

Te Kāhui Hauora o Te Taihū Iwi Māori Partnership Board

Te Whakamahere Hauora o Te Taihū Community Health Plan

September 2024

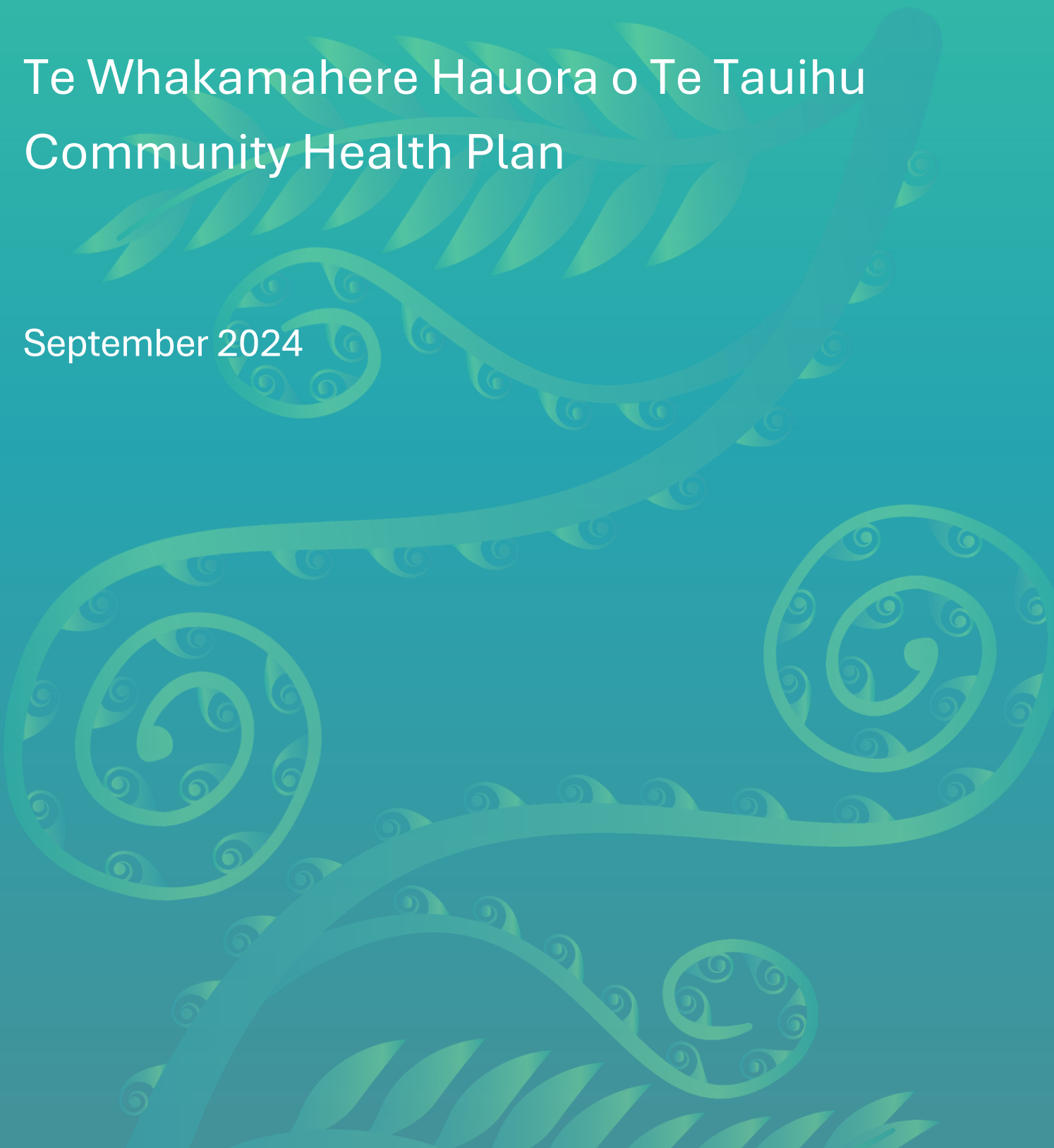


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Executive summary

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Our Community Health Plan (Te Whakamahere Hauora o Te Taihū) outlines our high-level intentions for Te Kāhui Hauora o Te Taihū for the next two to five years.

Rooted in the whakapapa and vision of Māori of Te Taihū, the plan harnesses this knowledge and connection to guide Te Kāhui Hauora towards achieving pae ora across Te Taihū.

The plan discusses our approach in gathering, analysing, and determining hauora priorities and outcomes as well as our methods for monitoring these priorities.

Our primary role is to understand the health needs and aspirations of the community, engage with various groups, and form partnerships with local providers and Health New Zealand to address these priorities. Through continuous monitoring and advocacy to Health New Zealand, we will support the delivery of priorities and desired outcomes.

Guided by a clear vision and our outcomes framework, our work focuses on the priorities of whānau.

The intent of this plan is to inform Health New Zealand about Te Kāhui Hauora's strategic direction and initial priorities for commissioning and monitoring. The key elements detailed provide clarity of our direction while outlining where support will be required. We intend to work in partnership with Health New Zealand to deliver on these priorities and reduce the equity gap for whānau Māori in Te Taihū.





Background of Te Kāhui Hauora o Te Taihū

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Background

Whakapapa of Te Kāhui Hauora o Te Taihū

Nestled in the heart of Te Taihū o Te Waka-a-Māui, *the prow of the demigod Māui's canoe* – lies a land rich in history, culture, and natural treasures. This northern tip of the South Island has long been a beacon for many iwi, each leaving an indelible mark on its fertile, mineral-laden soil. There are eight iwi within Te Taihū, each with distinct descendant lines to three waka:

Kurahaupō waka	Tainui waka	Tokomaru waka
Rangitāne, Ngāti Apa ki te Rā Tō, Ngāti Kuia	Ngāti Toa Rangatira, Ngāti Rārua, Ngāti Koata	Ngāti Tama, Te Ātiawa o Te Waka- a-Māui

We have a long and shared history together. Today, we cooperate in several areas to support our people, protect the taiao, and grow our collective and respective interests in Te Taihū so that our people can prosper. The IMPB represents yet another example of mana whenua coming together for a single cause – the hauora of our whānau.

The majority of whānau in Te Taihū are mātāwaka or descend from iwi outside of the rohe. This means that our IMPB has a powerful obligation to represent the voice of both mana whenua and mātāwaka who call our rohe home. This requires effort to engage across all communities, to introduce new and innovative ways to reach all whānau, and to build trusting relationships with community leaders and organisations to support the work that we do.



Figure 2

Te Kāhui Hauora o Te Taihū (Te Kāhui Hauora) continues this legacy of collaboration, purpose, and commitment to the whānau, whenua and whakapapa of Te Taihū.

Our formation and foundation

Te Kāhui Hauora was formed under the Pae Ora (Healthy Futures) Act (2022) and operates in partnership with Health New Zealand. In essence, our purpose is to support and enable the health system to achieve hauora Māori outcomes in Te Taihū. We do this by engaging with whānau, communities and organisations across Te Taihū and monitoring quantitative data provided by Health New Zealand. This will ensure that the services in our community are more responsive and accountable to the whānau they serve.

Our foundations are:

1. Iwi and Māori representation and oversight of what we do

We are governed by the eight iwi of Te Taihū, alongside two mātāwaka representatives and two co-chairs. Our governors ensure that we act in the best interests of all whānau Māori in our rohe.

