



# **Huarahi Oranga Māori Health Strategy 2007-2012**

**Ka Whakapakari te Hauora Māori i roto i te Rangatiratanga o te Iwi**

**'To advance Māori Health, Wellbeing and Independence'**

September 2007

## **He Mihi**

Whakarongo ake au ki te tangi a te manu  
E rere runga rawa  
Tui tui tuituia  
Tuia i runga  
Tuia i raro  
Tuia i roto  
Tuia i waho  
Tui tui tuia  
Ka rongo te po  
Ka rongo te ao  
Tui tui tuia

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## 1.0 INTRODUCTION

The purpose of the Whanganui District Health Board Huarahi Oranga, Māori Health Strategy 2007 - 12 is to guide and direct the planning, purchasing and delivery of Health Services in the district health board area to improve Māori health outcomes and reduce inequalities.

The aim of the strategy is focused in two key directions:

Partnership and advice:

- Strengthen the Iwi governance partnership between the district health board and Hauora a Iwi.
- Strengthen the capacity of Iwi partnership.
- Receive robust direction to the district health board planning and purchasing processes from Iwi.

Purchasing and service delivery:

- Instil the Whānau Ora philosophy/concept as the district health board purchasing strategy for Kaupapa Māori Services and the context within which mainstream services are delivered to Māori.
- Guide and support the achievement of mainstream effectiveness in the provision of services to Māori.
- Maintain the capacity and capability of Iwi Health Providers.
- Support the establishment and maintenance of intersectoral partnerships.

To achieve its aims the District Health Board Huarahi Oranga, Māori Health Strategy revolves around the relationship with the Iwi communities of the district health board region.

### **Whānau Ora**

This strategy identifies that 'Whānau Ora' is the philosophy/concept and model of purchasing and service delivery that will support our strategic journey towards reduced inequalities and improved outcomes for Māori.

He Korowai Oranga, the Government's Māori Health Strategy 2002 describes Whānau Ora in the context that whānau (kuia, koroua, pakeke, rangatahi and tamariki) is recognised as the foundation of Māori society. As a principal source of strength, support, security and identity, whānau plays a central role in the wellbeing of Māori individually and collectively. Also that Whānau Ora is a strategic tool that supports Health and Disability Services and Government Sectors, to work together with Iwi, Māori Providers and Māori communities and whānau to increase the lifespan of Māori, improve their health and quality of life, and reduce disparities with other New Zealanders.

It is important to acknowledge that when planning, purchasing and delivering health services to Māori we must recognise the interdependence of people, that health and wellbeing are influenced and affected by the 'collective' as well as the individual, and the importance of working with people in their social contexts, not just with their physical symptoms.

The health sector has developed a Whānau Ora model of purchasing Kaupapa Māori Health Services which encompasses the overall philosophy/concept of Whānau Ora.

### **Reducing Inequalities**

The New Zealand Health Strategy 2000 acknowledges that reducing inequalities is a major priority requiring ongoing commitment across the sector.

The strategy identifies that the most effective means to reduce inequalities is a focus on;

- Intersectoral approaches, use of prevention strategies with a population health focus, build on existing initiatives, modify behaviour and lifestyle risk factors through appropriate tailored policies and programmes, improved delivery of treatment services through mainstream enhancement and provider development and support the provision of for Māori by Māori Services.
- Improving the population's health including focusing on those factors/determinants that most influence health such as genetic inheritance, age, gender, ethnicity, income, education, employment, housing , a sense of control over life circumstances and access to health services.

- Tackling broader determinants requires action across sectors. This intersectoral approach is consistent with Māori approaches to maintaining and improving wellbeing. The Whare tapa whā (Durie 1994) Māori Health Model which is also known as the four cornerstones of Māori Health, describes four dimensions that contribute to wellbeing: te taha wairua (spiritual aspects), te taha hinengaro (mental and emotional aspects), te taha whānau (family and community aspects) and te taha tinana (physical aspects). It is considered that good health depends on the equilibrium of these dimensions.
- The Whānau Ora philosophy/concept of health service provision closely align with the Whare tapa whā Māori Health Model.

To achieve the best health outcomes for Māori we should ensure that the Whānau Ora Service Model is the foundation for our purchasing and delivery strategies for Kaupapa Māori Health Services and that the Whānau Ora philosophy/concept provides the context within which mainstream services are provided to Māori.

To ensure that purchasing and delivery strategies meet the needs of our Māori community it will be necessary to develop new and innovative models of care, including refinement of the Whānau Ora Service Model. The ongoing implementation of the Primary Health Care Strategy 2002 will influence the development of the new/revised service models and purchasing strategies. The focus of the strategy is on Primary Care led services and the ongoing development and consolidation of Primary Health Organisations, Primary Health Care teams (multidisciplinary planned approach to care), governance structures that include community membership and partnerships and improved services that will include working across sectors to reduce inequalities and improve Māori health outcomes.

### **Population Health Approach**

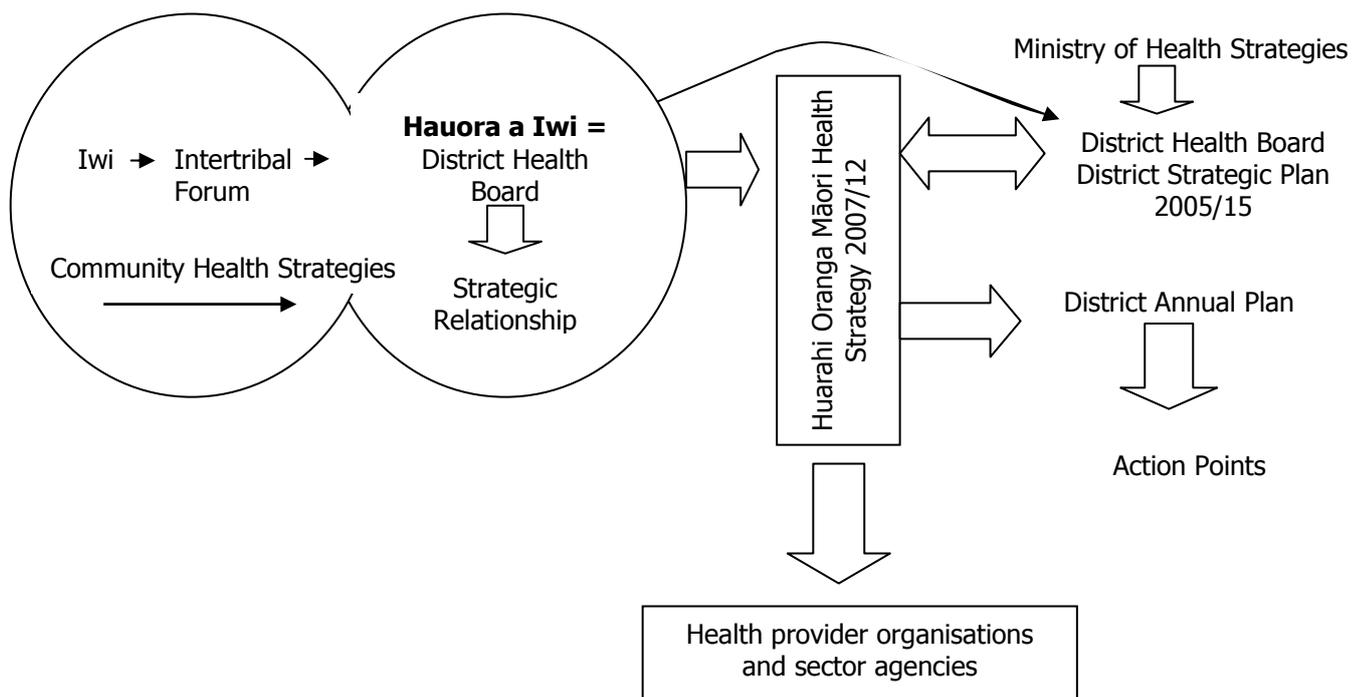
It is important to note that this strategy will be implemented inline with the district health board's intent to proactively reflect a *'population approach'* to planning, purchasing and service delivery.

A population approach is exactly that, it works at a broad population or community level taking into account all the wider factors that determine health; for example, housing, employment, and education. A population approach is concerned with preventing illness by raising community/ whānau knowledge and practice of healthy lifestyle behaviours, promoting healthy public policy, and working with other sectors to mitigate the wider determinants of poor health. Taking a population approach means working with definitions of health that are relevant and appropriate to particular population groups. For Māori this includes working holistically taking a broad view of health including physical (taha tinana), mental (taha hinengaroa), social (taha whānau) and spiritual (taha wairua) aspects. Population health also includes strategies and services to reduce the effects of ill health and disability for individuals and their whānau. These strategies are delivered most effectively through provider collaboration and integrated approaches /mechanisms, shared information and systems, including intersectoral relationships and programmes. These services will cover the range of health education, disease prevention, support for self-care, early intervention, diagnosis, treatment, ongoing care, rehabilitation and referral – across the continuum of care.

To achieve the aims of this strategy the Whanganui District Health Board will work with Māori to further define what 'Māori Health' is, what services will improve Māori Health outcomes and how these services can best be purchased and delivered including service evaluation and robust data collection and analysis.

The diagram below outlines how this strategy will inform key planning and purchasing processes undertaken by the district health board at all levels.

The strategy is informed by Government Strategies; Iwi Community Health Strategies and the Hauora a Iwi Strategic Plan 2006 through the governance partnership between the district health board and Hauora a Iwi and; is informed by and informs the Whanganui District Health Board District Strategic Plan 2005-10. This in turn informs the activities identified in the District Health Board Annual Plan each year, and informs health provider organisations and sector agencies of the district health boards intent and expectation in relation to the purchase and delivery of health services to Māori and development and maintenance of intersectoral relationships.



This strategy has been developed by the district health board working closely with its Iwi relationship partner Hauora a Iwi. Hauora a Iwi has developed its Strategic Plan "Leadership to Advance Māori Wellbeing", September 2006. This document was the result of consultation with Māori communities and will inform this strategy in its development and implementation.

Other key stakeholder health providers including Iwi Health Provider Organisations, Primary Health Organisations and mainstream Primary and Secondary Health Service Provider Organisations have been consulted in the drafting of the final Māori Health Strategy document.

