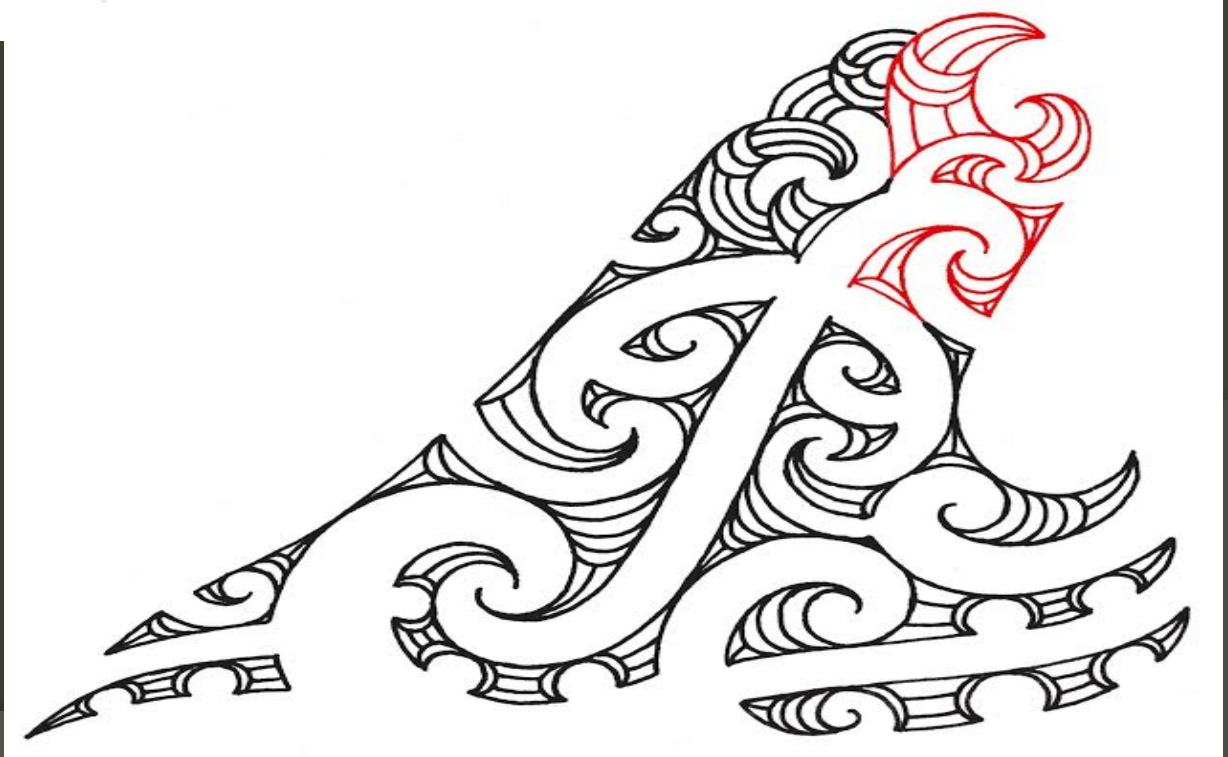


Talking about Te Tiriti o
Waitangi
Talking about Equity

Māori worldviews facilitating organisational change



CONTEXT

- **He Korowai Oranga, the Māori Health Strategy: the Ministry and the DHBs aim to improve outcomes and reduce inequalities for Māori within the context of the New Zealand Public Health and Disability Act (NZPHD).**
- **The Ministry and DHBs are committed to working with Māori to build capacity to actively participate in the health sector at all levels, and to provide high quality information and effective service delivery, which considers the impact on Māori, their whānau, and their health needs.**
- **The Ministry and the DHBs will meet Crown objectives for Māori health by working to ensure that all health and disability services are provided in a timely manner, are of high quality, and are effective in order to improve the health of Māori and their whānau, and reduce health inequalities for Māori.**

Te Tiriti o Waitangi

Legislated – If you are a Health Provider it is a requirement

We are all Treaty Partners in Aotearoa

We are all accountable

If we do it right, it works for all



Its about the Articles

- Wai 2575**
- The 3 Ps served their purpose**
- Is not rocket science**
- It belongs to all of us – Ensures our individual place in this great nation of Aotearoa**
- First up, its about acknowledgement of a problem, recognition, and taking action**

Te Tiriti O Waitangi – The Articles

- ① 1. Kawanatanga – Partnering for mutual benefit
- ② 2. Tinorangatiratanga – Maori retain chieftainship over their taonga, lands, resources, matauranga (knowledge)
- ③ 3. Oritetanga – All NZ citizens have the right to the same outcomes – Equity
- ④ 4. Wairuatanga – Spiritual Diversity is assured

EQUITY

eq·ui·ty *ek-wi-tee*, noun. Just and fair inclusion.