2. Empowering the voice of our community

Our primary role is to understand the hauora needs and aspirations of our community and ensure that their voice is central in decision-making about health services in Te Taihū. Our strategic plan empowers Tino Rangatiratana, the right for Māori of Te Taihū to self-determine health priority and shape the local health system. By using a "by Māori for Māori" perspective we will lift up all people within our community. We will actively engage with communities and priority groups across Te Taihū and form partnerships with organisations that share our vision and mission.

3. A Te Taihū collective vision and hauora outcomes framework

A clear vision and well-defined hauora outcomes will guide our work plan, ensuring resources are targeted on the issues that matter most to our community. We will collaborate with the health system and beyond to ensure these outcomes are achieved.

4. Holding the system accountable

One of our core functions is to translate the hauora outcomes and priorities of our community into measurable indicators so we can hold the system accountable for achieving these outcomes.

Vision

Our whānau, whenua and whakapapa are flourishing

Our vision speaks of safe and nurturing whānau, a nourishing environment around us, and a connection to generations past and present for our wellbeing. On another level, it speaks to the importance of connections that are unique to us as Māori, and the power and privilege that come with these connections that must be nurtured in us, our whānau and our hāpori.

Mission:

Kia whakamana, kia manaaki, kia aroha

To empower, to support, and to love

We envisage a whānau-centered and integrated wellbeing system in Te Taihū that is committed to and accountable for achieving hauora outcomes, and well-resourced to achieve these outcomes for all whānau.

Our journey so far

Since we became operational, in late 2023, we have been laying strong foundations for Te Kāhui Hauora. This includes appointing stakeholder representatives to governance positions for all iwi and mātāwaka roles, opening our office in Whakatū, building confidence to lead our approach, and creating operational documents, policies and procedures that will support our journey ahead.

Key achievements



Working to take a system approach to how whānau voice and community voice is collected.



A collaboration with Nelson Bays PHO, Health New Zealand, and Ngāti Koata to improve general practice and oral health services.



Leading a health response plan with Health New Zealand following gaps identified in recent emergency events.



Providing guidance on Rongoā Māori services, piloting a monitoring framework to better address Māori health priorities.



Supporting a joint hui to discuss the structure and aspirations of meso level organisations, ensuring that the needs and aspirations of whānau, hapū, iwi and hāpori (community) are central to health planning and delivery.



Development of the six-month work plan, accountability, and monitoring framework to operationalise our entity.



Hosted the first hauora Māori hui with 58 participants across primary care, hauora providers, patient advocates, iwi, marae, local council, and Health New Zealand.



The soft launch of the Te Kāhui Hauora IMPB website.



Initiated and supported the project to shift specialist services to Wairau including renal dialysis and oncology services.

Our learnings

Despite only being operational for under a year, clear themes through engagement with key stakeholders, providers and whānau in our rohe are emerging. These themes are summarised below.

Hauora and mainstream definition of health are two different things

The Pae Ora (Healthy Futures) Act 2022 mentioned ‘hauora outcomes’ which are important to whānau and has generated some discussion. Hauora, as understood within a Māori worldview, encompasses a holistic sense of wellbeing that extends beyond just mental health or physical health. Hauora is contextualised in a socio-economic framework and encompasses Taha Wairua (spiritual and cultural), Taha Whānau (family), Taha Tinana (physical), Taha Hinengaro (emotional) (Durrie 1984).

Overwhelmingly, whānau have expressed that true wellbeing can only be achieved when all aspects of their hauora are recognised and addressed. This means that health services must be culturally responsive, acknowledging the importance of cultural identity, spirituality, belonging, and community connections in addition to physical and mental health.

Mātauranga Māori

Mātauranga Māori (Māori knowledge and worldview originating from ancestors), which encompasses Māori traditional and contemporary knowledge, wisdom, and healing practices, is deeply valued by whānau as a vital component of their wellbeing in Te Taihū. There is a theme in Te Taihū to see this knowledge integrated more fully into the local health system, recognising that it offers a unique approach to healing that complements modern medical practices.

Whānau want to see a health system that honors and upholds mātauranga Māori as a legitimate and valuable source of knowledge. They see this as a crucial step toward achieving true hauora, where their cultural identity is not just acknowledged but celebrated as an integral part of their health and wellbeing.

As an IMPB, we have an important role in capturing our mātauranga in Te Taihū and presenting it to the system in ways that support its valued and treasured integration into system design, service development, and service procurement. For example, we will prioritise the use and integration of rongoā Māori across Te Taihū as a complimentary therapeutic wellbeing option for whānau.

The power of iwi to reach and engage vulnerable whānau

In Te Taihū, we saw during the COVID-19 pandemic and severe weather events. These events saw iwi take crucial steps to reach whānau and mobilise community resources and leaders quickly. Iwi have a unique and powerful ability to connect with and engage vulnerable whānau. Whānau often feel more comfortable and trusting when engaging with iwi-led initiatives, knowing that their cultural values and perspectives will be respected and upheld, and many also express a sense of ownership over initiatives and entities led by their iwi.

Collective approach

The collective approach, grounded in the principles of Kotahitanga (unity) and Whanaungatanga (relationships), is essential in achieving meaningful and lasting outcomes for whānau. Whānau have expressed a strong desire for services that are not siloed but instead work collaboratively across different sectors and organisations. This means breaking down barriers between health, education, housing, and social services to provide a more integrated wellbeing system in Te Taihū.

By working together, we can pool resources, knowledge, and expertise to address the complex and interrelated wellbeing challenges that whānau face. This collective approach not only enhances efficiencies, the effectiveness of individual services but also strengthens the social fabric of communities in Te Taihū, fostering a sense of unity and shared purpose. Whānau want to see a system where

providers collaborate, rather than compete, ensuring that their needs are the priority, and met in a coordinated and seamless manner.

Whānau want and need transformation

Whānau are not just seeking incremental improvements; they are calling for transformative change. This transformation is about more than just better access to services - it is about creating a system that truly reflects their values, needs and aspirations. Whānau want to be empowered to take control of their own wellbeing, with services that support them.

This transformative change involves shifting from a deficit-based model, where whānau are seen as problems to be fixed, to a strengths-based model that recognises and builds on the inherent mana and potential within every whānau. Whānau are asking for services that not only address immediate needs but also support them in achieving long-term goals, such as culturally affirming, economic independence, and intergenerational wellbeing.





Our mahi

Our mahi

This section will provide an overview of what we currently have in place to undertake our mahi, and how this will support activity over the short and medium term. Included here is also our future direction and what hauora outcomes we will strive to achieve.

Our hauora outcomes framework

The Outcomes Framework below, was developed through collating and defining the collective vision, mission, and outcomes of the iwi of Te Taihū. The framework guides our decision making, by ensuring that priorities put forward to the system, align to the framework and are therefore reflective of the voice of all iwi and intern, whānau.



Our hauora priorities

Our hauora priorities are shaped by our engagement with whānau and the wider community, informed by comprehensive health data, discussions with key stakeholders, including iwi and mātāwaka leaders represented on our Board. These priorities highlight the key areas of wellbeing that will command our focus over the next two to five years. Each priority has been carefully selected based on either representing a major health disparity in our community or its potential to significantly improve a disparity.

To ensure these priorities are effectively addressed, they will be integrated into our monitoring and accountability frameworks (See appendices for these frameworks). This integration will enhance the visibility of these critical issues, secure stakeholder commitment to positively transform each priority, and enable us to co-design solutions and corrective actions to improve outcomes in these areas.

Clinical Priorities

- 1: Mental Health and wellbeing
- 2: Cancer services
- 3: Access to high quality care and experiences for whānau
- 4: Workforce development and capability

Community Priorities

- 1: Cultural connection
- 2: Rongoā services
- 3: Health Literacy

Please see appendix 3 for detailed information of each priority area including why it is important (current data/inequity and what whānau have said), what success will look like, who should be involved and alignment to national priorities.



