



13 April 2026

Ref: OIA-2025/26-0588

Hayden  
fyi-request-32770-025ababe@requests.fyi.org.nz

Tēnā koe Hayden,

**Official Information Act request relating to cross-portfolio mortality or health impact assessments**

Thank you for your Official Information Act 1982 (the Act) request, which was received by the Department of the Prime Minister and Cabinet (DPMC) on 16 March 2026. Your request related to cross-portfolio mortality or health impact assessments in relation to economic policies. Your request was for (numbering added for ease of reference):

*“Under the Official Information Act 1982, I request: [Numbering added for ease of reference]:*

- [1] Any formal mechanism, framework, or process by which ministers receive advice on the cross-portfolio mortality or health impacts of economic, fiscal, or monetary policy decisions prior to those decisions being taken or confirmation that no such mechanism exists.*
- [2] Any Cabinet Office guidance, circular, or directive requiring agencies to assess potential mortality or health system impacts when developing policy advice for Cabinet consideration.*
- [3] Any instance since October 2023 in which a Cabinet paper, regulatory impact statement, or policy briefing has included an assessment of potential mortality impacts arising from economic policy settings including but not limited to fiscal tightening, benefit conditionality changes, or housing affordability measures.*
- [4] The process by which the Policy Project or DPMC ensures that policy advice reaching ministers reflects cross-portfolio impacts specifically where a decision in one portfolio (e.g., Finance) foreseeably increases demand or harm in another (e.g., Health).*
- [5] Any analysis, briefing, or report commissioned or received by DPMC regarding the relationship between economic conditions (unemployment, benefit sanctions, monetary tightening) and mortality or suicide rates in New Zealand.*
- [6] Whether any long-term insights briefing produced under Schedule 6, clauses 8-9 of the Public Service Act 2020 has addressed the mortality or health system implications of economic policy settings.*
- [7] What mechanism exists for ensuring that the stewardship obligations under sections 12 and 52 of the Public Service Act 2020 — specifically the requirement to provide advice on the “long-term implications of policies” and to “proactively promote stewardship” — are met in relation to cross-portfolio mortality impacts.*
- [8] If no mechanism described in items 1, 2, 4, or 7 exists, confirmation that ministers are currently making economic policy decisions without systematic advice on whether those decisions are likely to increase deaths.”*

You have asked for information across government, and I would note DPMC is only in a position to respond in relation to information we hold. We have also consulted with the other

government agencies we believe may be most relevant to the questions you have raised. I have set out our responses below under the different parts of your request.

*[1] Any formal mechanism, framework, or process by which ministers receive advice on the cross-portfolio mortality or health impacts of economic, fiscal, or monetary policy decisions prior to those decisions being taken or confirmation that no such mechanism exists.*

*[2] Any Cabinet Office guidance, circular, or directive requiring agencies to assess potential mortality or health system impacts when developing policy advice for Cabinet consideration.*

As noted above, we have responded to these two parts of your request in relation to information held by DPMC.

There are no Cabinet Office Circulars that contain a specific requirement for agencies to assess potential mortality or health system impacts when developing policy advice for Cabinet consideration.

The Cabinet Office in DPMC does provide general information and guidance for the preparation of Cabinet policy papers for Ministers.

The guidance in the Cabinet policy paper template indicates that “the analysis should reflect robust policy development and consultation processes, be informed by evidence and insights from diverse perspectives, and be analytically sound. You can access the Cabinet policy paper template guidance on DPMC’s website at: [www.dPMC.govt.nz/publications/cabinet-policy-paper-template](http://www.dPMC.govt.nz/publications/cabinet-policy-paper-template).

To the extent any of this information is relevant to these parts of your request, section 18(d) applies, as the information is already publicly available.

*[3] Any instance since October 2023 in which a Cabinet paper, regulatory impact statement, or policy briefing has included an assessment of potential mortality impacts arising from economic policy settings including but not limited to fiscal tightening, benefit conditionality changes, or housing affordability measures.*

You have requested information in the regulatory impact statement in any Cabinet paper or policy briefing since October 2023 that includes an assessment of potential mortality impacts arising from economic policy settings.

No government agency or Minister’s office holds a list of Cabinet papers and policy briefings that include assessments as requested in this part of your request. Some agencies may hold some relevant information.

DPMC holds all Cabinet and Cabinet Committee papers as Cabinet Office is a business unit within DPMC. However, DPMC transfers requests for Cabinet papers to the relevant portfolio Minister, or to the relevant agency for papers prepared by the previous administrations, as they are in the best position to assess them for release under the Act. They are transferred under section 14(b)(ii) of the Act on the basis that the information being more closely connected to the Minister’s functions.

To respond to this part of your request, DPMC has consulted the most relevant agencies, Manatū Hauora, Ministry of Health (MOH) and the Treasury. We also consulted with Te Tūāpapa Kura Kāinga – Ministry of Housing and Urban Development (HUD), who were not able to identify any information relevant to your request.