An equitable society is one in which all can participate and prosper. The goals of equity must be to create conditions that allow all to reach their full potential. In short, equity creates a path from hope to change.

What are the causes of health inequities?

- Multifactorial
- Uneven distribution of society's resources
- Differential access, quality and experiences
- Cumulative impact of disadvantage
- Mono Cultural Systems as our Norms =
Unconscious Bias Implicit Bias, Institutional
Racism

Three areas of focus - Equity

- ⦿ **Equity of access**
 - **Into the system**
- ⦿ **Equity of process**
 - **Once in the system – “the quality of the system”**
- ⦿ **Equity of outcome**
 - **The end results**

**Māori health
inequities can be
addressed
through robust
Treaty Partnership**

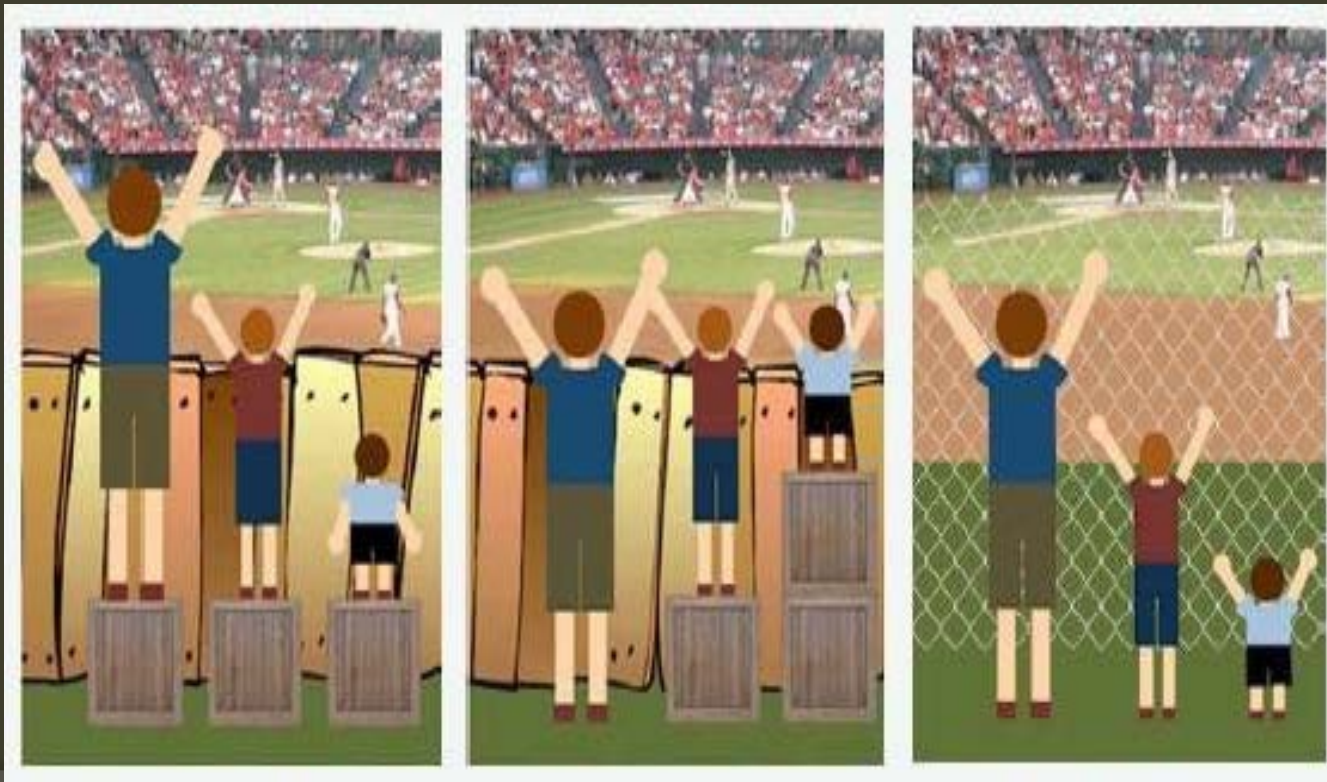
Quality must include Maori Worldview

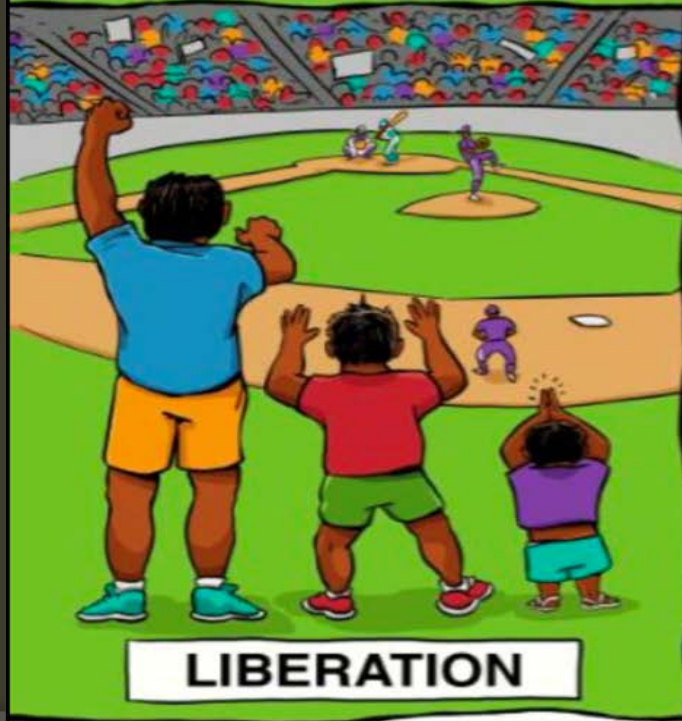
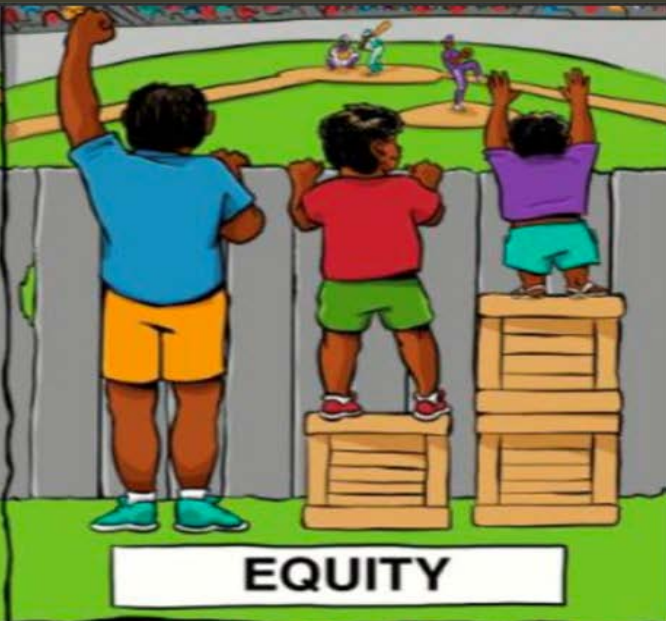
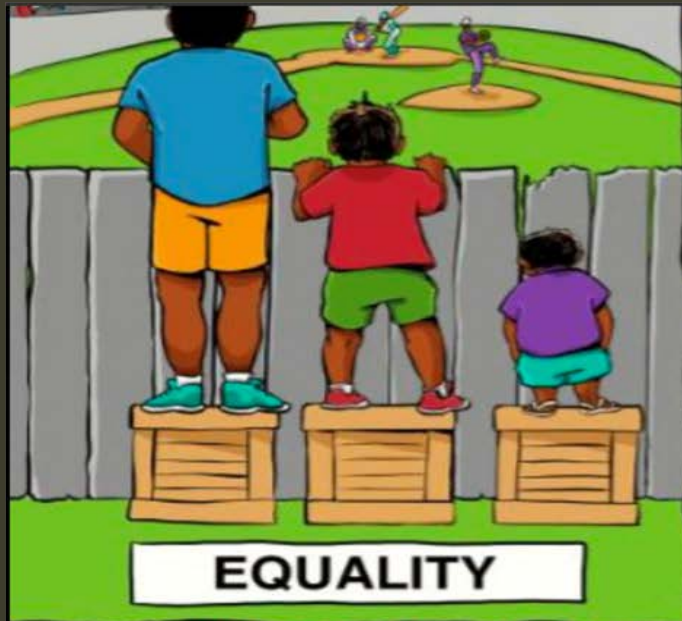
- **Strategies: Annual Plans, Service Plans**
- **Measures**
- **Quality must include Te Tiriti (Equity – Article 3)**
- **Across Commissioning & Procurement**
- **Individual Development Plans**
- **Organisational norms and behaviours**
- **Tikanga – Whats quality from a Maori worldview**

