Turuki Turuki! Paneke Paneke!

Move it Move it!
Move forward Move forward!
Kaupapa

• On the 9\textsuperscript{th} & 10\textsuperscript{th} August 2018, Te Rau Matatini hosted Hui Māori. This provided a platform for Māori with lived and whānau experience; for Māori from Kaupapa Māori mental health and addiction providers; for Iwi and Māori leaders; Māori practitioners; Māori researchers and Māori experts to meet with the New Zealand Governments Mental Health Inquiry Panel.

• Each of the oral presentations shared by the participants were captured by the secretariat staff employed by the Mental Health Inquiry Panel.

• This resource shares a snapshot, a glimpse into the two day hui, concluding with a short brief of insights, of the main problems and recommended solutions.

\textbf{NOTE: Every effort has been made to represent the korero in a mana enhancing manner in this resource, but in no way can it express entirely all of the opinions of the Māori leaders.}
• Māori to be the decision makers when it comes to solutions & approaches for Māori health & wellbeing.

• There is a need to revalue the relationship between Māori & the Crown as the Treaty partner.

• If the principles of equity & partnership are honoured, then tikanga Māori and positive solutions for Māori will truly be reflected.

• Services will reflect a strong Māori worldview & a continuum of care with full access to Māori models of practice.

• There is a need for a system that has the workforce & policies to whakamana the korero and aspirations of Māori.

• We want increased access to Te Ao Māori, Matauranga Māori, te reo me ona tikanga, Marae & wananga.

#Tumata Kokiritia: Catalyst for Change
Pam Armstrong

*Clear away the obstacles, so that we may turn our face to the world of light. Let’s focus on that light moving forward.*

- Racism is alive & well in New Zealand. Subtly or blatantly, people with little idea of mana whenua are proposing to speak for Māori & by doing so are excluding Māori from key decision making.

- **For Change** Māori must be in Leadership, otherwise there will continue to be a lack of understanding of & advocacy for Māori.

  *We cannot sit back, We must Act!*

- It is not just about us in the here and now, it is about the generations to come. If we cannot lay a strong foundation now, what would it look like for the next generation?
Ahakoa He Iti, He Pounamu

- There has been small changes, much of what we are saying we want, has been said before for a long time, but we need ACTION.
- Lets take back the power of Matauranga Māori.
- When services are delivering bad services to Māori, they are delivering bad services to my people, and to my whakapapa.
- We need to reinstate values, standards and accountabilities to our Māori values; of mana, whānaungatanga, aroha and manaaki.
- Lets not use kupu to label our whānau.
- Lets hold people to account!

Moe Milne
Ngāti Kahu Social & Health Services

*Representing: Whānau o Te Hiku o te Ika*

- The Kaupapa Māori context enables one to be creative & innovative. There is more time to listen to whānau, to work out solutions with whānau in their communities that work for them.

- There are still challenges locally with whānau waiting too long for a response from western mainstream services for their rangatahi & loved ones.

- We need accelerated workforce strategy to increase a grow our strategy & a more youthful workforce to work with young people.

- **What is working well:** Whānau enjoy coming together, they have an increased confidence in te reo me ona tikanga & in engaging with other people in the community.

- **Community based programmes are a big deal for Te Hiku o te Ika.**

- Whānau recommend Māori Minister of Māori health or a Māori minister with a portfolio for mental health.

- We expect the panel to effect change! Did you listen to us? Did you hear our whānau voice?

#Whānau Voice
He Waka Tapu

Committed to the Kaupapa of whānau & making a difference to whānau

• Māori have been saying the same thing for 30 years. We seriously need ACTION.
• The Government needs to accept the advise of Māori, and honour what is being said.
• We need to remove the clear funding bias that sits across all government funding models.
• We need to remove contracting silos, right from the top.
• Short term contracts & changing funding arrangements by mainstream funders make it difficult to provide continual holistic, whānau based support.
• There is a need for better funding for Kaupapa Māori providers.
He Mana o te Tangata Trust

Bringing the voice of our people about what is right to maintain their wellbeing

• A philosophy of Kaitiakitanga to preserve & to protect our people.
• Whānau are in charge of their own wellbeing.
• Kaupapa Māori should be the Mainstream.
• A Whole of System change is needed to ensure we contribute to flourishing individuals, whānau & communities.
• The obligations are to the people. Our answers are here in Aotearoa, to ensure the legacy of our tipuna are passed down to our next generations.

