

3 February 2021

[REDACTED]

By email: [REDACTED]
Ref: H202009294

Dear [REDACTED]

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) to the Ministry of Health (the Ministry) on 15 December 2020 for:

- 1. What is the total cost to the MOH of SUDI annually?*
- 2. Does the MOH have a specific campaign to reduce the incidence of SUDI?*
- 3. What specific measures is the MOH taking to reduce the incidence of SUDI for Māori?*
- 4. How much money in total does the MOH spend on SUDI prevention annually?*
- 5. How much money in total does the MOH spend on SUDI prevention education annually?*
- 3. Who/which organisations are the recipients of funding for SUDI prevention education?*
- 4. How much funding does each organisation receive annually?*
- 5. Are organisations receiving funding for SUDI prevention education required to provide information about effectiveness of their education, and if so, what is the evidence they are required to provide?*
- 6. Are organisations receiving funding for SUDI prevention education required to provide numbers of clinicians and members of the public they have provided education to?*
- 7. How much funding in total does the MOH provide to DHBs to spend on SUDI prevention education annually. Please break this down by DHB if possible*
- 8. What evidence does the MOH have that current education is reducing the incidence of SUDI, and specifically for Māori?"*

Information in response to your request is outlined below.

"1. What is the total cost to the MOH of SUDI annually?"

In 2017, the Government committed \$5.1 million per annum for the National SUDI (sudden unexpected death in infancy) Prevention Programme (NSPP). This is allocated across 20 district

health boards (DHBs), DHB contracted regional coordinators; and a national coordination service currently delivered through Hāpai te Hauora.

“2. Does the MOH have a specific campaign to reduce the incidence of SUDI?”

The current focus of the NSPP is to offer and provide an infant safe sleep bed (ISSB) (wahakura or pēpi-pod) to those at highest risk of SUDI, where the mother smoked during pregnancy, or where the parents want to share a sleep space. The Ministry also funds 16 stop smoking services, five of which sit within DHBs. All stop smoking services offer multi-session behavioural support and a range of medications, including nicotine replacement therapy.

“3. What specific measures is the MOH taking to reduce the incidence of SUDI for Māori?”

Hāpai te Hauora’s delivery of a National SUDI Prevention Coordination Service under a Ministry contract includes, but is not limited to:

- the provision of ongoing wānanga wahakura to help improve availability and access to wahakura
- helping increase Māori health literacy through promotion of SUDI prevention messages and activities via a range of media (print, radio, and television)
- delivery of webinar on safe sleep and wahakura in partnership with SafeKids Aotearoa and Professor David Tipene-Leach.

For the past two years, the Ministry has explored strategies to improve smoking cessation outcomes for Māori. This included a co-design and developmental evaluation process engaging directly with wāhine Māori who have lived experiences of smoking, as well as liaising with health and quit coaches. These coaches are also exploring innovative ways of working with wāhine Māori.

The result of the co-design sessions is outlined in Ka Pū te Ruha, ka Hao te Rangatahi – Good practice guidance for stop smoking services. This guidance enables stop smoking services to work in more responsive ways with young wāhine Māori which is publicly available on the Ministry website: <https://www.health.govt.nz/system/files/documents/publications/good-practice-guidance-for-stop-smoking-services-oct2019.pdf>.

“4. How much money in total does the MOH spend on SUDI prevention annually?”

Please refer to the response in part one of your request.

“5. How much money in total does the MOH spend on SUDI prevention education annually?”

While the Ministry has key focus areas, each region/district is responsible for implementing services that respond to their identified local needs, including education; and in alignment with other services that support SUDI. Therefore, funding is not specified for SUDI prevention education as it is a component of SUDI prevention services as a whole. This is to enable organisations to respond according to their needs.

“6. Who/which organisations are the recipients of funding for SUDI prevention education?”

“7. How much funding does each organisation receive annually?”

“8. Are organisations receiving funding for SUDI prevention education required to provide information about effectiveness of their education, and if so, what is the evidence they are required to provide?”

“9. Are organisations receiving funding for SUDI prevention education required to provide numbers of clinicians and members of the public they have provided education to?”

“10. How much funding in total does the MOH provide to DHBs to spend on SUDI prevention education annually. Please break this down by DHB if possible”

Funding for SUDI prevention is not broken down to specific activities (ie, prevention education). As such, parts six to 10 of your request are refused under section 18(e) of the Act, as this information does not exist.

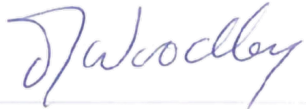
“11. What evidence does the MOH have that current education is reducing the incidence of SUDI, and specifically for Māori?”

SUDI is a multi-faceted issue and any reduction in SUDI incidence cannot be singularly ascribed to education.

I trust this information fulfils your request. Under section 28(3) of the Act you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Ministry website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Yours sincerely



Deborah Woodley
Deputy Director-General
Population Health and Prevention