1st step = Iwi Partnership

Where are we? Treaty Partnership means:

Co managing the pitch. Together establishing the rules of the game. Selection of competent players, being on the inside of the pitch, setting the context





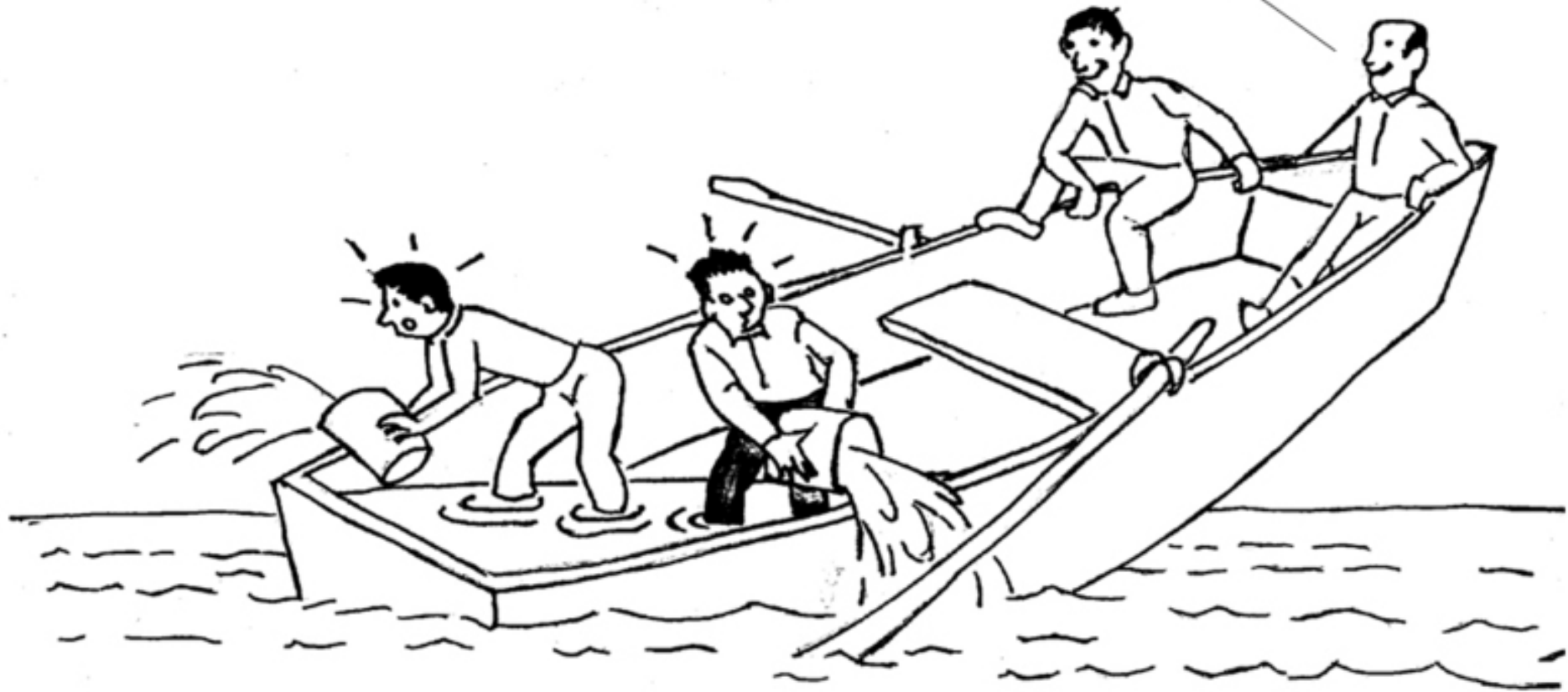
Te Tiriti o Waitangi

Partnership

Equity of Health Care for Māori: A framework

| | Leadership Championing the provision of high-quality health care that delivers equity of health outcomes for Māori | Knowledge Developing knowledge about ways to effectively deliver and monitor high-quality health care for Māori | Commitment Being committed to providing high-quality health care that meets the health care needs and aspirations of Māori |
|----------------------|--|--|---|
| Health System | <p>Health system leadership is about setting an expectation that all New Zealanders will have equity of health outcomes.</p> <p>In order to achieve equity of health outcomes, disparities in health care must be eliminated. Government legislative and strategic approaches are important in setting the scene for committing to the elimination of health disparities and achieving health equity.</p> <p>Health system leadership is expressed in: health policies and strategies; setting the expectation that equity is an integral component of quality; setting health targets; developing funding formulas for service procurement; and building and maintaining a health workforce that is responsive to the health care needs and aspirations of Māori.</p> <p>Services must be organised around the needs of individuals and whānau. To achieve this, Government must focus on removing infrastructural, financial, physical and other barriers to delivering high-quality health care for Māori that exist between health and other sectors.</p> | <p>The health system requires knowledge to monitor progress in achieving health equity for Māori.</p> <p>Knowledge encompasses high-quality health information that includes: research – quantitative and qualitative and/or informed by Māori methodologies; high-quality population health data with complete and consistent ethnicity data; cultural competency and health literacy; Māori models of health and wellbeing; clinical care pathways, guidelines and tools; and health innovation.</p> <p>Knowledge of what improves health equity for Māori should be developed and built upon to inform health policy and strategy. The use of high-quality health information, and the use of equity parameters to measure and monitor progress toward achieving health equity, is integral to this process.</p> <p>Further to this, the health system performance improvement and monitoring frameworks should include specific health equity measures.</p> | <p>The health system is committed to reconfiguring services to deliver high-quality health care that meets the health care needs and aspirations of Māori.</p> <p>Health system commitment is expressed in: incentivising and rewarding the delivery of equitable health outcomes for Māori; requiring performance data to be analysed by ethnicity, deprivation, age, gender, disability and location; measuring and monitoring progress toward achieving health equity for Māori; developing frameworks that focus on protecting the health rights of Māori; and investing in the development of organisational health equity expertise.</p> <p>Health system commitment requires regulatory authorities to ensure that all vocational training and continuing professional development activities have a robust health equity, cultural competency and health literacy focus.</p> |