Our actions and future direction

Our actions and future direction

Te Kāhui Hauora will focus on three core functions, this is provided in the table below, along with our responsible teams, and their actions/responsibilities.

Core function	Te Kāhui Hauora	Actions
Whānau Voice Pae Ora (Healthy Futures) Act 2022, 30, (1) (a) to engage with whānau and hapū about local health needs and communicate the results and insights from that engagement to Health New Zealand. (f) to report on the hauora Māori activities of Health New Zealand to Māori within the area covered by the iwi-Māori partnership board.	Engagement and Communications Group <i>Goal:</i> The voice of whānau Māori is present in all decision-making forums across the system.	<i>Establish – immediate actions</i> <ul style="list-style-type: none"> Establish regular stakeholder engagement hui and processes throughout Te Taihū. Identify key stakeholder groups and priority populations. Align with existing iwi engagement across the rohe. Establish a Whānau Voice Advisory Group of community leaders to access, protect and strengthen whānau voice in the system. Establish an online and physical presence where whānau can engage directly with us. <i>Nurture – medium term actions</i> <ul style="list-style-type: none"> Develop a Whaikaha whānau voice forum. Establish a hauora provider and practitioners forum. Create and implement hauora Māori surveys for the entire local health system to gather whānau experiences of care. Facilitate a co-design forum to support service improvements across Health New Zealand delivered and funded services. Include a whānau voice representative roles on the Te Kāhui Hauora board. Produce 'Whānau Voice' reports for the system and embed findings from these reports. Participate in local hui and events as opportunities to engage whānau. <i>Transform- long-term actions</i> <ul style="list-style-type: none"> Lead transformational actions needed for hauora Māori outcomes.

Core function	Te Kāhui Hauora	Actions
<p>Strategic Commissioning and Service Design</p> <p>Pae Ora (Healthy Futures) Act 2022, 30, (1)</p> <p>(c) to work with Health New Zealand in developing priorities for improving hauora Māori.</p> <p>(e) to engage with Health New Zealand and support its stewardship of hauora Māori and its priorities for kaupapa Māori investment and innovation.</p>	<p>Strategy and Planning Group</p> <p><i>Goal:</i></p> <p>The local system and services reflect the hauora needs and aspirations of whānau in Te Taihū.</p>	<p><i>Establish – immediate actions</i></p> <ul style="list-style-type: none"> • Establish internal commissioning capability. • Create a shared strategic commissioning approach with Health New Zealand. • Establish relationships and partnership with providers and funders of local services in Te Taihū. • Create a Te Taihū outcomes framework. • Support and input into the development of local health and wellbeing planning documents. • Establish partnerships with ministries, relevant to hauora Māori, outside of the health sector. <p><i>Nurture – medium term actions</i></p> <ul style="list-style-type: none"> • Create a commissioners’ forum to undertake regular planning and system design workshops. • Work with Health New Zealand to have visibility of unmet need in Te Taihū. • Determine (through data/information and whānau voice) and release annual ‘commissioning priorities’ for improving hauora Māori. • Support the procurement of hauora Māori solutions in Te Taihū. • Invest in research and service innovations to test new ideas and delivery methods. • Create new commissioning approaches based on social return on investment, long-term funding, and translational relationships with providers/practitioners. <p><i>Transform- long-term actions</i></p> <ul style="list-style-type: none"> • Increase funding for and availability of hauora Māori solutions in Te Taihū. • Ensure all delivered and funded services by Health New Zealand contribute to achieving hauora Māori outcomes. • Support the creation of a hauora system of care that is whānau-centered and integrated.

Core function	Te Kāhui Hauora	Actions
<p>Monitoring and Accountability</p> <p>Pae Ora (Healthy Futures) Act 2022, 30, (1)</p> <p>(b) to evaluate the current state of hauora Māori in the relevant locality for the purpose of determining priorities for improving hauora Māori.</p> <p>(d) to monitor the performance of the health sector in a relevant locality.</p>	<p>Monitoring and Improvement Group</p> <p><i>Goal:</i></p> <p>The system is achieving hauora outcomes for Māori.</p>	<p><i>Establish – immediate actions</i></p> <ul style="list-style-type: none"> • Establish and implement our monitoring and improvement process. • Establish a monitoring oversight group. • Create relevant measures and indicators aligned with our hauora priorities and outcomes. • Confirm data agreements and access with Health New Zealand and other government agencies to carryout monitoring activity. <p><i>Nurture – medium term actions</i></p> <ul style="list-style-type: none"> • Identify and report areas of concern identified through monitoring. • Work with Health New Zealand and wider IMPB teams to identify solutions to issues being identified. • Work with Health New Zealand to analyse data so it can be presented easily to our stakeholders and communities. • Support the regular production of hauora Māori performance reports for Te Taihū in partnership with Health New Zealand. • Work across the system to embed hauora Māori indicators including confirming sources for data. • Support service improvement forums and workshops. • Undertake service deep dives to understand why inequities are occurring and recommend improvements. <p><i>Transform- long-term actions</i></p> <ul style="list-style-type: none"> • Create a hauora Māori dashboard for Te Taihū that is available to the public. • Ensure hauora Māori outcomes in Te Taihū are visible across the health and wider system.



Support from Health New Zealand

Support from Health New Zealand

We intend to work in partnership with Health New Zealand

Our partnership with Health New Zealand will be critical for the success of our work programme. In summary this support includes:

1. Commitment to hauora outcomes for Te Taihū
2. To address community priorities
3. To monitor, deep dive and evaluate priority areas
4. Access to data and support to analyse data
5. Review of public documents that inform our stakeholders about the work we are doing
6. To build relationships with other sectors relevant to hauora Māori outcomes.

The role of Te Kāhui Hauora is to engage with whānau, hapū, iwi, communities, and organisations across Te Taihū to gather their voices to help us inform how local services are commissioned, monitored, and managed. This will ensure that the services in our community are more responsive and accountable to the whānau they serve. Their collective voice will determine the long-term outcomes and yearly priorities we set. We require a commitment from Health New Zealand to embed these outcomes into their planning and forecasting so that collectively we can focus on achieving these outcomes.

Our role is to work with whānau and community leaders to co-design solutions and improvements needed in these priority areas and support their implementation across the services delivered and funded by Health New Zealand. For example, this may require re-commissioning services, re-designing services, quality improvement action, and commissioning new and innovative hauora solutions that are needed by our communities.

We will then work with Health New Zealand to monitor how these improvements are working and evaluate/deep dive into services or solutions to understand how improvements can be made. Critical to this will be data sharing agreements so that we can access data as quickly as possible to help support our own analysis and priority setting. Data and information from services delivered and funded by Health New Zealand should be made available upon request by Te Kāhui Hauora. In some instances, analysis would be best carried out by Health New Zealand.

