

Te Ara Pounamu

A Tiriti-dynamic system

February 2021

Tēnā koutou katoa,

Kei ngā pupurutanga mauri o te motu, ā-tai, ā-whenua, ā-maunga, ā-wai-Māori, ka hoka arorangi aku whakamānawa ki a koutou katoa, e kōkiri nei, e whakahihiri nei, i ngā kaupapa e ora ai te mauri o te tangata ā-tinana, ā-wairua, ā-hinengaro. Tēnā tātou katoa!

On 26 November 2020, Te Hiringa Hauora/Health Promotion Agency hosted a national virtual hui that brought together public and population health leaders and practitioners to connect and reflect on proposed system changes, challenges and future opportunities in Aotearoa New Zealand. We have brought the themes and views from the hui into a short think piece.

It provides a simple, pragmatic and action-oriented approach to public and population health in Aotearoa. It describes the notion of a 'Tiriti-dynamic' system and suggests an agenda for Government action.

It is our hope that this think piece will challenge our existing thinking and ways of operating; stimulate robust korero/debate; excite people to experiment, test, share, and learn from others; and to ultimately support people to achieve their own aspirations for health and wellbeing.

I welcome your whakaaro and future contribution to this kaupapa so that we can share, grow and learn from each other.

Ngā mihi,

Tane Cassidy

Tumu Whakarae/Chief Executive

Te Ara Pounamu: A Tiriti-dynamic system

Core elements of a Tiriti-dynamic and sustainable system



An agenda for Government action

1. Share power at decision-making tables
2. Apply kaupapa Māori approaches to resourcing decisions
3. Make time to build authentic relationships with iwi and communities
4. Share and amplify successful iwi-led and community-driven models
5. Embed Te Tiriti articles into organisational culture and workforce development practices
6. Mandate inclusion of mātauranga Māori into health education and training
7. Collect robust data and stories and share them meaningfully
8. Conduct health impact assessments
9. Develop and implement infrastructure for joint learning

TE ARA POUNAMU

This statement covers core health system elements and practical steps Te Hiringa Hauora has drawn from the themes and discussions raised at Te Ara Pounamu, a virtual population health hui held in November 2020. It contains practical ways of being Tiriti-dynamic, achieving equitable health outcomes for Māori and Pasifika, and augmenting community wellbeing.

A TIRITI-DYNAMIC AND SUSTAINABLE SYSTEM

A renewed health system should centre on being Te Tiriti-dynamic. This means placing Te Tiriti o Waitangi at the forefront of all thinking and providing opportunities to enact Te Tiriti articles in practice. It involves changing the way the system functions to address bias and discrimination; introducing Te Tiriti and kaupapa Māori principles; balancing leadership between the Crown and Māori and Pasifika communities; and sharing and devolving decision-making and resources.

A Tiriti-dynamic and sustainable system requires seven core elements:

- Shared power
- Equitable resourcing
- Trusted relationships
- Community-driven priorities
- Te Tiriti-dynamic workforce
- Robust data
- Joint learning

AN AGENDA FOR GOVERNMENT ACTION

1. Share power at decision-making tables

Tino rangatiratanga asserts the goal of Māori led, by Māori, for Māori. This is often in conflict with Western co-design models favoured in current practice. A Tiriti-dynamic system reflects Māori having power, autonomy and control. This would include reviewing who is currently at the decision-making table for core decisions and ensuring Māori, Pasifika, and youth leaders have seats.

2. Apply kaupapa Māori approaches to resourcing decisions

Current planning, funding and procurement processes require an overhaul to ensure that the Crown prioritises longer term, trusted funding relationships with equal partnership between funder and provider. Options need to flatten structures, equalise power dynamics, share power, emphasise reciprocity, and reflect deliberate investment for equity. A change is required to ensure there is investment in funding people not issues. Whānau Ora provides a strong example of culturally-based, whānau-centred commissioning, providing wraparound support that links across sectors.

3. Make time to build authentic relationships with iwi and communities

Communities hold the expertise about their population's needs and contexts. Taking the time to build authentic relationships with communities is key; focusing on connection/whakapapa first, over function. It is important to keep an open mind, actively listen and respond genuinely, with integrity, to the needs and aspirations of communities. There are many health and community organisations already leading the way in this space. Services such as The Fono and Turanga Health strive for holistic wellbeing for families across generations, being responsive to the needs and challenges facing their local communities.

4. Share and amplify successful iwi-led and community-driven models

Many communities have been subjected to endless pilots. Before reinventing models/services it is important to scope the landscape and work instead to scale up current effective community models. COVID-19 has taught us what is possible; now it is time to put the lessons to work. The pandemic required actions at rapid pace which led to a removal of layers of bureaucracy, allowing communities to act quickly. Their activities had significant impact in a short time period. Now we have an opportunity to build these relationships into sustainable community-led solutions, advancing health and reducing inequities. The Mana Pasifika partnership group provides a strong example of collective action during COVID-19. This by Pasifika, for Pasifika, with Pasifika model focused on a 'village of wellness' approach to amplify community voices, experiences and stories.