| Health Organisations | <p>Health organisation leadership is about making an explicit organisational commitment to delivering high-quality health care that ensures health equity for Māori.</p> <p>Organisational leadership is expressed in well aligned policies, strategies and plans that are responsive to the health care needs and aspirations of Māori.</p> <p>The organisation sets and monitors equity and other quality improvement targets; ensures that structural arrangements do not prevent individuals and their whānau accessing health services and actively invests in building and maintaining Māori health workforce capacity and capability.</p> <p>The organisation actively partners with providers beyond the health sector to allow for better service integration, planning and support for Māori.</p> | <p>Health organisations must establish environments that encourage learning and the sharing of high-quality health information.</p> <p>To inform decision-making, health organisations should focus on developing and building their knowledge of evidence-based initiatives that have:</p> <ol style="list-style-type: none"> 1. undergone equity analyses before they are implemented 2. been monitored for their effectiveness in achieving health equity for Māori. <p>Health organisations should also endorse the use of health equity and quality improvement tools that support the delivery of high-quality health care that is responsive to the needs and aspirations of Māori.</p> | <p>Health organisations are committed to reconfiguring services to deliver high-quality health care that meets the health care needs and aspirations of Māori.</p> <p>Health organisations are committed to building relationships with Māori to collaboratively design, implement and evaluate initiatives that ensure delivery of high-quality health care that meets their needs and aspirations.</p> <p>Investment in initiatives that are successful in achieving health equity for Māori should be matched by divesting from initiatives that are unable to progress this goal. To make good decisions on which initiatives to support, health organisations must use high-quality health information, for example, complete and consistent ethnicity datasets, to monitor services against agreed indicators.</p> <p>Health organisations are also committed to supporting community initiatives that meet the health needs and aspirations of Māori.</p> |
| Health Practitioners | <p>Health practitioner leadership is pivotal in ensuring that health care is focused on achieving health equity for Māori.</p> <p>Leadership requires health practitioners to review their own clinical practice and those of their peers, through a health equity and quality lens, ensure that their organisation collects high-quality ethnicity data; audit, monitor and evaluate health impact and outcome data to improve the delivery of high-quality health care for Māori; and provide critical analysis of those organisational practices that maintain disparities in health care.</p> <p>Leadership involves active partnership with providers beyond the health sector to allow for better service integration, planning and support for Māori individuals and whānau.</p> | <p>Health practitioners strengthen their capacity and capability to deliver high-quality health care for Māori by learning and sharing high-quality health information.</p> <p>Routine use of clinical guidelines and tools is important in high-quality health care decision-making, as is building knowledge in the use of quality health equity improvement tools.</p> <p>Health practitioners should develop their skills in routinely examining data collected by their organisations to monitor the impact of their own work and the work of their colleagues on achieving health equity for Māori.</p> <p>Health practitioners must build their own knowledge of how they can provide health information effectively to ensure Māori individuals and whānau understand them.</p> | <p>Health practitioners must be committed to continuous quality improvement processes that focus on achieving health equity.</p> <p>Health practitioners express their commitment by: routinely using and analysing administrative data to inform their practice; using evidence-based innovations that achieve health equity for Māori; and tailoring continuing professional development to build their capacity/capability in delivering equitable health care.</p> <p>Health practitioners should also understand their role in supporting Māori individuals and whānau to develop their health literacy.</p> <p>Health practitioners are committed to supporting community initiatives that meet the health needs and aspirations of Māori individuals and whānau.</p> |

