

# TOITU TE TANGATA

Strategic Plan for Hauora in Wairarapa Matariki 2023 - Matariki 2026



#### He mihi

Te Karu o Te Ika Poari Hauora (Te Poari) want to acknowledge the crucial role played by Post Settlement Governance Entities (Rangitāne Tu Mai Ra Trust mea Ngāti Kahungunu ki Wairarapa Tāmaki Nui-a-Rua Trust)<sup>1</sup> in our establishment. Their direct relationship with the Crown and Government on behalf of our whānau, hapū, Iwi, and hapori will be invaluable to the success of this kaupapa.

We are also grateful to the individuals, whānau, hapū, lwi, and hapori who have worked over decades to shape and improve Māori health services, disability support, and hauora in the Wairarapa. Their mahi has given us a platform to work from and lends us considerable strength.

We wish to especially acknowledge the contributions made by Te Oranga o Te Iwi Kainga and the Māori Directorate of the former Wairarapa District Health Board, who – amongst other things – have left us with a valuable account of whānau Māori voices and aspirations through the survey they completed in 2021.

The content of this plan was developed through wānanga and we acknowledge the contribution of Aunty Mihi Namana and Mike Kawana. Their advice and guidance was integral in preparing our inaugural strategic plan.

Te Aka Whai Ora provided funding to Te Poari, which has allowed us to develop this plan. We look forward to an ongoing relationship with Te Aka Whai Ora, Te Whatu Ora, Manatū Hauora-Ministry of Health, and other Crown agencies as we look to achieve our vision for hauora.

We were supported to write this plan by Gabrielle Baker (Baker Consulting Ltd). Rosa Flood helped to bring our words to life through thoughtful design and layout of this plan.

We acknowledge the inclusion of stunning photographs by Kendyl Walker from around Wairarapa of our natural environment, landscape, whānau, and places of significance to us as Māori. These include several photos from marae in our rohe, and we thank everyone who allowed these photos to be featured in our plan.

<sup>&</sup>lt;sup>1</sup> Referred to from this point on as Ngāti Kahungunu ki Wairarapa and Rangitāne o Wairarapa respectively

# Whakatau mai ki te whakamōhio i te whakararuraru!

Welcome to enlighten the path to solutions!

As Co-Chairs, we extend our greetings to whānau as we embark on a journey of strategic planning and problemsolving. This greeting reflects our shared commitment to identifying and addressing the challenges that lie before us. Together, we seek to illuminate the path towards innovative and impactful solutions.

With open minds and collaborative spirits, let us navigate forward; driven by determination to overcome obstacles and create a hauora and a brighter future for our people.

It is with pleasure and enthusiasm that we introduce the strategic plan for Te Karu o Te Ika Poari Hauora, the Iwi Māori Partnership board for the Wairarapa region. This document represents a significant milestone in our collective journey towards better health outcomes for whānau Māori.

As we embark on this strategic direction it is important to acknowledge the dreams and visions that have brought us to this point. We have listened to the voices of our whānau, drawing upon their wisdom and experiences to inform our path forward. Our aspirations as set out in this plan, come with a deep understanding of the complex factors that contribute to health inequities within our community.

This strategic plan is the culmination of extensive collaboration and engagement, reflecting the diverse perspectives and expertise of our board members, health professionals, community leaders and, most importantly, the whānau we serve. It outlines our commitment to proactively address the challenges faced by Māori in the Wairarapa and support our people to shape their own health outcomes.

We recognise that improving health outcomes requires a holistic approach that encompasses physical, mental, environmental, emotional, and spiritual well-being. Our strategic plan embraces this holistic worldview, with a strong emphasis on whānau voice and participation. We firmly believe that our whānau possess the innate knowledge and resilience necessary to navigate their own hauora journeys. It is our responsibility to support and facilitate their empowerment: Toitū Te Tangata.

Central to our strategic direction is the recognition of Te Tiriti o Waitangi and the underpinning principles of Tino Rangatiratanga, mana motuhake and mana tangata. We are committed to working in true partnership with our lwi, government agencies, and other stakeholders to ensure that the aspirations and rights of Māori are upheld and prioritised to deliver the highest quality health and wellbeing services to our people.

This plan outlines a series of ambitious goals and objectives that will guide our

collective efforts over the coming years. It is a roadmap that reflects our shared vision for a future where Māori in the Wairarapa experience equitable access to quality healthcare, improved health outcomes, and a strengthened sense of identity and cultural well-being.

We would like to extend our gratitude to everyone who has contributed to the development of this plan. Your dedication, passion, and commitment have been instrumental in shaping this document and ensuring its alignment with the needs and aspirations of our whānau.

Finally, we encourage all board members, staff, and stakeholders to embrace this plan as a living document that guides our actions and decision-making. Let us continue to work together, united by a common purpose, to create positive change and improve the health and wellbeing of Māori in the Wairarapa.

### Ka whati te tīkouka, ka wana te tī ka rito te tī.

Te Karu o Te Ika Poari Hauora

Andrea Rutene & Piri Te Tau Co-Chairs





#### Monitoring

and rangatahi rōpū).

rohe, including those often overlooked by government

consultation processes (such as tāngata whaikaha Māori, takatāpui,

To be transparent for whānau, hapū, lwi, and hapori in Wairarapa we will publish updates on our mahi every six months

ensure appropriate mechanisms are in place for Māori data

Raraunga Māori Data Governance



## INTRODUCTION

In June last year, the Pae Ora (Healthy Futures) Act 2022 (Pae Ora Act) replaced the district health board system that had been operating in Aotearoa for 22 years. Inspired by the Waitangi Tribunal's landmark *Hauora* report, the Pae Ora Act brought in a new set of health agencies, clearer Ministerial responsibilities, and improved accountability mechanisms.