#MANA BEATZ  A Call to Action for Change!
Tui Ora

*We forge ahead beyond obstacles to ensure best services possible to our people*

- Twenty year history of providing solutions for whānau, hapu & Iwi.
- There is a need for better resourcing, contracting and reporting methods that value the mana of Māori providers & holistic services provided to whānau.
- Kaimahi need to be resilient & innovative to navigate barriers and those provoked by mainstream constructs.
- Time spent with whānau, practicing with aroha and manaakitanga, makes the world of difference to whānau.
Innovative programmes are driven by whānau.

Mainstream services have undermined Māori. In spite of them, Māori are successful because whānau Māori tell us what they want, and that’s what we deliver!

We need a Māori Commissioning Body & Māori Auditing Body.

Māori need to manage all funding & contracts relevant to Māori.

After 170 years under the Coloniser- we should have our own Māori Governing Body, alike Sámi people (indigenous people of Norway / Sweden) their decisions occur in their parliament, with funds & contracts determined by their own for their own.
Sadly there is a continual depletion of resource by mainstream funders yet there is an increase in community needs (82% have complex health & social issues and increasing addiction & mental health issues).

Geographical distance to specialist services can be inhibitive (e.g. 6 hour return drive to nearest Pain Management Clinic). We need local solutions for local problems.

The reduction of mental health & addiction services locally will have a dire impact as we see the sad regional reality of poor employment, education & housing opportunities.

We need to be building local community capacity not stripping it away.
South of the Waitaki Awa

We are tired of competing with each other for scraps and hand me downs from ungenerous funders and treaty partners. Funders pitting us against one another who will do more for less money. Tired of being treated like we are ripping off Pakeha New Zealand - mis-using tax payers money and getting hand-outs.

South of the Waitaki we are mostly left out of the national conversations that effect who we are & what we do, we do get to hear about it later….. and our rights to relevant culturally competent services is disgraceful. Consider this:

1. Eliminate waiting lists! No one should have to wait months to get the help they need now!

2. Addiction is a health issue not a criminal justice issue, when someone in our whānau gets a drug conviction it will impact negatively on the whole of their life – stigma, employment, travel. Stop punishing people who have drug issues, they already feel bad! – they need help, support, compassion and treatment not a criminal conviction or another term in jail.

3. Build better accountability measures for reducing inequalities. Have safe spaces and services where wahine can get help, support and treatment. (how safe are mixed wards really?)

4. It is time for change – lets do this and don’t forget our providers and whānau south of the Waitaki awa.
E whakapono ana matou o te oranga tonutanga o te tangata ngā te whānau te kaha, te wana, te wehi, e tu kaha matou.

• Pro-equity & Anti-racist System: What changes might we see?
  
• A system that:
  
  • Challenges institutional racism
  • Builds partnerships with Māori
  • Promotes indigenous leadership
  • Demands systematic monitoring & assessment of equity with quality data
  • Requires equity-focused quality improvement with consequences for lack of progress
  • Changes the workforce to promote equity
  • Improves accessibility to healthcare and education
Te Puna Hauora Ki Uta Ki Tai (Bay of Plenty)

- Employ Māori representative of their communities to join mental health teams knowledgeable in whakapapa, and whānau to help whānau
- Improve mental health content in undergraduate training programmes to ensure workforces well prepared to work in the mental health & addiction sector upon graduation
- Cultural qualification for all staff working with Māori – if you don’t have this qualification then you shouldn’t be working with Māori
- Increase opportunities to grow our own, there are not enough jobs for our own Māori graduates
- Increase fiscal opportunities to employ healers, tohunga and gain access to therapeutic remedies
- Increase flexibility of contracts to be better outcome based to suit Māori
• Addiction has major health & societal impacts. You are not just dealing with addiction issues.
• Substances are a colonizing tool in Māori communities.
• Underfunded contracts challenge Māori providers to adequately address high, complex needs & meet the expectations of Māori.
• Easy to mistrust funders intentions with continual changes to contracts & pre-agreed principles of relationship.
• Funding has to be unbundled from all Ministries to make a difference to Māori.
• We need a broader Māori workforce, it cannot be all about being academically prepared.
Te Runanga o Ngāti Whatua
(He Ha Oranga)

A responsibility to our Iwi
• Double Urban Shift of Māori returning home from city with various issues (no housing, unemployment)
• Large % of whānau impacted by addiction & mental health issues.
• Little access to addiction treatment / medical detox options.
• Access to services are a problem.
• Rurality requires the need to be innovative and available as there are no services in many communities
• Working in our community, means being confronted with hard issues but locally led solutions show great hope!
• # He Waka Eke Noa: The Road to Recovery
https://www.youtube.com/watch?v=8xA0HHGJ22s
Kāhui Tū Kaha

A Mainstream service deliberately partnered with Iwi to counter the issues for Māori.