The plan has taken cognition of the Ministry of Health's He Korowai Oranga, Māori Health Strategy 2002 and Whakatātaka Tuarua Māori Health Action Plan 2006- 2011 and the Whanganui District Health Board's own District Strategic Plan for the region, which sets a pathway and direction for the Board, particularly in relation to working with our communities, identifying specialist partners and establishing strong relationships, increasing its focus on population health and the outcomes of services it funds and provides, the Whanganui District Health Board Reducing Inequalities in Health Action Plan 2005 and the District Annual Plans.

It is intended that Hauora a Iwi the district health board's governance partner will play a key role in monitoring the outcomes of the implementation of this strategy, advising and supporting the Whanganui District Health Boards annual planning cycle to ensure the strategic directions, vision and objectives in the strategy are translated into the most appropriate actions. Specific actions and implementation plans will be identified in each District Annual Plan, and progress reported to the Board, Committees and Hauora a Iwi regularly.

The measurement of success will be based on the following imperatives:

- The achievement of the Reducing Inequalities in Health Action Plan outcomes.
- The achievement of the District Strategic Plan indicators for Māori Health.
- The achievement of the National Māori Health priorities.

## 2.0 PRINCIPLES, VISION AND VALUES

The following principles, vision and values have been identified to support the implementation of this strategy.

### 2.1 Principles

The principles identified in the development of this strategy are that the Strategy will:

- *Reinforce whānau, hapū, Iwi and Māori communities;*  
Through effective partnerships between Iwi (Hauora a Iwi) and the district health board; and purchasing strategies and delivery models for both Kaupapa Māori and mainstream services that meet the needs of Māori based on the Whānau Ora philosophy/concept.

Capable Iwi Health Organisation/structures within Iwi communities that support the overall capacity, capability and expertise of the Iwi/community.

- *Maintain robust effective Iwi Partnership;*  
Through effective partnership strategies between Hauora a Iwi and the district health board that will ensure, regular flow of information, regular meeting opportunities (at least quarterly). Iwi advice is sought and received to key planning and decision making processes that impact on the health of Māori at an operational and governance level.

Mainstream Health Providers that contract with the district health board have processes in place that ensure that Iwi Māori have an opportunity to influence decision making at a governance level related to key strategic planning and decision making processes. That services are provided in line with this strategy in particular to embrace the concept of Whānau Ora in the way in which services are delivered and understand and appreciate the values described in this strategy.

- *Improve Māori health;*  
Delivery of this strategy will support improved health outcomes for Māori over time.
- *Reduce inequalities;*  
Delivery of the this strategy will reduce inequalities in health for Māori over time, service prioritisation processes will include the health intervention framework and Health Equity Assessment Tool (HEAT) and intersectoral relationships and joint service approaches and initiatives will support the reduction of the impact of health determinants.
- *Increase whānau choice and use of quality Kaupapa Māori Health Service Providers and quality mainstream Providers;*  
The way in which services are provided and the purchasing strategy of the district health board will provide choice for Māori to access Kaupapa Māori and/or mainstream Services that will result in improved access to services and improved health status.
- *Maintain Iwi health provider capacity and capability;*  
Through planned workforce development, recruitment and retention strategies and implementation of the Māori Health Services Purchasing Framework.
- *Improve mainstream effectiveness;*  
Mainstream Health Providers that contract with the district health board have processes in place that ensure that Iwi Māori have an opportunity to influence decision making at a governance level related to key strategic planning and decision making processes and that services are provided in line with this strategy in particular to embrace the concept of Whānau Ora in the way in which services are delivered and understand and appreciate the values described in this strategy.

- *Demonstrate intersectoral approaches;*  
The district health board will work proactively with other sectors to establish and maintain relationships and facilitate and coordinate purchasing opportunities to support improved Māori health outcomes and reduced inequalities.
- *Support the Whanganui District Health Board investment in Māori health;*  
The strategy will inform the development of the district health board purchasing strategy for Māori Health Services and the investment in services in 2007/08 and out years.
- *Address priorities for Māori health gain as identified in the District Health Board Strategic Plan 2005-2010;*  
That the directions identified in this strategy and the resultant activities and initiatives will focus on and support the achievement of key priorities outlined in the District Strategic Plan 2005/10.
- *Build on Gains already made;*  
Any change to current services as a result of the implementation of this strategy will enhance and increase the capacity and capability of providers to provide effective services with improved Māori health outcomes.
- *Improve Effectiveness and Efficiency*  
That through the implementation of this strategy services will be more effective and efficient leading to improved health outcomes for Māori and services that are cost effective.

## 2.2 Vision

In bringing together the vision of the Whanganui District Health Board for 'Better Health and Independence' and the vision of the Iwi Partners to 'Advance Māori Wellbeing' the resultant vision for this strategy becomes:

**Ka Whakapakari te Hauora Māori I roto I Te Rangatiranga o te Iwi**

**To Advance Māori Health, Wellbeing and Independence**

Within this framework the most basic and critical component to success is the whānau and any Māori Health Strategy must support Māori whānau to achieve their maximum health and wellbeing. As a result of this the contributory vision is:

**Whānau Ora = Māori ora**

**Healthy whānau = Healthy Māori**

## 2.3 Values

Values used in this strategy are derived from the base values used to underpin the Hauora a Iwi vision as described in the Hauora a Iwi Strategic Plan "Leadership to Advance Māori Wellbeing", September 2006:

- **Manākitanga:** Acknowledges the mana of others through the expression of aroha, hospitality, generosity and mutual respect. Tikanga derived from Manākitanga is to;
  - Promote an environment where the care and welfare of each other is important, and;
  - Ensure that all parties agree to work together, treat each other with respect and act with integrity.

- **Rangatiratanga:** Is the expression of the attributes of a rangātira including humility, leadership by example, generosity, unselfishness, diplomacy and knowledge of benefit to the people. As an organisation, the importance of walking the talk, following through on commitments made, integrity and honesty is to be demonstrated. As a people, rangatiratanga is reflected in the promotion of self-determination, an expression of the rights defined by mana atua, mana tupuna and mana whenua. Tikanga derived from Rangatiratanga shall:
  - Recognise and acknowledge the authority of whānau, hapū and Iwi in their respective rohe;
  - Enhance the partnership between kāwanatanga and tino rangatiratanga as provided for in Te Tiriti o Waitangi;
  - Promote self-determination through the establishment of a forum to provide a viewpoint and guide and provide appropriate advice;
  - Acknowledge, nurture, support and reflect rangatiratanga;
  - Ensure that conduct and activities as a whole are reflective of the attributes of rangātira.
  
- **Whanaungatanga:** Underpins the social organisation of whānau, hapū and Iwi and includes rights and reciprocal obligations consistent with being part of a collective. It is the principle that binds individuals to the wider group and affirms the values of the collective. Inter-dependence with each other and recognition that the people are our wealth. Tikanga derived from Whanaungatanga shall:
  - Promote and contribute to the survival of Māori;
  - Promote respect for all cultures and ensure all New Zealanders have an understanding of, and respect for, the status of Māori;
  - Encourage relationships between whānau, hapū, iwi and other Māori organisations that reflect inter-dependence;
  - Promote whanaungatanga as the model for good collective arrangements.
  
- **Kotahitanga:** is the principle of unity of purpose and direction. It is demonstrated through the achievement of harmony and moving as one. All are encouraged to make their contribution, to have their say and then together a consensus can be reached. Tikanga Kotahitanga is:
  - Working for unity among Iwi and Whanganui District Health Board;
  - Avoid taking decisions and approaches that lead to division and disharmony;
  - Establish paepae that can work together and is committed to speaking with a single voice;
  - Promote harmonious relationships amongst all stakeholders.
  
- **Wairuatanga:** is reflected in the belief that there is a spiritual existence alongside the physical. It is expressed through the intimate connection of the people to their maunga, awa, moana, Marae, and to tūpuna and atua. These connections are affirmed through knowledge and understanding of atua Māori and must be maintained and nourished towards the achievement of wellness. It is central to the everyday lives of whānau, hapū and Iwi and is integral to their world view. Tikanga of Wairuatanga is to:
  - Encourage, maintain and promote spiritual identity and connection with the land, sea and air;
  - Break down secular and non-secular divisions and promote a unified and holistic approach to life;
  - Develop a wairua nourishing and nurturing environment;
  - Promote the importance of oranga wairua.
  
- **Mana Whenua:** is the principle that defines Māori by the land occupied by right of ancestral claim. It defines turangawaewae and ūkaipō, the places where you belong, where you count, where you are important and where you can contribute and is essential for Māori well-being. The places Māori find themselves, their strength, their energy are where Māori have mana whenua. Once grounded to the land and home, Māori are able to participate in society in general in a positive, productive manner. Tikanga Mana Whenua is to:

- Assist whānau hapū and Iwi to establish and maintain their connections to their own land, sea and air;
  - Develop arrangements that foster a sense of ūkaipō, of importance, belonging and contribution.
- **Kaitiakitanga:** Embraces the spiritual and cultural guardianship of Te Ao Mārama, a responsibility derived from whakapapa. Kaitiakitanga entails an active exercise of responsibility in a sustainable manner beneficial to resources and the welfare and well-being of the people. It promotes the growth and development of the Māori people in all spheres of livelihood so that Māori can participate in a future of living in good health and in reasonable prosperity. Preserving and maintaining whānau, hapū and Iwi so we can continue to fulfil our functions and duties as implicit within this kaupapa. Tikanga Kaitiakitanga is to:
    - Encourage an extensive research programme to collect and archive mātauranga Māori on health with kaumātua and other repositories;
    - Promote the achievement of wellness and well-being for whānau and hapū of Nga Rauru Kīahi, Whanganui, Ngāti Apa, Ngāti Hauiti, Otaihape and manuhiri;
    - Foster and promote sustainable management and growth of the economy so as to provide a stable and secure environment for future generations;
    - Create a clean, safe and healthy environment by promoting the protection and restoration of our natural environment.
- **Mana Tūpuna/Whakapapa:** defines who we are as people. It is the bridge that links us to our ancestors, defines our heritage and gives us the stories that define our place in the world. Mana Tūpuna helps us know who we are, from whom we descend, and what our obligations are to those who come after us. This is achieved through the recital of whakapapa, tracing the descent from Te Kore, to Te Pō and eventually through to Te Ao Mārama. Whakapapa is also a tool utilised in analysing and synthesising information and knowledge. Tikanga Mana Tūpuna/Whakapapa is to:
    - Encourage the view that Iwi are related;
    - Support endeavours by whānau to establish their Iwi connections, find their place in the world and become positive contributors to the wider Māori society;
    - Promote whakapapa as an analysis and synthesis tool within the research activity of all Iwi.
- **Te Reo**