Central to the Pae Ora Act's changes are the establishment of a national health agency (known as Te Whatu Ora, Health New Zealand) and a separate Māori Health Authority (known as Te Aka Whai Ora). Between them these two agencies work to design, arrange, and deliver health services, support community participation, promote health and wellbeing, and achieve equitable health outcomes for Māori. The Pae Ora Act also sets out the functions for locally based Iwi Māori Partnership Boards (IMPBs) who are tasked with representing local Māori perspectives on aspirations for hauora, health sector performance, and the design and delivery of services and public health interventions within localities.<sup>2</sup>

In January 2023, the first eleven IMPBs were officially added to schedule 4 of the Pae Ora Act, meaning they had completed the process to become formally recognised under legislation.

Te Karu o Te Ika Poari Hauora, (Te Poari) was in this first group of IMPBs. Te Poari was formed after a rigorous recruitment and appointment process by our Iwi, Ngāti Kahungunu ki Wairarapa and Rangitāne o Wairarapa.

Te Poari stands for the resilience, wisdom, and enduring traditions of our people. It is the result of a transformative partnership, where our lwi have come together with a shared ambition to forge a future that is firmly rooted in our rich heritage while embracing the opportunities of the modern world. This is underpinned by the many things that unite us, including our whakapapa, our reo, and our tikanga.

### Stronger together

We have a profound understanding that our collective strengths far surpass our individual efforts as we work to empower our communities, revitalise Ngāti Kahungunu ki Wairarapa and Rangitāne o Wairarapa traditions, and create a sustainable and prosperous future for Māori in Wairarapa. By pooling our knowledge, resources, and expertise, we are not only preserving our wisdom but also forging new paths that are grounded in manaakitanga, kaitiakitanga and whānaungatanga.

This introduction only scratches the surface of the profound impact Te Poari is poised to make. As we chart a course towards a future that honours the traditions of the past while embracing the opportunities of the present, the lwi stand united, guided by the strength of our tīpuna and the vision of a vibrant, inclusive Aotearoa.

### Te Poari as a platform

Te Poari have a mandate to address critical issues relating to the health and wellbeing that impact on our communities. To do this, Te Poari will champion open dialogue within our rohe, allowing diverse voices to be heard so we can develop effective, inclusive, solutions to advance health and wellbeing of whānau Māori. This open dialogue will extend to other stakeholders including government agencies, educational institutions and industry leaders.

This plan provides a framework for how we will:

- Amplify whānau voices from the Wairarapa
- Strengthen our relationships with government decision-makers to improve health service investment, planning, and commissioning in our rohe
- Use evidence and data well for advocacy and monitoring.

These efforts all work towards honouring and exercising our rights as Māori, our aspirations, and our cultural autonomy.



#### About our rohe

Te Poari rohe begins from Eketāhuna, and extends to Cape Palliser, bounded by the Tararua Range in the west and in the east from Rangiwhakaoma / Turanganui a Kiwa south to Turakirae Point. Our rohe includes a number of marae, as shown on our rohe map, five of which are designated 'matua marae' along with five rural towns and smaller rural communities. Masterton is the main provincial town of Wairarapa.

There is an estimated 8,169 Māori in our rohe, which is approximately 20 percent of the population of the Wairarapa. This is around 1.1 percent of the total Māori population of Aotearoa.<sup>3</sup>

A detailed analysis of demographic information for our rohe is available from the University of Auckland.4

Evidence is clear that Māori bear the inequitable impacts of the socio-political and economic environments that drive adverse health and disability outcomes in Aotearoa, and it is no different for us in the Wairarapa.<sup>5</sup> For example, in 2012, life expectancy at birth for Māori in the Wairarapa was reported as 74 years compared with 81 years for Pākehā, a difference of seven years. Data from 2022 also tells us Māori in Wairarapa are 2.9 times more likely than Pākehā to have

'poor' self-rated health.

These health and disability inequities experienced by Māori (which are the differences between Māori and non-Māori and non-Pacific populations that are unfair and unjust) have been written about extensively by Māori scholars<sup>6</sup> and have been assessed by the Waitangi Tribunal as requiring urgent action.

While part of the work of Te Poari, and the task of this strategic plan, is to build and use the evidence base on inequities to create change; we also know (as Ta Mason Durie has said for decades) that these conventional measures are imperfect and "fail to capture Māori vitality or mauri".7 Like Ta Mason Durie, we recognise the importance of a holistic approach to health that incorporates Māori cultural values, identity, and community involvement and this too is reflected in this plan.

