Strategic Direction 2012 - 2030
KARAKIA
Tuia i runga, tuia i raro
Mai te Rangi ki te whenua
Tuia te Herenga Tangata
Ka Rongo te po, ka Rongo te Ao
Tihei Mauri Ora

HE MIHI
Tēna koutou ngā Pou i te kaupapa e whai ake nei,
ngā mihi tei tei nau mai haere mai
kia whakaritea te huarahi o tēnei kaupapa
kia ea ai te whakatauki
ko tau rou rou ko tako rou rou ka ara ake
he oranga no reira,
Tēna koutou, tēna koutou, tēna koutou katoa.
Contents

The Henry Rongomau Bennett Foundation .......................................................... 5
Background ........................................................................................................... 5
Future Direction .................................................................................................. 7

Henry Rongomau Bennett Foundation Māori Leadership in Health Scholarship Programme .......................................................... 10
Introduction ......................................................................................................... 10
Future Focus ........................................................................................................ 10

Indigenous Development Programmes ............................................................ 12
Peer Reviewed Web-based Journal .................................................................... 12
Indigenous exchange .......................................................................................... 12
International Initiative for Mental Health Leadership .......................................... 13

Tohu Hiranga (Excellence and Innovation Awards) ............................................. 14
Toitū Hauora Māori 2030 .................................................................................. 15
Hautu Amorangi ................................................................................................. 19
Te Aranga Mai ..................................................................................................... 22
Tomokanga Whakamua ...................................................................................... 23
Waiata: Henare Rongomau Peneti .................................................................... 26
The tohu portrays the importance of leadership development and the support required for current and future leaders to soar, excel and propel. It also reflects the whakatauki that explains the vision of the Henry Rongomau Bennett Scholarship.

*Ko te manu e kai ana i te miro, nōna te wao nui ā Tāne Mahuta.*
*Ko te manu e kai ana, i te mātauranga, nōna tea o.*

The tohu embodies kahu (hawk) and ika (fish), such as whai, to represent kaitiaki who support and protect us. The kowhaiwhai featured in the wings of the kahu represents the wind that allows kahu to soar. The kowhaiwhai also acknowledges Henry Rongomau Bennett and the Bennett whānau who are uri of Ngāti Whakaue and Ngāti Pikiao. The wings symbolise current and future leaders and the necessity for supporting both to enable Māori leadership within the health sector to thrive.
The Henry Rongomau Bennett Foundation
Māori Leadership in Health

Background
The Henry Rongomau Bennett Foundation (Māori Leadership in Health) was launched in February 2011 in Rotorua. This was also the birth place of the inaugural scholarships programme some 11 years previously. The scholarship programme continues today and is the backbone of a suite of Henry Rongomau Bennett Foundation Māori leadership programmes in health.

The Henry Rongomau Bennett Memorial Scholarship Programme was established by the Health Funding Authority in 2001 with the aim of increasing the level of clinical leadership within the mental health sector. The specific objectives were to develop and build:

- leadership in Māori mental health,
- competence in Te Ao Māori, and
- excellence in mental health.

While the objective of increasing the number of Māori mental health professionals through scholarships has been an effective way of improving the level of Māori leadership in health, the Committee has also focussed on building system capability so that mental health services might be better placed to deliver quality services to Māori.

In the past 10 years, the Henry Rongomau Bennett Programme has established a comprehensive scholarship and award programme to advance the capability and capacity of the Māori mental health and addiction workforce, with a focus on dual competencies. Other initiatives that contributed to building leadership and expertise in

“A strong Māori leadership network across all areas of the health sector.”

5
the mental health sector have included mental health training for Māori GPs, recruitment of junior Māori doctors into psychiatry, repatriation of Māori psychiatrists, incentives for higher training in selected disciplines and secondments to addiction specialist services.

Subsequently the programme developed a stronger emphasis on developing Māori leadership pathways including training seminars, and secondment programmes. The focus on clinical leadership was broadened to include other areas of leadership, such as:

- management and governance,
- cultural (whānau, hapū, iwi),
- public health,
- policy,
- academic, and
- research.

In keeping with the new direction the name of the Henry Rongomau Bennett Memorial Scholarship Programme was changed to the Henry Rongomau Bennett Foundation (Māori Leadership in Health).

A strategic direction was set for the Henry Rongomau Bennett Foundation (Māori Leadership in Health) in 2009 taking a three year horizon. The direction had a stronger emphasis on Māori leadership across the health sector and a diminishing focus on the engagement and recruitment aspects of the programme. The leadership programme continued to build on the gains and successful programmes of the Henry Rongomau Bennett Memorial Scholarship Programme whilst evolving new approaches that take into account recent developments in Māori health (mental health, addictions and the broader health sector).

The vision:

**A strong Māori leadership network across all areas of the health sector.**

The focus of the Henry Rongomau Bennett Foundation (Māori Leadership in Health) was to develop leadership pathways for existing and emerging leaders and to facilitate Māori leadership networks in health.

The mission:

**Resource and facilitate sustainable pathways for the development and advancement of Māori leadership in health (with a focus on mental health and addiction).**
Key expectations for this period have in the most part been met. These included:

1. Expansion of the Scholarship Programme to focus on existing and emerging leaders
2. Expansion of new Leadership Development and Advancement Training Programmes to accelerate leadership pathways
   a. Puna Hua Rangatira Tangata Whaiora Leadership Bursary
   b. Hāpainga Manukura Māori Management and Leadership Bursary
   c. Kaupapa Whānau Consumer Leadership Programme
3. Extension of the Indigenous Leadership Mentoring, Secondment and Research Residency Programmes, and
4. Fostering new opportunities for existing and emerging leaders to interact through:
   a. An e-clearing house on Māori leadership and advancement
   b. Biennial Mental Health Leadership Summits
   c. Māori Mental Health and Addiction Excellence Awards
   d. Publishing opportunities in an indigenous peer-review journal, and
   e. Participation in an indigenous mental health network (including the indigenous International Initiative for Mental Health Leadership network).