5. Embed Te Tiriti articles into organisational culture and workforce development practices

Te Hiringa Hauora has examples of Tiriti-dynamic practices for organisational culture and workforce development. The emphasis is on providing opportunities to trial, learn and grow while embedding Te Tiriti articles into the organisational culture. Examples include kaupapa Māori approaches to procurement (eg, Like Minds Like Mine); ensuring staff, executive management and Board composition are more representative of the population being served; integrating kawa and tikanga in the organisation (eg, weekly te reo session, regular wānanga, waiata, mihi whakatau, pōwhiri); and developing Te Tiriti-based decision-making tools, health promotion outcomes framework and associated monitoring and evaluation plan. The Māori Crown Relations Capability Framework offers a further illustration of an approach to coordinating capability building across the public service.

6. Mandate inclusion of mātauranga Māori into health education and training

A mind-set shift is enhanced by understanding. Currently health professional training includes limited focus on the history of Aotearoa New Zealand, colonisation, Te Ao Māori, Te reo Māori, wider social determinants of health, mātauranga Māori, rongoā Māori, kawa, or tikanga. A review to ensure these topics are embedded into health curricula and training opportunities (eg, public health leadership programmes) would help future generations of health workers to gain a core understanding of the context within which they and their patients/communities live and work. The requirement that New Zealand history is taught in all schools and kura by 2022 provides an example that higher education and training institutions could learn from.

7. Collect robust data and stories and share them meaningfully

A Tiriti-dynamic system incorporates a mutual health intelligence function between Crown and iwi/community, where both sides can share, analyse and disseminate data. Robust data on community health and wellbeing needs must be available regionally to allow for the effective design, delivery and monitoring of tailored services. New consistent strategies for analysing national and local data (at iwi, hapū, whānau levels) should allow people to see themselves in the data shared. Definitions of 'data' need to integrate indigenous (mātauranga Māori) and western methodologies and incorporate all forms of evidence from stories to experiences, collected both by national mechanisms and by communities. Principles of data sovereignty and strengths-based (non-stigmatising) approaches must underpin collection, analysis and dissemination. Whakatōhea Māori Trust Board provides a strong example of data-driven wellbeing initiatives, that move beyond the required health and illness administrative data toward collection of wellbeing information based on what is of importance to the iwi.

8. Conduct health impact assessments

Health in All Policies is an approach designed to ensure all public policies consider health implications to enhance population health. Agencies/Ministries should be guided in this practice with training in health impact assessment. Application of Health in All Policies can be seen in the work of Community and Public Health (Canterbury DHB) with examples such as the Canterbury Health in All Policies Partnership; and in the South Island Health Services Plan 2017-2020 that saw the South Island Public Health Service Level Alliance embed Health in All Policies principles into work plans.

9. Develop and implement infrastructure for joint learning

Health should consider the practices of other sectors in designing, commissioning and implementing activities. Providing integrated and holistic models of care with wraparound support is not only important in health but in all areas of welfare, housing, employment and education. Planned, active sharing of best practice is the way forward. Whānau Ora and The Southern Initiative (South and West Auckland) are examples of integrated ways of working.

TE ARA POUNAMU – A HUI FOR POPULATION HEALTH

Nā te hiahia kia titiro, ā, ka kite ai tātou te mutunga
You must understand the beginning if you wish to see the end

Te Ara Pounamu is the pathway to wellbeing, acknowledging health and wellbeing as taonga we must protect. The name was gifted to this hui by Tau Huirama, te Kaumātua o Te Hiringa Hauora.

Te Ara Pounamu centred on resetting the focus and building a stronger narrative for public and population health. The three key themes were: Hauora Māori/Te Tiriti, Communities/Equity and Population Health/Sustainability.

This paper provides a summary of themes and an action agenda.

HAUORA MĀORI/TE TIRITI

“Pervasive, persistent inequities in health for Māori have resulted from a system failure to give effect to Te Tiriti o Waitangi” - Hui Participant

We know the health system has not worked well for Māori. We have known this for some time. What the hui added was a clear pathway forward to address this, a pathway to wellbeing for Māori. Entrenched inequities for Māori are not only harmful for Māori they are harmful for all, to collective wellbeing and prosperity.

A population health approach requires us to be brave and tackle the issues at the heart of Aotearoa New Zealand’s inequities in health. This means acknowledging and addressing the collective damage from our failure to enact and hold to Te Tiriti o Waitangi.

Achieving Pae Ora, Māori health and wellbeing, requires us to design a system that acknowledges and responds holistically to the intersection of individual, collective and environmental health. Te Tiriti is the framework for planning, with He Korowai Oranga (Māori Health Strategy), Whakamaui (Māori Health Action Plan 2020-2025) and Ola Manuia (Pacific Health and Wellbeing Action Plan 2020-2025) guiding the journey.

If we are serious about Te Tiriti as the starting point, this requires the Crown to do much more than co-design the system, infrastructure and services in partnership with Māori. It requires the shift of resources and decision-making away from the Crown to iwi, Māori and communities. This is crucial to remove inherent bias and design a system that works for Māori.