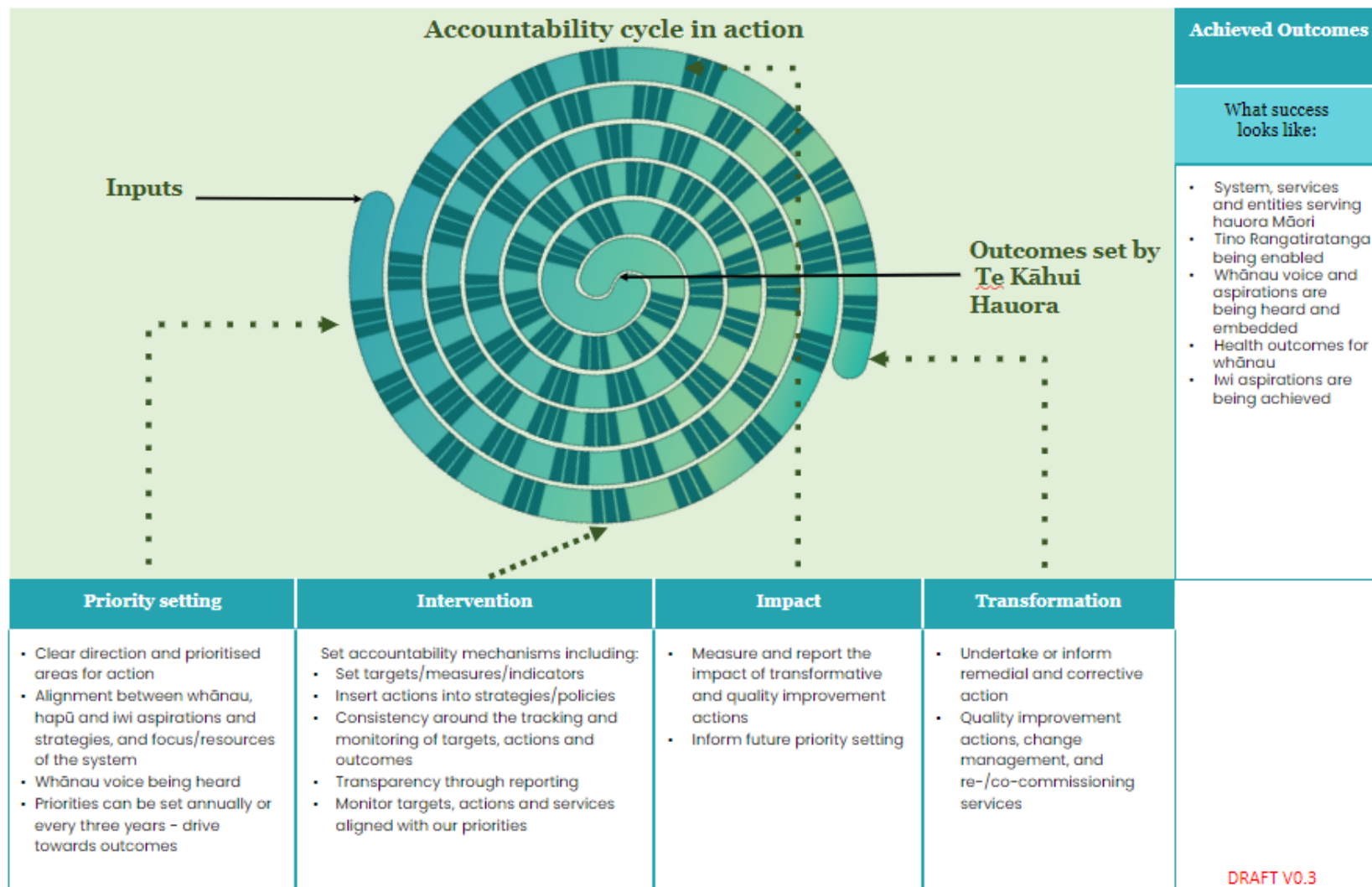
We expect to provide public reports to our stakeholders and communities so that they can see how well the system is performing for them. Health New Zealand would be required to review these documents prior to public release.

Our long-term vision is to move towards supporting the social determinants of health. When we are ready to step into this space, support from Health New Zealand to broker relationships with ministries supporting social determinants of health, e.g. housing, justice, and education, will be invaluable.



Appendix 1: Accountability Framework

Appendix 1: Accountability Framework





Appendix 2: Monitoring Framework

Appendix 2: Monitoring Framework

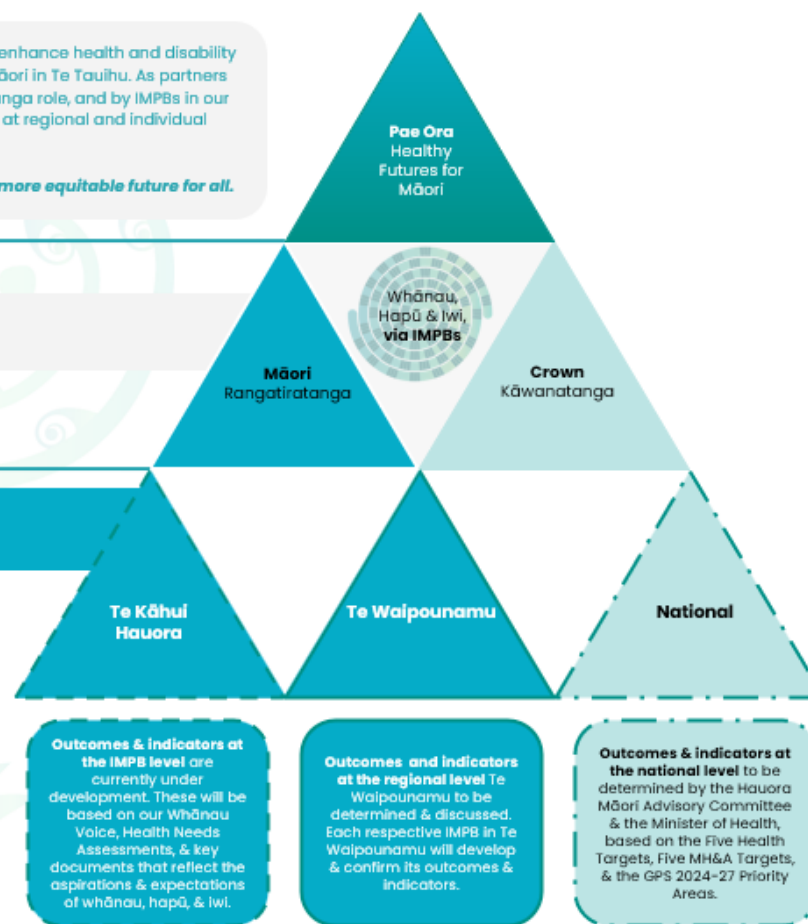
Our Monitoring Framework empowers Te Kāhui Hauora o Te Taihū Iwi Māori Partnership Board to enhance health and disability system performance by tracking progress towards shared outcomes and indicators for hauora Māori in Te Taihū. As partners under Te Tiriti o Waitangi, we propose that outcomes be determined by the Crown in its Kāwanatanga role, and by IMPBs in our legislated roles, guided by the voices of Whānau Māori. These outcomes and indicators will be set at regional and individual IMPB levels, focusing on priority areas, health targets, system enablers, and population groups.

Together, we will define transformative outcomes and indicators locally, ensuring a healthier, more equitable future for all.