Implementation of the strategy over the past 3 years has built on the Henry Rongomau Bennett Programme with a stronger leadership development and advancement focus.

**Future Direction**

It gives us great pleasure to present the Henry Rongomau Bennett Foundation (Māori Leadership in Health) Strategic Direction 2030. This document presents the next stage of development for the Henry Rongomau Bennett Foundation (Māori Leadership in Health) taking a 20 year horizon. The development of the strategy has been built from the first Toitū Hauora Summit in 2010 and has been crafted with the support of sector reference groups.

The Henry Rongomau Bennett Foundation (Māori Leadership in Health) has a clear focus on six Māori leadership pathways and leadership development in health. The leadership pathways include:

- cultural,
- clinical,
- public health,
- management and governance,
- research, and
- policy.
Leadership development programmes sit under the six leadership pathways. The connections between the leadership programmes and pathways, and the alignment to the vision and mission of the Henry Rongomau Bennett Foundation (Māori Leadership in Health) are represented on the following page. The leadership development programmes are:

- the Henry Rongomau Bennett Foundation Māori Leadership in Health Scholarship Programme,
- Indigenous Development Programmes,
- Tohu Hiranga (Excellence and Innovation Awards),
- Toitū Hauora Māori 2030,
- Hautu Amorangi (Whānau Leadership in Health),
- Te Aranga Mai (Māori Clinical Professional Leadership in Health), and
- Tomokanga Whakamua (Rangatahi Leadership Development in Health).

“Ko te manu e kai ana i te miro, nōna te wao nui ā Tāne Mahuta. Ko te manu e kai ana i te mātauranga, nōna tea o.”
Henry Rongomau Bennett Foundation
Māori Leadership in Health Scholarship Programme
Māori Leadership Development and Leadership Pathways in Health

Introduction

Ongoing training and professional development is essential for registration with professional bodies, career pathway advancement and leadership development. The Henry Rongomau Bennett Scholarship Programme has been a successful mechanism to increase the level of Māori participation in the mental health and addiction sector and across the health sector. In 2009, the Henry Rongomau Bennett Committee re-focused the scholarship programme to have a stronger emphasis on Māori leadership development and leadership pathways in health (mental health and addictions) with the aims of supporting emerging and existing leaders to:

- develop and build Māori leadership across the health sector,
- develop competence in Te Ao Māori, and
- build excellence in Māori health.

The scholarships were offered to those in health who could demonstrate Māori leadership potential across the health sector in areas such as:

- Kaumātua,
- Mental health workers,
- Tangata whaiora advisors, advocates and representatives,
- Child and adolescent mental health workers,
- Mental health nurses,
- Nurses,
- Psychologists,
- Psychiatric social workers,
- Addiction practitioners,
- Medical and other health students who are committed to mental health and addiction,
- Psychiatric registrars,
- Administrators,
- Māori health managers, and
- Governance leadership – current and potential.

Future Focus

To better ensure that the Henry Rongomau Bennett Māori Leadership in Health Scholarship Programme continues to build on the successes of the past, Māori leadership development in health has been prioritised. The scholarship programme criteria will change and applicants will be assessed against:

- Being able to demonstrate that they are well placed, have networks and/or are in positions of influence,
• Having endorsement as a Māori leader or future Māori leader by their community, employer and / or networks,
• Alignment of the chosen study programme to one or more of the six leadership pathways\(^1\), or they are able to demonstrate a commitment to health (mental health and addiction with a primary or specialist focus), and
• Dual-competency, either demonstrated by up skilling or having attained cultural and clinical competence, or be strong in one domain with a clear commitment as part of their scholarship to enhance the other.

The outcomes for the Henry Rongomau Bennett Māori Leadership in Health Scholarship Programme towards 2030 are:
• Continue to improve academic outcomes for recipients,
• Increased numbers of existing and emerging leaders enrolling and completing undergraduate studies (certificate, diploma or degree level) in one of the leadership areas identified,
• Increased number of existing and emerging leaders enrolling and completing postgraduate studies (certificate, diploma, or degree level) in selected discipline relevant to Māori and health,
• Increase the support and promotion of psychiatry as a specialty to medical students, and
• Increase the number of Māori Psychiatric registrars and Māori Psychiatrists by at least ten.

\(^1\) Cultural, clinical, public mental health, management and governance, research or policy.
Indigenous Development Programmes

The Henry Rongomau Bennett Foundation (Māori Leadership in Health) supports three indigenous development programmes. The programmes aim to provide pathways and opportunities for existing Māori leaders in health to advance professionally and to gain skills, knowledge and qualities to undertake leadership roles in their own workplaces.

Peer Reviewed Web-based Journal

*Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health* is a peer reviewed, web-based journal published twice each year by Native Counselling Services of Alberta, Canada.

The goal of Pimatisiwin Journal is to promote the sharing of knowledge and research experience among researchers, health professionals, Aboriginal leaders and community members. The journal provides a forum for this diverse population to publish on research process and findings in a cross-disciplinary, cross-cultural setting. The primary focus is on health and health research in Indigenous communities, broadly defined. Articles can be of interest to many fields, including sociological, psychological, medical, anthropological, experiential, and methodological—both qualitative and quantitative in nature. The promotion of an indigenous peer reviewed web-based journal will provide opportunities for existing leaders to contribute to building indigenous information and knowledge exchange, as well as developing skills and knowledge in publishing and peer reviewing articles and papers.