• Tikanga Māori underpins best practice with Māori. Under korowai of Iwi we can ensure best practice and outcomes.

• Māori need to stop being dependent on a mainstream system that is not working.

• We want a workforce that are identified by our people as the experts, whānau, hapu and Iwi.

• Money is not in the places needed to enable resources for our people.

He kākano āhau. I ruia mai i Rangiātea. And I can never be lost. I am a seed, born of greatness. Descended from a line of chiefs, He kākano āhau.
We should reset to become a Kaupapa Māori Wellbeing Service

- Operational mainstream model focus on money saving impedes resources needed in Māori communities.
- Much practitioner time spent in front of computer should be reversed to time spent with whānau.
- Māori workforces are not valued.
- We need Māori Crises Response Team(s) & Increased Rangatahi Resource in communities.

Three kete we wish for;
- Strengthen Cultural & Clinical Framework
- Position Kaiwhakahaere in Senior Leadership tier
- National Māori Auditing Body.
Te Rōpū Whitiora: Northland DHB

- Whānau Māori should be the voice of Kaupapa Māori services & determining their solutions.
- Māori skilled in Te Ao Māori need to be in decision making places.
- Kaupapa Māori mental health service would be better enhanced with a regional direction rather than separated by locality.
- Limited capacity to meet all Māori needs in the community due to resource availability. Meaning Māori may have to opt out of Kaupapa services for mainstream.
- Valid issues regarding future planning, preparation, recruitment & retention of a sustainable & local Māori workforce.
- Wavering availability of resource means constant service & community changes.
- Poor access to addiction treatment services, requires referral out of area, still difficult to access.
• Integrated & comprehensive Kaupapa Māori service. Taurawhiri & Kaumātua significant across teams.

• Clash with western mainstream constructs & colleagues are common due to cultural differences, and little understanding of Māori practices.

• Whānau thrive on the cultural elements of practice & service delivery model.

• There is not a strong emphasis on reducing inequities.

• Kaupapa services are generally under funded and the access to non clinical therapeutic aspects is not easy.
Te Puna Waiora
Counties Manukau DHB

• Continual & strong Māori Leadership is imperative in mainstream services.

• Mana whenua & Māori key part of recent plans to rebuild acute mental health services.

• Non Māori willing to utilise Māori knowledge to inform changes needed for Māori, though need to ensure mana on ngā mea Māori remains with Māori.

• Increasing fear amongst Māori providers when non Māori services propose to deliver Kaupapa Māori programmes or services.

• Concerns regarding psychiatric medications on Māori.

• We need Kaupapa Māori researchers & research to evidence the impact of treatment approaches on Māori.

• We need ‘wairua’ practitioners.
Better solutions are needed for our community rather than relying on poor delivery of care by mainstream mental health services.

There should be equal rights and access to effective services

Early intervention for tamariki and young people informed by our principles & models.

Iwi role is to promote good health & wellbeing for our people.

Treaty of Waitangi partnership, relationship is much more than a contract for services.
Te Rarawa

The Greatest Iwi is Te Iwi Māori

- Iwi leadership extensive experience & knowledge from various Govt & Iwi sectors & active participation in Marae & Community.

- Te Rūnanga: Important Gateway to Iwi via Marae (23) 17,000 members.

- Iwi institution comes from network of relationships, based on whakapapa model, beginning from Atua Māori.

- Impacts of Christianity & Colonisation upon generations of Māori whānau & communities quality of life. It’s a pressure pot & source of trauma.

- We are in an environment it is near impossible for Māori to achieve success.

- Iwi has best philosophical background, access to well skilled membership, structures more than able to provide mental health & addiction solutions.

- Mental Health & Addiction Services harm our people with high containment & psychiatric medication.