<p><i>Ki te kore tātou e koorero Māori, ka ngaro te reo</i></p> <p><i>Ka ngaro te reo, ka ngaro ngā Tikanga</i></p> <p><i>Ka ngaro ngā Tikanga, ka ngaro tātou kite Ao</i></p> <p><i>Ko te reo te kaupuri I te Māoritanga</i></p>	<p><i>By not speaking our language, it will be lost</i></p> <p><i>When our language is lost, so too are our principles of identity</i></p> <p><i>When our identity is lost, we are lost</i></p> <p><i>Our Language is the cornerstone of our being.</i></p>
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- Te reo Māori is the cornerstone of all that is Māori. Te reo Māori is the medium through which Māori explain the world. The survival of the people as Māori and the uniqueness of Māori as a race will be enhanced through the revival and maintenance of te reo Māori. Tikanga Reo is to:
- Ensure te reo Māori use in the Health sector;
  - Promote wider use of te reo Māori;
  - Ensure the ongoing development and growth of te reo Māori in the Health Sector.
- **Mātauranga:** is the way in which we are able to understand the explanations and ideas of the development of the world as seen and experienced by our ancestors. Mātauranga is seen as an integral component for the continued revival, retention and maintenance of traditional Māori knowledge around well-being.

### **3.0 STRATEGIC DIRECTIONS, THEMES AND OBJECTIVES OF HUARAHİ ORANGA, MĀORI HEALTH STRATEGY**

Outlined below are the strategic directions, themes and objectives for Huarahi Oranga, Māori Health Strategy 2007-2012.

The aim of the strategy is focused in two key directions:

Partnership and advice:

- Strengthen the Iwi governance partnership between the district health board and Hauora a Iwi.
- Strengthen the capacity of Iwi partnership.
- Receive robust direction to the district health board planning and purchasing processes from Iwi.

Purchasing and service delivery:

- Instil the Whānau Ora philosophy/concept as the district health board purchasing strategy for Kaupapa Māori Services and the context within which mainstream services are delivered to Māori.
- Guide and support the achievement of mainstream effectiveness in the provision of services to Māori.
- Maintain the capacity and capability of Iwi Health Providers.
- Support the establishment and maintenance of intersectoral partnerships.

#### **Strategic Direction: To Improve Māori Health Outcomes and Reduce Inequalities**

##### **Theme: Effective Iwi Health Organisations**

This strategy revolves around the relationship with the Iwi communities of the district health board region.

It is aligned to the strategies and priorities of other key district health board documents such as the Draft District Strategic Plan 2005 - 2010 and the District Annual Plan in relation to working with our communities, identifying specialist partners and establishing strong relationships.

The traditional equivalent of a community in Māoridom is the Iwi (or Hapū) and it is these societal structures that have most suffered under the colonisation processes of the last 150 years. In modern day we have many other types of communities including our cities and towns which are now generally accepted by mainstream as the community base from which we work.

Unfortunately this concept often conflicts with the remnants of Iwi and furthermore, many of the decisions we make are based on supporting modern communities to the further detriment of the Iwi structures mainly by under-estimating their integral part in Māori society.

A further complication is that while we continue to inadvertently support mainstream in preference to Iwi communities the more remote these Iwi structures become to Māori themselves and the bigger the void is created for Māori.

It is only the Iwi communities however, that can re-organise their constituents into a unit that makes sense to the Māori psyche (although this will be a long term process) and can then work towards the true advancement of Māori Health, wellbeing and independence as the vision for this strategy.

Iwi are based on confederations of hapū which are genealogically linked to eponymous ancestors and Atua (whakapapa), their deeds (tikanga) and the land (rohe) which gives rise to terms such as mana whenua and tangata whenua (people of the land).

Iwi use this base to express Manaakitanga (care and support) and Kaitiakitanga (protection) to all who live under the auspices of that community. It is on this basis therefore that Iwi must not only be viewed as the community entity to deal with but also as the partner with specialist knowledge.

Huarahi Oranga, Māori Health Strategy 2007-2012 therefore seeks to lay down the platform to improve the Iwi partnership, build Iwi capacity and ensure robust advice on Iwi strategic directions and Inter-Iwi development aspirations.

### **Objectives**

- Support the development of capable and competent Iwi Health Governance Organisations.
- Assist and support the development of effective governance partnerships/Iwi leadership.
- Committed Iwi leadership to achieve improved health outcomes for Māori.
- Implement strategies to develop effective and sustainable Iwi Health Provider Organisations.

### **Theme: Continuum of Care and Integration of Services**

A continuum of care and integration of services is about “providing the right treatment in the right place at the right time to support improved health outcomes for Māori”. Services and service development must be centred on the needs of the patient and their whānau / family rather than the needs of those providing them.

The continuum ranges from the healthy population to the acutely/chronically unwell and people can move along this continuum at different times and at different rates including primary, specialist in patient and community based services, Kaupapa Māori services, non government organisations, community organisations and across sectors. The increased focus on population health and wellness will also require services to become more ‘holistic’, recognising the importance of cultural and social needs and providing a wider range of health promotion, early detection and intervention services. This approach fits well with the Whānau Ora philosophy and concepts of service delivery for Māori.

This theme encompasses a number of elements including:

- Development of a purchasing framework for Māori Health Services including a range of services and service providers, models of care that instil the Whānau Ora philosophy/concepts, core kaupapa Māori services that will form the basis of iwi health provider organisations, clinical components and competencies, workforce planning and development all of which will work towards reduced inequalities and improved health outcomes for Māori. The purchase of mainstream and Kaupapa Māori Health Services for Māori will be focused towards primary care and prevention services.
- Improve the understanding about the roles of Secondary (specialist clinical) Services, Non-Government Organisation Services, Primary Care Services, for mainstream and Kaupapa Māori Services and how they can work together to provide an integrated system of care across the continuum.
- Kaupapa Māori Services should be available as an option for all Māori who choose to access them. The interface between Kaupapa Māori and other services should reflect a mutual respect of what constitutes and supports improved outcomes for Māori.
- Services focused towards the reduction of chronic disease through the implementation of the District Health Board Chronic Disease Prevention and Management Framework.
- Improved access to services – locally and regionally.
- Robust ethnicity data collection and analysis and evaluation of service models.

Kaupapa Māori Services are defined in this strategy as services purchased by the district health board that are provided by health organisations that demonstrate Iwi governance and provide the services within the Kaupapa of the organisation. Kaupapa Māori Services can be provided by Māori or non Māori staff, the optimum would be that all Kaupapa Māori Services are provided by Māori staff.

Services for delivery to Māori, which are purchased by the district health board from mainstream Providers are expected to be delivered within a Whānau Ora concept. These services can be provided by Māori or non Māori staff, the optimum would be that they are provided by Māori staff.

In Wanganui the majority of Māori access mainstream health services for most of their primary health care needs, specialist services and acute hospital inpatient services. It is recognised that there should be opportunities for partnerships and integrated service approaches between mainstream and Kaupapa Māori Services at governance and operational level to ensure that Māori can access services that best meet their needs.

Investment in services for Māori must therefore include investment in both mainstream and Kaupapa Māori Services and new service models should be developed to improve access across all services for Māori.

A vital role for Māori Health Provider Services is to work within their communities to support Māori to access services.

The district health board will work proactively to support providers to work across sectors and be involved in community development projects/initiatives to address the determinants of health to reduce inequalities for Māori.

Primary Health Organisations, mainstream and Iwi/Māori, have an opportunity to continue to develop first point of contact focused health service initiatives and ongoing care for Māori. The services should aim to be user friendly, responsive to Māori, holistic, affordable, and delivered in partnership with family/ whānau and other community and Iwi Health Provider Services. The district health board will continue to work with Primary Health Organisations to identify 'barriers to access' to Primary Care Services for Māori and also work to improve the interface between primary care and secondary care led services. The Primary Health Organisations are in a prime position to facilitate a population approach to wellness through Māori health promotion and prevention, in association with Public Health Services.

For Māori who access regional services it is important that these services interface with local communities and that district health boards provide supports than enable people to integrate back into their own communities as part of the recovery process.

### **Objectives**

- Define, describe and implement innovative, outcome focused service models both Kaupapa and mainstream to meet the needs of Māori.
- A Purchasing Framework for Services to Improve Health Outcomes for Māori that includes Whānau Ora philosophy/concepts as the service model.
- Ring fenced funding pool and planned investment in mainstream and Kaupapa Māori Health Services and service initiatives to improve health outcomes for Māori.
- Maximise partnerships to deliver quality care across the health care continuum.
- Closer collaboration between Primary Health Organisations and Iwi Health Provider Organisations.
- Improved access for Māori to services both mainstream and Kaupapa Māori.
- Development of a primary care led, single point assessment and care coordination service that includes Māori Health Services.

### **Theme: Workforce to achieve the strategy**

Improved health outcomes for Māori can not be achieved without the workforce resourced to provide services that will achieve National Policy Objectives and local directions and priorities for Māori health.

This will be achieved through:

- A Primary Care workforce that is ready and able to accept an increased role in providing service to Māori.
- Development of mainstream services that will apply the Whānau Ora philosophy/ concept in the provision of services to Māori.

- An Iwi Health Provider training and development framework that will maintain capacity and capability to provide quality Kaupapa Māori Health Services and support collaborative training and development opportunities.
- Recognition of the unique and vital contribution of the Iwi Health Provider workforce as complementary to services to Māori provided by mainstream services.

### **Objectives**

- Recruitment and retention strategy for Māori health professionals;
- Identified and planned training to support Kaupapa Māori models of care funded by Māori Provider Development Scheme, generic to all Iwi Health Providers;
- Proactive approach by mainstream providers to recruit and retain Māori staff to support the provision of effective services to Māori.
- Programmes to support mainstream effectiveness and Iwi Health Provider capability provided through the district health board learning centre and participation in such programmes by providers.
- Ensure mainstream services have the skills to deliver culturally appropriate services to Māori.
- Develop partnerships with other district health boards and Centres of Learning.