Sure glad the hole isn't at our end.





Aotearoa Context

Whakapapa

**What
Has Come Before**



**Korero
i
tuku
iho**



**Manaaki
Mana
aki
tanga**

We work in a system

We are the system

Māori work in systems

**We need to recognise the
cultural norms we work
within**

Te Ao Marama

Māori worldview structures, systems & approaches, delivery, practice and service model solutions require purposeful significant increases in investment both in kaupapa services and across every aspect of general stream planning, delivery

This belongs to all of us

**Equity of Health
Outcomes can be
achieved through the
mechanisms of
Treaty Partnership**



Crown contracted – we need to continue to ask ourselves what are the structures, systems, processes that will advance positive Māori health & wellbeing outcomes? What can we do to advance the needs and aspirations of Maori ?

We are all accountable for this



**Te Ao Māori
Solutions**

**Māori seeing
themselves
Reflected**

**Strengths Based
For All**



2019
2017

2016

2015

2002

WAWATA: BUILDING A SOCIAL MOVEMENT TO TRANSFORM INSTITUTIONAL RACISM



**Shift our cultural
norms**

**Transform the
Cultural Norms we
use to shape our
systems**

Challenges

- ◎ **Be accountable**
 - **It is all of our problem**
- ◎ **Redirect existing resources**
 - **Specific targets/priorities**
 - **Specific and clear accountability frameworks**
 - **Increase the Maori & Pacific workforce actively, not passively**
- ◎ **Draw on evidence base – count Māori & Pacific everything**

Take Accountability – Everyone's business

Strengthen leadership

Own It

- ◉ Ensure relevant support/training available – Treaty, anti racism, cultural comp
- ◉ Ensure Maori worldview norms during recruitment
- ◉ Embed addressing institutional racism within quality improvement planning & approach

Ensure all is underpinned by robust Treaty Partnership



health policy, strategy, decision making

- ⦿ Review methods of decision making
- ⦿ Ensure consistent application of prioritisation tools HEAT tool, Equity Tools, ensure relevant training/support
- ⦿ Ensure Māori Worldview norms ideas, service models and practice solutions are recognised and used
- ⦿ Proactively cite Māori academics
- ⦿ Include socio-political context within policy eg. determinants/prerequisites of health
- ⦿ Kaupapa Māori world views used to frame policy
- ⦿ Review effectiveness of international 'best practice' for Māori

Decision making

Use of evidence

Learn how to notice current norms

Implicit Bias - Inequity



and have the confidence to speak out

A photograph of a parking lot at sunset. The sky is filled with vibrant orange, red, and blue clouds. In the foreground, several cars are parked in rows, with their roofs and windows reflecting the low sun. Tall, dark light poles stand among the cars. In the background, there are silhouettes of trees and a sign that partially reads "ey park".