**Te Hiku Accord** is one example of a strategic agreement between the Iwi and Crown to improve social outcomes for whānau and communities. This will shift from historical ‘service delivery’ approaches that have struggled to address the negative social conditions in rohe o Te Hiku o te Ika.
Waikato Tainui
Kia Tupu, Kia Hua, Kia Puāwai

- We have a Tribal Structure poised and ready to self determine for our people.
- Principle of manaaki drives the importance of Waikato Tainui to care for our own.
- We are an Iwi who will deliver on the dreams of our Tūpuna of yesteryear for tomorrow.
- Our role is to provide a better platform for our tamariki & mokopuna than we inherited.
- We will not let the Crown abdicate its responsibilities under the Treaty of Waitangi. Under Article 3 Crown resources would be best served if Iwi were given the resources & were able to come up with best practice solutions, informed by our traditions, tikanga & our identity alongside our skilled people.

Waikato-Tainui are ready to partner with the Crown to commission NGO’s to better develop remedies and programmes based on best practice and tikanga.
Ngāi Tahu

Mō tātou, ā, mō kā uri ā muri ake nei

• A future focused Iwi with the largest rohe nationally.
• Positive & thriving connection to culture, identity, language & place are important to whānau wellbeing.
• A strong Iwi means a strong whānau.
• Equity is a minimum requirement of Health and Social Service providers, Excellence is our expectation.
• There is a need to address generations of colonisation & broader determinants that effect local communities. To do so, we need local solutions, and a local connected workforce.
• We are ready to lead, to collaborate for positive, generational impact so that our whānau are able to realise Tino Rakatirataka.
Lynette Stewart
Ki A Ora Ngāti Wai

• Heart break cannot be erased by the losses experienced by Māori whānau.
• Māori health policies are not the issue – it is the absence of goodwill to implement these properly.
• Master – Servant passive aggressive relationships of mainstream funders must stop.
• We need to remove attitudinal issues & to get to the heart of the matter of why our people are suffering so many problems.
• We need to encourage healing and hope within our Māori communities.

He aha te mea nui o te ao?
What is the most important thing in the world?
He tangata, he tangata, he tangata
It is the people, it is the people, it is the people
Our whānau should not have to contort themselves to fit the Mental Health system

We need a high performing system that enables the accelerated achievement of Pae Ora.

We must not let the powerful clinical narrative get in the way of good human behaviour or Māori health outcome improvement (e.g., our Whānau leading their own pathways to Pae Ora).

- Transform to an Oranga system based on Te Tiriti o Waitangi & underpinned by 10 Power Principles:
  - uphold indigenous rights and te Tiriti o Waitangi
  - action deliberate national policy to drive toward pae ora
  - performance manage with intent
  - embrace a tangata whenua worldview of oranga
  - value tangata whenua intelligence
  - transform to a model of caring that is co-designed with whānau
  - develop our tangata whenua and non-Māori oranga workforce
  - love our whānau
  - whakamana our whānau
  - expose the world to te ao Māori & Māori intelligence
• Drawing upon the legacies of our Tūpuna from the history of our Māori leaders & the foundation set by the first Māori mental health unit.

• Largest Kaupapa Māori provider delivering specialist mental health & addiction services.

• Committed to ensuring effective & comprehensive services for whānau.

• Providing a place of healing sets the benchmark for acute care options for Māori without restrictions.

• Building a local workforce committed to kaupapa Māori & quality of care.

• More is still needed to address the issues of our people.
• Layers of historical and contemporary trauma are largely ignored in mainstream mental health.

• Impacts of loss in Māori regions need to be better understood to identify the consequences to Māori mental health & wellbeing.

• Ill equipped mental health services means whānau resort to calling Police for help.

• Persistent levels of racism effect Māori.

• Whānau need support.

• Build the Māori mental health workforce.

• Adequately resource Whānau Ora & Rongoa providers.

• We need Māori (historically informed) Trauma Informed Care.
• Māori Clinical Psychologists are an increasing Māori therapeutic workforce with added depth of academic and research backgrounds.
• Walking two worlds whilst challenging status quo.
• Navigating the complicated systems to ensure access to care for Māori.
• Trauma, mental health & addiction problems require Māori informed & whānau centred approaches.
• Systemic change is needed to make a difference to Māori wellbeing & potential.
• As Māori people, we cannot deny the injustices caused by the Crown as the Treaty partner. Māori will continually elevate their kōrero & their opinions about the histories of alienation and the continual oppressive nature of western mainstream systems.

• The korero of Māori is culturally legitimate & will genuinely reflect the hard yet rich spectrum of Māori communities.

• The continued blindness to racism & cruelties will only serve the oppressive system within which Māori live.

