Faiva Ora  
2016–2021

National Pasifika Disability Plan



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# Executive summary

‘When I was younger, it was actually very tricky to navigate the system (disability). ... As I got to know the system better, I got the service [equipment] faster and better ...’ (Pasifika disabled person)[[1]](#footnote-1)

Pasifika disabled people and their families overall are somewhat under-represented amongst users of Ministry of Health funded disability support services. They represent 5.9% of service users, relative to the total Pacific population of 7.4%.

Contributory factors to this under-representation are that Pasifika disabled people have a limited choice of culturally responsive disability services, allied with the negative Pasifika community cultural views of disability.

Addressing this inequity requires the collective efforts of Pasifika disabled people, their families, Pasifika communities, disability services and government agencies. This concept reflects the spirit of Faiva Ora,[[2]](#footnote-2) which is to work together to solve the challenges experienced by Pasifika disabled people and their families. Significant gains have been made since 2010 to address these issues, with the delivery of advice, information in Pasifika languages, and Pasifika responsiveness training and guidelines for disability service providers.

Many of the issues Pasifika disabled people and their families face are not within the scope of the Ministry of Health Disability Support Services (DSS) Appropriation to address, which means the Ministry of Health DSS will only deliver the actions specified in this plan.

Faiva Ora 2016-2021 builds on past achievements of previous Faiva Ora plans[[3]](#footnote-3) and provides a coordinated and collaborative response by the Ministry of Health Disability Support Services to address these issues nationally. Over the next five years, the Faiva Ora plan will deliver on four priority outcomes to achieve its vision. It will focus on improving outcomes for Pasifika disabled children, youth and their families; strengthening Pasifika communities to engage with and support individuals with disabilities and the families, to participate in their communities; increasing the cultural responsiveness of disability services and supports, and stakeholders working in partnership to address challenges experienced by Pasifika disabled people and their families.

This plan has been developed, and will be implemented, in partnership with Pasifika disabled people, Pasifika communities, disability support services, Pacific health providers, district health boards and government agencies.

Key to informing this plan has been the guidance and advice of the Faiva Ora Leadership Group, the research commissioned by the Ministry of Health on Pasifika disabled children, youth and their families in 2015, and the evaluation of Faiva Ora 2010–2013. It has also been informed by Government priorities, the New Zealand Disability Strategy, the Ministry of Health’s Health Strategy and other evidenced based research.

# Introduction

Faiva Ora 2016–2021 builds on significant achievements over the last six years to address issues and challenges experienced by Pasifika disabled people and their families. It is the third national Pasifika disability plan and follows on from the 2014–2016 plan.

This plan supports the delivery of government priorities, and it is aligned with the New Zealand Health Strategy and the New Zealand Disability Strategy, and contributes to the delivery of the Ministry of Health Disability Support Services Strategy 2014–2018.

While this plan provides a national framework to address Pacific disability issues and opportunities, it will have a specific focus at a local level within the regions where Pacific people reside. Although there are specific ethnicities under the ‘Pacific’[[4]](#footnote-4) umbrella term, this plan takes a pan-Pacific approach in that it will be relevant across all Pacific ethnicities.

# Vision

Pasifika disabled people and their families are supported to live the lives they choose.

# Principles

The following principles, based on the Enabling Good Lives Principles, will guide the implementation of Faiva Ora over the next five years.

### Self-determination

Pasifika disabled people are in control of their lives.

### Beginning early

Invest early in Pasifika families and communities to support them to be aspirational for their disabled child; to strengthen community and natural supports; and to support Pasifika disabled children to become independent, rather than waiting for a crisis before support is accessed.

### Person and family centred

Pasifika disabled people have supports that are tailored to their individual and cultural needs and goals, and to take a whole-of-life approach, which involves Pasifika disabled people, their families, providers and communities working together.

### Ordinary life outcomes

Pasifika disabled people and their families are supported to live an everyday life in everyday places, and are regarded as citizens with opportunities for learning, employment, having a home and family, and social participation – like others at similar stages of life.

### Equity

Pasifika people have equal access to services and supports and achieve equitable outcomes in comparison to other population groups, and Pasifika people are supported to access mainstream services before specialist disability services.

### Enhancing Pasifika cultural identity

Pasifika people’s connectedness to their family and communities is enabled, and Pasifika people’s world views, practices and protocols are respected.