Accordingly, I am refusing this part of your request under section 18(g) of the Act as DPMC do not hold a list of or other information on instances of any relevant regulatory impact statements in Cabinet papers and policy briefings across government and we are not in a position to compile one. As noted above, DPMC holds all Cabinet papers and to assess all Cabinet papers lodged since October 2023 to identify any papers potentially in scope to be transferred to the relevant portfolio Minister or agency would involve substantial collation and research, which would be refused under section 18(f) of the Act.

However, if you are seeking information that may be held by individual agencies, you may wish to consider making a request direct to that agency (if you have not done so already). Details on other government agencies including the types of official information they may hold is available on the Ministry of Justice (MoJ) website at:

[www.justice.govt.nz/about/directory-of-official-information/directory-of-official-information-search-tool](http://www.justice.govt.nz/about/directory-of-official-information/directory-of-official-information-search-tool)

I note that Treasury is lead agency for economic policy and MOH is lead for health policy.

*[4] The process by which the Policy Project or DPMC ensures that policy advice reaching ministers reflects cross-portfolio impacts specifically where a decision in one portfolio (e.g., Finance) foreseeably increases demand or harm in another (e.g., Health).*

General guidance for drafting Cabinet policy papers has been provided under Parts [1] and [2] above.

The Policy Project's Policy Quality Framework sets the standard for good advice. The framework emphasises the importance of cross-agency consultation to ensure that policy advice is robust, evidence-based, and considers a wide range of perspectives. The framework requires policy advice to reflect and respond to the views of other agencies, communities, stakeholders, and Māori as Treaty partner. The Policy Quality Framework is available on DPMC's website at: [www.dPMC.govt.nz/publications/policy-quality-framework](http://www.dPMC.govt.nz/publications/policy-quality-framework).

To the extent that the information in the policy quality framework is relevant, this part of your request is refused under section 18(d) of the Act, as the information is already published on DPMC's website.

*[5] Any analysis, briefing, or report commissioned or received by DPMC regarding the relationship between economic conditions (unemployment, benefit sanctions, monetary tightening) and mortality or suicide rates in New Zealand.*

DPMC is not the lead agency for either economic or health policy. You may wish to consider making requests directly to other agencies who may hold relevant information. Searches were undertaken of the DPMC document management system for any relevant documents we may hold in scope of this part of your request.

A small amount of information has been identified in some documents held by DPMC. These were all part of the work carried out by the Canterbury Earthquake Recovery Authority (CERA), which was disestablished in 2016.

As only small parts of these documents are relevant to your request, I have decided to release these to you as excerpts as per section 16(1)(e) of the Act. Relevant excerpts are given in the table below.

Where these documents are already publicly available, a link to the document is provided in the table below, and section 18(d) of the Act applies.

Date	Title and description	Relevant excerpt
August 2011	Canterbury Earthquake Recovery Authority (CERA): Community Wellbeing Planners' Group.  "The Canterbury Earthquakes: Community Wellbeing Trajectories"	1.191 Another compounding factor on rates of suicide is unemployment, with many studies identifying a causal relationship between the two (Liaw et al., 2008; Preti, 2003; Kposowa, 2001). New Zealand research has found that unemployment has been associated with up to a threefold increase in suicide, compared with being employed (Blakely, Collings & Atkinson, 2005).
September 2012	Canterbury Earthquake Recovery Authority (CERA):  Canterbury Wellbeing Index: Employment outcomes: September 2012	Unemployment has strong linkages to ill health and other outcomes. Unemployed people have higher mortality rates, a higher risk of mental health issues and a higher rate of criminal activity. <sup>3</sup> Longitudinal studies show that unemployment has a direct effect on health over and above the effects of socioeconomic status, poverty, risk factors and prior ill-health. <sup>4</sup> <sup>3</sup> Keefe, V. et al. (2002). Serious health events following involuntary job loss in New Zealand meat processing workers. <i>Journal of Epidemiology</i> 31: 1155–61. Blakely, T. et al. (2003). Unemployment and suicide: evidence for a causal association? <i>Journal of Epidemiological Community Health</i> 57: 594–6001. Ferguson, D., Poulter, R., Horwood, J., Milne, B., Swain-Campbell, N. (2003). <i>Comorbidity and coincidence in the Christchurch and Dunedin longitudinal studies</i> . Report for the Ministry of Social Development, the Department of Labour and Treasury. Christchurch: University of Otago. All cited in Waddel et al. (2011). <i>Christchurch City Health Profile</i> , p55. <sup>4</sup> Junaker, R. (1991). Unemployment and mortality in England and Wales: a preliminary analysis. <i>Oxford Economics Papers</i> , 43: 305–20. Mathers, C., and Schofield, D. (1998). The health consequences of unemployment: the evidence. <i>Medical Journal of Australia</i> 168: 178–82.
December 2013	Canterbury Earthquake Recovery Authority (CERA):  Canterbury Wellbeing Index December 2013	Document is published on DPMC's website at:  <a href="https://www.dPMC.govt.nz/sites/default/files/2024-03/canterbury-wellbeing-index-05-12-2013_0.pdf">https://www.dPMC.govt.nz/sites/default/files/2024-03/canterbury-wellbeing-index-05-12-2013_0.pdf</a>  [Relevant information on page 21 of published PDF]
June 2014	Canterbury Earthquake Recovery Authority (CERA):  Canterbury Wellbeing Index June 2014	Document is published on DPMC's website at:  <a href="https://www.dPMC.govt.nz/sites/default/files/2024-03/canterbury-wellbeing-index-june-2014-full-document_0.pdf">https://www.dPMC.govt.nz/sites/default/files/2024-03/canterbury-wellbeing-index-june-2014-full-document_0.pdf</a>  [Relevant information on page 25 of published PDF]
June 2015	Canterbury Earthquake Recovery Authority (CERA):  Canterbury Wellbeing Index June 2015	Document is published on DPMC's website at:  <a href="https://www.dPMC.govt.nz/sites/default/files/2024-03/canterbury-wellbeing-index-june-2015-full-document_0.pdf">https://www.dPMC.govt.nz/sites/default/files/2024-03/canterbury-wellbeing-index-june-2015-full-document_0.pdf</a>  [Relevant information on page 29 of published PDF]