Te Tiriti o Waitangi partnerships
Māori and Crown aspirations

Our monitoring role
Local and regional level

GPS 2024-27 Priority Areas	Access	Timeliness	Quality	Workforce	Infrastructure
Five Health Targets	Improved immunisation	Faster cancer treatment	Shorter stays in Emergency Departments.	Shorter wait times for first specialist assessment	Shorter wait times for elective treatment
Five Mental Health and Addiction (MH&A) Targets	Faster access to specialist MH&A services	Faster access to primary MH&A services	Shorter MH&A related stays in emergency departments	Increased MH&A workforce development	Strengthened focus on prevention and early intervention
System enablers	Funding, Data, Social Determinants, Cross-Government, Policy and Legislations, Taiao - Natural Environments				
Lifestages	Hapūtanga (<0) Pēpi (0-5) Tamariki (6-11) Rangatahi (12-19) Taiohi (20-30) Pakeke (31-59) Kaumātua (60+)				
Priority Populations	Disabled People	Pasifika Peoples	Women	Rainbow	Rural





Appendix 3: Hauora Priorities

Appendix 3: Hauora Priorities

Clinical priority 1: Mental health and wellbeing

<p>Why is this important? (current data/inequity)</p>	<p>Hauora hinengaro is a cornerstone of our hauora. Poor mental health is considered a long-term condition and whāiora can remain unwell for their entire lifetime affecting relationships, employment, education, and community involvement, further isolating them from their support networks and identity.</p> <p>According to a recent (2022) analysis by Te Aka Whai Ora, mental health conditions, including anxiety and depression, traumatic brain injury, alcohol use disorders, and schizophrenia are all among the top ten contributors to overall health loss for Māori. Mental disorders, addictions and mental distress definitions are outlined in the Health Status Report 2023.</p> <p>Locally, mental health is one of two clinical conditions that regularly featured as a priority amongst whānau. Whānau told us that mental health services are limited, with cost pressures on whānau. Other issues related to mental health include access to services, quality of services, a lack of specific counselling and psychologist support needed for rangatahi. It was voiced that kaupapa Māori mental health services are needed.</p> <p>Data from the NZHS 2017, 2022 shows 16% of Māori respondents (>15 years) in Te Taihū had a score indicating high or very high levels of psychological distress. This is disparagingly high compared to only 9% of non-Māori participants". Māori are 1.4 times more likely to be diagnosed with depression and 1.9 times more likely to be diagnosed with anxiety.</p> <p>Māori in Te Taihū are 2.18 times more likely to be hospitalised with mental disorder than non-Māori. This means Māori are present later when their condition is more severe. It also may be reflective of poor management of mental health conditions within the community. This data includes ED presentations >3hrs which might not eventuate into inpatient admission. However, this is a direct reflection on the performance of community mental health and preventative measures.</p> <p>Māori are 1.6 times more likely to be hospitalised due to intentional self-harm, averaging 48 people per year. Adding to this is a higher and growing national Māori suicide rate for Māori which is particularly concerning. Hospital admission data may reflect that there is a bias in the system to hospitalise Māori before other treatment pathways are explored. More data is needed to explore potential biases which lead to differential treatment in the mental health system. There is also growing national concern regarding the growing numbers of rangatahi Māori who report depressive symptoms (28% in 2029 versus 14% in 2012). Aotearoa New Zealand's suicide rate for adolescents aged 15 to 19 years was reported to be the highest of the 41 OECD/European Union Countries.</p> <p>What whānau have told us;</p>
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“If we don't change now, it'll never happen and the history of tūpuna have shown that”.

<p>What will success look like?</p>	<p>For Te Taihū:</p> <ol style="list-style-type: none"> 1. Focus on what enhances oranga hinengaro such as; cultural and community connections, strong whānau units, resilience, and support being easily accessible as and when required before the condition worsens. 2. Focus on a connection to culture as a protective factor for oranga hinengaro. 3. Equitable rates of mental health and addiction diagnoses. 4. Equitable and timely, access to treatments, medication, and therapies. 5. Greater options for community and culturally based oranga hinengaro care. 6. Equitable timely access to specialist support and treatments. 7. Improved whānau experiences and involvement in care and treatment. 8. Increased availability of Māori-led mental health and addiction solutions in all communities. 9. A focus on supporting hapū whānau and rangatahi, building resilience and wrapping support around our most vulnerable whānau. 10. A mental health and addiction workforce reflective of the local population. 11. A varied and multi-skilled mental health and addiction workforce. 12. A culturally safe and supportive mental health and addiction workforce, services, and system. 13. Whānau recognising the signs of becoming unwell and reaching out for support, early. 14. Decreased wait times for clinical support
<p>Who should be involved?</p>	<ul style="list-style-type: none"> • Iwi leaders. • Whānau with lived experience. • The Māori mental health and addiction workforce. • Health New Zealand delivered and funded specialist mental health and addiction services (local and national services). • Community leaders and advocates - including kura, schools, and local businesses.
<p>Strategic alignment</p>	<p>This priority has STRONG alignment with wider system strategies. Including the system's own mental health strategy and specifically:</p> <p>Hauora Māori Advisory Committee</p> <ul style="list-style-type: none"> • Rangatahi experience stronger mental health and resilience (e.g., timely access to mental health and addiction services). • Rangatahi are engaging in healthy behaviours and are surrounded by protective social factors (e.g., smoking prevalence). <p>Ministry of Health, Government Policy Statement 2024-27</p> <ul style="list-style-type: none"> • Clinical priority- poor mental health

	<p>Te Pae Tata Interim Health Plan</p> <ul style="list-style-type: none"> Oranga hinengaro has been identified as a priority in the Te Pae Tata interim health plan. <p>Te Kāhui Hauora Outcomes Framework</p> <ul style="list-style-type: none"> Oranga Tinana: Promotion of hauora
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Clinical priority 2: Cancer services

<p>Why is this important? (current data/inequity)</p>	<p>Cancer is a leading cause of illness and death for Māori, making up 25% of amenable mortality for wāhine and 10% for tāne nationally. Meaning, although preventable (with early detection and lifestyles changes), cancer is a major killer of Māori.</p> <p>In Te Taihupo, lung cancer is the leading cause of death for wāhine and the second for tāne. Data shows that Māori are less likely to participate preventative measures and screening services such as breast screening (66.1% Māori, 68% Non-Māori), Bowel screening (62.9% Māori, 68.7% non-Māori), and cervical screening (70.9% Māori, 77.3% non-Māori)."</p> <p>The rate of All Cancer Deaths in 2017-2021, by District Health Board (DHB) and Prioritised Ethnicity for Nelson-Marlborough are: 160.3 for Māori and 101.0 for European/other. Meaning, for all cancers Māori have a significantly higher mortality rate.</p> <p>In 2022, Te Aka Whai Ora identified a range of contributing factors such as; smoking, diet and activity, and poor access to preventive services and engagement with health services. They also identified broad health system actions that could be taken such as, timely diagnosis and appropriate treatment, and increased Māori control in cancer decision making and Māori.</p> <p>Whānau engagement echoed these wider issues. Citing a lack of access and timeliness to treatment as a real issue in Te Taihupo. Whānau spoke of needing to travel greater distances for specialist appointments and feeling culturally unsafe and unsupported by the system. One whānau spoke of their own ordeal and lack of treatment planning being whānau-centred, and instead being service centred. They felt disempowered by the system during an extremely harrowing time for them. These poor experiences and lack of support shared by whānau contribute further to local barriers and reinforce mistrust Māori already feel towards the system.</p> <p>This means that Māori present later with increased disease burden which impacts cancer survival.</p> <p>What whānau have told us;</p> <p><i>"I never want any other whānau to experience what we experienced."</i></p> <p><i>"They had been suffering for 6 months and had 7 doctor's visits, the doctors said no and wouldn't give pain relief".</i></p>
<p>What will success look like?</p>	<p>For Te Taihupo:</p> <ol style="list-style-type: none"> 1. A focus on prevention as well as promotion of hauora including smoking cessation, healthy kai and lifestyle, and regular screening of whānau. 2. Equitable rates of cancer diagnoses and survival rates.