### Easy to use

Pasifika disabled people have supports that are simple to use, culturally appropriate and flexible.

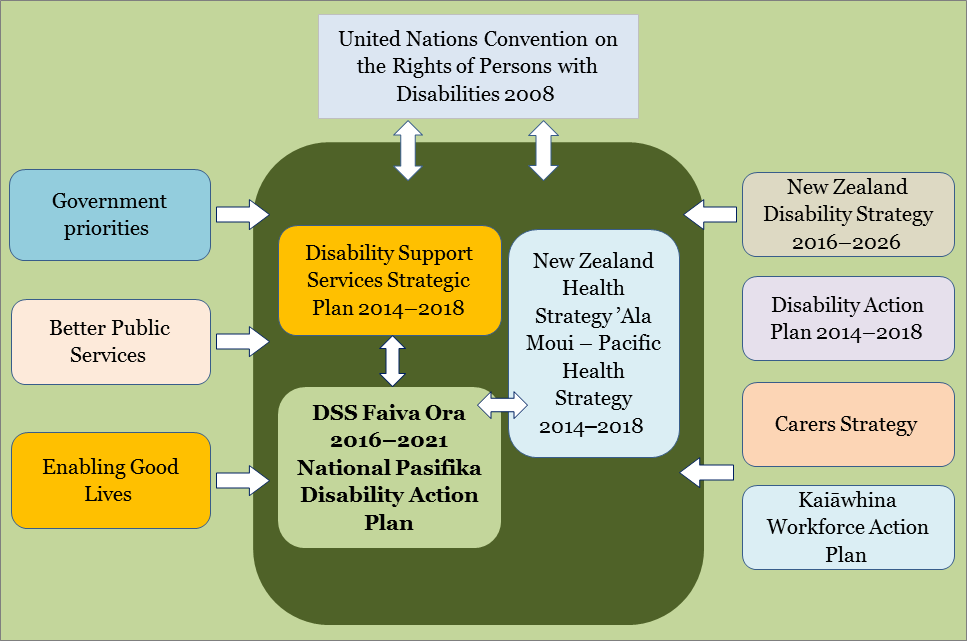
### Relationship building

Supports to build and strengthen relationships between Pasifika disabled people, their families and communities.

# Context of Faiva Ora 2016–2021

Faiva Ora 2016–2021 sits under the Ministry of Health’s Disability Support Services Strategic Plan 2014–2018 and sets out the priority actions and outcomes for Pasifika disabled people and their families. The strategies and commitments that have guided the development of Faiva Ora are illustrated in Figure 1 and described more fully below.

Figure 1: Faiva Ora 2016–2021 in its government context



# Government goals

## United Nations Convention on the Rights of Persons with Disabilities 2008

The purpose of the Convention is to ‘promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity’. It sets out 50 articles stating the rights of disabled people, covering all aspects of economic, social, political, and cultural life.

## New Zealand Disability Strategy 2016–2026

The vision of the New Zealand Disability Strategy is: New Zealand is a non-disabling society – a place where disabled people have an equal opportunity to achieve their goals and aspirations, and all of New Zealand works together to make this happen. To achieve this vision, this cross government plan focuses on the following eight outcomes.

1 Education

2 Employment and economic security

3 Health and wellbeing

4 Rights, protection and justice

5 Accessibility

6 Attitudes

7 Choice and control

8 Leadership.

## Disability Action Plan 2014–2018

### Cross-government priorities to make a difference

This cross-government plan aims to ensure that ‘all New Zealanders experience equal rights of citizenship’. Led by the Office for Disability Issues, in partnership with disabled persons organisations and key government agencies, the plan sets out four areas of focus.

1 Increase employment and economic opportunities

2 Ensure personal safety

3 Transform the disability support system

4 Promote access in the community.

### New Zealand Health Strategy 2016

This strategy provides the overarching framework and directions for the health system. It aims to ensure that ‘All New Zealanders live well, stay well, get well, in a system that is people-powered, provides services closer to home, is designed for value and high performance, and works as one team in a smart system’.

### Ministry of Health Disability Support Services Strategic Plan 2014–2018

This strategic plan sets out the vision for disability support services – disabled people and their families are supported to live the lives they choose – along with some guiding principles that informed the development of the plan. It outlines four objectives.