## 4.0 OUR APPROACH TO DEVELOPING HUARAHI ORANGA, MĀORI HEALTH STRATEGY 2006-2011

### Introduction

The purpose of the Whanganui District Health Board Huarahi Oranga, Māori Health Strategy 2007/12 is to guide and direct the planning, purchasing and delivery of health services in the district health board area to improve Māori health outcomes and reduce inequalities. To achieve its aims the District Health Board Huarahi Oranga, Māori Health Strategy revolves around the relationship with the Iwi communities of the district health board region through two key directions; partnership and advice and purchasing and service delivery.

This strategy identifies that 'Whānau Ora' is the philosophy/concept and model of purchasing and service delivery that will support our strategic journey towards reduced inequalities and improved outcomes for Māori.

Also that it is important to acknowledge that when planning, purchasing and delivering health services to Māori we must recognise the interdependence of people, that health and wellbeing are influenced and affected by the 'collective' as well as the individual, and the importance of working with people in their social contexts, not just with their physical symptoms.

### Background

Māori have significantly poorer health outcomes at the same age compared to non-Māori and experience inequalities in health increased by the impact on the determinants of health related to income, employment and education.

Māori health is a priority health area for the Government, as reflected in:

- The New Zealand Health Strategy 2000
- New Zealand Disability Strategy 2001
- He Korowai Oranga Māori Health Strategy 2002 and Whakatātaka Tuarua Māori Health Action Plan 2006-2011
- The Primary Health Care Strategy 2001
- Te Tahuu – Improving Mental Health 2005 -2015
- Te Puawaitanga the Māori Mental Health National Strategic Framework 2002.

The Minister of Health has identified a number of key priority areas that he expects district health board to focus on in 2007- 20008 and out years.

The table below identifies the linkage between the Minister's priorities and the objectives in this strategy. It should be noted that some priorities are linked to more than one objective. The action plan included in the Strategy document identifies the activities to implement each objective.

#### Ministers priorities 2007-2008

Getting ahead of the  
Chronic Disease Burden

Child and Family health

#### Objectives identified in this strategy

- Define, describe and implement innovative, outcome focused service models both Kaupapa and mainstream to meet the needs of Māori.
- A Purchasing Framework for Services to Improve Health Outcomes for Māori that includes Whānau Ora philosophy/concepts as the service model.
- Maximise partnerships to deliver quality care across the health care continuum.
- Development of a primary care led, single point assessment and care coordination service that includes Māori Health Services.
- Define, describe and implement innovative, outcome focused service models both Kaupapa and mainstream to meet the needs of Māori.

- Primary health Care

  - A Purchasing Framework for Services to Improve Health Outcomes for Māori that includes Whānau Ora philosophy/concepts as the service model.
  - Assist and support the development of effective governance partnerships/Iwi leadership.
  - Define, describe and implement innovative, outcome focused service models both Kaupapa and mainstream to meet the needs of Māori.
  - Maximise partnerships to deliver quality care across the health care continuum.
  - Closer collaboration between Primary Health Organisations and Iwi Health Provider Organisations.
  - Improved access for Māori to services both mainstream and Kaupapa Māori.
  - Development of a primary care led, single point assessment and care coordination service that includes Māori Health Services.
  - A Primary Care workforce that is ready and able to accept an increased role in providing service to Māori.
- The health of older people

  - Development of a primary care led, single point assessment and care coordination service that includes Māori Health Services.
  - Maximise partnerships to deliver quality care across the health care continuum.
- Infrastructure

  - Development of mainstream services that have an understanding and ability to provide services to Māori within a Whānau Ora philosophy/concept.
  - An Iwi Health Provider training and development framework that will maintain capacity and capability to provide quality Kaupapa Māori Health Services and support collaborative training and development opportunities.
- Cost effectiveness

  - Ring fenced funding pool and planned investment in mainstream and Kaupapa Māori Health Services and service initiatives to improve health outcomes for Māori.
  - Maximise partnerships to deliver quality care across the health care continuum.
- Reducing inequalities

  - Committed Iwi leadership to achieve improved health outcomes for Māori.
  - Maximise partnerships to deliver quality care across the health care continuum.
  - Improved access for Māori to services both mainstream and Kaupapa Māori.
- Population Health

  - Define, describe and implement innovative, outcome focused service models both Kaupapa and mainstream to meet the needs of Māori.
  - A Purchasing Framework for Services to Improve Health Outcomes for Māori that includes Whānau Ora philosophy/concepts as the service model.
  - Maximise partnerships to deliver quality care across the health care continuum.
- Common Purpose

  - Committed Iwi leadership to achieve improved health outcomes for Māori.
  - Maximise partnerships to deliver quality care across the health care continuum.

The vision of the Whanganui District Health Board's District Strategic Plan 2005-2010 is for "better health and independence". The Health Needs Assessment,<sup>1</sup> on which the Strategic Plan is based, identifies that the Whanganui region has higher than average levels of deprivation which directly impacts on the physical health and wellbeing of the population and in particular Māori:

- Improving Health
- Reducing Inequalities, and
- Promoting Recovery, Wellbeing and Independence.

The District Health Board's Reducing Inequalities in Health Action Plan 2005 describes the primary cause of inequalities in health as the unequal distribution of access to material resources - income, education, employment and housing. Disparity of access to Health Care Services and differences in care impact significantly on health status and mortality. Interlinked with social and economic determinants of health is the impact of ethnic identity. The Whanganui District Health Board region has a Māori population higher than the national average and at all educational, occupational and income levels Māori have poorer health status than non-Māori.

The Action Plan provides a structured and coordinated response or mechanism through which Whanganui District Health Board will monitor its progress in addressing inequalities in health.

#### **4.1 The New Zealand Health Strategy 2000**

The New Zealand Health Strategy outlines seven fundamental principles, one of which acknowledges the special relationship between Māori and the Crown under the Treaty of Waitangi.

This relationship in the Health and Disability Sector is based on three principles:

- Participation at all levels
- Partnership in service delivery
- Protection and improvement of Māori health status.

The strategy also outlines thirteen health objectives including goals and objectives that relate specifically to Māori health:

Goal: Reducing Inequalities in health status

Objectives:

- To ensure accessible and appropriate services for people from lower socioeconomic groups
- To ensure accessible and appropriate services to Māori.

Goal: Māori development in health:

Objectives:

- Building Māori participation in the health sector at all levels.
- Enable Māori communities to identify and provide for their own health needs.
- Recognise the importance of relationships between Māori and the crown, in Health Services both mainstream and those provided by Māori.
- Collect high quality health information to better inform Māori policy and research and focus on health outcomes.
- Foster and support Māori health workforce development.

#### **4.2 He Korowai Oranga, The Māori Health Strategy 2002**

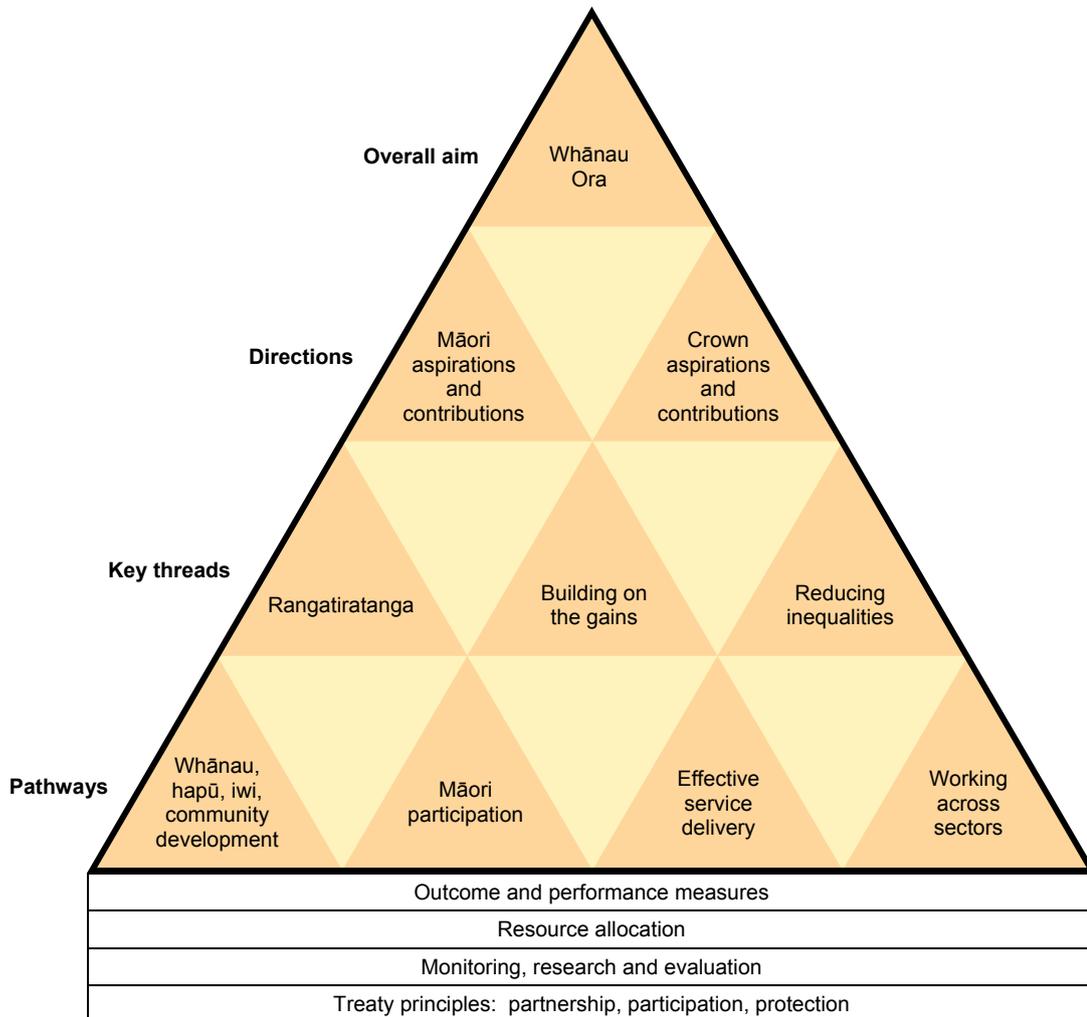
He Korowai Oranga, the Māori Health Strategy, was launched in 2002 (Minister of Health and Associate Minister of Health 2002a). It sets a new direction for Māori health development over

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<sup>1</sup> Extracts from "An Assessment of Health Needs in the Whanganui District Health Board District Health Needs of Māori Information Section.