<sup>&</sup>lt;sup>3</sup> Te Whatu Ora (2023). Wairarapa Current State Report

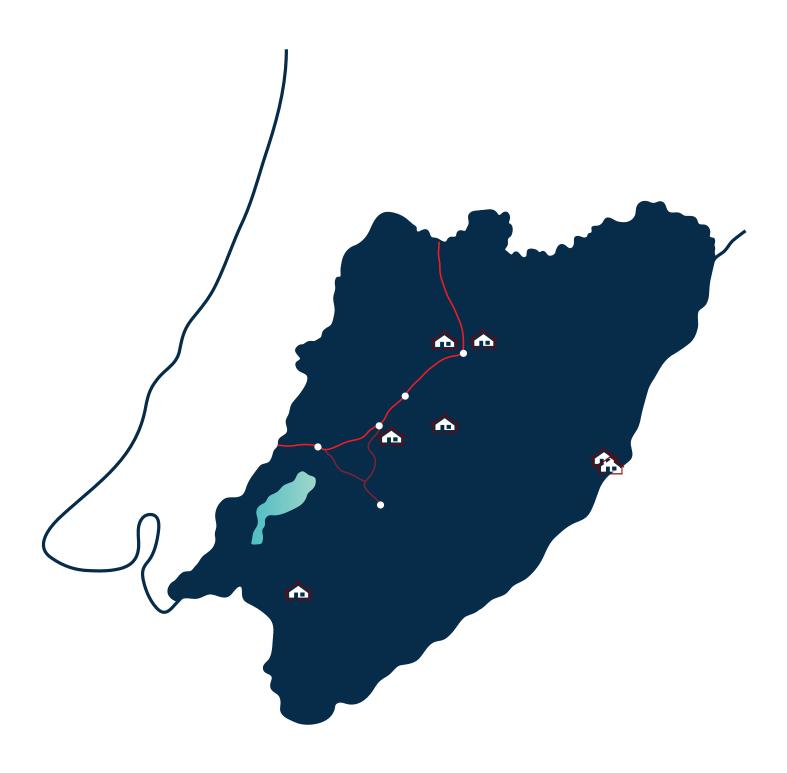
<sup>4</sup> You can access the full analysis here: fmhs.auckland.ac.nz/assets/fmhs/soph/epi/hqd/docs/dhbprofiles/Wairarapa.pdf

<sup>&</sup>lt;sup>5</sup> Health Quality and Safety Commission, 2021

<sup>&</sup>lt;sup>6</sup> Harris et al., 2019; King, 2019; Reid et al., 2019; Talamaivao, 2020.

<sup>&</sup>lt;sup>7</sup> Durie (1998), p 139.

### Map of Te Poari rohe.8



<sup>&</sup>lt;sup>8</sup> Map is hand drawn based on the rohe map in Schedule 4, clause 11 of the Pae Ora Act.



## TE WHAKAKITENGA

Ko te moemoeā te moemoeā
Kaua e tuku to moemoeā kia noho noa hei moemoeā
Waiho te moemoeā ki te hunga moe
hoatu tātou me te hauora
Kia toitū te tangata
Kia kaha rawa ngā whakarerenga
Kia tū rangatira tātou

'Nau mai e tama ki te taiao nei, kia whakangungua koe ki te Kahikatoa ki te Tūmatakuru ki te Taraongaonga'

A dream is a dream,
Let us not just dream for the things we want
Leave the dreams for those who sleep
Let us go forward together healthy and well
So that our people endure
So that our legacies are strong
So that we realise our full potential

'Welcome little one into the living world, and become strong like the Kahikatoa, become sturdy like the tumatakuru, and become resilient like the Tara ongaonga'

Driven by these words, the overarching vision for Te Poari and for this strategy is Toitū te Tangata.

# TOITŪ TE TANGATA

The kupu  $toit\bar{u}$  has several meanings, including to be undisturbed, to be permanent, and to be sustainable. Toit  $\bar{u}$  also contains within it a concept of accountability, and connecting individual actions to achieve a collective outcome, values that are important to all.

By adopting Toitū te Tangata as our vision Te Poari is reflecting our commitment to protecting the health and wellbeing of whānau Māori in the Wairarapa, our obligation to improving health systems for our mokopuna and future generations, and our understanding that we are part of an enduring legacy – passed down from our tīpuna.

This strategic plan is based on the view that whānau Māori in our rohe have limitless potential. We aim for this potential to be realised through the expression of mana Motuhake; accepting and valuing ourselves as Māori; showing manaakitanga and lifting up others; being creative, innovative, entrepreneurial; and staying true to ourselves with a strong sense of what is tika and pono.

This part of our vision is also to acknowledge those who whakapapa to our rohe and live elsewhere but still have contributions to make to whānau Māori thriving in Wairarapa.

<sup>&</sup>lt;sup>9</sup> Williams (1971); Te Ara Māori Dictionary online (accessed June 2023).

Our **purpose** is to whakamana whānau in all things that are important to them so our whānau can flourish.

Our **mission** is to give a voice to the things that matter most to ngā whānau o Ngāti Kahungunu ki Wairarapa, Rangitāne O Wairarapa and mātāwaka for whom the rohe of Wairarapa is their home, their kainga.



# NGĀ UARA

What we do and how we do it will be guided by a set of five principles. These principles are our commitments to working for whānau Māori, uplifting our communities, and seeking partnership with Crown agencies that honour Te Tiriti o Waitangi.

### Wairarapatanga

Te Poari is an autonomous entity and is distinctively of Wairarapa. We stand in our own mana and will act in a way that has integrity, is consistent with our own traditions, and has relevance for our community. This allows us to be unwavering in our commitment to whānau voice and working in the interests of whānau Māori in our rohe.

Wairarapatanga also reflects the autonomy Te Poari maintains under the korowai of Ngāti Kahungunu ki Wairarapa and Rangitāne o Wairarapa.

#### Te mana tika

To be tika is to be right and correct, and it is also about striving for the best outcomes for whānau Māori in our rohe. Being tika also means achieving outcomes for all our whānau, especially those who have been overlooked by the Crown's health system in the past – such as tāngata whaikaha Māori and Takatāpui whānau.