1 Improved outcomes for disabled people and their whānau/families

2 An improved disability support system to better support disabled people

3 Improved collaboration, communication and consultation

4 Management of risks to the sustainability of the support system.

### More choice, control and flexibility

Disability Support Services within the Ministry of Health is committed to transforming the disability support system and increasing disabled people’s choice, control and flexibility of their support options. Leading this transforming process are person-directed approaches, which include the Ministry of Health’s New Model for supporting disabled people and the cross-government Enabling Good Lives initiative.

Under these person-directed approaches, disabled people have more choice, control and flexibility regarding the supports they receive and the lives they lead. These approaches include the Choices in Community Living project, the Individualised Funding and Enhanced Individualised Funding schemes, local area coordination, and supported self-assessment.

More broadly, across government the Ministries of Health, Education and Social Development have been jointly supporting the Enabling Good Lives demonstrations in Christchurch and Waikato. By combining the funding from these government agencies a disabled person has the freedom and support to plan his or her own life and finance it with one personal budget. Lessons from the review of the Enabling Good Lives and the New Model will continue to inform service development in the coming years.

Over the years Pasifika disabled people and their families have expressed their desire to have more choice of culturally appropriate services (University of Auckland 2015), more control to direct their own supports, choice about who manages these, and more flexibility regarding who, where and when supports should be provided. By having this greater choice, control and flexibility they and their families will improve their ability to live a good life and participate and live in their communities.

### Ministry of Health ’Ala Mo’ui – Pathways to Pacific Health and Wellbeing 2014–2018

*’Ala Mo’ui: Pathways to Pacific Health and Wellbeing 2014–2018* sets out the priority outcomes and actions for the next four years that will contribute to achieving the Government’s long-term outcomes for Pasifika people’s health. That is, all New Zealanders, including Pasifika people, will lead healthier and more independent lives, high-quality health services will be delivered in a timely and accessible manner, and the future sustainability of the health and disability sector will be assured.

### New Zealand Carers Strategy Action Plan 2014–2018

The New Zealand Carers’ Strategy Action Plan recognises the immense contribution of whānau, aiga and carers to the lives of people with disabilities in New Zealand. The Ministry of Health contributes to the implementation of this strategy, and the Ministry of Social Development is the lead agency.

The purpose of this strategy is to improve support for carers. It has five priorities.

1 Enable whānau, aiga, family and carers to take a break

2 Protect the health and wellbeing of whānau, aiga, family and carers

3 Provide information that whānau, aiga, family and carers need

4 Improve pathways to paid employment for carers and support for whānau, aiga, family and carers to balance their work, life and caring roles

5 Increase awareness and understanding of the carer’s role.

### Kaiāwhina Workforce Action Plan

This is a five-year action plan with a 20-year vision for the New Zealand health and disability kaiāwhina workforce. Actions are practical and clearly described to focus efforts on achieving the long-term vision, which is a kaiāwhina workforce that adds value to the health and wellbeing of New Zealanders by being competent, adaptable and an integral part of service provision. The Kaiāwhina Workforce Action Plan is a living document that will continue to evolve and adapt in a dynamic environment.

### Better Public Services

Disability Support Services is committed to delivering on the Government’s priorities[[5]](#footnote-5) for Better Public Services. Over the next five years Faiva Ora will deliver on the following priority result areas.

#### Results 2–4: Supporting vulnerable children

Pasifika people accessing Ministry-funded disability support services are younger on average than other ethnic groups. The median age of Pasifika people accessing disability support services is 23 years, compared with 36 years for the total population. Having a focus on this younger demographic group through early intervention and prevention services will support the achievement of better outcomes for this group in the long term.

#### Results 5–6: Boosting skills

Equipping the Pasifika disability workforce with the necessary skills will support them to undertake their roles effectively. For the wider disability workforce, having Pacific cultural skills will improve engagement with, and service delivery to, Pasifika clients.

#### Results 9–10: Improve interaction with government

Over the next five years Faiva Ora aims to build closer links between the Ministry of Health and local Pasifika communities and health and disability service providers. Specifically, Faiva Ora aims to raise awareness and understanding of Ministry-funded disability support services to local Pasifika communities, and to enable better collaboration between the Ministry and its funded health and disability services to improve outcomes for Pasifika people.