	<ol style="list-style-type: none"> 3. Timely access to treatments including more community-based services and more specialist services in Te Taihū. 4. Timely access to medicine. 5. Equitable screening rates for all public health screening programmes for Māori – breast, cervical, lung and bowel. As well as other cancers including prostate. 6. Increase availability of culturally based and Māori led cancer support and navigation services designed which partner with whānau to and through their cancer treatment journey. 7. Improved whānau experiences and involvement in care and treatment for whānau, including treatment planning processes. 8. A Cancer Services workforce reflective of the local population. 9. A culturally safe and supportive cancer workforce, services, and system. 10. All screening ages for Māori are lowered to reflect higher prevalence and mortality across all cancers. 11. Pain clinic care that is culturally responsive.
Who should be involved?	<ul style="list-style-type: none"> • Iwi leaders. • Whānau with lived experience. • The Māori workforce in cancer services. • Health New Zealand oncology services and senior hospital leaders. • Primary care providers. • Cancer Society. • Screening services and public health units. • Community leaders and advocates - including kura, schools, and local businesses.
Strategic alignment	<p>This priority has STRONG alignment with wider system strategies. Specifically:</p> <p>Hauora Māori Advisory Committee</p> <ul style="list-style-type: none"> • Identification and treatment pathways for cancer are faster, timely, comprehensive, and effective (e.g., patients receiving cancer management within 31 days of decision to treatment). <p>Ministry of Health, Government Policy Statement 2024-27</p> <ul style="list-style-type: none"> • Clinical priority- cancer. <p>Te Kāhui Hauora Outcomes Framework</p> <ul style="list-style-type: none"> • Oranga Tinana: Promotion of hauora.

Clinical priority 3: Access to high quality care and experiences for whānau

<p>Why is this important? (current data/inequity)</p>	<p>Poor access to high-quality care and experience for whānau represents a fundamental health system issue, rather than a specific condition or problem. As a foundational priority, it influences enrolment and engagement with care services, access to care, the building of trust, and the establishment of long-term therapeutic relationships. Addressing this issue can lead to necessary improvements in cancer and long-term condition management, mental health, addictions, workforce development, and investment in higher-quality services. Quality in this priority encompasses both clinical and cultural aspects, each playing a crucial role in building trust throughout the journey of care.</p> <p>Improvements in Māori health require a much greater focus on understanding the health, social and cultural needs of communities, addressing these needs in a more connected way. There are many indicators and surveys that exist showing how poorly Māori receive care. For example, the Health Quality and Safety Commission (HQSC) confirmed that 27% of Māori (who responded to the primary care survey administered by their practice) reported a time in the last 12 months when they wanted health care from a GP or nurse but couldn't get it. Reasons include timeliness, cost, and quality of the interaction.</p> <p>Whānau engagement exposed many instances of whānau feeling unsupported, culturally unsafe, and biased behaviours displayed by health practitioners in both primary and secondary care settings. This contributed to a lack of trust and willingness to engage. We know that to prevent ill-health, whānau must be proactive about their care and take a leading role in attending and planning their care.</p> <p>This is extremely concerning for Te Kāhui Hauora because several programmes exist to improve care experiences and already monitor individual interactions. And poor-quality care and experiences in Te Taihū further continue the cycle of poor health outcomes for our whānau and communities.</p> <p>Some indicators are:</p> <ul style="list-style-type: none"> • Māori in Te Taihū are more likely to miss specialist appointments. 5.8% of first specialist appointments missed and 12% for surgical appointments compared with 2.9% and 4% for non-Māori respectively. • Only 57.8% of Māori pēpi in Te Taihū are enrolled with a PHO at 3 months compared to 100% for non-Māori. • Only 83.3% of Māori in Te Taihū are enrolled with a GP compared with 95.7% of non-Māori. • Māori in Te Taihū are 1.8 times more likely to present with an ambulatory sensitive hospital admission (admissions that could have been prevented through primary care) than non-Māori.
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	<ul style="list-style-type: none"> Only 78.7% of Māori Tamariki are vaccinated by 2 years, compared to 88.1% for non-Māori. Asthma hospitalisation is 3.1 times higher for Māori tamariki and 2.9 times higher for adults than non-Māori. COPD hospitalisation 3.3 times higher for Māori adults. On average 4 premature deaths per year due to respiratory disease. Māori aged 25 years+ in Te Taihū are 1.8 times more likely than non-Māori to have diabetes. Patient surveys monitored by HQSC. <p>*(workforce is its own priority below)</p> <p>What whānau have told us;</p> <p><i>“Cohesive, collaborative, navigation services”</i></p> <p><i>“Needs to communicate better in a way whānau understand”</i></p>
What will success look like?	<p>For Te Taihū:</p> <ol style="list-style-type: none"> Improving the quality of existing services that engage a high proportion of Māori. All health care providers are culturally responsive to the Māori population. Health services who are not reaching the whole population, including Māori, have a portion of funding reallocated to Kaupapa Māori services. Increase the availability of locally available whānau centred and integrated services. Timely access to healthcare, medicine and devices (where appropriate). Improved experiences of care through existing (and potentially new) surveys for Māori locally. Whānau report higher trust and engagement in primary and secondary care services. Focus on increasing enrolment in primary care for pēpi and all whānau. Reduce Did Not Attend/Failed Engagements in secondary care. Improved long-term condition management and immunisation coverage (managed by primary care). Engage more Māori in service co-design, development, and management across the system.
Who should be involved?	<ul style="list-style-type: none"> Iwi leaders. Whānau with lived experience. Health New Zealand delivered and funded services. Primary health organisations. Community leaders and advocates.

<p>Strategic alignment</p>	<p>This priority has STRONG alignment with wider system strategies. Specifically:</p> <p>Hauora Māori Advisory Committee</p> <ul style="list-style-type: none"> • Māori are protected from communicable diseases across the life course (e.g., immunisation rates at 2 years). • Māmā and pēpi receive consistent quality care during pregnancy and into the early years (e.g., enrolment with a primary care provider in the first trimester of pregnancy). • Pakeke are accessing primary and community healthcare early, with positive outcomes and experiences relating to diabetes and cardiovascular disease (e.g., people with diabetes regularly receiving any hypoglycaemic medication in the relevant year). • Kaumātua are supported to live well through managing complex co-morbidities (e.g., rate of polypharmacy in over 65s). <p>Ministry of Health, Government Policy Statement 2024-27</p> <ul style="list-style-type: none"> • Quality – ensuring New Zealand’s health care and services are safe, easy to navigate, understandable and welcoming to users, and are continuously improving. <p>Te Kāhui Hauora Outcomes Framework</p> <ul style="list-style-type: none"> • Oranga whānau: Highest quality. • Oranga Kāinga: Healthy and sustaining environments.
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Clinical priority 4: Workforce development and capability

<p>Why is this important? (current data/inequity)</p>	<p>A strong, well connected, safe and engaged health workforce is a major enabler for hauora in Te Taihū. A workforce that reflects the local community (in terms of numbers, needs and values) is a bare necessity for any system to function equitably. However, in Te Taihū we are not here yet.</p> <p>Available data shows that Māori are a small portion of the total workforce, and an even smaller portion of service providers in the community. For example, locally Māori make up 4.4 FTE of the total 114.15 FTE Resident Medical Officer workforce, 1.8 FTE Senior Medical Offices of 132.84 FTE, and 34 FTE nurses of a total 674.03 FTE. This means that the availability of Māori practitioners is extremely low.</p> <p>Māori are 3.43 times more likely than non-Māori to experience unfair treatment by a health professional based on ethnicity. Cultural safety requires healthcare professionals and organisations to examine and address their own racism (e.g. biases), attitudes, assumptions, stereotypes, prejudices, structures, and characteristics that may affect the quality of care provided.</p> <p>Whānau spoke of the need for more Māori to be working in health. Whānau want a culturally safe workforce. Meaning a growth of the Māori workforce and cultural safety development for the non-Māori workforce to enhance care to whānau and affirm Māori culture.</p> <p>What whānau have told us;</p> <p><i>“Every day is a new start and I have to prepare every day to be by myself”</i></p> <p><i>“Increase Māori clinicians and iwi health workforce”</i></p> <p><i>“Need more Māori clinicians who better understand and can communicate with you”</i></p> <p><i>“Better connection to Māori community”</i></p> <p><i>“How hard it is to do right by people.”</i></p> <p>In 2022, Te Aka Whai Ora further confirmed that Māori continue to be under-represented in the health and disability workforce in almost all areas, and that the Māori health and disability workforce needs a substantial uplift in capacity and capability. Further, they were concerned that the system needed to create more welcoming environments for Māori health workers to feel valued and recognised for the cultural expertise.</p>
<p>What will success look like?</p>	<p>For Te Taihū:</p> <ol style="list-style-type: none"> 1. Te Taihū becomes a local health system where Māori want and are encouraged to work.