10 years, and provides guidance at a strategic level on ways to achieve Māori health improvements and eliminate health inequalities. Figure 1 below shows the framework for the strategy. The 4 pathways form the basis of Whakatātaka, and *Whakatātaka Tuarua* the Māori Health Action Plan 2002-2011.

**Figure 1. He Korowai Oranga components**



The overall aim of He Korowai Oranga is Whānau Ora, Māori families supported to achieve their maximum health and wellbeing.

Whānau (kuia, koroua, pakeke, rangatahi and tamariki) is recognised as the foundation of Māori society. As a principal source of strength, support, security and identity, whānau plays a central role in the wellbeing of Māori individually and collectively.

The use of the term whānau in this document is not limited to traditional definitions but recognises the wide diversity of families represented within Māori communities. It is up to each whānau and each individual to define for themselves who their whānau is.

The outcomes sought for whānau include:

- Whānau experience physical, spiritual, mental and emotional health;
- Whānau have control over their own destinies;
- Whānau members live longer and enjoy a better quality of life;

- Whānau members (including those with disabilities) participate in te ao Māori and wider New Zealand society.

These outcomes are more likely where:

- Whānau are cohesive, nurturing and safe;
- Whānau are able to give and receive support;
- Whānau have a secure identity, high self-esteem, confidence and pride;
- Whānau have the necessary physical, social and economic means to participate fully and to provide for their own needs;
- Whānau live, work and play in safe and supportive environments.

He Korowai Oranga asks the Health and Disability Sectors to recognise the interdependence of people, that health and wellbeing are influenced and affected by the 'collective' as well as the individual, and the importance of working with people in their social contexts, not just with their physical symptoms.

Whānau Ora is a strategic tool for the Health and Disability Sector, as well as for other Government sectors, to assist them to work together with iwi, Māori Providers and Māori communities and whānau to increase the lifespan of Māori, improve their health and quality of life, and reduce disparities with other New Zealanders.

### **Priority Areas for Whakatātaka Tuarua**

Enhancing the effectiveness of mainstream services to deliver and contribute positively towards improving Māori health outcomes remains an important priority for the Ministry of Health. To date, the Ministry of Health has put considerable effort into supporting Māori capacity building within the sector.

Development has shifted in recent years from increasing the number of Māori Providers to building, strengthening and sustaining the quality of the services provided. While an important area of business that will continue to be supported, over the short to medium term it is important that Māori-led initiatives are highlighted and positioned as models of good practice and innovation to be shared for the benefit of all.

Alongside the work with Māori Providers, an ongoing focus will remain on district health boards and mainstream providers to ensure greater effectiveness of the resources and initiatives aimed at improving Māori health outcomes. A high proportion of Māori continue to access mainstream services, and an overwhelming proportion of health and disability funding goes to mainstream providers. Therefore, these providers have a critical role in improving Māori health, and it is essential that mainstream services respond effectively to the health status of Māori.

As part of Whakatātaka Tuarua, the Ministry of Health has identified the following areas for priority attention:

- Building quality data and monitoring Māori health;
- Developing Whānau Ora-based models;
- Ensuring Māori participation: workforce development and governance;
- Improving Primary Health care.

The Whakatātaka Tuarua Action Plan identifies the following areas for priority attention:

#### ***Te Ara Whakahaere: Pathway Ahead – Implementing Whakatātaka***

- *Building Quality Data:* To be able to monitor Māori health effectively, high-quality data has to be available.
- *Monitoring Progress in Māori Health:* Monitoring Māori health and its determinants is essential for identifying patterns and trends, developing appropriate programmes and policies, and measuring outcomes.

- *Monitoring Investment In Māori Health:* District health boards and other national-level, regional and local funders and providers monitor their investment in Māori health improvement until Māori have the same opportunities for good health as other New Zealanders.
- *Implementing the Strategic Research Agenda for He Korowai Oranga:* The Ministry of Health will build an evidence base for He Korowai Oranga that is supported by a co-ordinated and resourced Māori health research community.

***Te Ara Tuatahi: Development of Whānau, Hapū, Iwi and Māori Communities***

- *Fostering Māori Community Development:* To increase whānau health and wellbeing through fostering Māori community development that builds on the strengths and assets of whānau and Māori communities.
- *Building on Māori Models of Health:* To recognise and value Māori models of health and traditional healing.

***Te Ara Tuarua: Māori Participation in the Health And Disability Sector***

- *Increasing Māori Participation in Decision-Making:* Iwi and Māori communities and Government Health Agencies work together in effective relationships to achieve Māori health objectives.
- *Increasing Māori Provider Capacity and Capability:* To increase the capacity and capability of Māori providers to deliver effective Health and Disability Services for Māori.
- *Providing Highest Quality Service:* To deliver services to the highest clinical safety and quality standards within available funding.
- *Developing the Māori Health and Disability Workforce:* To increase the number and improve the skills of the Māori health and disability workforce at all levels.

***Te Ara Tuatoru: Effective Health And Disability Services***

- *Addressing Health Inequalities for Māori:* To reduce Māori health and disability inequalities through specific Māori health priorities.
- *Improving Mainstream Effectiveness:* To improve access to, and the effectiveness of, mainstream services for Māori.
- *Māori Health Plans:* To ensure a local and regional focus is maintained by district health boards on the range of effective and quality services for Māori.
- *Removing Barriers and Promoting Participation of Māori who have a Disability:* To remove barriers to Māori with disabilities and their whānau from fully participating in New Zealand society, including te ao Māori.

***Te Ara Tuawhā: Working Across Sectors***

- *Encouraging Initiatives with Other Sectors that Positively Affect Whānau Ora:* To ensure other sector agencies work effectively together to support initiatives that positively contribute to Whānau Ora.
- *Reducing Inequalities for Māori who have a Disability.*

### **4.3 The Primary Health Care Strategy 2001**

Published in February 2001, the strategy's vision was twofold:

People will be part of local Primary Health Care Services that improve their health, keep them well, are easy to get to and coordinate their ongoing care.

Primary Health Care Services will focus on better health for a population, and actively work to reduce health inequalities between different groups.

The strategy had six key directions for Primary Health Care to achieve this vision:

- Work with local communities and enrolled populations;
- Identify and remove health inequalities;

- Offer access to comprehensive services to improve, maintain and restore people's health;
- Co-ordinate care across service areas;
- Develop the primary health care workforce;
- Continuously improve quality using good information.

A key part of the strategy is the implementation of Primary Health Organisations.

The Whanganui District Health Board will work with Primary Health Organisations to further progress the Primary Health Care Strategy in the following key areas:

- Allow an increased community participation in decision making including the involvement of Māori and communities where appropriate and including those groups at greatest risk of ill health.
- Reduce health outcome inequalities by directing resources to better preventing and managing chronic or long-term conditions among those groups at greatest risk of ill health, including for Māori.

#### **4.4 Te Tahuhu – Improving Mental Health 2005 to 2015**

Te Tāhuhu - Improving Mental Health 2005-2015 is Government's most recent policy statement on mental health and addiction and joins Looking Forward (1994) and Moving Forward (1997) as part of the National Mental Health Strategy.

Te Tahuhu identifies Māori Mental Health as a key challenge or action priority for the Mental Health and Addiction Sector for the next 10 years.

Over the past 10 years there has been significant growth and development in the range of Mental Health and Addiction Services for Māori, however despite these improvements, Māori still tend to access Mental Health Services at a later stage of illness and with more severe symptoms.

There is a strong link between health and Māori community, and the wellness of tangata whaiora is dependent upon and affected by the wellness of whānau. Models of practise must recognise the importance of whānau in recovery and the interface between culture and clinical practices.

Te Puawaitanga the Māori Mental Health National Strategic Framework 2002 released by the Ministry of Health prior to Te Tahuhu provides district health boards with a nationally consistent framework for planning and delivering Māori mental health services and recognises that services will only be effective for Māori when they reflect all dimensions of wellness. National Mental Health Standards require all mainstream Mental Health Services to provide appropriate services for Māori and the National Mental Health Strategy sets a goal for Māori to have the choice of accessing either Kaupapa Māori or mainstream Mental Health Services.

These particular strategies sit well with the aims of this strategy and the Whānau Ora philosophy/concept of purchasing and providing services.

#### **4.5 District Health Board Strategic Plan 2005/10**

The District Health Board Strategic Plan 2005/15 describes the following key strategic direction and priorities:

##### ***Our Vision***

"Better health and independence"

##### ***Our Mission***

To improve health and independence through a responsive and integrated health system.

##### ***Our Values***

The Whanganui District Health Board confirms that in all its endeavours it will be guided by the following set of values:

<b>Co-operation</b>	Working collaboratively and positively with others.
<b>Social equality</b>	Valuing people, respecting diversity, and responsiveness in reducing disparities in health.
<b>Adaptability</b>	Being flexible and able to respond to change and new circumstances, or initiate change.
<b>Development</b>	Growing and learning, empowering people and communities to achieve their goals.
<b>Integrity</b>	Acting honestly and openly, following ethical principles, serving the public interest.
<b>Responsibility</b>	Having concern for the consequences of our actions, prioritising and allocating resources in the best interest of the community.
<b>Respect</b>	Respecting all people, the rule of law, institutions of democracy and the Treaty of Waitangi.

## Population Goals

The focus of this plan is to improve the health of the population in the Whanganui District Health Board area. This means our key focus is on the needs of our population and not just on the services that are provided. It also means we need to make some changes to what we do and how we do it.