# Current status of Pasifika disabled people

## Using Ministry-funded disability support services

In 2014 a total of 1893 (5.9%) Pasifika people were allocated Ministry-funded disability support services. While this was a slight increase from 1874 in 2013, Pasifika disabled people overall remain under-represented in disability support services relative to the total Pasifika population, which made up 7.4% (296,944)[[6]](#footnote-6) of the New Zealand population.

According to the census in 2013, the Pacific population is the most youthful population of all ethnic groups in New Zealand with a median age of 22.1 years old. This is consistent with the ages of Pasifika people using Ministry-funded disability support services, with 42% of the Pasifika people who were allocated Ministry funded disability supports being aged 19 years and below (compared with 32% European/other). Of these, 60% were male and only 40% were female.

Figure 2: Number of Pasifika clients allocated Ministry funded disability support services in age groups

In the Ministry of Health Client Demographic Report 2014, Pasifika disabled people were allocated the following services.

* Home and Community Support Services – 1158 people (7% of all DSS clients allocated this service). Service utilisation was just under 700 people. This service was used equally by both Pasifika men and women.
* Carer Support – 1380 people (8.2%). Pasifika men were higher users (60%) than Pasifika women.
* Community Residential Services – 215 people (3%). Pasifika men were higher users (61%) than Pasifika women. Service utilisation was just over 200 people.
* Supported Living – 80 people (2%). Pasifika men were higher users (53%) than Pasifika women.
* Respite Services – 141 people (7%). Pasifika men were higher users (66%).
* Day Programmes – 29 people (1.5%). Pasifika women were higher users (59%) than Pasifika men.

Most of the Pasifika disabled people allocated disability support services live in the Auckland region (74%), followed by the Wellington region (11%), the Waikato region (3%), the Christchurch region (3%), and the Manawatu / Wanganui region (2%).

Table 1: Top 10 regions where Pasifika people with allocated Ministry disability support services live\* against where the general Pacific population live\*\*

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Region** | **DSS clients** | **Pacific population** |
| 1 | Auckland | 1,405 | 227,000 |
| 2 | Wellington | 202 | 40,700 |
| 3 | Waikato | 64 | 17,300 |
| 4 | Christchurch | 62 | 14,750 |
| 5 | Manawatu–Wanganui | 32 | 8,430 |
| 6 | Hawkes Bay | 30 | 7,650 |
| 7 | Bay of Plenty | 28 | 9,160 |
| 8 | Otago | 23 | 4,490 |
| 9 | Northland | 17 | 5,850 |
| 10 | Gisborne | 10 | 1,980 |
|  | Southland | 10 | 2,170 |

\* Source: Ministry of Health 2014

\*\* Source: Statistics New Zealand 2013a

In summary, Pasifika people were well represented among users of the carer support subsidy and home and community support services, while they were under-represented among users of community residential services, supported living and day programmes. Reasons for such differences in the use of disability support services may include:

* Pasifika people’s lack of awareness of the supports available
* Pasifika families preferring to care for their disabled family members at home
* the lack of culturally responsive services to choose from.

While the Demographic Report captures the people who have been allocated disability supports and services, it does not record the number of family members, caregivers and community members who provide disability supports or who are affected by disability. A Pasifika person with a disability will usually have some level of connection to their family, including extended family members, and their community.

# Challenges and opportunities

There are a number of current and future challenges for Pasifika disabled people and their families, which present opportunities for development and improvement in the 2016–2021 period.

## Challenges

### 1 The Pasifika disabled population is young

According to the 2014 DSS demographic report, the Pasifika disabled population is relatively young. In the 2015 research report (University of Auckland 2015), Pasifika disabled youth accessing Ministry-funded disability services identified the following barriers.

* Their voice was not heard and respected, and it made them feel ‘fragile’ and incapable of looking after themselves or making decisions for themselves. All communication about disability supports, medication and care with health professionals and staff working in disability services was directed to the parents and not to the disabled youth.
* Pasifika children and youth need to develop their intellectual or academic knowledge and abilities to prepare them ‘for life’.
* There is a need for support when transitioning from secondary school to adulthood. With limited skills, abilities and supports, Pasifika disabled school leavers felt they were not in a good position to make good choices when they left school. Transition services to support school leavers to establish their adult lives are strongly recommended.
* There is a continual need to prove their disability in order to renew their disability allowance or explain school absences, despite having a permanent disability.

### 2 Pasifika families and caregivers

Pasifika families and caregivers play a critical supportive role for Pasifika disabled children and youth. Over the years they have told of the ongoing challenges they experience when trying to navigate the disability system. They often feel ‘alone’ and ‘isolated’ in the system, and they have reported that they need to know more about available disability support services.

