Building a platform for integrated care to deliver change that matters to comunities

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- Māori are three times as likely than non-Māori to have type II diabetes and are more likely to develop complications
- There has been little progress made in the way of reducing health inequities in New Zealand - existing interventions have resulted in some change and yet are not sufficient
- This case study forms part of the He Pikinga Waiora project, funded through the National Science Challenge Healthier Lives stream, to promote transformational improvements in health service delivery, with a focus on pre-diabetes

HEALTH INEQUITIES IN NEW ZEALAND

HE PIKINGA WAIORA IMPLEMENTATION FRAMEWORK

CULTURAL - CENTEREDNESS

Ko tõku reo, tõku ohooho, Ko tõku reo, tõku Māpihi Maurea

Community voice Community is involved in defining the problem and developing the solution.

Reflexivity

Implementation team is reflexive and identifies adjustments to the intervention as a result.

<u>Structural transformation and resources</u> The intervention results in significant structural transformation and resources which are sustainable over time.

COMMUNITY ENGAGEMENT He urunga tangata he urunga pähekeheke,

he urunga oneone mau tonu

Partnering between researchers and community members/ organizations in all phases of the project. Guided by principles of action, social justice, and power sharing.

Decision-making and communication is shared and a strong partnership is identified throughout the intervention process. Relationships build capacity of communities and researchers.

KAUPAPA MĀORI

He oranga ngakau, he pikinga waiora

The Framework has indigenous self-determination at its core. All four elements have conceptual fit with Kaupapa Māori aspirations and all have demonstrated evidence of positive implementation outcomes.

A coding scheme derived from the Framework was applied to 13 studies of diabetes prevention in indigenous communities in Australia, Canada, New Zealand, and the United States. Cross-tabulations demonstrated that cultural centeredness (p=.008) and community engagement (p=.009) explained differences in diabetes outcomes and community engagement (p=.098) explained difference in blood pressure outcomes.

The Framework is intended as a planning tool to guide the successful development and implementation of interventions. Funders can use the Framework to assess the likely effectiveness of proposed interventions. Community organizations can use the Framework to work with researchers or policy makers to strengthen each of the four elements.

Please let us know how you are using the Framework and any feedback you may have: hpwadmin@waikato.ac.nz



SYSTEMS THINKING He tina ki runga, he tāmore ki raro

Systems perspectives

Intervention considers multiple perspectives, world views, and values. It considers multiple causes, has a broad focus and offers multiple solutions.

System relationships

Demonstrates strong understanding of the complex relationships between variables including feedback loops, time delays and multi-level effects.

Systems levels

Intervention targets change at the macro, meso and micro levels.

INTEGRATED KNOWLEDGE TRANSLATION

Toi te kupu, toi te mana, toi te whenua

Integration of knowledge translation activities within the context of the community in which the knowledge is to be applied.

There is a process of bi-directional learning established so that information is tailored to knowledge users needs.

SETTING THE SCENE POUTIRI CHARITABLE TRUST, TE PUKE

Established in 1997 to contract and develop Māori Health Providers within the Bay of Plenty region to deliver health and wellbeing services.



- 'Wicked problems' such as the prevention of long term conditions are characterised by high levels of complexity and uncertainty
- These problems are not easily understood nor are they tackled successfully using a reductionist approach, which breaks complex problems into smaller simpler problems
- There is a need to develop effective interventions that work in 'real world settings', that is, an obesogenic environment
- There is no simple solution. A bigger picture understanding is needed to develop a multi-level comprehensive approach to addressing diabetes

SYSTEMS THINKING TO STIMULATE DIALOGUE

- The purpose of this project is to establish a partnership to identify strategic opportunities for Poutiri Trust to respond to pre-diabetes and improve health gains for Māori
- Key relationships, partnerships, contracts, funding streams, services and organisational strengths and barriers were identified and analysed utilising case study methodology
- Data sources were triangulated including from semi-structured interviews, documentation (including history, vision, mission and values) to provide an understanding of the organisation
- In addition, a systems map was utilised to support the identification of strategic opportunities for consideration by Poutiri Trust

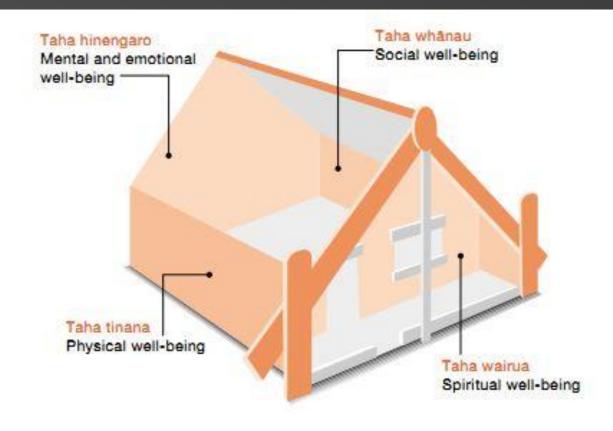
RESEARCH DESIGN

The importance of 'hauora' aligns with intersectoral integration of health and social services to deliver whānau-centred care, and the need for Poutiri Trust to diversify its funding sources to deliver services in this way

"We need to work around the client, not around [our] contracts..."

"Because health and wellbeing to Māori is not just what health is to the health system. Poutiri needs to reflect that, because my understanding is historically contracts have been health focused but not Māori health focused."

KEY FINDINGS – of relevance to Poutiri Trust



Adapted from Mason Durie's Whaiora: Māori Health Development. Auckland: Oxford University Press, 1994, page 70 Unfortunately, current performance measures often have a purely clinical focus

The development of sets of wider, more holistic outcome measures will provide the opportunity to demonstrate a wider range of positive outcomes back into the system

KEY FINDINGS – of relevance to Poutiri Trust

There is a need for Poutiri Trust to leverage organisational strengths and data to shift organisation-level performance and exert influence within the health system

"...we have no influence over the system, how much should we commit ourselves to being only within that system, I suppose, is the question."

Strengthened partnerships will support evidence-based change and quality service delivery.

"I think partnerships are essential. Relationships are essential ... instead of having the academic team come into the community, I want Poutiri to be the team that goes to a research organisation and says this is what we need, you can help us to do that. It's the whole whānau collective thing. It all makes sense, collaboration makes sense. And I don't think it can be done without that."

KEY FINDINGS – of relevance to Poutiri Trust

- Greater recognition of the strengths of Māori (Development) Organisations as leaders to effect change, to promote community engagement and to ensure consideration of the local context
- Intersectoral integration of health/social services must be supported by more seamless integrated planning/funding across government agencies
- Capability and capacity building for Māori organisations is essential to ensure the potential for data to inform funding decisions, and to shift and better measure organisation/system performance in an equitable way
- Recognition that strengthened partnerships with Māori organisations support measurable, evidence-based change/service delivery, partic when Māori knowledge systems are viewed alongside a Western scientific approach.

KEY FINDINGS – of relevance to policy makers

FUTURE DIRECTIONS In many political agendas, integrated care remains synonymous with IT integration and structural initiatives and funding driven by national policy

While quantitative data is important to inform funding decisions, adequate attention must be paid to the local context, a focus on hauora, the experience of the person and their whānau, and the important role of Māori development organisations



Sincere thanks to all of the case study participants, Poutiri Trust staff and board, and the He Pikinga Waiora team!