• <b>Population Goals</b>	• <b>Objectives</b>
<b>1. Improving health</b> •	1. Focus on prevention strategies, health promotion and education. 2. Ensure access to appropriate and timely/early intervention to improve health. 3. Achieve seamless integrated service delivery and break down barriers, especially across Primary and Secondary Services. 4. Undertake activities with other agencies (local Territorial Authorities, Community Organisations and Primary Care Providers etc) to help improve health. 5. Achieve improved health status in target areas.
<b>2. Reducing inequalities</b> •	1. Implement He Korowai Oranga through Whakatātaka: Māori Health Action Plan. 2. Achieve Improve Māori health status in target areas. 3. Improve Maintain access to services for rural people. 4. Reduce avoidable hospital admissions for target groups. <ul style="list-style-type: none"> <li>▪ older people</li> <li>▪ children</li> <li>▪ Māori and Pacific peoples.</li> </ul> 5. Reduce affordability/cost as a barrier to accessing services. 6. Undertake activities with other agencies (local Territorial Authorities, Community Organisations and Primary Care Providers etc) to help reduce inequalities.
<b>3. Promoting recovery, wellbeing and independence</b> •	1. Ensure recovery models/approaches are central all health services and especially Mental Health Services. 2. Ensure restoration and independence models/approaches are central to all services and especially Disability Support Services. 3. Undertake activities with other agencies (local Territorial Authorities, Community Organisations and Primary Care Providers etc) to promote community wellbeing. 4. Promote family, whānau, hapū and community wellbeing.

## Partnership with Iwi and Relationships with Māori

Whanganui District Health Board recognises and respects the principles of the Treaty of Waitangi in accordance with the New Zealand Public Health and Disability Act 2000 as agents of the Crown. A Memorandum of Understanding with Hauora a Iwi is in place to implement this.

The Whanganui District Health Board will work to:

- |                        |  |
|------------------------|--|
| Partnership formed     | - Improve partnerships with Iwi;                           |
| Capacity built         | - Build Iwi and Māori capacity to respond to health needs; |
| Planning               | - Involve Iwi and Māori in planning and decision making;   |
| ↓                      |  |
| Health improvement     | - Improve Māori health;                                    |
| Inequalities reduction | - Reduce health and disability inequalities.               |

#### 4.6 Reducing Inequalities in Health Action Plan 2005

The Whanganui District Health Board Reducing Inequalities Health Action Plan 2005 describes the following actions/solutions and outcomes sought:

##### Action/ Solution

Identify inequalities in health based on health needs assessment information and data

Utilise inequality in health tool kits in it planning and funding of services or decisions about resource allocation, service developments and / or changes

Monitor, report on actions 1 and 2 above to Statutory Board Committees and Board as appropriate

Meeting national reporting requirements

##### Outcomes Sought

Ensuring accessible and appropriate services to the target populations. Allocations of resources based on information to assist in reducing inequalities in health

Ensuring accessible and appropriate services to the target populations. Allocation of resources based on health needs assessment information to assist in reducing inequalities in health. Improve health wellbeing of people in low socio-economic groups , Māori and pacific peoples.

Ensuring accessible and appropriate services to the target populations.

Improve health and wellbeing of people in low socio-economic groups, Māori and Pacific people.

Ensuring accessible services to the target populations

**The Huarahi Oranga, Māori Health Strategy Action Plan  
Linked with the Key Objectives and Regional and National strategies**

<b>Vision and Objectives from the Whanganui District Health Board Huarahi Oranga, Māori Health Strategy</b>	<b>Activities / workstream</b>	<b>He Korowai Oranga 2002 and Whakatātaka Tuarua 2006 Areas of priority attention</b>
<p><b>Theme: Effective Iwi Health Organisations</b></p> <ul style="list-style-type: none"> <li>▪ Support the development of capable and competent Iwi Health Governance Organisations.</li> <li>▪ Assist and support the development of effective governance partnerships/Iwi leadership</li> <li>▪ Committed Iwi leadership to achieve improved health outcomes for Māori</li> <li>▪ Implement strategies to develop effective and sustainable Iwi health provider organisations</li> </ul>	<ul style="list-style-type: none"> <li>▪ Investment in Hauora a Iwi strategic development</li> <li>▪ Review all support services provided to Hauora a Iwi.</li> <li>▪ Ensure Iwi decision making for Māori and Māori Health provider participation in Health and Disability Sector</li> <li>▪ Assist Hauora a Iwi to ensure Iwi community health plans are in place.</li> <li>▪ Assist Hauora a Iwi to ensure high level Memorandum of Understanding between Iwi and Mainstream Health providers are in place and effective.</li> <li>▪ Iwi health organisations will demonstrate effective Iwi governance</li> <li>▪ Ensure intersectoral initiatives span community development</li> </ul>	<p><i>Te Ara Tuatahi: Development of whanu hapū iwi and Māori communities</i></p> <ul style="list-style-type: none"> <li>- Fostering Māori Community Development:</li> </ul> <p><i>Te Ara Tuatoru: Effective Health and Disability services</i></p> <ul style="list-style-type: none"> <li>- Improving mainstream effectiveness</li> </ul> <p><i>Te Ara Tuarua: Māori Participation in Health and Disability Sector</i></p> <ul style="list-style-type: none"> <li>- Increasing Māori Participation in Decision-Making:</li> <li>- Increasing Māori Provider Capacity and Capability:</li> </ul> <p><i>Te Ara Tuawha : Working across sectors</i></p> <ul style="list-style-type: none"> <li>- Encouraging Initiatives with Other Sectors that Positively Affect Whānau Ora:</li> </ul>
<p><b>Theme: Continuum of Care and Integration of Services</b></p> <ul style="list-style-type: none"> <li>▪ Define, describe and implement innovative, outcome focused service models both Kaupapa and mainstream to meet the</li> </ul>	<ul style="list-style-type: none"> <li>▪ Development of a purchasing framework for Māori health services including a range of services and service providers, models of care that instil the Whānau Ora philosophy / concepts, core kaupapa Māori services that will form the basis of iwi health provider organisations, clinical components and competencies, workforce planning and development all of which will work towards reduced inequalities and improved health outcomes for Māori. The purchase of mainstream and Kaupapa Māori health services for Māori focused towards primary care</li> </ul>	<p><i>Te Ara Tuatoru: Effective Health and Disability services</i></p> <ul style="list-style-type: none"> <li>- Addressing Health Inequalities for Māori:</li> <li>- Improving Mainstream Effectiveness:</li> <li>- Māori Health Plans:</li> </ul>

Vision and Objectives from the Whanganui District Health Board Huarahi Oranga, Māori Health Strategy	Activities / workstream	He Korowai Oranga 2002 and Whakatātaka Tuarua 2006 Areas of priority attention
<p>needs of Māori</p> <ul style="list-style-type: none"> <li>▪ A Purchasing Framework for Services to Improve Health Outcomes for Māori that includes Whānau Ora philosophy / concepts as the service model</li> <li>▪ Ring fenced funding pool and planned investment in mainstream and Kaupapa Māori Health Services and service initiatives to improve health outcomes for Māori</li> <li>▪ Maximise partnerships to deliver quality care across the health care continuum</li> <li>▪ Closer collaboration between primary health organisations and Iwi health provider organisations</li> <li>▪ Development of a primary care led, single point assessment and care coordination service that includes Māori health services.</li> <li>▪ Improved access for Māori to services both mainstream and Kaupapa Māori</li> </ul>	<p>and prevention services.</p> <p>Realignment of service provision:</p> <ul style="list-style-type: none"> <li>- Evaluation of Kaupapa Māori service models</li> <li>- Kaupapa Māori health services will be realigned to focus on reducing chronic disease in line with the implementation of the district health board Chronic Disease Prevention and Management Framework.</li> <li>- Alignment of the Whānau Ora Service Specification with the revised national specification and including outcome measurements</li> <li>- Inclusion of registered nurse clinical component into Whānau Ora Services</li> <li>▪ Development of mainstream models to improve mainstream effectiveness</li> </ul> <ul style="list-style-type: none"> <li>▪ Inclusive of collaborative models working across services and sectors.</li> <li>▪ Primary Care Nursing Service Model</li> </ul> <p>Work with key stakeholders to explore and develop a nursing model of care that will combine community based nursing services with primary care practice nursing services delivered in a primary care setting. The model should include nurse practitioner and nurse led service initiatives, linked with Māori health provider Whānau Ora Services – clinical and kaiawhina; high health need and care plus nursing services, specialist nursing services and district nursing services. The model should include new graduate placements and practicum placements into community based nursing services in both urban and rural settings. This model should also take into account the development of the integrated assessment service model and identified linkages to this service. Expert facilitation and participation from key stakeholders will be vital to the success of this opportunity to identify a primary care nursing service model to progress the primary health care strategy and primary health organisation development into the future. It is proposed that a business</p>	<ul style="list-style-type: none"> <li>- Developing Whānau Ora –based models</li> <li>- Improving primary health care</li> </ul> <p><i>Te Ara Tuarua: Māori Participation in Health and Disability Sector</i></p> <ul style="list-style-type: none"> <li>- Increasing Māori Provider Capacity and Capability:</li> <li>- Providing Highest Quality Service:</li> </ul> <p><i>Te Ara Tuawha : Working across sectors</i></p> <ul style="list-style-type: none"> <li>- Encouraging Initiatives with Other Sectors that Positively Affect Whānau Ora:</li> <li>- Reducing Inequalities for Māori who have a Disability.</li> </ul> <p><i>Te Ara Whakahaere: Pathway Ahead – Implementing Whakatātaka</i></p> <ul style="list-style-type: none"> <li>- Building Quality Data:</li> <li>- Monitoring Progress in Māori Health:</li> <li>- Monitoring Investment In Māori Health:</li> </ul>

Vision and Objectives from the Whanganui District Health Board Huarahi Oranga, Māori Health Strategy	Activities / workstream	He Korowai Oranga 2002 and Whakatātaka Tuarua 2006 Areas of priority attention
	<p>case will be developed for implementation in 2008/09.</p> <ul style="list-style-type: none"> <li>▪ Integrated Nursing Leadership</li> </ul> <p>The district health board provider division and primary health organisations will explore the opportunity to establish an integrated Nursing Leader Role across primary and secondary nursing services. This development would align with the proposed new nursing model described above</p> <ul style="list-style-type: none"> <li>▪ Maximise collaborative working relationships between Kaupapa Māori services and mainstream health organisations at all levels</li> <li>▪ Work together to develop collaborative working relationships and service solutions with other district health boards</li> <li>▪ <i>Improve Access to Kaupapa Māori Primary Health Services</i> and development of sustainable first line Kaupapa services - Work with the primary health organisation to evaluate current services and develop a kaupapa Māori general practice medical and nursing service model , located within Wanganui city focused on a nurse led service model, including nurse practitioner and medical services within a multidisciplinary team, based on a Whānau Ora purchasing and service framework.</li> </ul> <p>Identifying barriers to access for Māori to address current inequalities.</p> <ul style="list-style-type: none"> <li>▪ Planned investment in health services to improve health outcomes for Māori</li> <li>▪ Information (written and oral) provided to Māori consumers and their whānau that takes cognisance of literacy and knowledge levels and understanding</li> <li>▪ Adopting mechanisms that will strengthen the role of the consumer and empower the individual and their whānau to advocate on their own behalf , recognise the individual as an 'expert' in their own health</li> <li>▪ Integrated information systems that will allow timely and accurate information transfer</li> <li>▪ Quality services that include; robust Clinical governance processes;</li> </ul>	<p><i>Te Ara Tuatoru: Effective Health and Disability services</i></p> <ul style="list-style-type: none"> <li>- Addressing Health Inequalities for Māori:</li> <li>- Improving Mainstream Effectiveness:</li> </ul>