### Kotahitanga

Kotahitanga reflects the importance of unity in how we work – with each other and with our wider communities, hapū, lwi; and even how we engage with our Crown partners.

Kotahitanga is connected closely with the concept of whanaungatanga. At its core, whanaungatanga is about relationships that are caring, sharing, and nurturing. As a value it reinforces the commitment members of a whānau have to each other, but also reminds them of their responsibilities to all others.

#### Pono

Being pono is about being true and genuine, and adhering to our principles in a way that others can observe. Pono as a foundational principle reflects the importance of holding ourselves to account. It also provides a framework for new or unexpected developments that require our response – reminding us that every action we take needs to align with ngā uara.

#### **Aroha**

Aroha is associated with love, respect, and compassion. Aroha requires action and is seen in the caring acts expected to be performed towards whānau and hapū, especially in times of sickness, need or other trouble. We see aroha exercised daily by whānau Māori across our rohe, and especially in the health sector. And we see aroha shine through in Māori communities in times of emergency as we have recently experienced with the response to Cyclone Gabrielle across the East Coast and in the North.



### **PRIORITIES**

### Engaging whānau voice

2021 survey results show that whānau Māori in Wairarapa see hauora as a broad concept that involves feeling physically and mentally well, both as individuals and as whānau. Core to good health for our whānau is living well as whānau.

"Happiness, laughing, eating well, a healthy home, being active, family time, time with friends and extended whānau, access to medical facilities, resting..."

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"A few whānau are doing well, others are not. Some have had regular well-paid jobs and now own homes. Some have not. Some have been incarcerated and that disadvantaged their employment prospects hugely. They now struggle income-wise and are government dependent, and [their] health is very poor."

A recent study into the lived experiences of tāngata whaikaha Māori (Māori with lived experience of disability) in our rohe, funded by local DHBs, also highlighted a lack of information available to whānau about the services available in the Wairarapa.

"I think we need a directory for anyone who has [a disability] ... and not everybody has a laptop and if they're my age not everyone wants a laptop." 12

Based on this information, we know that there needs to be attention placed on improving both the access to the 'determinants of health' (the things that keep us well) and to health and disability support services. Figure 1 provides a summary of these issues.

<sup>&</sup>lt;sup>10</sup> Quote from Wairarapa DHB Māori Health Strategy: Submission data analysis profile (2021)

<sup>&</sup>lt;sup>11</sup> Quote from Wairarapa DHB Māori Health Strategy: Submission data analysis profile (2021)

<sup>&</sup>lt;sup>12</sup> Quote from McGregor, B., Jones, B., Baker, C., and Tuuta, M (2023). Less talking, more action: Views and Experiences of Tāngata Whaikaha Māori in Wairarapa (Report prepared for Te Aka Whai Ora). FERNZ, Wellington.

# Figure 1: Summary of the improvements Wairarapa whānau want to see

### Improving the determinants of health

- · Addressing the issue of unaffordable daily living
- · Improving housing
- · Eliminating racism
- · The need for wellbeing supports (around nutrition and exercise)
- · Addictions, such as smoking

### Improving health and disability support services

- · Improving physical access to services, including mobility parking options
- · Location of services, and the need for transport to access services
- · Improving service hours, and reducing waiting times to access services
- Addressing issues about the quality of health care in the rohe, including eliminating racism and discrimination experienced by our whānau
- Removing or reducing the cost barriers whānau face in accessing health services - with specific mention of addressing the costs of dental care and disability supports such as hearing aids

### What whānau can expect from us

Engaging whānau voice is a core function for us. Whānau Māori in our rohe can expect:

- Regular opportunities to share views with us. We will aim to make these opportunities as accessible as possible and will use a range of approaches including online surveys, feedback forms in health provider waiting rooms, and in person korero
- We will take what we hear seriously, and we will take actions within our remit to address the issues shared with us, including advocating for issues most important to whānau to Crown agencies
- We will be transparent and feed back to whānau regularly on the progress we make, including through advocacy, monitoring of the Crown, commissioning, and decisions around localities.

### What we expect from health agencies

We expect that health agencies will act in good faith to support our mahi in engaging with whānau, including through fair and reasonable resourcing.

Part of acting in good faith is respecting our relationship with whānau in our rohe. We know that having multiple agencies trying to extract views and mātauranga can be exhausting and confusing for whānau, so we expect that our partners will cease this type of practice and work with us to engage more thoughtfully with whānau Māori.

We also expect that health agencies will act on issues we raise on behalf of whānau Māori, and report to us on their progress to address the issues we raise. This includes an expectation that Te Whatu Ora and Te Aka Whai Ora will coordinate and work with other government agencies where necessary, so that neither whānau nor Te Poari are left trying to navigate the confusing silos of government.

### First year commitments

In the first 12 months of this plan we commit to:

- Developing a communications plan looking at how we will korero with whānau, how to get information about our mahi to whānau in our rohe, and how we share insights with Crown partners – in particular Te Whatu Ora and Te Aka Whai Ora
- Providing a digital platform so that all whānau Māori in Wairarapa can access information about Te Poari
- Holding regular gatherings and events across the different communities in the Wairarapa rohe, including those often overlooked by government consultation processes (such as tāngata whaikaha Māori, takatāpui, and rangatahi rōpū).

Within the first 18 months we will also explore how we can best support whānau to access their full rights (including freedom from discrimination and racism) in the health sector. Additionally we are committed to ensuring that tāngata whaikaha Māori and tāngata whaiora Māori have access to the full range of support services and health entitlements.

