

Let's get real 
REAL SKILLS FOR PEOPLE WORKING IN MENTAL HEALTH & ADDICTION

Working with Māori

Leader level learning module



Te Pou
o Te Whakaaro Nui

 **MINISTRY OF
HEALTH**
MANATŪ HAUORA

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Introduction

Tēnā koe e āro mai ana te whakaaro ki tēnei huarahi. Kia kaha i roto i ngā akoranga mō te ao Māori e whai ake nei.

Kia ora mai.

The Real Skill for Working with Māori is: Every person working in a mental health and addiction treatment service contributes to whānau ora for Māori.

Performance indicators - leader	
Te reo Māori	<p>Promote and provide for resources that:</p> <ul style="list-style-type: none">• ensure easy access to te reo Māori speakers and information written in both English and Māori• support staff and the service to integrate te reo Māori into their service delivery• Develop and maintain explicit relationships and partnerships with local Māori• Utilise local Māori to verify the relevance and common practice of te reo Māori and tikanga in the health setting• Put strategies in place to ensure Māori know how to access Māori-responsive services and/or have access to kaumātua, kaimahi Māori and cultural interventions (e.g. assessment, therapy).
Whakawhanaunga	<p>Promote an environment that:</p> <ul style="list-style-type: none">• is conducive to effective service delivery processes for whānau and significant others (e.g. a time and venue for comprehensive assessment or whānau hui)• supports whakawhanaunga processes.
Hauora Māori	<p>Promote and provide for processes and practices that meet cultural requirements, such as:</p> <ul style="list-style-type: none">• recognition of Māori models of practice and healing• resource allocation and prioritisation to reduce Māori health inequalities• activities that measure the cultural effectiveness of performance and social delivery• outcomes information that indicates Māori and whānau satisfaction.

Wairua	<p>Promote and provide for resources that support:</p> <ul style="list-style-type: none"> • Māori-responsive interventions and processes to meet the wairua needs of tāngata whaiora, whānau and staff • staff access to kaumātua and kaimahi Māori that support whānau ora.
Tuakiri tangata	<p>Promote and support:</p> <ul style="list-style-type: none"> • interventions and services to emphasise cultural linkages and whanaungatanga in practice • staff access to wānanga and training that enhance knowledge and understanding of tuakiri tangata and its importance to the therapeutic relationship.
Manaaki	<p>Promote and support:</p> <ul style="list-style-type: none"> • awareness of manaaki and its significance in the recovery processes of tāngata whaiora and whānau • manaaki of the community being engaged with • staff learning and professional development of manaaki in practice.

Ko te kai o te rangatira he kōrero.
Ko te tohu o te rangatira he manaaki i te tangata.
Ko te mahi o te rangatira he whakatira i tōna iwi.

The sustenance of leaders is oration.
The symbol of leadership is the honouring of people.
The work of the leader is to unite the people.

The original source of this traditional saying is unknown.

The working with Māori Real Skill in the *Let's get real* framework identifies six key areas within which to explore the knowledge, skills, attitudes and values deemed essential when working with Māori in the mental health and addiction context. These areas are:

- te reo Māori (Māori language)
- whakawhanaunga (relationship building)
- hauora Māori (Māori health and well-being)
- wairua (spirituality)
- tuakiri tangata (personality and identity)

- manaaki (hospitality and respect).

The three modules, essential, practitioner and leader, provide some brief, fundamental information, key questions and activities that encourage reflection and planning by those working with Māori in mental health and addiction services.

The selection of the key areas for the working with Māori Real Skill, and consequently the information and activities presented in this module, represent one way of constructing a framework for exploring Māori content. The Real Skills modules should be seen as complementary to other Māori health frameworks and not definitive in nature. The structure and content of these modules has been developed through written submission and workshops held across New Zealand in 2006 and 2007, and represent the prioritised areas of focus arising from that process.

Preparation

To help you complete this module, please familiarise yourself with national key strategy and policy documents relevant to mental health, addiction and Māori health. For your reference a list of recommended reading is included in this module. It is strongly recommended that you familiarise yourself with these documents, as they relate to working with Māori.

The following documents are of particular relevance to this module.