In the research report on Pasifika disabled children, youth and their families, Pasifika families and caregivers highlighted:

* difficulties they experienced when accessing respite and carer support,[[7]](#footnote-7) and the ineligibility for Funded Family Care to pay for extended family living at the same address to provide this support
* the challenges accessing Pasifika relief carers
* issues regarding access to relief carers for respite after hours in the evenings.

### 3 Challenges to achieving better outcomes for Pasifika disabled people

According to the 2015 research report and the 2014 evaluation report, the following were identified as challenges to achieving better outcomes for Pasifika disabled people.

* There is a limited number of Pasifika disability provider organisations, particularly for home and community support services and respite services. This reduces the choice for Pasifika clients and their families.
* Non-Pasifika needs and service coordination (NASC) staff and disability support staff experience challenges of language difficulties and cultural misunderstanding when engaging with Pasifika disabled people and their families.
* Pasifika people reported a lack of knowledge and understanding of the disability supports available. When providing information about supports, the focus should be on relationship building with clients to increase their understanding of the information provided to them.
* Having multiple funding agencies such as the Ministries of Social Development, Health and Education, each with its own disability definitions and eligibility criteria, has exacerbated the confusion and frustrations of Pasifika clients. More collaborative work with other government agencies and health professionals is required.
* Late assessment and diagnosis of disability of their disabled child means that parents felt they had missed out on medical assistance and support that may have reduced the severity of their impairments.

### 4 Incidence of chronic disease among Pasifika people

The incidence of chronic disease such as stroke, diabetes and ischaemic heart disease is higher in adult Pasifika people than in other ethnic groups (Statistics New Zealand and Ministry of Pacific Island Affairs 2011). Mortality rates for cardiovascular disease and diabetes account for a large part of the difference between the overall mortality rates for Pasifika people and those for other ethnic groups.

Given the continual rising rates of chronic diseases and their complications among Pasifika people in New Zealand, it is likely there will be a profound impact on Ministry-funded environmental support services, environment and modifications services, and sensory services in the coming years. Collaborating with health stakeholders to reduce the incidence of chronic disease among Pasifika people will reduce pressures on Ministry disability services downstream.

## Opportunities

Building on achievements over recent years, this plan presents an opportunity to adopt innovative approaches to address current and future challenges experienced by Pasifika disabled people and their families.

### 1 Input from Pasifika disabled people and their families

Supporting the delivery of quality disability supports and services to Pasifika people requires getting their views, perspectives and input into policy development, service design and implementation. Having Pasifika representation on key Ministry forums and disability sector groups gives Pasifika people a voice so that disability supports, services and programmes are appropriate for Pasifika people.

### 2 Pasifika-specific disability support services

Over the last few years the Ministry of Health has responded to calls from disabled people and their families for more choice, control of, and flexibility in their support options. For Pasifika disabled people and their families, this means having a choice of culturally appropriate disability services. Pasifika disabled people and their families have expressed the need for Pasifika-specific disability services,[[8]](#footnote-8) particularly in areas where Pasifika people reside.[[9]](#footnote-9) They have noted the need for the following Pasifika-specific disability services.

* Respite services with Pasifika relief carers who are aware of and understand their language and cultural needs
* Day programmes like PHAB,[[10]](#footnote-10) which would enable Pasifika disabled youth to connect and socialise with others like themselves and provide good role models for becoming more independent
* Supported living so that they are able to live in the community, stay connected to family and participate in community events
* Home and community support services to support them in their daily lives, and so that they are able to live in the community and be closer to families and friends (University of Auckland 2015)
* Carer support groups, which would enable Pasifika parents and families to meet, network and share information and experiences with others who are ‘in the same boat’.

Also, learning opportunities are important to address issues of health literacy among Pasifika families.

Overall, these services will help to reduce access barriers such as cultural, logistic and physical factors. Apart from providing more choice, these services may also help to reduce ongoing service use as Pasifika disabled people and their families learn the skills to maximise their independence.

### 3 Culturally responsive disability services

#### Faiva Ora Leadership Group[[11]](#footnote-11)

Since 2010, the Ministry has sought advice and guidance from the Faiva Ora Leadership Group on service responsiveness to Pasifika disability issues. Continued support of this group will ensure Ministry-funded services and programmes are well informed about Pasifika cultural needs and preferences. With a lot of Pasifika youth using Ministry-funded disability services, more youth representation on this group is needed.