	<ol style="list-style-type: none"> 2. Increase the number of Māori employed in health within Te Taihū. 3. Increase the availability of Māori led services that value and affirm Māori culture and identity. 4. Increase availability and visibility of Māori specific roles including rongoā practitioners, kaumātua, cultural advisors, and whānau ora workers. 5. The non-Māori workforce is culturally safe. 6. Improve whānau experiences of care – especially cultural safety and instances of racism. 7. More Māori in senior health management and clinical roles. 8. All services employ local Māori whānau so our whānau do not have to move elsewhere for employment. 9. Increase local training opportunities for Māori in health.
Who should be involved?	<ul style="list-style-type: none"> • Iwi leaders • The Māori workforce. • Health New Zealand workforce leaders. • Primary Health Organisations and other community providers. • Training organisations – those who train the health workforce and those with expertise in cultural safety. • Community leaders and advocates.
Strategic alignment	<p>This priority has STRONG alignment with wider system strategies.</p> <p>Ministry of Health: Health Workforce Framework</p> <ul style="list-style-type: none"> • Our workforce delivers safe, effective, and efficient care, and are partners with Māori in providing the competencies needed to achieve outcomes. <p>Ministry of Health, Government Policy Statement 2024-27</p> <ul style="list-style-type: none"> • Workforce – having a skilled and culturally capable workforce who are accessible, responsive, and supported to deliver safe and effective health care. • Our workforce is culturally safe, representative of the community it serves, and flexible to meet the needs of individuals and their whānau. • Our workforce has sufficient availability to meet Māori and other population groups' service needs. • Our workforce is equitably accessible to provide choice and timely support for Māori and other population groups. <p>Te Kāhui Hauora Outcomes Framework</p> <ul style="list-style-type: none"> • Oranga mārie: Accessible and acceptable services.

Community priority 1: Cultural Connection

<p>Why is this important? (current data/inequity what whānau say)</p>	<p>Cultural connection is integral to health and wellbeing, as articulated through Te Whare Tapa Whā and other Māori models of health. Te Whare Tapa Whā encompasses four dimensions: Taha Tinana (physical health), Taha Hinengaro (mental health), Taha Wairua (spiritual health), and Taha Whānau (family health).</p> <p>Despite this, 21.1% of respondents in Te Tauihu reported that being involved in Māori culture is not important to them, compared to 10.6% nationally, according to the IMPB profile for Te Kāhui Hauora. Recognising this disparity, Te Tauihu has identified cultural connection as a priority, underscoring the need to strengthen these links to enhance overall health outcomes. By prioritising cultural connection, Te Tauihu aims to address the gaps in cultural engagement and support the holistic health of their community.</p> <p>Cultural identity and practices enhance spiritual health by providing a sense of identity and belonging (Durie, 1998), while strong family ties and intergenerational knowledge bolster social and emotional support (Durie, 1994; Pere, 1982). Mental resilience is strengthened through cultural connection, mitigating the effects of discrimination, and fostering self-esteem (Kingi & Durie, 2000). Additionally, holistic health practices and traditional activities promote physical health and overall wellbeing (Durie, 1994).</p> <p>Many families we engaged with, who felt a strong connection to their culture, spoke about how they drew on their cultural practices to help maintain the well-being of themselves and their whānau.</p> <p>Government policies such as <i>He Korowai Oranga</i> and initiatives like <i>Whānau Ora</i> highlight the importance of culturally responsive health services and empowerment of Māori families (Ministry of Health, 2014; Te Puni Kōkiri, 2015). Models such as Te Pae Mahutonga further emphasise the importance of cultural identity and access to cultural resources in health promotion (Durie, 1999).</p> <p>Academic research supports these policies, demonstrating that culturally appropriate care leads to better health outcomes and increased satisfaction among Māori (Waitangi Tribunal, 2019). Thus, cultural connection is fundamental to a balanced and holistic sense of health for Māori.</p> <p>What whānau said:</p> <p>Barriers</p> <p>Cultural Disconnect for Mātāwaka</p> <ul style="list-style-type: none"> Many mātāwaka lack strong ties to their iwi, leading to a lack of support from their Iwi or tribal organisations.
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	<ul style="list-style-type: none"> • “The population of mātāwaka don’t have connection to iwi so iwi don’t help.” <p>Rangatahi Concerns</p> <ul style="list-style-type: none"> • Rangatahi often struggle with issues related to cultural disconnection and identity, which can affect their mental and emotional health. <p>Need for More Cultural Support</p> <ul style="list-style-type: none"> • Individuals express a need for "more awahi to help me be Māori," indicating a lack of sufficient support to embrace and express their Māori identity. • Limited opportunities to learn and engage in cultural practices such as te reo Māori and kapa haka. <p>Strengths</p> <p>Connection to Whakapapa and Iwi</p> <ul style="list-style-type: none"> • Strong sense of identity and belonging through connections to whakapapa and support from marae and iwi. <p>Cultural Knowledge and Practices</p> <ul style="list-style-type: none"> • Understanding health through mātauranga Māori and engaging in wānanga promotes holistic wellbeing. <p>Generational Knowledge Transfer</p> <ul style="list-style-type: none"> • Passing on generational knowledge and engaging in cultural practices such as learning and speaking te reo Māori, and participating in kapa haka, strengthen cultural identity and community bonds. • Connection with the whenua (land) provides therapeutic benefits and reinforces cultural heritage.
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What will success look like?	<p>For Te Taihū:</p> <ol style="list-style-type: none"> 1. Increase the number of kaupapa Māori health providers in Te Taihū. 2. Develop health services that are tailored to the cultural needs and values of whānau Māori. 3. Culturally competent health workforce in Te Taihū. 4. Increase the number of Māori health practitioners across Te Taihū. 5. Increased the use of Te Reo Māori across Te Taihū. 6. Increase participation in marae events, kapa haka and other activities 7. Increased engagement in traditional practices such as weaving and carving (and rongoā services – priority 2). 8. Increase in enrolments in kōhanga reo, kura kaupapa and wharekura. 9. Increased initiatives that promote the sharing of mātauranga (intergenerationally). 10. Mental health and wellbeing – assessing improvement in mental health outcomes that can be attributed to stronger cultural connections and support networks. 11. Increase roles and employment focused on cultural engagement such as reo kaiako, cultural advisors and rongoā practitioners. 12. Increase the involvement of Māori in natural resource protection and use. 13. Increase sustainable practices in line with traditional actions – implementation of traditional environmental management practices and their impact on local ecosystems. 14. Include Māori in decision making that impacts or influences Māori cultural practices or accounts for them.
Who should be involved?	<ul style="list-style-type: none"> • Iwi leaders. • Whānau and hapū including mātāwaka. • Marae. • Te Pūtahitanga o Te Waipounamu (South Island Whānau Ora Commissioning agency). • Health providers – Nelson Bays PHO, Piki Te Oranga. • Health New Zealand delivered and funded services. • Community leaders and advocates - including kura, schools, and local businesses. • Other government social agencies including TPK, MSD, MoE, and Social Investment Agency.
Strategic alignment	<p>This priority is seen as an enabler to support whānau to stay connected and stay well. It has strong alignment to:</p> <p>Te Kāhui Hauora Outcomes Framework</p> <ul style="list-style-type: none"> • Oranga māia: Connected to Te Ao Māori.