<b>Vision and Objectives from the Whanganui District Health Board Huarahi Oranga, Māori Health Strategy</b>	<b>Activities / workstream</b>	<b>He Korowai Oranga 2002 and Whakatātaka Tuarua 2006 Areas of priority attention</b>
	<p>health service provision aligned with an appropriate accreditation body and service outcomes that are measurable and demonstrate effective and efficient services provision</p> <ul style="list-style-type: none"> <li>▪ Robust methods for the collection and analysis of ethnicity data</li> <li>▪ Develop and implement effective service evaluation processes</li> <li>▪ Identification and investment in research and development projects.</li> <li>▪ Health sector funder and provider organisations will use the Heat Tool (Health Inequalities Assessment Tool) as part of service planning, development and prioritisation processes.</li> <li>▪ Regular contract monitoring and audit of services</li> <li>▪ Māori health outcome measures identified, attached to mainstream services and monitored</li> </ul> <ul style="list-style-type: none"> <li>▪ <i>Improved Mainstream Effectiveness:</i> <ul style="list-style-type: none"> <li>▪ The provider division will review the provision of Māori Liaison Services in 2007/08</li> <li>▪ Implementation and evaluation of processes developed to improve admission and discharge process for Māori and linkages to Māori health provider organisations</li> <li>▪ Continue to implement Te Puawaitanga (National Māori Mental Health Strategy) through the specialist mental health services.</li> <li>▪ Advocacy and support for Māori to access services in a timely way and receive services provided through holistic interdisciplinary clinical team models of care.</li> </ul> </li> </ul>	
<p><b>Theme: Workforce to achieve the strategy</b></p> <ul style="list-style-type: none"> <li>▪ Recruitment and retention strategy for Māori health professionals;</li> <li>▪ Identified and planned training</li> </ul>	<ul style="list-style-type: none"> <li>▪ Work with Iwi health organisations to develop: <ul style="list-style-type: none"> <li>- a recruitment and retention strategy for Māori health professionals that supports the implementation of the Purchasing Strategy for Māori health services</li> <li>- workforce development plan including the identification of generic training needs across</li> </ul> </li> </ul>	<p><i>Te Ara Tuatahi: Development of whanu hapū iwi and Māori communities</i></p> <ul style="list-style-type: none"> <li>- Fostering Māori Community Development:</li> <li>- Building on Māori Models of Health:</li> </ul> <p><i>Te Ara Tuarua: Māori Participation in the</i></p>

<b>Vision and Objectives from the Whanganui District Health Board Huarahi Oranga, Māori Health Strategy</b>	<b>Activities / workstream</b>	<b>He Korowai Oranga 2002 and Whakatātaka Tuarua 2006 Areas of priority attention</b>
<p>to support Kaupapa Māori models of care funded by Māori Provider Development Scheme, generic to all Iwi health providers;</p> <ul style="list-style-type: none"> <li>▪ Proactive approach by mainstream providers to recruit and retain Māori staff to support the provision of effective services to Māori.</li> <li>▪ Ensure mainstream services have the skills to deliver culturally appropriate services to Māori.</li> <li>▪ Programmes to support mainstream effectiveness and Iwi health provider capability provided through the district health board learning centre and participation in such programmes by providers</li> <li>▪ Develop partnerships with other district health boards and Centres of Learning.</li> </ul>	<p>core Iwi health provider services</p> <ul style="list-style-type: none"> <li>▪ Assist mainstream providers to identify recruitment and retention strategies for Māori staff.</li> <li>▪ Supporting mainstream service providers to undertake workforce development training in Whānau Ora concepts and to support the development of for Māori by Māori models of care.</li> <li>▪ Develop partnerships with other district health boards and Centres of Learning.</li> </ul>	<p><i>Health And Disability Sector</i></p> <ul style="list-style-type: none"> <li>- Developing the Māori Health and Disability Workforce:</li> </ul> <p><i>Te Ara Tuatoru: Effective Health and Disability services</i></p> <ul style="list-style-type: none"> <li>- Improving mainstream effectiveness.</li> </ul>

## Information Section

### Part One: Extracts from "An Assessment of Health Needs in the Whanganui District Health Board District 2005"

#### Chapter 8: Health Needs of Māori

This section describes key health issues and inequalities for Māori of the district. The information is presented throughout this Health Needs Assessment.

#### Key Issues

- By 2021 the Māori population is expected to grow 15% to 17,860 which will represent 25% of the overall population.
- Māori mortality rate 1.65 times that of non-Māori in Whanganui (age standardised).
- Since the last Needs Assessment all cause mortality rates for Māori in Whanganui has decreased slightly.
- Avoidable hospitalisation rates for Māori in Whanganui are 31% higher than the overall population, although have decreased since the last Health Needs Assessment.
- Hospitalisation rates due to stroke for Māori are higher than non-Māori, 25-64 years old 1.8 times higher and for those over 65 years twice the rate.
- Mortality rates from diabetes are six times those of non-Māori
- Māori hospitalisation rates for diabetes may be as much as three times higher than that of non-Māori but overall have decreased since the last Health Needs Assessment.
- Māori are 1.7 times more likely than non-Māori to be diagnosed with cancer and 1.6 times more likely die from it.
- Oral health in Māori is worse than non-Māori.
- Higher smoking rates amongst Māori, particularly in young women
- For Māori in Whanganui the four top avoidable hospitalisation conditions are; respiratory infections, dental conditions, cellulitis and angina
- In Māori ischaemic heart disease, lung cancer and diabetes are the major avoidable causes of mortality in the Whanganui.
- Increased proportion of Māori in mental health alcohol and drug services and a high mortality for Māori for alcohol related conditions
- Māori in Whanganui have high hospitalisation rates for nutrition related conditions
- Child mortality from injury for Māori in Whanganui higher than in New Zealand overall.

#### Older Māori

- By 2021 the over 55 Māori population expected to grow 133% to 3,150
- Māori are disproportionately represented in the low income chronically ill/disabled grouping
- Māori have a higher incidence of chronic illness at an earlier age than the overall population
- Older Māori and Pacific people are more likely to live with family than other ethnic groups, 60% of those over 75 years live with whānau (MoH 2002b)
- Māori have higher than average rates of stroke and the average age for first stroke is 10 years younger than non-Māori.

## Changes since the 2001 Health Needs Assessment

- Deprivation using NZDep2001 cannot be compared directly with NZDep1996 due to minor changes in the methodology.
- The Ruapehu territorial authority was identified as being an area of especially high deprivation; this is no longer the case. Incorrect assumptions may have been made from the 2001 Health Needs Assessment.
- Wanganui territorial authority has the highest deprivation in the Whanganui District Health Board region.
- The overcrowding situation has improved. Overall Whanganui has a better overcrowding index than New Zealand.
- Avoidable hospitalisation rates for Māori in Whanganui have decreased.
- Suicide rates for Māori have decreased
- Hospitalisation rates from attempted suicide have decreased.
- Cancer mortality rates have increased for Māori and non-Māori.
- Diabetes – hospitalisation rates for Māori have decreased.

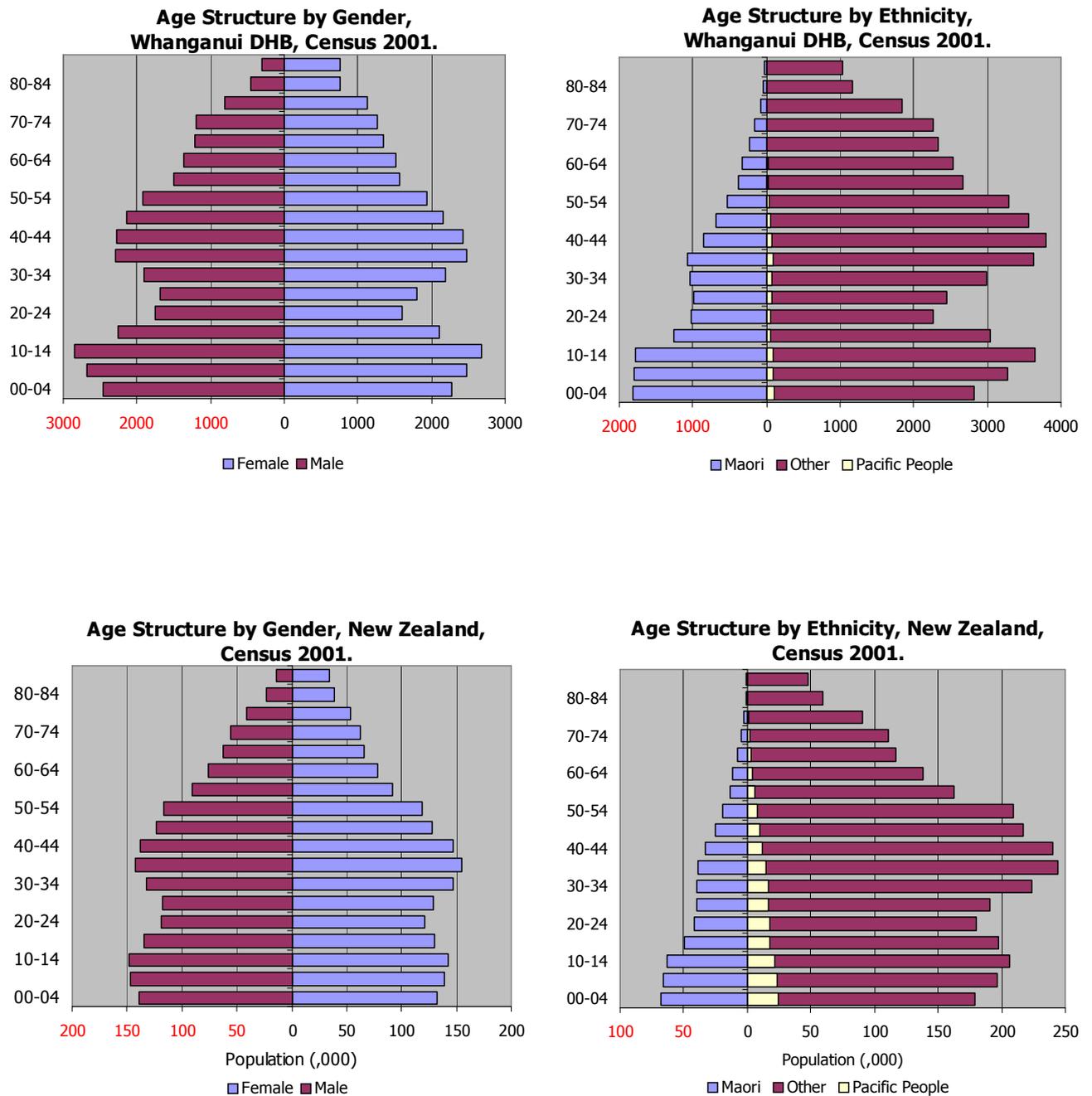
## What is the population?