Outcomes towards 2030 include:
- To have four successful submissions to Pimatisiwin per annum.

Whiriwhiria: Indigenous exchange

The focus of this leadership exchange is to offer an opportunity to practically support another organisation in ways that see the indigenous leadership attributes used and valued reciprocally by the exchange organisations. There has been high interest in progressing this programme by a number of organisations in New Zealand, Australia, Hawaii and Canada. It has been acknowledged that establishing protocols between indigenous organisations will require some sound infrastructure development in the early stages and to approach the activity in a pilot. The pilot will allow for the testing of infrastructure in a manageable process with reduced exposure to financial risk.

It has been agreed the first exchange will be with Australia looking at a secondment / exchange to an indigenous tribal organisation that will contribute to the development of indigenous leadership in health.
Outcomes towards 2030 include the following international exchange examples:

- a policy secondment / exchange to World Health Organisation Mental Health and Substance Abuse Department to facilitate better understanding of indigeneity, best practice and evidence and indigenous leadership,
- a policy secondment / exchange to Substance Abuse & Mental Health Services Administration organisation / management secondment that will build the management capacity and capability across Non Government Organisations District Health Boards and policy agencies, and
- a research residency that will build the capacity and capability across indigenous research agencies to facilitate better understanding of the implications of research and evaluation for service delivery.

**International Initiative for Mental Health Leadership**

The International Initiative for Mental Health Leadership (IIMHL) is an indigenous network that provides an avenue for the Wharerata Declaration: An Agenda for Indigenous Mental Health Leadership (2009) to be realised. The Wharerata Declaration was developed by indigenous representatives from Canada, USA, Australia, Samoa and New Zealand to promote and advance indigenous mental health leadership.

Outcomes towards 2030 include:

- Working with those Mental health leaders who have previously attended the exchanges and plan towards stronger representation into the future for the Wharerata Declaration, and
- Support conference attendance of at least two participants.
Tohu Hiranga (Excellence and Innovation Awards)
Harry Pitman Māori Addiction Excellence and Innovation,
Bob Henare Māori Mental Health Excellence and Innovation
and Tā Tatou Mahe Korowai Awards

The Harry Pitman Scholarships were established in 2006 to prepare speakers from the Māori mental health and addiction sector to develop basic presentation skills that supported them to be equipped to make effective ‘audience-centred’ presentations at local, regional and national events, with the possibility of presenting to international events. While the workshops were of value to individual participants, it was unclear if the training was targeted to meet the overall objectives of the Henry Rongomau Bennett Memorial Scholarship Programme. The committee has agreed to refocus the Harry Pitman Award to acknowledge excellence and innovation in the addiction field and also established the Bob Henare Māori Mental Health Excellence and Innovation Awards in 2010. In 2011, the Tā Tatou Mahere Korowai Award was established with a view to supporting providers establish rangatahi advisory roopu.

The Excellence and Innovation Awards aim to acknowledge and recognise excellence in Māori health, mental health and addictions area (individuals, groups and organisations) and encourage the development of innovative approaches to achieving best outcomes for tangata whaiora and whānau. The specific objective is to recognise and endorse professional achievements and high levels of Māori excellence by awarding the Harry Pitman (Māori addiction services) the Bob Henare (Māori mental health) Excellence and Innovation Awards and the Ta Tatou Mahere Korowai awards.

Outcomes towards 2030 for the awards include:

- Continuing to provide the awards as long as they are relevant to the sector, and
- Building a network of award recipients.

“Waiho i te toipoto, kaua i te toiroa.”

“Let us keep close together, not far apart.”
Toitū Hauora Māori 2030
Māori Leadership in Health Towards 2030
Strategic Framework

Toitū Hauora Māori 2030 was established in 2010 as part of the Henry Rongomau Bennett Foundation Strategic Direction 2009-2012. It is a future focussed programme that aims to build the knowledge, skills and competencies necessary to grow Māori leadership in health. In November 2010, the first biennial summit was held to bring together existing and emerging Māori leaders in health to consider the future Māori leadership needs for health towards the year 2030. The contributions of those who participated in the 2010 summit have been used in the development of a strategic framework.

The Toitū Hauora 2030: Māori Leadership in Health Towards 2030 Strategic Framework is underpinned by values immersed in te ao Māori, including:

- kotahitanga,
- tuakana-teina,
- manaakitanga,
- whakapono,
- te reo,
- ihi,
- whanaungatanga,
- mahi,
- whenua,
- ahikaroa
- mo ake tonu
- mokopuna,
- ūkaipo,
- oho mauri,
- mana,
- rangatira,
- kaupapa Māori,
- whakapapa,
- whakarongo, and
- tangata.

The strategic framework recognises that Māori leadership in health should also be guided by the principles of Mātauranga Māori, Kotahitanga, Whakamārama, and Whakamana.