- Durie, M. H. (2003). *Ngā Kāhui Pou: Launching Māori futures*. Wellington: Huia Publishers.
- Ihimaera, L. (2008). *Whiria te Oranga: Kaumātua workforce strategy for mental health and addiction services*. Palmerston North: Te Rau Matatini.
- Matua Raki. (2009). *Takarangi Competency Framework (Draft)*. Wellington: Matua Raki.
- Ministry of Health. (2006). *Te Kōkiri: The mental health and addiction action plan 2006-2015*. Wellington: Ministry of Health.
- Orange, C. (1987). *The Treaty of Waitangi*. Wellington: Port Nicholson Press.

The work in this module builds on the essential and practitioner levels of the working with Māori Real Skill learning modules. This module follows the same key areas as the essential and practitioner level modules, but provides a deeper level of content for your exploration and reflection. Its also requires you to consider your knowledge, and the application of that knowledge, as a leader in mental health and addiction.



In this module you will draw on your experiences working with service users and tāngata whaiora, and the strategies your organisation has implemented to support their recovery. Before beginning this module, you should consider the ways in which your organisation has responded to national and regional mental health and addiction goals and priorities, and the way in which your organisation interacts with the communities that you serve.

There are several main themes included in this module:

- providing resource support
- communicating and engaging with the community
- unique Māori perspectives of health and health service delivery
- measuring cultural effectiveness
- Māori support for your service
- Māori workforce development
- Manaaki in action with tāngata whaiora, staff and the community.

To gain the maximum benefit from this module you are encouraged to think about how the learning module applies to you and your work context. When you have finished working through this module use the Learning Review Tool to help you reflect on how you work with Maori. This will enable you to identify where your strengths are, along with any areas you may need to further explore in your Individual Professional Development Plan.

Organisations often have access to Māori organisations in the community and some have access to the support of a kaumātua. Feel free to consult with the kaumātua that supports your organisation as you work through this module. There may also be opportunities to integrate this module into your supervision programme.

This document has been formatted to work on electronically. Type your answers into the areas indicated with grey shading. The answer areas will grow to accommodate the length of your answer. Print versions are available if you would rather handwrite your answers, see www.tepou.co.nz/letsgetreal to download a print version.

Overview

Leaders of mental health and addiction services are required to implement national mental health and addiction strategy and policy. Current strategies emphasise the importance of services working in a collaborative way with the communities that they interact with.

The broad socioeconomic factors, such as education, employment, housing and poverty, that impact upon mental health and addiction, mean that a whole of government approach

is required to successfully produce positive outcomes for people using mental health and addiction services. For the organisational leader, this means developing and maintaining functional relationships with other agencies, including state sector agencies and national and community non-government agencies.

Leaders of mental health and addiction services that work with Māori have an additional consideration, and consequent responsibility, to understand and apply alternative models of practice. These models may challenge some of the traditional practice modes and quality systems.

One challenge faced by leaders of such organisations is resourcing. As the use of Māori models of health increases, so does the need for workforce development approaches to ensure mental health and addiction practitioners are adequately qualified to apply these models. Furthermore, because Māori models of health provide an alternative to more traditional clinical models, debate continues as to their validity, their relationship to clinical approaches and the nature of their implementation through Crown contracted services. In this respect, the leader of a mental health and addiction service must lead, as well as manage.

Theories of organisational management and leadership make a strong distinction between the functions of management and leadership. One distinction is to consider the role of the manager as implementing systems and processes that lead to the achievement of an organisation's goals. Leaders on the other hand, bring about inspiration and impassion people towards the purpose and goals of the organisation. In a situation where models of health service delivery may be in conflict, and new approaches may require additional support, the ability to inspire others is crucial.

This module is primarily concerned with the strategies and approaches leaders in mental health and addiction services will need to implement in order to support staff in their practice when working with Māori.



1 The Treaty of Waitangi /Te Tiriti o Waitangi

In the working with Māori Real Skill essential module we offered a brief description of the Treaty of Waitangi and its relationship to the health and disability sector. We introduced the three Ps - the principles of partnership, protection and participation. It is through these three principles that the health and disability sector has interpreted it's commitment to the Treaty of Waitangi.

In the practitioner module we encouraged reflection about the way in which the principles of the treaty were reflected when working directly with tāngata whaiora and people with addiction.

1.1 As a sector leader, identify the ways in which these three principles and the Treaty of Waitangi are reflected in the policy and activity of your organisation.

Partnership

Protection

Participation

1.2 In the table below, identify any challenges you face in your role as a leader in applying the principles of the Treaty of Waitangi? Please also describe the solutions you and your colleagues have to respond to these challenges?