# Commissioning and contracting

Many health services are delivered by community-based providers in our rohe (i.e., services provided outside of Masterton Hospital), usually under contract to Te Whatu Ora or Te Aka Whai Ora (although formerly this would have been through contracts to Wairarapa DHB or the Ministry of Health).

There is a large body of evidence that these contracting arrangements have disadvantaged Māori in the past. This includes a finding from the Waitangi Tribunal in 2019 that:

"The funding arrangements for the primary health care system do not adequately provide for kaupapa Māori models of care". 13

A big feature of the health sector reforms has been to put an emphasis on good quality commissioning rather than ad hoc contracting to address some of these concerns.

We know that this can sound like jargon! For us what this really means is that there will be:

- Intentional service design, based on the needs and aspirations of whānau and hapori Māori
- Sensible contract processes (without too many bureaucratic loopholes) and a focus on partnership and co-design
- Fair prices paid for services by

#### government funders

 Effective performance monitoring – to make sure providers can show the positive impacts they are making for whānau Māori.

Te Poari will have an integral role in identifying and evaluating the health priorities of our rohe, alongside Te Whatu Ora and Te Aka Whai Ora. Through this collaborative effort, we will strive for more suitable contracting of all health services. It is our expectation that as a result contracted providers will better align their services with the needs and aspirations of whānau Māori.

In turn, this will mean more fairness in monitoring and accountability. High quality commissioning means that all providers will need to demonstrate their effectiveness and contribution to improved Māori health outcomes and the elimination of health inequities.

This priority area also reflects the interests of Te Poari in supporting the capacity and capability development of Kaupapa Māori providers in the Wairarapa. We believe in empowering these providers to expand their reach and enhance their services, ultimately contributing to the overall growth and well-being of our community. Through strategic partnerships and investments, we aim to create an environment that nurtures and facilitates their growth, ensuring that they can effectively meet the evolving needs of our whānau.

### What whānau can expect from us

As an IMPB, Te Poari are committed to fostering growth and development within our community. For whānau, a well-run commissioning process should lead to services from providers in the community that make more sense, are easier to find and use, and are more responsive to whānau Māori needs and aspirations.

#### Better commissioning means:

- More confidence that providers are meeting performance expectations and achieving outcomes that matter to whānau Māori
- More options, with a greater range of services offered through Kaupapa
   Māori providers, and in culturally safe ways (even if they seek services from mainstream providers)
- · Removing or reducing the cost barriers to community health services.

### What we expect of health agencies

We expect the health sector's funding agencies (Te Aka Whai Ora and Te Whatu Ora) to take a collaborative approach to commissioning in our rohe. We expect to be at the table when key decisions on commissioning are made that affect whānau Māori in the Wairarapa.

We also expect that agencies will:

- Design services around the needs, aspirations, and strengths of whānau and communities, based on the priorities identified through our whānau voice mahi
- Collaborate with other sectors so that there can be unified responses in our rohe to broad issues affecting hauora (such as housing and tāmariki wellbeing)
- Adopt approaches that reflect a commitment to Te Tiriti o Waitangi, including
  working in partnership with us and with kaupapa Māori providers and ensuring the
  level of investment in the Wairarapa rohe reflects and responds to the level of
  whānau health need in the area
- Be supportive of Māori models of care and interventions that focus on prevention of illness and supporting the wellbeing of whānau Māori (even when it falls outside of the Western medical model government is most comfortable with)
- Undertake effective monitoring of all health services, to make sure that wherever whānau Māori access services they can have trust and confidence that they will be accessing high quality, culturally safe care, free from racism and discrimination of any kind

### First year commitments

In the first 12 months of this plan, our focus will be on building our ability to lead and partner with health funding agencies on commissioning activity in the Wairarapa rohe.

This will rely heavily on our mahi to capture and share whānau voice (discussed in priority one), and will also include:

- Establishing a small commissioning ropu to lead the day-to-day mahi around commissioning on behalf of the Board (as part of building up essential infrastructure for commissioning)
- Issuing the first of what we expect to be annual advice to government funders on whānau priorities for commissioning.

# Localities, planning, and coordination

Localities have been introduced by the government to connect service providers, lwi, and other stakeholders to collectively improve community health and wellbeing outcomes through better service design, planning, and coordination.

For whānau, hapū and lwi, locality planning provides a more formalised way to be part of setting an agenda for health services in Wairarapa.

Te Poari intends to co-lead the development of a locality approach for the Wairarapa to be implemented by July 2024.

In many ways, this is something our tīpuna have advocated for since the Crown established its health systems more than a century ago. Whānau in the Wairarapa always fought for what was best for the health and wellbeing of our whānau, approaching all the decisionmakers we could.

The Waitangi Tribunal, for example, notes several examples of Māori communities calling for greater access to services and health supplies in the 1880s through to the early 1900s – often to have these ignored by Ministers and government officials.

"In 1910, Mihi Reita, Tangi
Matutaera, and 17 others based
at Whakataki petitioned... to have
medicines supplied through
the local public school, as it was
too difficult for them to travel to
Masterton. There appears to have
been no official response..."
14

The geographical boundaries for localities are being determined in consultation with communities, lwi Māori Partnership Boards, and local authorities. And we will be central to this discussion in the Wairarapa.<sup>15</sup>

We will also take a critical role in developing, with local service providers, community groups, and agencies who can contribute to hauora, a locality plan that shapes the services provided in the Wairarapa. The plan will focus on wellness, reflecting the needs and aspirations of whānau, ensuring joined up care and support services, and seek to improve the physical location of services so they are easier for whānau to access regardless of where in the Wairarapa they live.