Community priority 2: Rongoā services

<p>Why is this important? (current data/inequity and what whānau say)</p>	<p>Rongoā services, which encompass traditional Māori healing methods, are an invaluable tool to support the wellbeing of whānau in Te Taihū. These practices are deeply rooted in Te Ao Māori emphasising a holistic approach to hauora that includes the physical, mental, emotional, and spiritual dimensions of well-being. By incorporating rongoā into community health initiatives, Te Taihū can honour and preserve these traditional practices, ensuring that they remain a living part of the region's cultural identity. This not only fosters a sense of connection among Māori but also provides a culturally relevant framework for addressing health disparities and promoting overall community wellness.</p> <p>Additionally, rongoā practices contribute to hauora by offering alternative and complementary treatments that can enhance conventional medical approaches. The use of native plants, such as kawakawa and mānuka, and traditional healing techniques like mirimiri and karakia, provide valuable resources for managing a wide range of health issues. By addressing the spiritual and emotional dimensions of health, rongoā can help alleviate hauora struggles such as trauma, grief and stress that may not be adequately addressed through conventional medicinal practices. This integrative approach acknowledges the importance of cultural context in health care, thereby improving patient engagement and outcomes. The communal aspect of rongoā practices, which often involve collective activities and knowledge-sharing, strengthens social bonds, and fosters a collaborative spirit within the community.</p> <p>What whānau said:</p> <p><i>“From whakamā to whakamana through rongoā”</i></p> <p>Whānau have emphasised their desire for the Integration of rongoā into the health system.</p> <p>Whānau highlighted the need for easier access to rongoā Māori (including those who practice rongoā). <i>“Rongoā Māori- access to mātauranga and practitioners is needed”. “I cannot find rongoā kaimahi”.</i></p> <p>What the data says:</p> <p>10.3% of Māori aged 15 years+ took part in traditional healing or massage. Compared with 12.3% nationally.</p> <p>a. (Reference: IMPB Health Profile: Te Kāhui Hauora o Te Taihū Volume Two 2024, Jan-Dec 2022.</p>
<p>What will success look like?</p>	<p>For Te Taihū:</p> <p>2. A health system that effectively integrates accessible rongoā services:</p>

	<ol style="list-style-type: none"> a. Rongoā Māori practices are available and accessible to the community (i.e. marae-based practices) b. Meaningful collaboration between rongoā practitioners and conventional healthcare providers. c. Active knowledge exchange and mutual respect between rongoā practitioners and mainstream medical professionals. d. Integrated health care plans that incorporate both traditional and modern medical approaches. <ol style="list-style-type: none"> 3. Increased number of Rongoā Practitioners: <ol style="list-style-type: none"> a. A larger, well-trained network of rongoā practitioners accessible to the community. b. Comprehensive training programs to ensure quality and consistency in rongoā practices. 4. Improved Health Outcomes: <ol style="list-style-type: none"> a. Reduction in health disparities amongst Māori. b. Enhanced overall well-being and mental health statistics for the community. 5. Cultural Continuity and Empowerment: <ol style="list-style-type: none"> a. Preservation and transmission of traditional Māori healing knowledge. <p>Empowerment of Māori communities through the recognition and practice of tikanga and mātauranga Māori.</p>
Who should be involved?	<ul style="list-style-type: none"> • Te Taihū iwi leaders. • Whānau, including mātāwaka. • Marae. • Rongoā practitioners and the national rongoā Māori body. • HNZ rongoā funded providers and services. • ACC and ACC funded rongoā practitioners. • Primary Health Organisations and other community providers. • Training organisations – those who train the health workforce and those with expertise in cultural safety. • Community leaders and advocates - including kura, schools, and local businesses.
Strategic alignment	<p>This priority is seen as an enabler to support whānau to stay connected and stay well. This priority strongly aligns to:</p> <p>Te Kāhui Hauora Outcomes Framework</p> <ul style="list-style-type: none"> • Mana Motuhake: Self-determination. • Oranga māia: connected to Te Ao Māori. • Oranga mārīe: accessible and acceptable services.

Community priority 3: Health Literacy

<p>Why is this important? (current data/inequity and what whānau say)</p>	<p>Health literacy is the capacity to find, interpret and use information and health services to make effective decisions for health and wellbeing. This includes the capacity to recognize when to access or be referred for health care in a timely manner.</p> <p>Improved health literacy contributes to hauora in many ways:</p> <ul style="list-style-type: none"> • Empowering whānau and individuals to self-advocate, manage and lead their care and creating a partnership with their health practitioner. Additionally, whānau are more receptive to care management and are more willing to use the tools and information provided to stay well and prevent poor health. • Improving engagement with health services. Health literacy gives whānau the confidence and knowledge to navigate the health system. Whānau are more likely to attend, enrol and access care proactively. <p>Health literacy in this context relates to both the health provider and whānau; information provided by hauora providers, as well as empowering whānau with the tools to understand their condition and make informed choices, how to keep well and how to navigate services.</p> <p>Whānau have told us that health literacy is important to them.</p> <p><i>“My family health literacy was low on what (my) diagnosis meant”.</i></p> <p><i>“More educational opportunities are needed”.</i></p> <p>Through whānau voice engagement we heard a strong desire for education around healthy kai, alignment, and connection to hauora elements (Te Whare Tapa Whā), education on hauora services currently available and how to navigate them, as well as condition specific education.</p> <p>Multiple whānau discussed the need for improved communication from health providers, ensuring that communication was delivered in a way that people could easily understand.</p> <p>Whānau expressed a desire for hubs within schools and the community to support health literacy. They also discussed the establishment of network forums and facilitating wānanga.</p>
<p>What will success look like?</p>	<p>For Te Tauihu:</p> <ol style="list-style-type: none"> 1. Whānau are empowered to navigate the local health system. 2. Whānau report they understand the local health system. 3. The health workforce improves communication with whānau through training and development, and quality improvement actions. 4. Whānau understand their condition and/or diagnosis and can communicate this to their own whānau.

	<ol style="list-style-type: none"> 5. Whānau recognise when to access or be referred to health care in a timely manner. 6. Rangatiratanga- whānau units have a whānau health plan. 7. There are regular forums and engagements in place to support educating whānau about their hauora and local health system. 8. Surveys exist to understand what whānau know and what can be provided to improve their knowledge about health. 9. Health provider mandatory reporting on Māori whānau that have been declined their services. 10. Responsibility of health services to refer or recommend whānau to an alternative agency when services have been declined.
Who should be involved?	<ul style="list-style-type: none"> • Iwi leaders. • Whānau and hapū including mātāwaka. • Marae. • Healthy Families programme. • Sport Tasman. • Community leaders and advocates - including kura, schools, Nelson Marlborough Institute of Technology. • Tokomaru Research Centre.
Strategic alignment	<p>This priority has strong alignment to;</p> <p>Te Kāhui Hauora Outcomes Framework</p> <ul style="list-style-type: none"> • Mana Motuhake: Self determination • Oranga Tinana: Promotion of hauora