Challenges	Solutions

2 Te reo Māori

In the previous modules, the language of introduction and greeting, as well as metaphorical forms of te reo Māori were explored. That exploration provides a foundation for using te reo Māori in interactions with mental health and addiction service users.

The challenge for leaders of mental health and addiction services is to provide access to opportunities to learn te reo Māori for staff and to develop strategies for increasing the use of te reo Māori throughout the organisation's activities.

2.1 What percentage of people in your team are able to confidently use te reo Māori as part of their daily activity?

2.3 Describe the approaches your organisation currently uses to integrate te reo Māori into its activities. Consider these headings to help organise your thinking.

When practitioners work with service users

When staff meet

When people enter your organisation

When people see your organisation's literature

When holding hui

Other situations

3 Whakawhanaunga

Kāhui tautoko - support groups

Often, one of the functions of Māori support groups is to validate the use of te reo Māori in the organisation.

3.1 Who are the local Māori groups that your organisation has a relationship with? What arrangements does your organisation have with these groups or individuals with respect to validating your te reo Māori usage?

Creating a culturally safe environment for Māori

3.2 In this exercise you are required to assess your organisation’s performance against criteria in the table. The list of criteria is not exhaustive, but represents a range of features characteristic of an environment that is conducive to working with Māori and could be considered culturally safe.

Choose a score between one and five to indicate your organisation’s performance against each criteria, where one equals excellent performance and five equals poor performance.

In the right hand column identify ways in which you could improve your organisation’s performance against each of the criteria. If your organisation scores a five against any criteria, continue to consider ways to further improve or extend your performance.

Criteria	Score	Future improvements
The organisation has allocated space appropriate for whānau hui.		
Te reo Māori speakers are available when required.		
External Māori support groups can be accessed when needed.		
Kaumātua are part of the organisation.		
The organisation has a range of mechanisms for measuring cultural outcomes.		
The organisation has a remunerative arrangement with kaumātua.		
Staff are supported and have access to te reo Māori development.		

Criteria	Score	Future improvements
There is common understanding about the application of tikanga Māori in the organisation.		
Staff understand and use Māori greetings when working with Māori service users.		
The organisation has policy relating to the use of Māori models of health.		
The organisation supports whakawhanaunga processes.		
The organisation has a process for identifying Māori and whānau satisfaction.		
The organisation has a workforce strategy to develop capability and capacity in the use of Māori health models.		
The organisation integrates Māori knowledge and skills into tangata whaiora programmes.		
Karakia is used appropriately in the organisation's activities.		
Staff use Mihimihi where and when appropriate.		
Programmes include activities that assist tangata whaiora to strengthen their identity.		
The organisation effectively records whanaungatanga processes.		
Staff can demonstrate an understanding of tautoko.		
Staff can articulate how aroha can be demonstrated in the therapeutic relationship.		
The organisation has a positive and functional relationship with local Māori groups (mana whenua).		
Staff understand and can articulate the kawa (protocols) of local iwi and hapū.		
Staff understand the function of karakia in the protection and transition of spirit during the care and support of tangata whaiora and their whānau.		
The organisation uses the natural environment as part of therapy.		

Source: Matua Raki. (2009). *Takarangi Competency Framework*. Wellington: Matua Raki

4 Hauora Māori

Rob's story

Rob is an occupational therapist who has recently joined the organisation. He has been raised in a very positive and supportive family and as such has succeeded well through secondary and tertiary education. Rob is of Ngāti Maniapoto descent. He has strong connections to his marae at home and regularly visits relatives in the King Country with his family. Rob has not had any Māori language education and there are no fluent speakers in his home.

Rob is very confident with the skills that he has learnt through his training as an occupational therapist, but along with two other colleagues, is starting to notice that his lack of te reo Māori and understanding of Māori processes inhibits his ability to get the best outcome when working with Māori who use the services of his organisation.

Rob has long held a desire to become a fluent speaker of te reo Māori, and even more so now he wants to understand how knowledge of his culture can improve his performance on behalf of the organisation. Along with his two colleagues, Rob is struggling to find a starting point for this journey and is unsure of the commitment he will need to make to achieve his desire.

4.1 As a leader in the organisation, what supports could you make available to Rob?

4.2 What workforce development options, related to te reo Māori and Māori models of health are available to staff in the mental health and addiction sectors? List the ones you know and identify others through discussion with colleagues. Place a tick next to those that are currently being accessed by people in your organisation.