*[6] Whether any long-term insights briefing produced under Schedule 6, clauses 8-9 of the Public Service Act 2020 has addressed the mortality or health system implications of economic policy settings.*

Long-term Insights Briefings are published by agencies. Te Kawa Mataaho Public Service Commission (PSC) has links to all published Long-term Insights Briefings. These are available on the PSC website at: [www.publicservice.govt.nz/publications/long-term-insights-briefings/published-briefings](http://www.publicservice.govt.nz/publications/long-term-insights-briefings/published-briefings).

Accordingly, this part of your request is refused under section 18(d) of the Act as any information that exists will be already publicly available in the published briefings.

MOH's briefing "*Precision health: exploring opportunities and challenges, to predict, prevent, diagnose and treat health needs more precisely in Aotearoa New Zealand of particular interest*" is also available on the MOH website at: [www.health.govt.nz/publications/precision-health-exploring-opportunities-and-challenges-to-predict-prevent-diagnose-and-treat-health](http://www.health.govt.nz/publications/precision-health-exploring-opportunities-and-challenges-to-predict-prevent-diagnose-and-treat-health).

*[7] What mechanism exists for ensuring that the stewardship obligations under sections 12 and 52 of the Public Service Act 2020 — specifically the requirement to provide advice on the "long-term implications of policies" and to "proactively promote stewardship" — are met in relation to cross-portfolio mortality impacts.*

The Public Service Act 2020 requires chief executives to develop a Long-term Insights Briefing at least once every three years. The purpose of the Briefings is to bring a focus to the long-term and promote public debate on important matters for Aotearoa New Zealand. The Briefings are a key way that chief executives give effect to the public service principle of stewardship. The Policy Project supports departments with their Briefings. This includes providing guidance and hosting workshops on key trends and strategic foresight. Departments are currently finalising their second round of briefings.

Last year, Cabinet agreed to amend the Public Service Act provisions on Long-term Insights Briefings. A new requirement will task DPMC with coordinating a single Long-term Insights Briefing every parliamentary term and providing guidance on long-term thinking. This change addresses some agency feedback that the current process was overly specified and that long-term thinking should be a core function, not a three-yearly activity. The Public Service Amendment Bill, which will implement the changes, was introduced to the House in 2025 and was reported back from the Governance and Administration Select Committee in March 2026.

As noted under Part [6] above, you can find a copy of all the published briefings on the PSC website at: [www.publicservice.govt.nz/publications/long-term-insights-briefings/published-briefings](http://www.publicservice.govt.nz/publications/long-term-insights-briefings/published-briefings).

I believe the information you have requested in Part [7] of your request is more closely connected to the functions of Te Kawa Mataaho Public Service Commission (PSC), who administer *The Public Service Act 2020*. Accordingly, I have decided to transfer this part of your request to PSC under section 14(b)(ii) of the Act. As it is already outside of the ten working day time limit for transferring a request, I have extended the time-limit available by an additional ten working days to make this transfer under section 15(A) of the Act. This extension is required because of the consultation needed to make a decision on your request. PSC has the usual time limits under the Act from receipt of this transfer to make a decision on your request.

*[8] If no mechanism described in items 1, 2, 4, or 7 exists, confirmation that ministers are currently making economic policy decisions without systematic advice on whether those decisions are likely to increase deaths.*

I refer you to the responses above to Parts [1], [2], [4] and [7].

You have the right to ask the Ombudsman to investigate and review my decision under section 28(3) of the Act.

This response will be published on DPMC's website during our regular publication cycle. Typically, information is released monthly, or as otherwise determined. Your personal information including name and contact details will be removed for publication.

Nāku noa, nā

A handwritten signature in blue ink, appearing to read 'Lisa Daniell', written in a cursive style.

Lisa Daniell  
**Acting Deputy Chief Executive,  
Policy and Delivery Unit**