<sup>&</sup>lt;sup>14</sup> Waitangi Tribunal (2010) The Wairarapa Ki Tararua Report (Wai 863), Volume 1 (p. 340).

<sup>&</sup>lt;sup>15</sup> Initially, twelve localities were selected to test how localities will work. These include a locality nearby in Horowhenua. However, there has not been a confirmed approach for localities in Wairarapa.



### What whānau can expect from us

For whānau, the locality approach should mean that services offered in the Wairarapa are easier to access, more joined up (i.e., whānau will have to go to fewer places to seek support) and make more sense to everyone.

We know from the survey data Wairarapa DHB and Iwi Kainga collected in 2021, that for many whānau Māori in our rohe a locality approach would include looking at the health of our environment.

"More healthy kai, mara kai. Collective impact so more agencies/services [are] working smoothly together." <sup>16</sup>

We will use this holistic approach to guide our work in locality planning.

Whānau can expect our first year of locality planning to mean:

- Whānau voices and priorities are reflected in plans and are given more prominence by local health service providers
- A focus on improved access to services, for example improved physical accessibility, longer or more useful service hours, and reduced waiting times to access services.

We know, for example, improved oral health, more transport options to primary care and hospital services, better access to disability support services, and better care of te taiao are issues for whānau in our rohe –this will be reflected in our locality planning.

<sup>&</sup>lt;sup>16</sup> Quote from Wairarapa DHB Māori Health Strategy: Submission data analysis profile (2021)



### What we expect of health agencies

The approach to localities is being run by Te Whatu Ora and Te Aka Whai Ora and we expect we will work in partnership with both agencies to make decisions on the locality and its planning.

The support we understand health agencies will provide includes:

- Sharing examples of what has worked in other localities, and supporting us to work with other lwi Māori Partnership Boards to learn from their experiences
- · Providing tools such as Te Whatu Ora's locality digital collaboration hub
- Supporting relationships between Te Poari and local health, social services, disability support service providers, and local councils. The support we will need will vary

   at times we will be looking to Te Whatu Ora to facilitate relationships between us and contracted health services or other government agencies, while at others we will be expecting the health agencies to move aside so we can exercise rangatiratanga and build on our existing relationships.

### First year commitments

In the first 12 months of this plan, we undertake to work with our partner agencies to:

- · Develop and confirm a locality approach for our rohe
- Identify local priorities for the locality based on whānau voices, health needs and aspirations
- Ensure the first Wairarapa Locality Plan incorporates a broad understanding of hauora and includes strong performance monitoring.

Within the first 18 months we will also establish an approach to monitoring the performance of the health system for whānau Māori in our rohe, against our locality plan, and share the results regularly with whānau.



# Data, analytics, and sovereignty

Data tells stories. While in pre-colonial times we had control over our own data and stories, government processes have meant that for many decades data about Māori individuals and groups has been held in government archives and databases and, crucially, out of Māori hands. And similarly, the stories the data tells have been created by the Crown and not by whānau, hapū and lwi.

Over the past twenty years, we have had access to a wide range of data on Māori health – thanks to improved ethnicity data collected through health providers and hospitals. This improvement has often been driven and advocated for by Māori. However, there are still significant limitations in the data collected by the health sector. This includes a lack of data to show what is happening for tāngata whaikaha Māori, and a lack of good quality analysis that helps us determine the nature and extent of health inequities for Māori compared with non-Māori.

Through this priority area Te Poari will enhance data gathering, analysis, and sovereignty practices to ensure the governance, collection, management, and utilisation of data aligns with ethical standards and respects privacy while providing valuable insights. We will also

embed tikanga me te mātauranga Māori practices into data we have responsibility for. As part of this priority area, we will also work with Iwi across the motu to make sure they have access to information about whānau Māori with whakapapa connections to places outside of the Wairarapa.<sup>17</sup>

This priority closely aligns to our priority around whānau voice, and the importance of looking at hauora from multiple viewpoints to get a more accurate and strengths-based picture of the needs and aspirations of whānau Māori.

The first year to 18 months of this priority area will involve understanding the data that is currently available through health and other government data, and ensuring it is analysed in a way that allows whānau Māori to be well informed and in control of the narratives around the data held by the Crown.

<sup>&</sup>lt;sup>17</sup> For more information on Māori data sovereignty visit the website of Te Mana Raraunga (the Māori Data Sovereignty Network) - www.temanararaunga.maori.nz/

## What whānau can expect from us

For us, a focus on data is about seeing more accurate reflections of the health priorities, needs, and aspirations of whānau Māori in our rohe, and greater accountability of health and other publicly funded services that contribute to hauora.

Whānau can expect that we will:

- Ensure high quality analysis of local health data, with a focus on ensuring equitable outcomes for whānau Māori
- Advocate for the collection of high quality, meaningful data which includes supporting tāngata whaikaha Māori communities from our rohe to be part of national korero on disability data collection and analysis
- Work with our Iwi partners and Te Whatu Ora and Te Aka Whai Ora to ensure appropriate mechanisms are in place for Māori data sovereignty and so that Ngāti Kahungunu ki Wairarapa and Rangitāne o Wairarapa as mana whenua can exercise governance over collection, storage, access to and analysis of Iwi data.