About 63,600 people live within the Whanganui District Health Board's boundaries (census 2001). Of these 22.2% are Māori, compared to 14.1% for the whole of New Zealand. Whanganui District Health Board has the sixth largest Māori population behind Tairāwhiti (44.0%), Lakes (31.6%), Northland (29.1%), Bay of Plenty (24.0%) and Hawkes Bay (22.6%). A profile of age and ethnicity can be seen in Table 1.

Full age-sex-ethnicity tables for the Whanganui district are presented in Appendix 1: Population Structure.

The age structure is similar to New Zealand, however, there is a lower proportion in the 15-44 year age groups, and the number in the 25-44 year age group is in the bottom 25% of all district health boards (fourth lowest). The older age groups, 65+ years is also proportionately higher, being in the top 25% of all district health boards (fourth highest), as is the 5-14 year age group. These figures would indicate a definite migration of working age adults to the larger centres probably for employment and education. This can be seen when comparing Whanganui with centres like Wellington and Auckland. As this is also the age to have a family, the birth rate for Whanganui is affected.

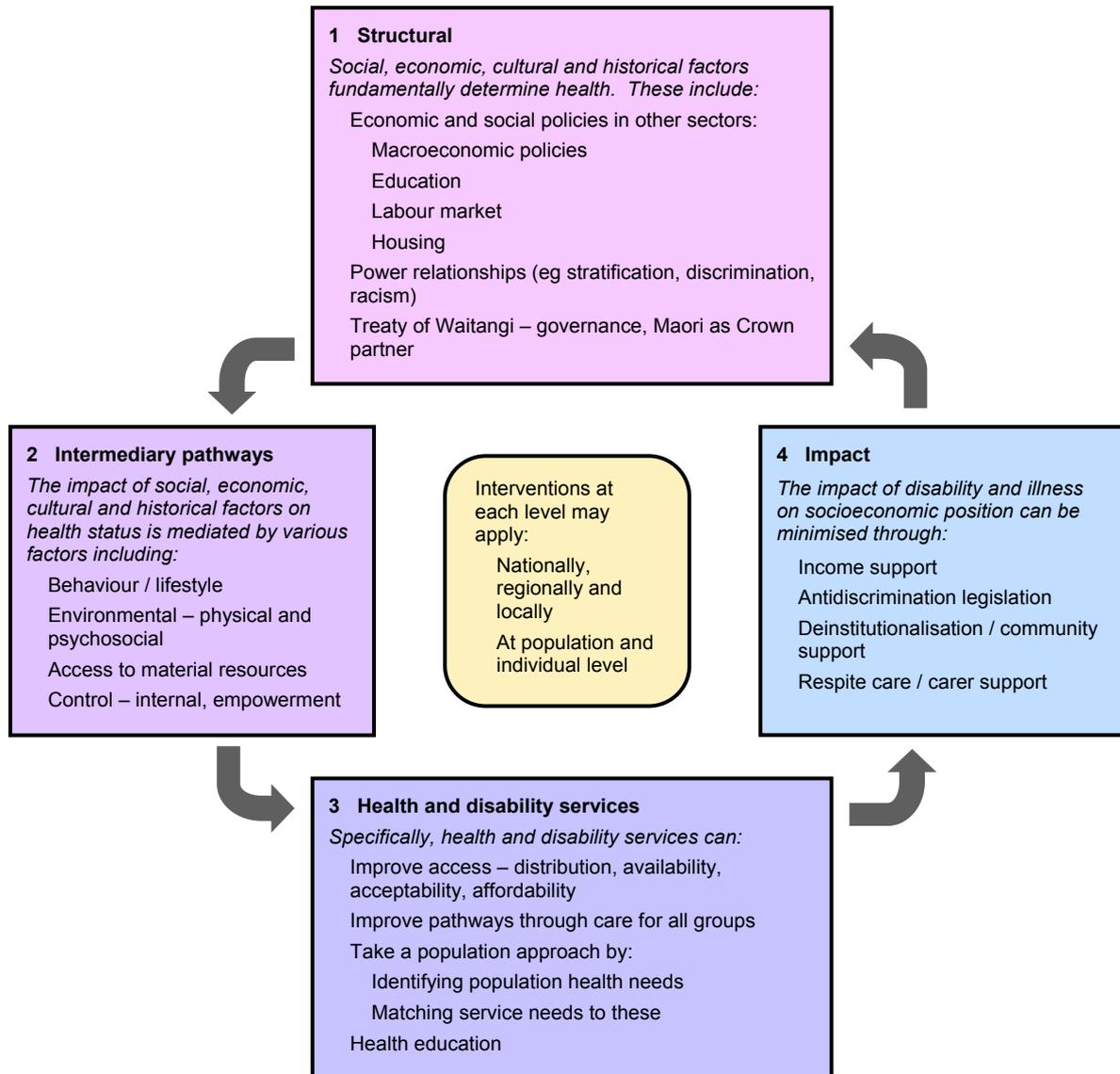
Figure 1: Age structure of population by gender and ethnicity, census 2001.



**Information Section Part 2:**

**Health Intervention Framework and Health equity Assessment Tool – HEAT (Equity Lens)**

**Reducing Inequalities Framework**



**Health Equity Assessment Tool**

The following set of questions has been developed to help in considering how particular inequalities in health have come about, and where the effective intervention points are to tackle them.

1 What health issue is the policy / programme trying to address?	7 Where / how will the programme intervene to tackle this issue? (Use the MoH Intervention Framework and the ToW to guide thinking.)
2 What inequalities exist in this health area?	8 How could this intervention affect health inequalities?
3 Who is advantaged most and how?	9 Who will benefit most?
4 How did the inequality occur? What are the mechanisms by which it was created, and is it being maintained or increased?	10 What might the unintended consequences be?
5 What are the determinants of the inequality?	11 How will the programme reduce or eliminate inequalities?
6 How will the programme address the principles of the Treaty of Waitangi (specifically partnership, participation and protection)?	12 How will reduction in inequalities be measured?

### Information Section Part Three 3:

## GLOSSARY

Awa	Rivers
Hapū	Sub- tribe
Hauora a Iwi	Iwi governance partner to the Whanganui District Health Board
He Korowai Oranga	Cloak of wellbeing
Hinengaro	Emotional or mental wellbeing – (literally means missing woman)
Huarahi Oranga	Pathway to Wellbeing
Iwi	Tribe
Kaitiakitanga	Embraces the spiritual and cultural guardianship of Te Ao Mārama
Kaumātua	Male elder
Kaupapa	Subject/topic
Kawanatanga	Crown
Koroua	Male elder
Kotahitanga	Principle of unity of purpose and direction
Kuia	Female elder
Manākitanga	To care for whānau members/people
Mana Tūpuna	Links to ancestors, defines heritage our place in the world
Mana Whenua	Indigenous Rights
Marae	Meeting/speaking places
Mātauranga:	Explanations and ideas of the development of the world as seen and experienced by ancestors
Maunga	Mountains
Moana	Seas and lakes
Oranga wairua	Spiritual well being
Pae pae	Speaking place
Pupuri taonga	Guardianship of the family estate
Rangatahi	Youth
Rangatiratanga	Principality
Rohe	Area of influence
Rongoa	Medicine
Roopu	Group
Tamariki Ora	Child health
Te Ao Marama	Modern World
Te Ao Māori	The world of the Māori
Te Ao Pakeha	The world of the European (non-Māori)
Te Manu Whakahiato	Māori District Health Board Relationship Board Members
Te Pae Tuarua	Level one
Te Pae Tuatahi	Level two
Te Pae Tuatoru	Level three
Te Pae Tuawha	Level four
Te Reo	Medium through which Māori explain the world
Turanga wae wae	Standing ground
Te Whare Tapa Wha	A Māori health model coined by Professor Mason Durie (dubbed the four cornerstones of Māori health), this holistic approach to Māori health comprises four sides, they are wairua (spiritual), hinengaro (mental), tinana (physical) and whānau (family). When these become unbalanced then there requires healing to take place. This healing can be through medical/conventional methods or traditional methods. The choice of healing resting with the individual.
Tikanga	Custom, rules or principles
Tinana	Physical body
Tuarua	Second
Tuatoru	Third
Tuawha	Fourth

Tumu Whakarae	District Health Board Māori Managers Collective Forum
Tupuna	Ancestors
Ukaipo	Home ground
Wairua/Wairuatanga	Spirit
Whakahaere	Organisation
Whakamana	To give power to/empowerment
Whakapapa	Genealogy, cultural identity
Whakapumau tikanga	Cultural endorsement
Whakatakoto tikanga	Planning
Whakatātaka	To move about
Whakawhanaungatanga	Whānau consensus/ancestral linkages (genealogical)
Whānau Ora	Family health
Whānau	Family
Whanautanga	Relationship, family ties
Whanaungatanga	Social organisation of whānau, hapū and Iwi and includes rights and reciprocal obligations consistent with being part of a collective.