This means:

- Providing for Māori self-determination in the design, delivery and monitoring of health and disability services.
- Acting to the fullest extent practicable to achieve equitable health outcomes for Māori.
- Providing for and properly resourcing kaupapa Māori health and disability services.

- Ensuring all health and disability services are provided in a culturally appropriate way that recognises and supports the expression of hauora Māori models of care.
- Working in partnership with Māori in the governance, design, delivery and monitoring of health and disability services – Māori must be leaders, with the Crown, of the primary health system for Māori¹.

“It is not good enough to just describe the inequities for Māori and Pasifika peoples, we need solutions that give ownership and accountability to Māori and Pasifika communities” - Hui Participant

COMMUNITIES/EQUITY

We already have innovative and successful indigenous health promotion approaches in iwi, communities, and non-government organisations. Our challenge is to shift the power and resources to support and grow these initiatives as well as share and transfer lessons or stories of success.

“Sharing power is not losing power” - Hui Participant

Leadership is critical - for the Crown, iwi, communities - leadership that is based on values, relationships, collaboration (sharing power and resources) and leveraging all forms of intelligence (emotional and technical). We know these are at the heart of successful international indigenous health systems.

Wellbeing for Māori goes beyond physical health, encompassing cultural regeneration, supported by innovative cultural infrastructures and cultural practices that enhance mana. Working in a mana-enhancing way benefits the system, organisations, and individuals. There are good examples, such as Whānau Ora, showing the potential for iwi-led community partnerships. Whānau Ora provides a proven and sustainable example of commissioning that public health could use. It is a model that is not health-focused but whānau-focused, and can address determinants of health.

Community-led initiatives are everywhere in Aotearoa New Zealand. Whether they be Māori, Pasifika, older people, young families, frontline workers or other cohorts, communities are the experts in their own needs. Building high trust relationships, facilitating access to regional data and information and enhancing resources for community-level development (eg, through community grants) are the functions required to ensure a population health-driven approach. Examples such as the Southern Initiative illustrate what a facilitation role looks like, working in partnership with communities to drive innovation.

“Government Ministers need to put money on the table and take their hand away - pushing power and resources to communities” - Hui Participant

Whānau Ora and many other iwi-led initiatives during COVID-19 highlighted the ability of Māori to respond to the needs of whānau in a mana-enhancing way. The low rates of COVID-19 for Māori

¹ Ministry of Health. 2020. *Whakamaua: Māori Health Action Plan 2020–2025*. Wellington, NZ: Ministry of Health.

did not happen by chance, rather they provide an example of sharing power, resources and trusting communities to respond.

“If we had waited for government to provide us with the prescription, we knew whānau would have been compromised” - Hui Participant

POPULATION HEALTH/SUSTAINABILITY

Population health requires us to look beyond individual behaviours and explicitly address the more powerful social, economic, and societal determinants of health. It requires us to tackle current challenges (eg, non-communicable diseases and the risk factors affecting them) and prepare for future threats and/or emergencies.

There is no recipe or blueprint for an effective system. Culture, values, and leadership are not determined by structure – relationships are at the heart. We must focus on building relationships with iwi, hapū and communities.

“Success is not a single structural reform, or a new agency or form of leadership. It is much more complex” - Hui Participant

The system must be clear about what population health is and the current challenges including:

- Under-resourcing of public health
- The low status of public health in the system – governments struggle to retain a focus on population health
- Ideological tensions, neoliberalism (minimisation of regulation, role of the State) is at odds with population health approaches.

“What does it look like when I have a Treaty focus and an equity focus in my general practice?” - Hui Participant

A framework outlining the capability for an effective public health system² should be used to guide decisions about the design of a health and disability system.

For population health to be a foundational element in the system:

- Te Tiriti must be the key organising framework for all work, with addressing systemic racism at the core.
- The Māori Health Authority must have a full commissioning role, at the centre of system.
- The Ministry of Health must have stronger accountability for the social and economic determinants of health.
- If Te Hiringa Hauora/Health Promotion Agency is disestablished alternate authoritative and well-resourced capacity is required for health promotion.

² Crampton, P., Matheson, D., & Cotter, M. (2020) Assessing the design and capability of our public health system in a Covid and Post-Covid New Zealand. *Policy Quarterly*, 16(3), 30-35.

“We must move from thoughts to action, from talk to action” - Hui Participant

ABOUT TE ARA POUNAMU

Te Ara Pounamu was a virtual hui run in November 2020. It brought together public health leaders at a critical time, to connect and reflect on proposed system changes, challenges and future opportunities.

The hui was conceived and hosted by Te Hiringa Hauora/Health Promotion Agency and supported by a steering group including John Whaanga (Ministry of Health), Don Matheson (Ministry of Health), Nick Chamberlain (Northland DHB), Selah Hart (Hāpai te Hauora Tapui), Jane McEntee (Auckland Regional Public Health Service), Rachael Haggerty (Capital and Coast DHB), Ruth Cunningham (University of Otago), and Carolyn Watts (Quigley and Watts).

Over 500 people attended – signalling the critical importance of this kaupapa.

tehiringahauora.org.nz