**MĀTAURANGA MĀORI**
Te Ao Māori: Māori leadership is built on mātauranga Māori.
- Whakaaro Māori
- Tikanga Māori
- Te Reo Māori

**KOTAHITANGA**
Unity: the benefits of a networked approach to leadership and health extend beyond the health sector
- Māori networks
- Professional networks
- Economic and social dimensions

**WHAKAMĀRAMA**
Enlightenment: an obligation of leadership is to provide clarity of thought and communication that is relevant to whānau, kaumātua, and rangatahi.
- Enlightenment
- Information
- Explanation

**WHAKAMANĀ**
Empowerment: leadership will empower others.
- Whānau
- Rangatahi
- Matua
- Kaumātua
Key Māori leadership attributes in health include:

- **T**angata whenua perspectives – tikanga, reo, kawa
- **O**rientated to the future – 2030
- **I**nformed by science, experience, mātauranga Māori, statistics and aspirations
- **T**rainened for leadership
- **U**nderpinned by the legacies of the past
- **H**ealth Knowledge – promotion, prevention, care, treatment, policy, research
- **A**ffiliated to wider Māori leadership – part of te ao Māori
- **U**nleashing Māori potential within all whānau
- **O**utcomes for individuals, whānau, communities, hapu and iwi
- **R**angatahi aspirations and potential as tomorrows leaders
- **A**utonomy – ready to take the lead

Māori models of development will be key factors in growing future Māori leadership in health. Traditionally within Te Ao Māori, the concept of Tuakana-Teina relationships has been an integral part of whakapapa within whānau, hapū and iwi. In today’s society one can apply the same concept to represent more experienced persons providing support and guidance to a less experienced person. It is a reciprocal relationship that benefits both the tuakana and teina and is an ideal model for growth and learning.

*Tuakana and teina are one of the gifts that we have is about roles and responsibilities. For the tuakana to take responsibility and for the teina to stimulate responsibility and that the roles are shared, and that all of us have some taonga that each one puts into the relationship. In relation to tuakana and teina, we have to support each role, as no role is less than another. (Moe Milne, Puna Hua Rangatira, 2007)*
Three priority areas and associated activities for Toitū Hauora Māori 2030 are outlined below.

**Priority One: Building a Māori Leadership Network in Health**

Outcome towards 2030: A well established, nationally recognised Māori leadership network in health which is actively supported by a broad range of stakeholders.

Activities which will contribute to the building of a nationally recognised Māori leadership network in health include:

- Establishing tools which facilitate membership of a Māori leadership network in health (e.g. database of roles and positions),
- Maintaining ongoing connection and communication across the Māori leadership network in health utilising technology and regular forums (e.g. web based access to summit resources; opportunities for national collaboration through the use of technology),
- Raising the profile of the national Māori leadership network in health,
- Initiating and maintaining engagement with Iwi, and
- Extending the national Māori leadership network in health to wider affiliated Māori leadership networks.

**Priority Two: Building Māori Leadership Capacity and Expertise in Health**

Outcome towards 2030: Competent Māori leaders in significant leadership roles within the health sector.

Activities which will contribute to the building of Māori leadership capacity and expertise in health include:

- Developing and implementing engagement strategies that are relevant to all diverse groups within Māori communities,
- Continuing to build the capacity within whānau and create whānau independence,
- Implementing programmes that support Māori, rangatahi and whānau into leadership pathways, and
- Growing professional development opportunities and training programmes that are relevant to Māori leadership in health, including Māori management pathways, clinical leadership programmes, CEO/Senior Management training, research and development, and mātauranga Māori.

**Priority Three: Māori Leadership Succession Planning and Leadership Pathway Development, Implementation and Evaluation in Health**

Outcome towards 2030: Sustainable, accessible pathways for Māori leadership in health supported by high quality and appropriate development programmes.
Activities under this priority area will include:

- Continuing to develop understandings of leadership and skills for the future to inform development programmes, and
- Promoting engagement with rangatahi to grow leadership capacity.

The chart below outlines the Toitū Hauora Māori 2030 Strategic Framework.

---

“Leadership needs to be deliberate; planned, supported, and resourced. We need to identify and select people for leadership, and be inclusive of rangatahi and whānau.”
The Hautu Amorangi programme aims to develop whānau leadership in health by establishing a sustainable approach consistent with the needs and aspirations of whānau. It will explore opportunities for the development of whānau leadership as part of the Henry Rongomau Bennett Foundation (Māori Leadership in Health). Hautu Amorangi identifies key priorities and actions for whānau leadership in health towards 2030. The strategic direction proposes to move meaningful leadership as best practice to provide a way forward for whānau leadership, making a difference to the aspirations of the communities to which they serve. It also focuses on “normalising” and acknowledging whānau leadership across the health sector.

The underpinning values of the Hautu Amorangi Programme are located within a Māori world view. They include:

- Whānau,
- Whānau whanui,
- Humarie,
- Wairua,
- Kotahitanga,
- Whanaugatanga,
- Kuia/Kaumatua,
- Tuakana / Teina,
- Manaakitanga,
- Whānau driven,
- Hapori driven,
- Rangatiratanga,
- Karakia,
- Friendship,
- Creativity,
- Freedom of expression, and
- Knowing and understanding ourselves.

“The desire to lead, to direct, to guide [and] to work in services...all of you no matter what the path you chose, all of you have skills, you have traits, attributes” (Philleen Macdonald, Puna Hua Rangatira, September 2007)

Three priority areas for the development and maintenance of whānau leadership in health have been identified for the Hautu Amorangai Programme. These are:

1. Creating opportunities to build and strengthen networks for whānau leadership in health.
2. Building capability to drive capacity for whānau leadership in health, and
3. Whānau leadership succession planning, pathway development, implementation and evaluation.

The priority areas are described in more detail below.
Priority One: Create opportunities to build and strengthen networks for whānau leadership in health

Outcome towards 2030: A well resourced, nationally recognised Māori leadership network in health actively supported by a broad range of stakeholders including whānau.

The Hautu Amorangi Programme will create opportunities for whānau to have a greater presence in recognised health forums. This will help to strengthen whānau leadership networks in health and ensure that there are opportunities for whānau to develop meaningful relationships and be able to experience practical leadership models in health.

Priority Two: Building capability to drive capacity for whānau leadership in health

Outcome towards 2030: Capable whānau leadership in health.