Measuring cultural outcomes

Including te reo Māori and Māori models of health in service activity means that Māori knowledge, skills and practices will become mandatory elements of planning, programming, intervention strategies, quality improvement, performance management criteria and outcome measures. Measuring the impact of these mandatory elements on tangata whaiora recovery are important functions for leaders and managers.

4.3 Listed below are a range of approaches for collating information and evidence about the impact of Māori cultural content on the activity and performance of a service. Tick

those that you currently use in your service and list any other approaches that could be used in your service.

- ⇒ Feedback from kaumātua.
- ⇒ Feedback from hui with tangata whaiora and whānau conducted by kaumātua.
- ⇒ Analysing clinical and case notes.
- ⇒ Reviewing notes from whānau meetings.
- ⇒ Private interviews.
- ⇒ Monitoring staff progress against competency frameworks.
- ⇒ Whakawhanaunga hui for tangata whaiora.
- ⇒ Feedback from external agencies.
- ⇒ Regular reviews of performance against national goals.
- ⇒ Programme observations.
- ⇒ Staff performance appraisal.
- ⇒ Setting and assessing against cultural goals.
- ⇒ Setting te reo Māori objectives for staff.

Others

4.4 Identify two approaches that your organisation is not currently using that could be integrated into its practice.

A

B

5 Wairua

Working with kaumātua

Whiria te Oranga (Te Rau Matatini, 2008) is the recently released kaumātua workforce strategy for mental health and addiction services. The strategy recognises the leadership and role of kaumātua in supporting the well-being of tangata whaiora, whānau, hapū, iwi, and mental health and addiction workers and services.

Most importantly, the strategy provides organisational leaders with ways to formally consider the role of kaumātua within their organisation. As an organisational leader, it is essential to formally consider the role of kaumātua in this way, as to not do so creates risk for kaumātua and those that they work alongside.

Whiria te Oranga can be accessed on the Te Rau Matatini website, www.matatini.co.nz.

5.1 In which contexts are kaumātua able to support and make contributions to the activities of a mental health and addiction service?

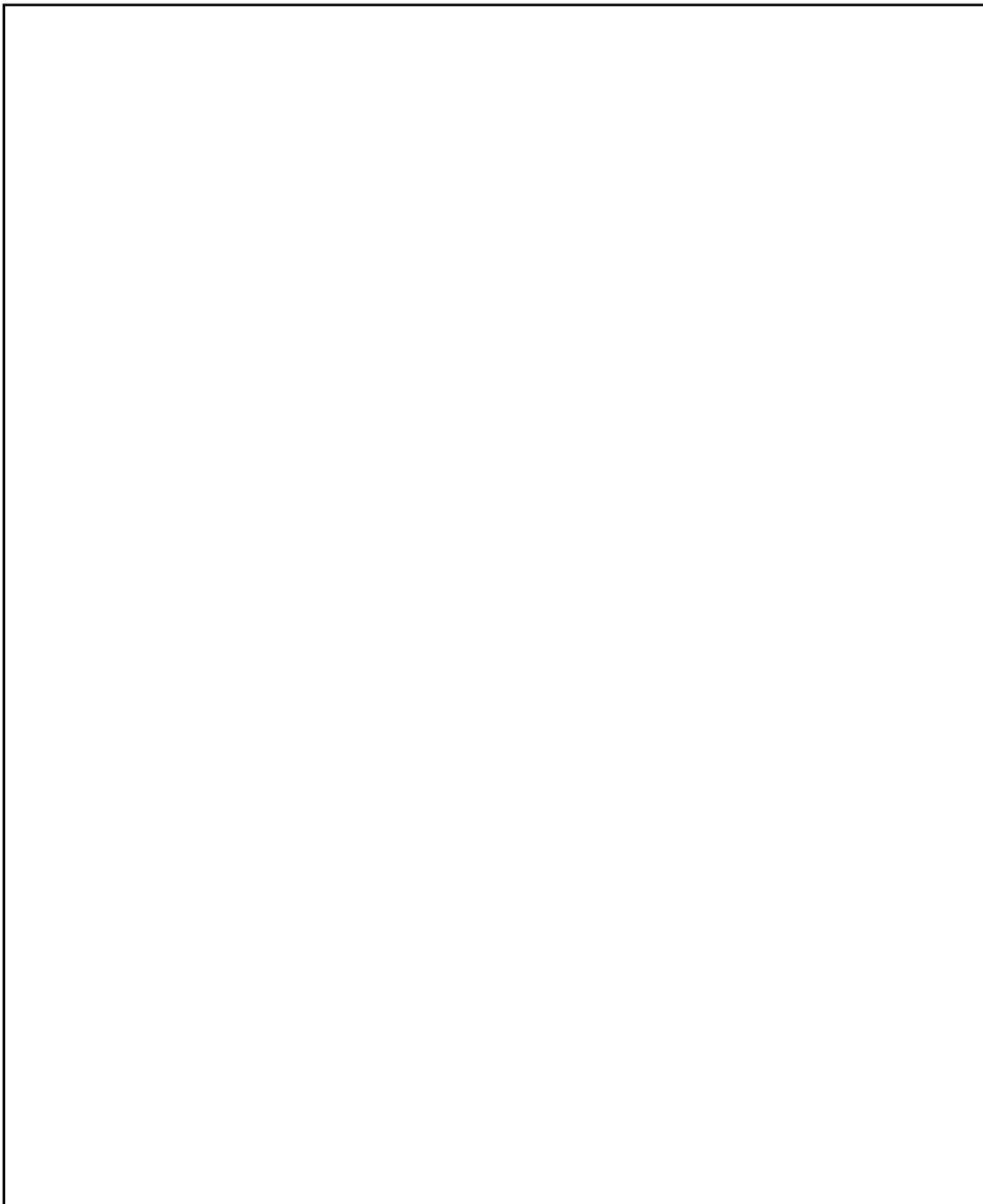
5.2 What challenges are faced by mental health and addiction services when working with kaumātua?

