collectives have strong community links such as marae and iwi/hapū, public health units, Healthy Families, health and social service providers, public health advocacy organisations, and NGOs. Local knowledge and relationships are strong in many places. There is consensus for greater regional and local activity which is linked to and enabled by national support and a vision.

⁶ See https://www.nzfoodnetwork.org.nz/s/about-us?language=en_US

Leadership can be built on in communities and solutions can be coordinated to meet local community needs.

The energy and desire for greater coordination of community solutions could boost local food systems, strengthen local economies, and better address the needs of rural communities.

SUMMARY OF SECTION D

Aspirations for Aotearoa New Zealand's food system imagined a future where Te Ao Māori, wellbeing, and sociocultural perspectives on food drive change and help to reorientate the workings of Aotearoa New Zealand's food system. The majority of stakeholders we interviewed outside of the food industry wanted clear national leadership and coordination, a comprehensive strategy for moving forward, evidence to track progress, a shift to regional and local solutions, and a revitalisation of local food environments.

Barriers to healthy food are systemic, complex, and reach far beyond the remit of the Ministry of Health. The solutions proposed require action that begins with a comprehensive and coordinated strategy across all of government if access to healthy food is to become equitable.

SECTION E: APPENDIX

13. CONTRIBUTORS

The following table identifies the contributors to the research. Those marked * or ^ provided or included Māori and Pacific perspectives, respectively.

Table 3 Agencies/organisations who contributed to this research and the people we spoke with

Agency/Group	Key contact/participants	No.	Category assigned
Academic/ researcher	Cliona Ni Mhurchu	1	Academic
Auckland Regional Public Health *	Sande Mareroa-Gates plus team (3 people)	4	Community organisation
Cancer Society	Emmeline Taptiklis & Emma Shields	2	NGO
Commerce Commission	Cameron Vannisselroy (with MBIE)	1	Government entity
Eat New Zealand	Angela Clifford (with Freedom Farms)	1	Advocacy group
Foodstuffs NZ	Melissa Hodd	1	Industry representative
Freedom Farms	Hilary Pearson (with Eat NZ)	1	Industry representative
Health Coalition Aotearoa*	Boyd Swinburn, Lisa Te Morenga, Sally Mackay	3	Advocacy group
Healthy Auckland Together Team	Sally Hughes	1	Advocacy group
Healthy Families South Auckland/Southern Initiative	Julio Bin	1	Community organisation
Healthy Families team, South Island*	Wendy Findlay & two colleagues	3	Community organisation
Heart Foundation	Justine Munro, Dave Monro	2	NGO
Kids Can	Julie Chapman	1	Community organisation
Kōkiri Marae Keriana Olsen Trust*	Cheryl Davies & kaimahi (Tu Kotahi Māori Asthma Trust)	8	Community organisation
Kore Hiakai Zero Hunger Collective	Tric Malcolm	1	Advocacy group
Mana Kai	Jack Keays	1	Advocacy group

Agency/Group	Key contact/participants	No.	Category assigned
Identified through the MAS Foundation[^]	Mafi Funaki-Tahifote (health strategy and clinical dietetics)	1	Other
MBIE	Stephen Trebilco (with Commerce Commission)	1	Government entity
Ministry for Social Development	Jesse Nichols & team	5	Government entity
New Zealand Food & Grocery Council	Carole Inkster Raewyn Bleakley	1	Industry advocacy
New Zealand Nutrition Foundation	Jane Bollard & team	5	NGO
NZ Breastfeeding Alliance	Jane Cartwright	1	NGO
Otago Uni academic	Jim Mann	1	Academic
Pacific perspectives[^]	Dr Debbie Ryan	1	Other
Restaurant Association NZ	Marisa Bidois	1	Industry advocacy
The Fono[^]	Tevita Funaki	1	Community organisation
Toi Tangata*	Haylee Koroï	1	Community organisation
University of Otago, Centre for Sustainability*	Professor Merata Kawharu	1	Academic
Vegetables NZ	Antony Heywood	1	Industry advocacy
Westpac Institutional Bank, economics team	Nathan Penny & Paul Clark	2	Other
Woolworths NZ Ltd	Ross Young and colleagues	1	Industry representative

14. INTERVIEW RESOURCES

The interview schedule and the PHACs vision and food environment concept map were used in interview.

14.1. Interview schedule

The schedule was developed by the synergia team following our briefing for this work. The schedule was reviewed by representatives of the PHAC and its secretariat before being used. The interviews were conversational style with the following questions included.

Tell me about you?

- Confirm position/representation.
- Identify and acknowledge any known connection/position of interviewee/their organization regarding the food environment.
- Refer to the PHAC draft outline of its work on food environments as an insight into the topic and how the PHAC is approaching its work.

What, if anything, has successfully moved us towards healthy food for all?

Within the last decade, what programmes or strategies do you consider have been effective? Has anything been surprisingly successful? Probe around National/Local levels and why they worked.

What hasn't worked?

Are you aware of any untried or unsuccessful approaches? Probe around what would make that feasible/work. What were the challenges / barriers? How do you think these could be overcome? To what extent would you need help from other parties, organisations, a change in policy settings?

Where should we focus to close the equity gap?

To what extent have programmes or solutions considered Māori, Pasifika peoples, people on lower incomes, or other groups that face greater barriers to the consumption of healthy food?

- From your perspective – what are the unique needs of those most in need or at risk, especially Māori and/or Pasifika?
- What is making, or could make a difference, even a small difference?

What if healthy food for all was framed as a right? What would that mean for your sector?

How can we get closer to the vision of healthy food for all?

Do you have any thoughts on the most practical way the vision of health food for to all can be achieved? Probe best “bang for buck” re food equity.

What are you aware of that could work where you are, or in other parts of the food environment? Probe overseas, cultural practices etc.

Who else would you suggest we talk to or could contribute to PHACs work? What perspective would they bring to this work? (Particularly Māori and Pasifika).

14.2. The vision and concept map

The concept map included in Section 2 was shared in most interviews and stakeholders generally found the concept map to be quite intuitive. Other feedback on the concept map from the interview process is noted here:

- Some stakeholders remarked that the language should be as plain as possible (e.g., consider rewording terms like ‘structural factors’) if it will be used in the future.
- The vision presented in the concept map was: Everyone in Aotearoa eats food that enables their wellbeing and health. This framing is somewhat person-focused and individualistic.
- The right to healthy food can stand alone and does not need to be connected to the Treaty.
- Education needs to be included.
- The wellbeing of the planet and environment/impacts need to be reflected.
- ‘Promote’ could replace ‘enables’ in the vision because this takes an active stance consistent with putting Te Tiriti into practice.