

IN THE MATTER OF The Treaty of
Waitangi Act 1975

AND

IN THE MATTER OF Claims by
HUHURERE
TUKUKINO and
OTHERS known as
the HAURAKI
CLAIMS

**STATEMENT OF EVIDENCE OF
HARENGARANGI HARRY MIKAERE
ON BEHALF OF THE CLAIMANTS**

Foreword

1. My name is Haerengarangi Harry Mikaere. I belong to Ngati Pukenga of Manaia. I am the member for Ngati Pukenga on the Hauraki Maori Trust Board and am the chairperson of Te Korowai Hauora o Hauraki. This fact reflects the close relationship between the Trust Board and Te Korowai o Hauraki.

2. Te Korowai Hauora O Hauraki Incorporated is a Maori health provider organisation established, as a result of findings from a health needs assessment, demographic and socio-graphic profile of Hauraki, undertaken by Hauraki Maori Trust Board in October 1993 -1994.
3. A synthesis of this report reflected that the health of Hauraki was at risk and in particular the health of Hauraki mokopuna. The Board concluded that the likely impact of this risk would be that the ability of the Whaanui to participate in and contribute to the social, economic and cultural development of Hauraki and New Zealand society into the 21st century would be severely arrested.
4. To work towards improving this situation Te Korowai Hauora O Hauraki was established to deliver Maori health services for and by Maori. In April 1995, Te Korowai Hauora O Hauraki began development and implementation of services based on a Hauraki view of health.

Introduction

5. It is from the position that Te Korowai Hauora O Hauraki has compiled this evidence for the purpose of identifying positive health initiatives, initiated, strategically directed, owned and monitored by Hauraki.
6. The key points raised in this evidence come under the broad categories of, the Treaty of Waitangi, Ottawa Charter, Equitable access for Maori in Hauraki to health care, Equitable Distribution, Te Korowai Hauora O Hauraki service provision and future development.

The Treaty of Waitangi

7. The Treaty of Waitangi is the founding document of New Zealand Society from which Maori in Hauraki expect no less than to enjoy a standard of health commensurate to the non-Maori population in Hauraki while at the same time

retaining and enhancing Maori cultural identity. Further, the Treaty reaffirms the rights and values of Hauraki in regard to health and well being.

8. The Treaty of Waitangi also prescribes a framework which would enable the Crown to administer equitably all Health & disability entitlements on behalf of Hauraki Briefly, this framework is:

- (a) The responsibility of the Te Korowai Hauora O Hauraki to purchase quality and culturally appropriate health, rehabilitation and support care services for Maori in Hauraki;
- (b) The principle and right of informed choice which will enable Maori individuals and families in Hauraki to make timely and well informed decisions concerning the most appropriate health, rehabilitation and support care for themselves;
- (c) The right of Maori in Hauraki to care and nurture their own people;
- (d) The right of Maori in Hauraki to enjoy a holistic quality of life based on Maori values and concepts; and
- (e) The right of Maori in Hauraki to have unconstrained access to the health resources of New Zealand society.
- (f) Maori being able to confidently state that all strategies and principle objectives of the Crown (Ministry of health and Health Funding Authority) to openly reclaim, promote and affirm through purchasing and contracting process the tangible and intangible dimensions of Maori health values, concepts and practises.

9. The indicators for measuring equitable tangible health outcomes for Maori health include but are not limited to an improved health status, equitable distribution of health resources and planned and implemented increases of Maori who return to their optimum health.
10. Indicators for measuring equitable intangible health outcomes for Maori include but are not restricted to increased usage and fluency of Te Reo Maori by Maori, proportional acceptance of rongoa Maori practitioners accredited by the Crown, application of tikanga and kawa in assessment processes and health care delivery, ownership of Maori health data by Maori and a recognition of Maori intellectual property rights.

The Significance of the Ottawa Charter

11. The Government is a signatory to the Ottawa charter which is an international agreement providing for the development and implementation of health promotion, health education and health service delivery. The aim of this framework is to achieve health for all by the year 2000.
12. The Ottawa Charter like the Treaty outlines broad health areas which require immediate attention in regard to ensuring that Maori health needs and aspirations are recognised and taken seriously. The Ottawa Charter addresses five broad areas which also provide guidance for the Crown in their attempts to consolidate positive working relationships with Maori. These five areas are:
 - (a) building health public policy
 - (b) creating supportive environments
 - (c) strengthening community action

- (d) developing personal skills
- (e) re-orientating health services

The Linkages Between The Treaty of Waitangi and The Ottawa Charter

13. For the Minister Health to act appropriately in regard to these two agreements requires a commitment at the highest political levels to give legislative recognition to these two agreements. This commitment must be founded on the understanding that implicit in the principles of these two agreements, are premises from which Government at the highest levels can be proactive in respect to achieving well health for Hauraki by the year 2000.
14. The first understanding is that the Ottawa Charter does not subsume the principles and articles of the Treaty of Waitangi. Moreover, the Ottawa Charter reinforces from an international perspective the health rights and responsibilities of Maori as articulated in the Treaty of Waitangi. The second understanding is that the Ottawa Charter provides acceptable political and social imperatives from which the rights of Maori to well health as articulated in the Treaty of Waitangi can be implemented in the health arena. The third and most important understanding is the recognition of the explicit linkages between these two agreements.