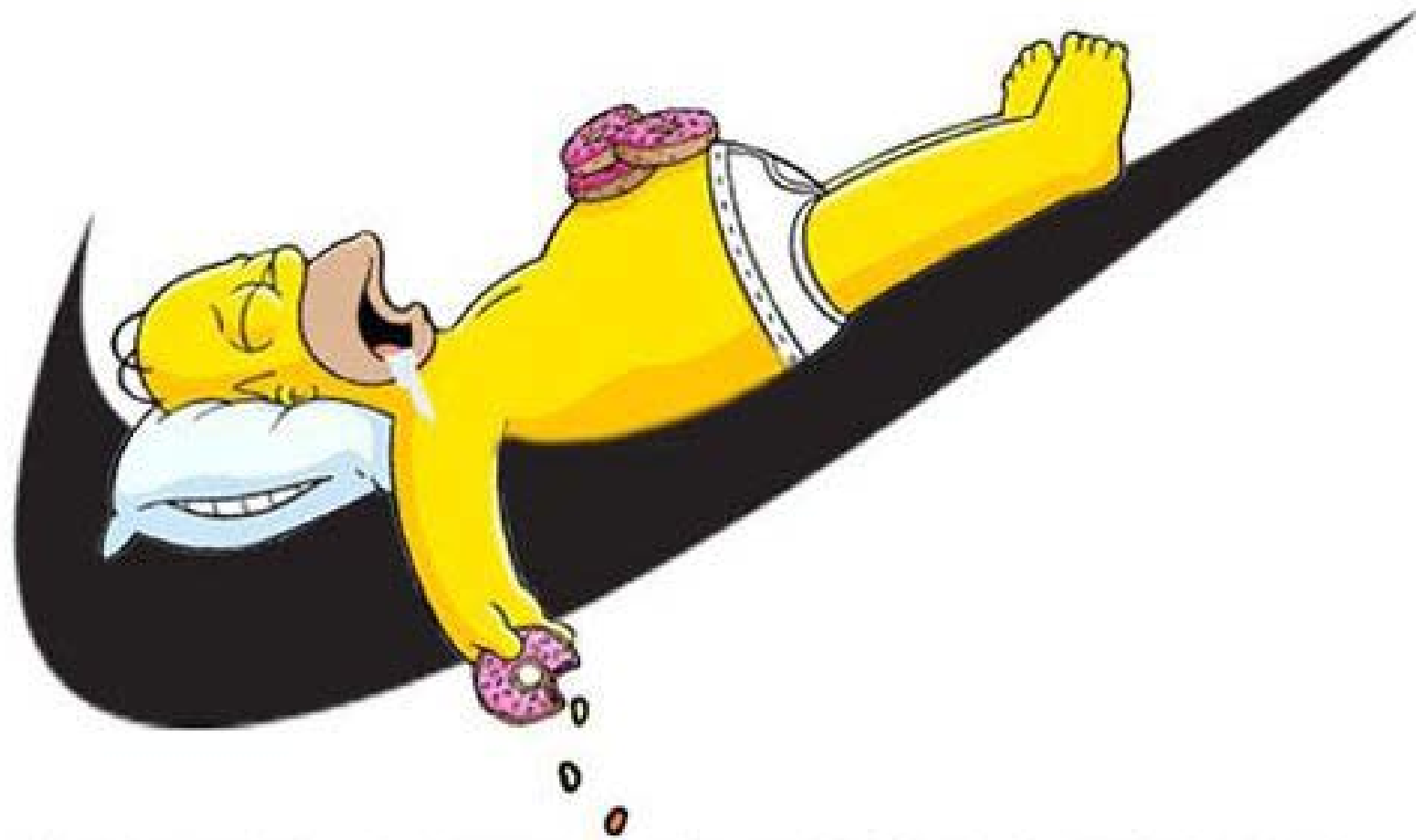
**Integration is
not Assimilation**

Coming Up

He Matapihi – Windows on Quality

- Unevenly distributed social realities
- Considerably worse mortality outcomes for Māori
- Little evidence of improvement in equity over time

Kawanatanga
Tinorangatiratanga
Oritetanga
Wairuatanga



**CAN'T SOMEONE ELSE
JUST DO IT?**