Supporting whānau to develop leadership potential in health will require a focus on actively building whānau leadership capability. Access to Matauranga Māori, role models, guidance, leadership pathways, scholarships, training and career pathway development will be important aspects of the Hautu Amorangi Programme.

Priority Three: Whānau leadership succession planning, pathway development, implementation and evaluation

Outcome towards 2030: Sustainable whānau leadership pathways in health are established, supported and maintained.

Connecting with and understanding whānau aspirations for leadership in health will help to inform succession planning. Whānau aspirations are shaped by a wide range of factors including social, cultural, political, historical, environmental and economic factors. They can be inspired by people with whom whānau feel most connected with, be derived from hapu, iwi and community interactions or from legacies left by those who have passed on. But regardless of how whānau aspirations are produced, whānau leadership has a key role in determining whānau wellbeing. Linking whānau leadership aspirations to those of hapu, iwi and communities will lead to a more cohesive approach for the development of future Māori leaders in health.

The following page provides the overall view of the programme plan for Hautu Amoranga. It sets out the key actions required in five year time periods to achieve proposed outcomes for each priority area.
### Hautu Amorangi Programme Plan 2011 – 2030

**VISION:** Strong whānau leadership supporting whānau aspirations for health and wellbeing

**MISSION:** Developing whānau leadership in health

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Instilling Māori identity</td>
<td>Creating opportunities to build and strengthen networks for whānau leadership in health</td>
<td>Support whānau to experience, participate and be acknowledged in health forums</td>
<td>Improve access to workforce development opportunities that support whānau leadership in health</td>
<td>Explore opportunities to connect iwi aspirations to Hautu Amorangi</td>
<td>Support regional and national directions to ensure that whānau leadership can participate at all levels in health</td>
<td>A well resourced, nationally recognised Māori leadership network in health actively supported by a broad range of stakeholders, including whānau</td>
</tr>
<tr>
<td>Leadership and determination</td>
<td>Building capability to drive capacity for whānau leadership in health</td>
<td>Improve access to resources to build collective whānau leadership capacity</td>
<td>Integrate into existing training and development programmes opportunities for whanau to develop leadership qualities in health</td>
<td>Demonstrate strong accountable whānau leadership which contributes to whānau, hapu iwi and Māori development</td>
<td>Implement strategies that support aspirations of whānau becoming leaders within the health sector</td>
<td>Capable whānau leadership in health</td>
</tr>
<tr>
<td>Our connections to whakapapa, Hakihaki, wairau and hinengaro</td>
<td>Whānau leadership succession planning, pathway development, implementation and evaluation</td>
<td>Develop quality research that contributes to understanding of whānau aspirations for leadership in health</td>
<td>Support the development of succession planning within whānau, including cultural, advisory and advocacy roles in health</td>
<td>Build knowledge and understanding of Māori community health leadership aspirations to support the development and implementation of succession planning for whānau leadership in health</td>
<td>Increase the recruitment, access, participation, retention, development and success of whānau leadership in health</td>
<td>Sustainable whānau leadership pathways in health are established and supported</td>
</tr>
<tr>
<td>Looking back to go forward</td>
<td></td>
<td>Create a national database of whānau leaders in health</td>
<td>Explore opportunities for whānau advocacy and advisory leadership roles in health</td>
<td>Integrate succession planning into Māori health workforce development, recruitment and extension activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ownership, responsibility</td>
<td></td>
<td>Support whānau to experience, participate and be acknowledged in health forums</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life experiences</td>
<td></td>
<td>Improve access to workforce development opportunities that support whānau leadership in health</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flexibility</td>
<td></td>
<td>Integrate into existing training and development programmes opportunities for whanau to develop leadership qualities in health</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Validity</td>
<td></td>
<td>Build whānau leadership expertise and facilitate best practice in health governance and management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reliability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be fair and equitable to all groups or learners</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recognise prior learning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be dual competency based</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Success</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hope</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faith</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Courage</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Choice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Empowerment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self advocacy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Achievement</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ACTIONS: 2015 - 2020

- Support Hautu Amorangi participants to share, listen and gain knowledge in a wananga environment
- Build whānau leadership expertise and facilitate best practice in health governance and management
- Increase access, recruitment and retention to, and the development of the Hautu Amorangi programme

ACTIONS: 2020 - 2025

- Demonstrate strong accountable whānau leadership which contributes to whānau, hapu iwi and Māori development
- Build whānau leadership expertise and facilitate best practice in health governance and management
- Integrate succession planning into Māori health workforce development, recruitment and extension activities

ACTIONS: 2025 - 2030

- Support regional and national directions to ensure that whānau leadership can participate at all levels in health
- Implement strategies that support aspirations of whānau becoming leaders within the health sector
- Increase access, recruitment and retention to, and the development of the Hautu Amorangi programme

OUTCOMES

- A well resourced, nationally recognised Māori leadership network in health actively supported by a broad range of stakeholders, including whānau
- Capable whānau leadership in health
- Sustainable whānau leadership pathways in health are established and supported
Te Aranga Mai
Māori Clinical Professional Leadership in Health

Te Aranga Mai refers to the awakening of knowledge. This name reflects the overall purpose of creating pathways, opportunities and training programmes for emerging Māori leaders in clinical and / or professional areas in the health sector, and to provide practical tools which are relevant and useful to support leaders.

Te Aranga Mai is a programme focused on building and developing Māori leadership competence, capacity, skill and experience across the health workforce. It seeks to create pathways, opportunities and training programmes for Te Aranga Mai within the health sector. The gains made across the health sector will be built on by working with Māori who have already forged pathways into leadership and management roles.