#### Pasifika cultural training

When Pasifika people use disability support services, most use non-Pasifika disability support services. To support the delivery of a quality service to, and achieve better outcomes for, Pasifika clients and their families, these services must have the appropriate Pasifika cultural skills and knowledge (Integrity Professionals 2015). A Pasifika disability cultural training package was developed and has been implemented over the past four years. During this time over 90% of participants have noted an increase in confidence in engaging with Pasifika clients (Pacific Inc, 2014).

#### Information on disability support services and organisational guidelines for disability service responsiveness[[12]](#footnote-12)

A whole-of-organisation approach was identified as being essential to meet the needs of Pasifika clients (Pacific Inc, 2014). An organisation’s governance, policies and service delivery models – and even its documentation, such as the personal plans of Pasifika clients – should consider the cultural needs of Pasifika disabled people. An organisational guideline was developed and circulated to disability providers in 2014. Since then, this resource has made organisations more aware of the issues experienced by their Pasifika clients and has guided some organisations in their approaches.

Information on disability support services continues to be a challenging area for Pasifika people. Although information guides were developed and have been translated into six Pacific languages, feedback from the consultation for this plan has suggested the following approaches may be useful.

* With a youthful population who have access to digital devices and use these to access social media, such communication channels could be considered to ensure information is accessible for Pasifika young people with disabilities.
* Feedback obtained from Pasifika people over the years suggests a growing young carer population who support their disabled sibling, parent or extended family member with a disability. Given that most Pasifika youth have access to digital devices, information to support this carer demographic could also be channelled through online platforms.
* More work is required to make information about disability services accessible to primary health organisations and DHBs, given that they are often the first point of contact for health issues for Pasifika people with disabilities.

The review of all Ministry-funded disability information advisory services and needs assessment service coordination (NASC) organisations may present opportunities for culturally appropriate models of information service delivery for Pasifika people. This may also help to address challenges which Pasifika people face when trying to navigate the disability system.

#### Pasifika disability workforce

Although equipping the disability workforce with Pasifika cultural competence is important, recruiting Pasifika staff also supports better engagement with Pasifika consumers (University of Auckland 2015). Pasifika staff, because of their Pasifika cultural connection, would go the ‘extra mile’ to achieve outcomes for Pasifika disabled people and their families (ibid.).

The New Zealand Disability Support Network and Te Pou disability workforce report (Te Pou o te Whakaaro and NZDSN) highlighted the need for more Pasifika people in leadership and managerial positions in disability support services. More Pasifika people working at a senior level and participating in organisation decision-making will support organisational responsiveness and enable better engagement with Pasifika disabled people and their families.

It is predicted that by 2051 one in five children in New Zealand will be of Pasifika ethnicity (Statistics New Zealand 2013b). There is an expectation that there will be a corresponding increase in the number of Pasifika disabled children. With this increase, disability services must have a workforce that reflects the number of Pasifika clients, especially young clients. Attracting Pasifika people to work in disability support services would enable the application of Pasifika models of support,[[13]](#footnote-13) and as a consequence better outcomes will be achieved for Pasifika disabled people and their families.

### 4 Community engagement and participation

Over 80% of Pasifika people in New Zealand were affiliated with a church community.[[14]](#footnote-14) As well as a place of worship, the church over the years has become a centre of Pasifika communities for social events, cultural and economic development, and health and education activities. Working in partnership with local organisations, Pasifika churches have led the development and delivery of innovative local solutions to address local problems for their parishioners (University of Auckland 2009).

Given the importance of disabled people living and participating in their communities, a community engagement approach is needed to achieve better outcomes for Pasifika disabled people. Continued promotion of community leadership and development would aim to increase disabled people’s inclusion and participation, and challenge the ongoing stigma attached to disability in Pasifika communities. With the appropriate information, training and support, local Pasifika churches and Pasifika disabled people and their families could partner with their local NASC organisations, disability support service providers and other agencies to deliver local innovative solutions to address local Pasifika disability needs. Building sustainable relationships between the Pasifika community and local providers may also support Pasifika disabled people and their families to navigate the disability system.