Equitable Distribution

15. Equitable distribution or distributive justice is considered to be synonymous with the principle of fairness. Distributive justice is a formalised commitment to redress the inequities that currently exist between the health status of Maori and non-Maori.
16. Equitable distribution within the context of Maori health means maximising health outcomes through increased delivery of Maori health services for Maori

and by Maori. Maximising health outcomes in this manner is reliant on a just and fair distribution of health resources and wealth.

17. A fair distribution does not necessarily mean an equal share. The debate surrounding equitable distribution and one, which is being seriously debated among economists, is the notion of vertical equity. Vertical equity signals that equitable distribution involves the different treatment of individuals and groups where warranted and that this different treatment may include disparate distribution of resources. The complexity of issues including social, psychological, financial and other factors, that affected people's health and their ability to appropriately address their health issues and the time and resources necessary to assist people with these issues require serious consideration in the current levels of funding.

Equitable Process

18. The current discrepancies in Maori health have in part been attributed to the failure of mainstream health care to give effect to Maori values and concepts. This, among other oversights, has contributed to inequitable processes prevailing in respect to Maori accessing their just entitlements.
19. An equitable process is concerned with removing these oppressive undertones and concentrates on the "who and how" of health purchasing, provision and assessment.

Te Korowai Hauora O Hauraki Service Development

20. Before it was fashionable Te Korowai Hauora O Hauraki began developing a Hauraki model for the delivery of Integrated Maori health services. This included a transfer of Alcohol & Drug, Sexual Abuse & Cervical Screening services and two Community Health workers from Thames Hospital. With this in mind Family and mental health contracts with Midlands Regional Health Authority was sought,

this provided the scope for our organisation to be an independent or stand alone Maori integrated care organisation.

21. Te Korowai Hauora O Hauraki considers its prime responsibility is to progressively develop, establish and deliver quality Maori health services which will be responsive to the health needs and aspirations of Hauraki. Inherent in this responsibility is the imperative to identify opportunities in the health system which provide the scope for Hauraki to secure equitable access to the health resources of New Zealand society. With this in mind our services must be innovative, robust and flexible within a rapidly changing health environment. To achieve this suitably qualified health professionals and management personnel who have expertise in Maori and tauwi health services, systems and resources are and will be employed.

22. As previously documented Te Korowai Hauora O Hauraki is registered as an Incorporated Society. Membership is open to all Maori who reside within the traditional boundaries of Hauraki and those who have a commitment to improving the health status of Hauraki.

Organisational Aims

23. Te Korowai Hauora O Hauraki Inc. aims to be a leader in the provision of quality Maori based health services.

Further and where deemed appropriate and advantageous to the aim and aspirations of the society, partnerships, joint ventures and other business or contractual arrangements with either private, public or charitable health providers and purchasers will be developed and entered into. (Te Korowai Hauora o Hauraki)

Current Service Delivery

24. At present services are being provided in Kennedy Bay, Coromandel, Manaia, Whitianga, Whangapoua, Colville, Port Charles and Port Jackson, Whitianga, Tairua, Whangamata, Whiritoa, Waihi, Paeroa, Te Aroha, Kerepehi, Ngatea, Hauraki Plains, Thames and the Thames Coast.
25. With the exception of a residential supported housing facility for Maori persons our services are mobile. Services are delivered for example in people's home, community centres, marae, schools, regular street clinics, kohanga reo, kura kaupapa Maori, camping grounds, Women's Refuge and shopping centres.

Services which are accessed by these communities are: (i)

Primary Health Services

- a) **He Ratonga I te manaaki Kuia me Koroua** -Kuia and Koroua home-based and acute care.

Maori home support workers whose qualifications vary considerably from registered nurses to caregivers provide this service. The objective of this service is to facilitate inter-dependent living for kuia and koroua.

The key functions of home support workers are to deliver: Home care outlined in the clients care plan, documentation, support and monitoring.

- b) **He Ratonga Hauora Mokopuna** -Free General Practitioner and Whanau nursing service & **He Ratonga Waka Hauora** - Mobile Health Clinic. There are two registered Maori nurses and three part-time General Practitioners delivering this service. One of nurses is Plunket trained. The key objectives of these positions are

to provide kaupapa Maori whanau based well child health care. The key objective of the support workers is to provide information, education and support to assist whanau of tamariki to make informed decisions and choices about the range of health care they may wish to access for themselves and their tamariki. **The functional roles of this position are:**

To provide follow-up home-based care to mokopuna and tamariki as directed by the well child health nurse, to co-ordinate and facilitate Maori well child health, education programmes, communication and liaison, documentation, research and continuing education.