Te Aranga Mai Programme Plan creates a foundation for Māori leadership to be nurtured and developed. It is underpinned by values located within te ao Māori, including:

- kotahitanga
- manaakitanga
- whakapono
- te reo
- ihi
- whānaungatanga
- mahi
- whenua
- ahikāroa
- mō ake tonu
- mokopuna
- ākaipo
- oho mauri
- mana
- rangatira
- kaupapa Māori
- whakapapa
- whakarongo
- tangata

“Herea to waka ki te whetu, kaua e herea ki te tokerama.”

“Tie your canoe to a star and not to a glow worm.”
Values relevant to supporting the intergenerational transfer of knowledge through support and mentoring, for example via tuakana-teina relationships also underpin the Te Aranga Mai Programme. Values associated with intergenerational transfer recognise diversity of understanding and that for some, values relevant to tuakana-teina are located solely within the context of whakapapa.

Three priority areas identified for Te Aranga Mai are:

1. Building and strengthening Māori clinical and professional networks in health,
2. Building capacity and expertise through mentoring programmes and work experience, and
3. Instituting succession planning which includes building, establishing, reviewing, and evaluating leadership pathways.

**Priority One: Building and strengthening Māori clinical and professional networks in health**

Outcome towards 2030: A well established nationally recognised Māori leadership development network in health.

Three themes have been identified in relation to the building and strengthening of networks. These are: effectively utilising existing Māori leadership knowledge in health; alignment with iwi aspirations; and strengthening networks among undergraduate students.

The Māori health sector has made significant progress in building capacity across the health workforce over the past 30 years. Leaders have recognised the value of having an awareness of who the key players are within the health sector, acknowledging that strength and support derives from building networks and relationships. A network mechanism which enables Te Aranga Mai to build relevant and meaningful relationships to assist ongoing development of skills and knowledge is required. Locating, recognising and consolidating the wealth of Māori leadership knowledge which currently exists within the sector will provide further opportunities to utilise existing networks and relationships to support and nurture Te Aranga Mai.

Iwi are developing rapidly as a result of assertive leadership, infrastructure development and astute management of tribal assets. Iwi developments in the future aspire to collectively benefit whānau from economic, health and social perspectives. Supporting Te Aranga Mai to participate and link to the vision of their respective iwi will create opportunities for both Te Aranga Mai and Māori leaders from across the sector to contribute to the development of iwi health, education and social strategies which meet the aspirations of whānau, hapū and iwi.

There is a relatively large knowledge base regarding factors which impact on successful participation by Māori students in tertiary studies. Major factors include
transitioning from home to unfamiliar tertiary environments; inappropriate support systems; financial barriers; unwelcoming educational environments; lack of social and/or academic support; and racism (Nikora, Levy, Henry, Whangapirita, 2002). Facilitating Te Aranga Mai therefore requires an emphasis on support systems for undergraduate students, with a particular focus on the enhancement of student performance and leadership potential via the relationship and network building.

Underpinning the key themes is that Māori leadership is founded on Matauranga Māori. Māori leaders need to have a broad knowledge of te reo, tikanga and kawa and have the opportunities to continually develop in this area. With te reo Māori being fundamental to supporting growth and development for Māori, identity is strengthened and a strong sense of purpose within Te Ao Māori is built. Regular interaction with whānau, hapū and iwi will keep leaders connected to Te Ao Māori, thus strengthening their capacity to operate in both mainstream and Māori environments.

**Priority Two: Building capacity and expertise in health through mentoring programmes and work experience**

Outcome towards 2030: Sustainable Māori leadership competently fulfilling key leadership roles in health.

Increasing the number of Māori in leadership roles across the health sector requires Te Aranga Mai to build on gains which have already been made. Expertise and knowledge are required to support Te Aranga Mai accelerate their leadership pathways via training and development. Creating opportunities to perform and experience leadership will build confident Te Aranga Mai with the capacity to continue to develop their cultural, clinical and professional leadership pathways. Ensuring there are opportunities for Te Aranga Mai to be exposed to practical leadership models, focused on both clinical and cultural excellence, which are appropriate and relevant for Māori pathways, needs and aspirations is an important element of fostering and developing the potential within Te Aranga Mai. A focus on strategic pathways for Te Aranga Mai who understand the nature of Māori needs and aspirations and as such can effect reality based solutions for Māori into clinical, strategic or policy making roles is also important.

Exposure to Māori leaders via tuakana-teina or mentoring programmes will also provide exposure to practical Māori leadership models which derive from traditional stories, past experiences, history and culture. The provision of work experience which is aligned to leadership development, prior to, or during training, will enable a more in-depth understanding of a chosen career pathway, thus allowing for the early detection of training and leadership needs.
Priority Three: Instituting succession planning which includes building, establishing, reviewing, and evaluating leadership pathways

Outcome towards 2030: Pathways into leadership within the health sector are articulated, understood and utilised to inform high quality leadership programmes which actively support Māori leadership in health.

Potential and aspiring leaders need to be recognised early so that the right mix of support can be offered. Such support includes guidance in mātauranga Māori, being connected to professional development opportunities, insight and knowledge of the health sector, awareness of financial support, and access to modern technology. An ideal place to start looking for future leaders is at kura kaupapa Māori, where students are immersed in Te Reo me ōna Tikanga Māori, and have strong Māori networks supporting them to achieve. Connecting these students to health recruitment programmes, such as, but not limited to, Kia Ora Hauora, will allow mechanisms to be established early by which career planning and tracking can be monitored. Having access to scholarships and financial assistance is also related to the development of Te Aranga Mai.

The following page provides the overall view of the programme plan for Te Aranga Mai. It lays out the key actions required in five year time periods to achieve proposed outcomes for each priority area.