Engaging with the community sector (such as sports clubs, non-profit organisations, local government) and the education sector will be important to ensuring a holistic and encompassing approach. This provides access to other services for Pasifika disabled people, but also maximises other resources that already exist in the community.

By bringing community-led solutions together in a fono, Pasifika people would be able to share their experiences and learnings. In the long term, this would foster an innovative can-do culture in local Pasifika churches and their communities on disability issues.

### 5 Evidence-based information on Pasifika disabled people

Better use of data to improve outcomes[[15]](#footnote-15) is one of the priorities for the Government in delivering Better Public Services. Although quantitative information on Pasifika client demographics[[16]](#footnote-16) is now available, there is a growing need for complementary qualitative information that would help to explain trends and patterns. Combining the disability support services client demographic information with qualitative information allows the Ministry to make evidence-based decisions about how best to commission disability support services to Pasifika disabled people and their families.

Such information could be shared with a range of agencies and made available to funded disability support services in aggregated form. Accessing other agency data sets (University of Auckland 2015) could also provide insights and inform planning and funding decisions.

# Priority outcomes and actions

Faiva Ora 2016–2021 sets out the actions for the next five years that will contribute to achieving its vision. These priorities are:

1 improved outcomes for Pasifika disabled children, youth and their families

2 Pasifika communities are able to better engage with and support individuals with disabilities and their families to participate in their communities

3 disability services and supports meet the needs of Pasifika disabled people and their families

4 stakeholders working in partnership to address challenges experienced by Pasifika disabled people and their families.

## Priority Outcome 1: Improved outcomes for Pasifika disabled children, youth and their families

The following actions aim to meet the above outcome.

| **Action** | | **Outcome** | **Outcome measure** | **Completion date** |
| --- | --- | --- | --- | --- |
| 1 | Support Pasifika youth to access leadership training, mentoring and development opportunities | Pasifika disabled youth increase their independence | Increased numbers of Pasifika disabled youth complete leadership and mentoring training | June 2021 |
| 2 | Consider the establishment of a range of respite options that are Pasifika specific in Auckland and Wellington as part of the Disability Support Services Respite Strategy | Pasifika families have improved access to respite | Pasifika-specific respite options are considered in Auckland and Wellington | December 2018 |
| 3 | Promote and encourage Pasifika disabled to use person-directed purchasing approaches[[17]](#footnote-17) | Pasifika disabled youth have more choice, control and flexibility in their support options | Increased numbers of Pasifika disabled people use Individualised Funding, Enhanced Individualised Funding, Enabling Good Lives, Choices in Community Living | June 2021 |
| 4 | Explore the possibility of establishing a Pasifika independent facilitator in South Auckland | Pasifika disabled people and their carers are more aware of, and are connected with, available disability services and community supports | Pasifika independent facilitator considered in South Auckland | December 2017 |
| 5 | Widely disseminate culturally appropriate information and resources about disability support services based on recommendations from the review of all Ministry-funded disability information and advisory services | Pasifika people are more aware of and understand accessible information on available disability support services | Pasifika people access information on disability support services | December 2017 |
| 6 | Encourage Pasifika people to access the carer learning and wellbeing resource service and carer matching service, and monitor their use of the services | Pasifika families and carers have the skills and knowledge to support disabled people | An increase in the number of Pasifika people using the carer matching service and carer learning and wellbeing resource service | December 2017 |
| 7 | Consider establishing two circles of support[[18]](#footnote-18) for Pasifika families who have disabled children and youth – one in Auckland and one in Wellington – per annum | Pasifika disabled people have support from a group of people who assist with the thinking, planning and actioning of their personal goals | Two circles of support for Pasifika people per annum are considered | June 2018 |
| 8 | Consider establishing ‘community conversations’[[19]](#footnote-19) for Pasifika families who have disabled children and youth – three per annum in Auckland and one per annum in Wellington | Pasifika disabled people and their families participate in community conversations on how best to support them in their communities | Three community conversations are considered per annum in Auckland and one per annum in Wellington | June 2021 |
| 9 | Include Pasifika youth and family members in policy development and service design and implementation | The Ministry’s decision-making is well informed regarding Pasifika disability | Youth and family member representatives are on key Ministry DSS advisory groups | June 2021 |

## Priority Outcome 2: Pasifika communities are able to better engage with and support individuals with disabilities and their families to participate in their communities