## What we expect of health agencies

We know that getting data issues right is important to our government partners. We know that there is work already underway, for example, to further improve ethnicity data collection and that there is Kaupapa Māori Research underway looking into the best way to collect data for tāngata whaikaha Māori. We expect this to continue.

#### We also expect that:

- Te Whatu Ora and Te Aka Whai Ora will provide data we request, in easy to use and easy to understand formats
- · There will be investment in local infrastructure to support Iwi data governance
- A commitment across all health and disability sector agencies to align with principles of Māori data sovereignty
- Greater accountability to whānau, hapū and Iwi for the use and publication of Māori data by government agencies.

# First year commitments

In the first 12 months of this plan, we undertake to work with our partners to develop a monitoring dashboard for health services in our rohe. Related other activities include:

- Assessing the effectiveness and appropriateness of data collection methods in our rohe to ensure high quality analysis of local health data, with a focus on ensuring equitable outcomes for whānau Māori
- Establish a process to monitor and report on data quality, integrity, and insights for the rohe, so that eventually these can be shared quarterly by Te Poari
- Work with our Iwi partners and Te Whatu Ora and Te Aka Whai Ora to ensure appropriate mechanisms are in place for Māori data governance, in line with Te Kahui Raraunga Māori Data Governance Model.

# **MONITORING PROCESS**

The four priority areas of Toitū te Tangata are interrelated. For example, gathering and sharing whānau voice supports the needs assessment stage of commissioning, provides key information for service design and planning, and provides context to administrative health data. In the same way, monitoring progress in these priority areas needs to take a holistic approach.

Between now and July 2027, we see our work having three different phases, as set out in this diagram:

Matariki 2024

Matariki 2026

Matariki 2027

### Phase 1

Creating a foundation for hauora.

This phase is set out in some detail in this plan, and includes creating mechanisms for whānau voice, establishing processes for influencing health sector commissioning, developing an approach to localities that works for Wairarapa and developing a dashboard to monitor Crown activity related to hauora in our rohe.

#### Phase 2

Extending our influence.

This phase will be confirmed in coming years, but could include:

- Tangible improvements for whānau Māori accessing hauora services
- Increased accountability of publicly funded health services to whānau Māori.

### Phase 3

Seeing widespread,
meaningful changes for
whānau Māori, including
new or improved health
services offered in Wairarapa
linked to what whānau want.

Every six months, from December 2023, we will provide a summary of our activity and progress to whānau Māori, kaupapa Māori providers, hapū, and lwi in our rohe. The summary will be focused on the key performance indicators set out in this plan.

We welcome feedback on how you would like to receive this information and encourage any thoughts be shared with us at **office@tkoti.nz** 



# Appendix 1: Te Karu o Te Ika Poari Hauora Member Profile

# Piri Te Tau Co-Chair



Ko Kurahaupo te waka Ko Rangitāne te iwi Ko Ngāti Hamua te tangata

Ko Rangitumau te maunga Ko Ruamahanga te awa Ko Te Ore Ore te marae Ko Nga Tau e Waru te whare tupuna Tihei mauri ora!

Ko Kahungunu ratou Ko Kai Tahu Ko Raukawa ngā Iwi Ko Piriniha Edward Tikawenga Te Tau tōku ingoa, he uri o ngā whānau o ngā hapū mea nga marae ki Wairarapa

I am Piri Te Tau. I come from a large whānau, being the third of thirteen children born to Hinerau and Ted Te Tau. Through my lineage, I am honoured to hold the position of mana whenua, along with my whanaunga and Co-Chair Andrea Rutene.

My life has been shaped by a rich heritage and an unwavering commitment to serving our community. My experiences span several fields including 23 years in the freezing work industry, leadership in the union movement, graduating from Victoria University, and working in social services and community development.

I retired in 2020, and even in retirement I hold multiple trustee roles and embrace the chance to shape policies, provide direction and ensure accountability from service providers to our whānau. My unwavering belief in the inherent value of every individual, irrespective of their circumstances, demeanour, or status, drives me to work toward improving the health and wellbeing achievements of our whānau.

### **Andrea Rutene**

Co-Chair



Ko Takitimu te waka

Ko Aorangi te pae maunga

Ko Wairarapa moana te karu o te ika

Ko Ngāti Hinewaka te hapū

Ko Kohunui te marae

Ko Iraia Te Whaiti rāua ko Kaihou Aporo ōku tipuna

Ko Ngāti Kahungunu te iwi

I'm Wairarapa proud! I have lived most of my life right here, at home. I appreciate the beauty of our rohe, spending time with my whānau, watching sport, and chasing cows. I'm a lucky mum to five beautiful daughters, two of whom work as kaitiaki in taiao – protecting the environment. The other three work in hauora (two as nurses and one studying to be a counsellor).

I have a passion to make a difference by contributing to my whānau, hapū and Iwi – from whānau support at kōhanga and kura to participating in planting days near our marae, church, and representing and working for whānau within local government as a member of the Māori Standing Committee for South Wairarapa. I have worked both in te taiao and in hauora, most recently as a Kahungunu representative on Te Poari.

It is these things that I love. Tihei Kahungunu!

### **Yvette Grace**



Te Tipuna waka e heke nei, ko Kurahaupo
Te maunga e karapoti nei, ko Rangitumau
Te wai e kōripo nei, ko Ruamahanga
Te iwi e takahi nei i te whenua o kui mā, o Koro mā ko Rangitāne raua ko Ngāti Kahungunu
Ko Yvette Rewa Hikitapua-Grace toku ingoa

I have been in the health sector at both a governance and operational level for over 20 years. I understand the experience of the health system and its shortfalls for our whānau.