“Mehemea ka moemoeā ahau ko ahau anake,
mehemea ka moemoeā a tātou,
ka taea tātou.”

“If I dream, I dream alone;
if we all dream together,
we will achieve.”
**Te Arangamai Programme Plan 2011 – 2030**

**MISSION:** All Māori who enter the health workforce have an opportunity to become highly competent in all aspects of cultural and clinical/professional leadership

**VISION:** Competent and Effective Māori Leadership

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Māori led, Māori developed, Māori driven</td>
<td>Building and strengthening Māori clinical and professional networks in health</td>
<td>Build Māori leadership networks</td>
<td>Create opportunities which support better integration between iwi aspirations and Te Arangamai across the health sector</td>
<td>Create relationship and leadership networking opportunities for Te Arangamai within the undergraduate student population.</td>
<td>Create relationship and networking opportunities for Te Arangamai which focus on the development of cultural excellence in te reo, tikanga and kawa</td>
<td>A well established nationally recognised Māori leadership development network in health</td>
</tr>
<tr>
<td>Listen to your inner voice, it maybe your tupuna calling</td>
<td></td>
<td>Build opportunities for Māori health leaders to share their success</td>
<td>Explore opportunities to connect iwi aspirations with the aspirations of Te Arangamai within the undergraduate student population.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Learn from traditional stories, past experiences, history and culture</td>
<td></td>
<td>Create opportunities for Te Arangamai to experience and perform leadership functions</td>
<td>Coordinate opportunities for undergraduates to wānanga together with the aim of raising awareness of career pathways, financial assistance (scholarships) and Māori health leadership champions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Value Māori knowledge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Growth in tikanga and clinical competencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Know who you are</td>
<td>Building capacity and expertise in health through mentoring programmes and work experience</td>
<td>Facilitate mentoring programmes which create exposure to leaders and leadership models</td>
<td>Build on the opportunities, knowledge and progress made from 2011-2015 to implement programmes that support accelerated leadership pathways focused on cultural and clinical excellence for Te Arangamai</td>
<td>Provide opportunities for knowledge, skills, competencies and successes to be shared via discussions and forums for emerging and existing leaders</td>
<td>Implement strategies which support the increase and strategic positioning of Te Arangamai within roles which utilise data/information pertaining to Māori health needs to influence policy</td>
<td>Sustainable Māori leadership competently fulfilling key leadership roles in health</td>
</tr>
<tr>
<td>Maintain wellbeing</td>
<td></td>
<td>Provide work experience opportunities which align to leadership, prior to, or during training</td>
<td></td>
<td>Facilitate opportunities for the development of tuakana-teina relationships which support Te Arangamai</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Start wherever you start</td>
<td></td>
<td>Create opportunities for Te Arangamai to focus on both cultural and clinical excellence</td>
<td></td>
<td>Utilise the discussions and forums for emerging and existing leaders as a resource to identify what drives and inspires leaders to make a difference</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Start with your own whānau</td>
<td></td>
<td>Identify and evaluate effective leadership development models and approaches for Te Arangamai</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be actively motivated</td>
<td></td>
<td>Consider how the younger generation of Te Arangamai can be developed and nurtured</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seek guidance and support from hapū</td>
<td></td>
<td>Consider how pathways to scholarships and financial assistance can be effectively accessed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Instituting succession planning which includes building, establishing and evaluating Māori leadership pathways in health</td>
<td></td>
<td>Identify how current leaders are implementing succession planning via a series of workshops that explore what makes succession planning initiatives successful</td>
<td></td>
<td></td>
<td>Pathways into leadership are articulated, understood and utilised to inform high quality leadership programmes which actively support Māori leadership in health</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Develop and pilot a succession planning model with current leaders</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Tomokanga Whakamua
Rangatahi Leadership Development in Health

Tomokanga Whakamua aims to create a foundation to awhi and manaaki rangatahi leadership in health. The programme is underpinned by a set of values that are located within a rangatahi Māori world view.

- Mātauranga Māori
- Pepeha
- Tautoko
- Whānau
- Rangatiratanga
- Kuia/Kaumatua
- Tuakana/Teina
- Kawa
- Kai with respect to noa
- Hikaka te Manawa

Priority One: Creating opportunities for rangatahi to participate in Māori leadership networks in health

Outcome towards 2030: Rangatahi participating in recognised Māori leadership networks in health.

Networking, including social networking, is an important young person’s activity. A network mechanism which enables rangatahi to build meaningful relationships within the health sector is required as it will assist in the ongoing development of leadership skills and knowledge. Networking opportunities should include activities that encourage rangatahi to engage with each other as well as with emerging and existing leaders in health. They can offer support by sharing their own journeys/stories relating to their work experiences, including how they came to work in the health sector, training, challenges and rewards.

Priority Two: Supporting rangatahi to access Māori leadership development and training to build Māori leadership capacity in health

Outcome towards 2030: Rangatahi are supported to develop leadership capabilities in health.

Part of the Tomokanga Whakamua Programme is to ensure that there are opportunities for rangatahi to be exposed to practical leadership models focussed on both clinical and cultural excellence. Appropriate and relevant Māori pathways are important elements of fostering and developing the potential within rangatahi.
Tuakana-teina relationships and the provision of rangatahi leadership workshops aligned to Māori leadership development in health, will enable rangatahi to have a gain a better understanding of potential health career pathways, thus allowing for the early detection of leadership needs.

Priority Three: Engaging rangatahi in succession planning to strengthen Māori leadership in health

Outcomes towards 2030: Rangatahi actively involved in the development and implementation of Māori leadership succession planning in health.

