



# POUTOKO HAUORA

A NETWORK OF MĀORI KAIMAHI HAUORA

## **Poutoko Hauora Hui**

*Wednesday 20<sup>th</sup> October, 4.30pm to 5.30pm*

*Facilitated by Ainsleigh Cribb-Su'a*

In this hui, we introduced Poutoko Hauora and the vision behind its establishment to new members. We discussed the areas we should be proactive in and received an update from a member of Te Rōpū Whakakaupapa Urutā on the current state of COVID for māori.

## **Action Register:**

If you are interested in the following tonu, email Monleigh on [admin@poutokohauora.co.nz](mailto:admin@poutokohauora.co.nz) (All)

- Primary Mental health & addictions (i.e., the dissemination of funding, complicated space to navigate for whānau).
- COVID Māori provider response (learnings to date, implications of what we have learned, recommendations as a result to MHA & HNZ).

Next Poutoko Hauora Meeting: Monday 29<sup>th</sup> November 4.30pm - 5.30pm

## **Poutoko Hauora: Ainsleigh Cribb Su'a**

- Poutoko Hauora has come into being in the last four Months. Within Poutoko hauora is a smaller roopu of Takawaenga who serve as conduits to their professional groups and/or specialty area and have agreed to galvanise those Hauora Māori Kaimahi within their rohe. The purpose of this conduit group is to ensure we activate ourselves in terms of having relevant input where we can, in reforms or where our respective iwi might call upon us for hauora expertise.
- We are unapologetically focused and intentional about Whānau Ora as in the oranga of our Whānau katoa across and within rohe.
- Our activities will be to tautoko, promote and empower our Māori voice into spaces where we do not think we are heard strongly or well enough.
- A business case has been pulled together, the purpose of this being to attain funding to support the establishment and enablement of infrastructure of Poutoko Hauora.

## **Acknowledgements: Ainsleigh Cribb Su'a**

- Acknowledgement of the appointment of network members and other Māori leaders to the various leadership bodies of the health reforms. Congratulations to all our Māori leaders from

across the sector whose leadership, contributions, and pukumahi has been recognised in these auspicious appointments.

#### **Takawaenga Update: Teah Carlson**

- Inclusive roopu, and open to more members.
- Over the past few weeks, network numbers have increased to over 100. Poutoko Hauora spans over 50 professions, representative of many iwi and rohe.
- Moving forward, we are looking to capture and present this data to the PH hui on a dashboard.
- With requests coming in, we need to home in on specific kaupapa that we, as a collective, want to focus on more in-depth. What is on top for us as kaimahi Māori? Interest area groups will be convened to progress these conversations.
- How do we support those Māori on advisory and governance boards to advocate for change?
- Updates have been made on the terms of reference and will be sent out shortly, it is important to note that this is an evolving document.
- Discussing potential distinctions on identity of Poutoko in relation to who can and should be part of the roopu, as opposed to those whose mahi is not in the hauora space. Do we become fully inclusive, and those for whom this kaupapa might not align well, will naturally drop off.
- Process of creating website to host some of the non-identifiable data (dashboard).
- The Takawaenga group have recently met with the Health Quality & Safety Commission leadership group, including the CEO. Discussed how this network can participate in some of the reform groupings and feed into developments there.
- Hopefully, as the pandemic responses become more aligned to business as usual, we will have more time and energy to ensure that our communications are regular and consistent.

#### **Proactive Planning: Ainsleigh Cribb Su'a & Mark Lawrence**

- Takawaenga roopu spoke about the need to be proactive and intentional about moving and speaking out into areas we think are essential. Taking a Poutoko Hauora position about key and pertinent areas of health that are impacting whānau Māori.
- Tono to invite individuals to self-nominate to lead a roopu or to feed into the korero.
  - Two essential kaupapa:
  - Dissemination of funds for Primary Mental health addictions: Looking into how the Ministry has disseminated monies into this space, essentially looking at being proactive about what Māori need within that space. Quite pressing given that the Ministry is still disseminating some of those funds.
  - COVID Māori provider response: Resource ability for Māori providers was withheld for a long time, with Māori providers instead pushing into this space with volunteers and whānau, from which amazing things have happened. There is an opportunity here to analyse the spaces where Māori have been able to self-determine and exercise mana motuhake across the motu, that deserves collating and describing. Understandings should enable MHA and Health NZ to do what they need to for whānau Māori.
- Dependant on who is leading out the roopu, decisions yet to be made as to how best that group chooses to communicate and congregate. Monleigh has aligned a small amount of time to administrate and support the setup of communication channels and coordinate meetings for these roopu.
- Mark: With regards to Addictions, service delivery will move to being primarily delivered in primary care, so we're going to need a GP, a psychiatrist, a consumer type of representation as well in these discussions. That is the wonderful thing about this roopu, it spans across the whole health care

spectrum, we come from different directions, and we all have a role to play. With broad representation, we could also tag team within professions.

- Te Hao: Pātai-when the Takawaenga developed their whakaaro around these two Kaupapa, was the scope of them discussed?
- Ainsleigh: At this point, the leadership group are just bringing forth ideas to be percolated within each roopu.
- The PH network comprises regulated health practitioners as well as several practitioners where Hauora Māori is their area of practice. Alongside Teah, the co-director of Nga Pou Mana. Intention to reach out to the Hauora practitioners to bring that voice forth into these developments.
- PH position kaupapa intended to be broader than just directed towards MHA and/or HNZ. Insights might be directed towards iwi and community groups within certain rohe. The scope of this work is extensive, and as a collective, we are greater than going in alone, which is often what happens for us as kaimahi Māori.

#### **Reform Update: Monleigh Ikiua**

- Announcements today: Minister of health- Pae Ora Healthy futures Bill is going to parliament for debate and is opening for submissions.
- Minister has spoken openly about how the current health system fails Māori.
- Preliminary funding to develop the essential element of locality planning and developing local networks (\$46 mill). MHA has given initial funding to develop Kaupapa Māori services.
- Iwi Partnership Boards and Leaning on these to inform local needs. Not yet established, but the MHA will work with the boards to outline their functions and powers.
- Full implementation of the reforms not yet developed, still determining localities and the power of boards.

#### **Urutā Update: Ranche Johnson**

- Ranche is a member of the sub-committee that feeds into the larger group. What is happening now in terms of vaccinations rates and the burden of disease falling onto Māori is no surprise. We advised from the beginning to make Māori a priority. We are currently preparing documents and advice for whānau who have COVID and advice for Marae, Kura and Kōhanga. There is much work behind the scenes to make policies and processes.
- There are examples of some organisations doing right for Māori whānau, vaccinating whānau because they recognise Māori as high risk.
- Recommendations were made, some DHB's took it up, and others did not.
- Various membership groups of Urutā meet regularly, many advocating and advising and getting information from other smaller groups to feed into.
- If the health system had been set up with more mana motuhake from the beginning, we would not be in this terrible situation now.
- Fingers crossed; we are going towards a brighter future.
- Ainsleigh: A significant chunk of those suffering from COVID, who have COVID and are in quarantine or are a close contact, are Māori. Contributing to this is less than optimum housing and social circumstances that has made some of these people more vulnerable to contracting COVID. The concerns that Urutā have told the Ministry since the beginning are manifesting. We acknowledge and recognise the work of Te Roopu Whakakaupapa Urutā and the continued leadership in this space.

**He rau ringa e oti ai**

**Kia maiea tō rā**