• Māori are maximally concerned about the wellbeing of their people & much of their work relates to this concern.

• Māori will take responsibility for their people, and will insist on standing up and saying what needs to be said and take action.

• A future for Māori does not mean absorbing the dominant western perspective.

• The cultural forces more than any other connector is the vehicle important to Māori wellbeing - to transmit language, identity, connectedness, values, whānau ora from one generation to another.

Mo to tatou lwi
Etahi Raru

Some of the problems hindering Māori

- Continual impacts of colonisation & broader determinants that effect Māori.
- Ongoing alienation of Māori due to mainstream policies e.g. separating Māori from their whānau & their culture.
- Persistent Racism & Discrimination toward Māori ++
- Over use of restrictive practices by western mainstream mental health services upon Māori.
- Minimal acute mental health treatment options without restrictions.
- Limited Kaupapa Māori addiction treatment options.
- Western mainstream programmes brought into Māori communities espoused to help yet continue to separate Māori from culture, connectedness, wairua, whānau, place and Māori models of practice.
- Western Science & non Māori evaluation mooted as the only evidence base or way to affirm validity or credibility of programmes of value to Māori.
- Funding & Contractual Methods, Mechanisms & Approaches inhibitive of Māori holistic perspectives, approaches & whānau.
- Decision making power & oppressive relationships inside mainstream services whom influence Kaupapa Māori provider investment.
- Tolerance of a mediocre health care system & little accountability of mainstream services to Māori as the Treaty partner.
- Late interventions & delayed support by health services when whānau seek and need help.
- Limited resources & short term programmes in Māori communities.
- Psychiatric medication causing significant negative implications to Māori.
- Minimal Māori Workforce: in number, location, across service levels & in leadership roles.
- Limited ‘wairua’ practitioners and places for healing conducive to Māori.
- Limited support options for whānau in the community.
Some of the solutions for empowering Māori

- Government recognise the role of Iwi, who have significant roles in their regions in regard to the wellbeing of their members.

- Introduce equity based funding model & outcomes approach comprehensive enough to address Māori holistic needs, as individuals, whānau & Iwi – that centres upon whānau.

- The Crown to partner with Iwi to commission NGO’s to better develop remedies and programmes based on best practice and tikanga.

- Improve policy to ensure resource goes into Māori communities, followed by Māori centred accountability & monitoring mechanisms.

- Funding & Contract Mechanisms for Kaupapa Māori providers & solutions for Māori communities to be established outside of District Health Boards.

- Establish a National Māori Health Auditing Body.

- Establish a National Māori Health Commissioning Body (with Funding & Contracting responsibilities).

- Renew and increase funds in all Kaupapa Māori provider contracts.

- Provide flexible funding opportunities for Māori to respond to & provide additional supports to whānau in communities.

- Increase investment in the growth and development of Kaupapa Māori (mental health & addiction treatment) workforces.

- Increase & recognise Māori workforces steeped in Matauranga Māori.

- Increase Māori peer support workforce & their ability to enter places, services to access Māori using services & in community.

- Increase financial & resource investment to accelerate number & preparation of Māori Workforces. Ensure Māori are recruited & retained (in all areas where Māori inequalities are poor).

- Set targets to increase Māori in Leadership roles across mainstream and NGO providers.

- Increase long term programmes for Kaupapa Māori research to increase the Māori evidence base.

- Ensure Māori whānau have better access to non clinical activities such as mirimiri, rongoa, wairua practitioners, physical activity, respite and acute care options with out restrictions.

- Rural areas specifically require resources to ensure safe clinical and cultural care options. In addition to funds that enable innovative, locally based and locally led solutions to address mental health and addiction issues.

- Establish Ministerial portfolio for Māori Health; Māori mental health and addiction.

- Funding be unbundled from all Ministries to make a difference to Māori.

- Increase Kaupapa Māori addiction treatment options.

- Recognise te reo me ona tikanga to inform mandatory practice standards.

- Establish qualification & standard to affirm health practitioner is safe when working with Māori.

- Invest in Māori foc on mokopuna, tamariki in terms of youth development, enterprise and potential. If needed early intervention & support to be informed by Māori models and principles, and whānau centred practice.
Nga mihi aroha kia koutou nga tuakana ma

Tuhia ki te rangi
Tuhia ki te whenua
Tuhia ki te ngākau
Ko te mea nui
Ko te aroha
He tangata, he tangata, he tangata
Mauri Ora