5.3 What challenges do kaumātua face when working in a mental health and addiction service?

6 Tuakiri Tangata

6.1 Draw a flow chart to show the steps that your organisation would take to reconnect tāngata whaiora with their whānau, whakapapa, marae, hapū and iwi. Consider the Māori support staff and groups available to your organisation.

(Note: you will need to print out this page to draw your flow chart.)



7 Manaaki

The following descriptors provide meaning for the term manaaki in the context of mental health and addiction (Matua Raki, 2009).

- To be involved in activity that enhances the mana of others - tangata whaiora or colleagues.
- He mana tō te kupu: te mana-ā-kī - the integrity of the spoken word.
- The active hosting and support of tangata whaiora and whānau.
- A characteristic of a kaupapa Māori service.

7.1 Describe the ways in which your service promotes, supports and applies the principle of manaaki in the following two contexts.

The recovery processes of tāngata whaiora and whānau

When engaging with the community

7.2 Describe your organisation's understanding of the way in which the principle of manaaki is integrated into practice.

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Ministry of Health - www.moh.govt.nz.

Te Puni Kōkiri Ministry of Māori Affairs - www.tpk.govt.nz.

Te Rau Matatini - www.matatini.co.nz.

Te Taura Whiri i te Reo Māori: Māori Language Commission - www.tetaurawhiri.govt.nz.

Working with Māori - leader level

Learning Review Tool and
Individual Professional Development
Plan



Learning Review Tool

Using the Likert scales below, rate your work in relation to working with Māori

I consider that my organisation performs well in providing an environment that is culturally safe for Māori.

1	2	3	4	5
═	═	═	═	═
Not really				Absolutely

My organisation supports staff well to develop Māori knowledge and skills.

1	2	3	4	5
═	═	═	═	═
Not really				Absolutely

My organisation effectively and appropriately integrates Māori models of health.

1	2	3	4	5
═	═	═	═	═
Not really				We do well

The use of Te reo Māori is obviously improving within my organisation.

1	2	3	4	5
═	═	═	═	═
Not really				Absolutely

Choose your response to one of the above statements, and explain why you made this response.

What new knowledge or insights have I gained from studying this module?

What are three things that I can put into practice or improve upon as a result of this new knowledge or insights?

A

B

C

Individual Professional Development Plan

Working with Māori (leader level)

One thing I can take personal responsibility for.

Action What will I do?	Timeframe When will I do this?	Resources What or who will I need?	Challenges What barriers or resistance will I face?

One thing I can advocate for and work towards.

Action What will I do?	Timeframe When will I do this?	Resources What or who will I need?	Challenges What barriers or resistance will I face?

Please retain this Individual Professional Development Plan: working with Māori - (leader level) to contribute to your summary action plan once you have completed all of the learning modules.



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