I want to be part of the solutions that ensure we as tangata whenua o Aotearoa have equitable access and outcomes as a result of engaging with either the New Zealand health system or our own systems of hauora and wellbeing.

I love the adventure of travel overseas, but more importantly I love to come home to my whānau, my tamariki and my mokopuna. They are my 'why' for everything I endeavour to do and part of the reason I have taken up the CEO role at Te Hauora Rūnanga o Wairarapa and this important role with Te Poari.

### Leah Hemi



Ngā rangi kapua, o te kahu kura Kakahuria ngā pokohiwi, ō tararua maunga Ki ngā ao ō te rangi Nā te hā, ō te pō ō ngā tini whetu E riporipo ana ngā kōrero, taonga tuku iho

Ki rō te whenua ō Wairarapa

Ki rō te whatumanawa ō ngā iwi ō Rangitāne, me Kahungunu.

Ko Waiohine te awa

Ko Pāpāwai te marae

Ko Hikurangi te whare whakaruruhau

Ko Leah Hēmi Cunningham tōku ingoa

My moemoea is to ensure that tāngata whenua ō Wairarapa and their experiences of healthcare services, homelessness, mental health and addiction, counselling, and Oranga Tamariki services, are all reflected and factored into the kōrero that will create new pathways that whakamana Māori, Wairarapatānga, and the Hauora of our community.

As a regional manager of Mental Health & Addictions Services Te Wahapūahoaho – Yellow Brick Road, I was able to capture the unique demographic and social analysis of our people living within this rohe.

Te Karu ō te Ika Paori Hauora is mā ngā iwi ō Wairarapa, mō ngā iwi ō Wairarapa. We are committed to our iwi, hapū, whānau & tāngata, accessing the appropriate resources and supports, with a delivery that is tika!

It is a privilege to contribute as a director on Te Poari, under the korowai of Kahungunu ki Wairarapa, kei raro i te maru ō Piri Te Tau and Andrea Rutene.

### Kim Smith



Ko Tararua, ko Rangitūmau, ko Maungarake ngā maunga Ko Ruamāhanga te awa

Ko Te Oreore, ko Hurunui-o-rangi, ko Papawai ngā marae Ko Ngāti Hāmua, ko Ngai Tāneroa, ko Ngāti Moe ngā hapū Ko Hinetearorangi, ko Tāneroroa, ko Moeteao ngā tīpuna Ko Rangitāne, ko Kahungunu ngā iwi

After completing a degree in psychology at the University of Auckland, I knew I wanted to help whānau through my mahi. I subsequently worked for a Māori provider, in public health (with a particular interest in oral health), with and for Iwi, and – for more than a decade – for central government in Wellington. My work presently centres on the government's anti-racism strategy.

I am the current Chair of Te Hauora Runanga o Wairarapa which, in addition to my role with Te Poari, allows me to continue my commitment to the health and wellbeing of whānau Māori.

### **Marise Stuart**



Ko Tutahanaga Otekai Arahi Ngātuere toku koro Ko Pheobe (Ruhe) toku kuia Ko Maryann Kerehi Stuart (Ngātuere) toku mama

Growing up on a sheep and beef farm in the Wairarapa, I was inspired by the korero and life experiences of my kaumatua.

As a doctor I think it is important to work beyond the clinic walls to impact the spaces required to promote overall wellbeing for Māori, focusing on sectors fundamental for living: kai (food), wai (water), warmth (energy), shelter (housing), as well as digital technology as a requirement for future work.

I have had a really varied career to date. I have worked with Māori and non-Māori, Indigenous and non-Indigenous groups internationally, across public and private health and social entities, within governance, operations, and investment roles. In 2020 through Harvard Kennedy School, I worked with Dineh' (Navajo Nation), assessing strategy for both government and private enterprise, to promote and sustain self-reliance in Navajo Nation.

I recently graduated from Harvard University with a Masters of Global Health Delivery. My thesis explored Māori health service expectations with the establishment of the Māori Health Authority.

My aim is a future where every Māori child is capable of achieving their hopes and aspirations, with the understanding that free and full participation in economic environments is essential to fully realising a holistic approach to wellbeing.



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# Appendix 3: Photo credits

Page 1-2	Close-up photo of body of water. Taken by Matt Hardy. Royalty free image: https://www.pexels.com/photo/close-up-photo-of-body-of-water-3560168/
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Page 7	Rangiwhakaoma/Castlepoint. Taken by Kendyl Walker, and used with permission.
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Page 48	Pāpāwai Marae. Taken by Kendyl Walker, and used with permission.
Page 50	Tūmapūhia Marae. Taken by Kendyl Walker, and used with permission.



Wairarapa's Iwi Māori Partnership Board is Te Karu o Te Ika Poari Hauora, (Te Poari). This tohu symbolises te maunga and te moana, drawing a strong focus from te taiao. This concept was inspired by the story of Haunui-ā-Nanaia and Te Karu o Te Ika a Maui (the eye of the fish, Wairarapa Moana). From this story, Haunui-ā-Nanaia named Wairarapa Moana as he sat at the summit of Remutaka which this tohu also contains.

The use of blue colours connect back to te moana and the tears from Haunui-ā-Nanaia's eyes as the the reflection of the sun caught him.

This tohu is used throughout this report to recognise the leadership provided by Te Poari to the people of Wairarapa, as they interact within our health and disability sector (Te Karu o te Ika Poari Hauora, 2023).