To understand tomorrow's workforce, we need to understand our future demographic realities. It is estimated that the Māori population has increased from 6.9% in 1951 to 14.6% in 2006; it is predicted that by 2026 Māori will make up 17% of the New Zealand population. Data also highlights that the Māori population is youthful\(^2\). Potential and aspiring leaders need to be recognised early so that the right mix of support can be offered. Such support includes guidance in mātauranga Māori, being connected to professional development opportunities, insight and knowledge of the health sector, awareness of financial support, and access to modern technology. An ideal place to start looking for future leaders is at kura kaupapa Māori and kura with bilingual classrooms where students are immersed in te reo me ona tikanga Māori, and have strong Māori networks supporting them to achieve. Connecting these students to health recruitment programmes, such as, but not limited to, Kia Ora Hauora, will allow mechanisms to be established early by which career planning and tracking can be monitored. Having access to scholarships and financial assistance is also related to the development of Tomokanga Whakamua.\(^3\)

The following page provides the overall view of the programme plan for Tomokanga Whakamua. It lays out the key actions required in five year time periods to achieve proposed outcomes for each priority area.

---

\(^2\) Statistics NZ 2006
\(^3\) Michelle Levy
### Tomokanga Whakamua Programme Plan 2011 – 2030

**VISION:** Creating access and exposure to Māori Leadership

**MISSION:** To inspire and create opportunities for rangatahi to explore leadership within health

#### OUTCOMES

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Rangatahi leadership workshops that are rangatahi driven</td>
<td>Creating opportunities for Rangatahi to participate in Māori leadership networks in health</td>
<td>Create opportunities for Rangatahi to interact with Māori leaders in health</td>
<td>Build the opportunities, knowledge and progress made from 2011-2015 to implement programmes that support accelerated leadership pathways focused on cultural and clinical excellence for emerging leaders</td>
<td>Coordinate opportunities for undergraduates to wānanga together with the aim of raising awareness of career pathways, financial assistance (scholarships) and Māori health leadership champions</td>
<td>Create capacity, self sufficiency for rangatahi leadership wānanga within whānau, hapū and iwi Create opportunities which support rangatahi and iwi aspirations within the health sector</td>
<td>Rangatahi are supported the develop Māori leadership capabilities in health</td>
</tr>
<tr>
<td>Interactive activities</td>
<td>Engaging rangatahi in succession planning to strengthen Māori leadership in health</td>
<td>Expand engagement with kura kaupapa Māori and kura with bilingual classrooms, with a focus on Māori and Science departments in order to provide rangatahi with more exposure to leadership pathways in health</td>
<td>Consider how the younger generation of Tomokanga Whakamua can be developed and nurtured</td>
<td>Develop strategies which support rangatahi aspirations of becoming leaders within the health sector</td>
<td>Implement succession planning for rangatahi leadership Review, evaluate and refine emerging leaders leadership pathways</td>
<td></td>
</tr>
<tr>
<td>Eye catching</td>
<td>Engaging rangatahi in succession planning to strengthen Māori leadership in health</td>
<td>Build on knowledge obtained in relation to succession planning by reviewing and expanding succession planning models</td>
<td>Maintaining key relationships with other roopu such as Te Aranga Mai, Toitu Hauora, Kia Ora Hauora to identify how current leaders are implementing succession planning</td>
<td>Identify the leadership pathways for rangatahi and what is required to develop succession planning for rangatahi leadership that is iwi led</td>
<td></td>
<td>Rangatahi actively involved in the development and implementation of Māori leadership succession planning in health</td>
</tr>
<tr>
<td>Interested in the kaupapa of rangatahi leadership</td>
<td>Supporting rangatahi to experience and undertake leadership functions in health</td>
<td>Facilitate rangatahi workshops which create exposure to leaders and leadership models</td>
<td>Support the ongoing health workforce development of Tomokanga Whakamua members by facilitating the provision of advice and support for them to complete and submit applications for appropriate Henry Rongomau Bennett scholarships</td>
<td>Provide opportunities for rangatahi to share, listen and gain knowledge via discussions at wānanga for rangatahi and existing leaders.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Listen to whānau and other leaders who share their stories to give us guidance</td>
<td>Explore how pathways to scholarships and financial assistance can be effectively accessed</td>
<td>Utilise the discussions and forums for emerging and existing leaders as a resource to identify what drives and inspires leaders to make a difference</td>
<td>Utilise the discussions and forums for emerging and existing leaders as a resource to identify what drives and inspires leaders to make a difference</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be positive</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be open minded</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Share confidence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be adaptable and versatile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Show respect</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### ACTIONS: 2011 - 2015

- Engaging rangatahi in succession planning to strengthen Māori leadership in health
- Supporting rangatahi to access Māori leadership development and training to build Māori leadership capacity in health
- Rangatahi leadership workshops that are rangatahi driven
- Interactive activities
- Be open minded
Waiata: Henare Rongomau Peneti  
Composed by Hineroa Hakiaha

Te Amorangi mate kite, he whakaaro rereke
Puaki ōna tatau, mō te iwi katoa
Patukituki te Manawa, hapitia te mauri
Whakapau, aroha, whanui (x2 this line)

E tapai atu te ohaki, Ka whanakihia he tohu,
whakapiki ake te tangata, Whatukura-Mareikura
Koi... te Hinengaro, kia mau ngā tumanako
Kore rawa i warewaretia, te ao Māori (x2 this line)

Ko ngā tau-ma hekeheke, ka piki ake te wariu
Hei whakarangatira ia tatou, tiaho mai-te oranga
Ko pikau ngā werawera, ko māro te tū
Anei ngā ringa raupa, ō āpōpō (x2 this line)

Henare Rongomau Peneti (x2 this line)