- Primary Practitioner functional roles:

Our experience has been that primary practitioner services have been practitioner focused. If we are to effect positive change for Hauraki Maori we initially need to establish community focused services and work towards introducing primary practitioner services following this. The aim is to ensure as best as we can that we attract primary care practitioners who have a community focus and are committed to the philosophy of taking services to the people.

He Ratonga Hauora Whanaunga: Cervical Screening. This service is provided by a Registered Nurse. The key objectives of this service are to promote safe sexual behaviour and attitudes.

He Ratonga I te Whare tangata: This service is provided by a certified cervical smear taker. The objectives of this service are to improve the health of Maori women in Hauraki.

(ii) Mental Health

- a) **He Ratonga Hauora Marino** -Violence Prevention and Counselling.

This service is provided by a certified Alcohol and Drug counsellor. The key objectives of this position are to deliver kaupapa Maori Violence Prevention programmes.

He Ratonga Hauora Rangatahi -Mental Health Prevention for Rangatahi. These services are delivered by a Maori Community health worker. The key objectives of this position is to facilitate culturally safe and culturally affirming mental health prevention programmes for Rangatahi and their whanau. Clinical assessments for the identification of mental illness are undertaken by a psychiatric nurse employed by our service. The key objectives of this service are to assess clinical needs and to share case management.

- b) **He Ratonga Tumu Korero- Alcohol and Drug Prevention and Counselling.**

These services are delivered by two Maori certificated alcohol and drug counsellors. The key objectives of these positions are to deliver kaupapa Maori alcohol and drug treatment and prevention programmes.

- c) **He Ratonga Whakaritenga-** Primary and Mental Health on-call service & **Te Whare Awhina** - Residential Supported Housing for Maori who are mentally challenged. This service is provided by a Maori psychiatric nurse and three Maori caregivers. The key objectives of this service is to provide kaupapa Maori supported housing.

(iii) Community Health

There are currently two community Maori health workers delivering this service. They have certificates in adult teaching, first aid, reproductive health, Maori counselling and therapeutic massage. The key objectives of these positions are to facilitate kaupapa Maori health education and promotion services. Their functional roles are:

The delivery of kaupapa Maori health education programmes that work towards the prevention of alcohol and drug abuse, child abuse, illness and disease and development of health promotion strategies for Maori communities.

- a) **He Ratonga Hauora Tokonga Iwi** - Health Promotion, Immunisation, Education, Auahi Kore Wananga, Transport to hospitals and specialist services
- b) **He Ratonga Hauora Whanaunga** - Sexual Health
- c) **He Ratonga Korero Taumata** - Sexual Abuse Prevention and Counselling
- d) **He Ratonga Hauora Mahi** - Vocational and Pre-vocational service.

(iv) Cultural Needs of Maori

Te Korowai Hauora O Hauraki works towards meeting the cultural needs of Maori by ensuring that core cultural components of whakapapa, tikanga, kawa, whakawhanaungatanga, ira atua and ira tangata are integral to all services. It is difficult to respond to the total cultural needs of all Maori in Hauraki given not all Maori residing in Hauraki are from Hauraki. That is the application of the core cultural components within the services of Te Korowai Hauora O Hauraki are from a Hauraki perspective, which may or may not meet the cultural needs of other iwi. However, having a working and living knowledge, experience and

understanding of the variances in iwi culture needs enables the services delivered by Te Korowai Hauora O Hauraki to be open to a vast range of valid cultural perceptions. Consultation with iwi takes place at the hands on service delivery level, through client satisfaction surveys, feedback from the Hauraki Maori Trust Board's nominated representatives to the Board of Trustees for Te Korowai Hauora O Hauraki and through hui and wananga with each of the Maori communities in Hauraki.

(v) Linkages with Other Primary and Secondary Providers

When Te Korowai Hauora O Hauraki first began delivering services we had established working relationships with Plunket and two General Practitioners in the region. The majority of health providers both in Primary Care and Health Waikato based services, were sceptical about what we were doing and how we intended to provide our services. We were not considered to be professional and or clinically competent.

To a large extent this has changed and there is now an increased willingness to work alongside each other as indicated by the memorandum of agreement and integrated mental health service we are working on with Health Waikato.

Te Korowai Hauora O Hauraki and Health Waikato are the biggest health providers in the Hauraki region. Given this, it makes sense that we work together with the common aim of improving service delivery to the Hauraki region with Health Providers in the Hauraki region, who share the aim of developing long term sustainable, culturally appropriate health services.

Our Focus for 2000-2005

Remain a leader in delivery of integrated health care by:

- Improving referral, quality management & monitoring systems
- Formalising strategic relationships and alliances with industries that interface with the health sector
- Ongoing training and development for staff and the executive committee
- Maintaining and expanding the current health services by:
 1. Providing new health services, appropriate people and infrastructure support for health service delivery; and
 2. Investing in our future.