The following actions aim to meet the above outcome.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Action** | | **Outcome** | **Outcome measure** | **Completion date** |
| 1 | Pasifika communities[[20]](#footnote-20) to lead innovations that raise awareness of disability services and challenge stigma | Pasifika communities are aware of disability services and challenge community stigma[[21]](#footnote-21) | Local innovations are developed and delivered by Pasifika communities | June 2018 |
| 2 | Update and circulate Pasifika church engagement resources | Enhanced disability responsiveness of Pasifika church communities | An increase in the number of Pasifika church communities who use church engagement resources | December 2017 |
| 3 | Share innovation experiences and lessons learnt with the disability sector | Fono are held in Auckland and Wellington on a two-yearly basis to share experiences and learnings from innovations | Fono held in Auckland and Wellington | June 2021 |
| 4 | Enable Pasifika disabled people and their families to access the UNCRPD training programme[[22]](#footnote-22) | Pasifika disabled people and their families access UNCRPD training | An increase in the number of Pacific people who access the programme | June 2021 |

## Priority Outcome 3: Disability services and supports meet the needs of Pasifika disabled people and their families

The following actions aim to meet the above outcome.

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| --- | --- | --- | --- | --- |
| **Action** | | **Outcome** | **Outcome measure** | **Completion date** |
| 1 | Increase the number of disability providers and staff who access training on organisational Pasifika service responsiveness | An increase in the Pasifika cultural competence of the disability support workforce | An increase in the number of disability workers who access Pasifika disability cultural training | June 2018 |
| 2 | Support the provision of advice by the Faiva Ora Leadership Group by holding twice-yearly meetings | Pasifika expert advice is provided to the Ministry | Two-yearly meetings of the Faiva Ora Leadership group are held | June 2021 |
| 3 | Ensure Pasifika disability needs are considered in all Ministry service reviews, service commissioning and programmes | Pasifika disability needs are considered and inform decision-making | Pasifika advice is provided to Ministry service reviews and service commissioning activities | June 2021 |
| 4 | Promote disability careers to Pasifika people and communities | An increase in the number of Pasifika people working in disability support services | The profile of disability careers is raised in Pasifika communities  More Pasifika people are in leadership and support worker roles in disability support services | December 2019 |
| 5 | Establish a statistically reliable method of obtaining satisfaction feedback from Pasifika disability support service users | Pasifika people have a ‘voice’ and contribute to service improvement | Feedback is obtained annually and disseminated to providers to inform improvements to service delivery | December 2018 |

## Priority Outcome 4: Stakeholders working in partnership to address challenges experienced by Pasifika disabled people and their families

The following actions aim to meet the above outcome.

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| **Action** | | **Outcome** | **Outcome measure** | **Completion date** |
| 1 | Work with primary health organisations (PHOs) and district health boards (DHBs) in the Auckland and Wellington regions to promote information resources to Pasifika people | More Pasifika people are aware of and understand available disability support services and other services | PHO and DHBs are aware of the Ministry of Health’s Pasifika disability initiatives | June 2021 |
| 2 | Work with the Ministries of Social Development, Vulnerable Children, Justice and Education on initiatives concerning Pasifika disabled children | Other ministries are aware of the Ministry of Health’s Pasifika disability initiatives | Advice is provided to the ministries  Pasifika disability tools and resources are shared with other ministries | June 2021 |

# Implementation plan

To deliver the Faiva Ora Plan 2016–2021, annual implementation plans will be developed, with input from the Faiva Ora Leadership Group and key stakeholders. These plans will be presented to the Disability Support Services Senior Management Team for approval.

The annual implementation plans will identify the organisations that will lead and contribute to delivering on the actions, success measures, specific timeframes, deliverables and costings.

The Faiva Ora Plan 2016–2021 may be updated to reflect any changes to government and Ministry of Health priorities.

# Monitoring and reporting

The Ministry of Health Disability Support Services will monitor and report on the plan’s implementation.

Progress reports on the plan will be provided to the Minister of Health through the monthly Minister’s report as per request. Six-monthly progress reports will be reviewed by the DSS Senior Leadership Team. Overall progress will be communicated to the disability sector through the Ministry of Health DSS quarterly newsletter.

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1. University of Auckland.2015. *Talanga Report – Research on Pasifika disabled children, youth and their families*. Unpublished report for the Ministry of Health. [↑](#footnote-ref-1)
2. ‘Faiva’ is a Samoan word for ‘work’, and ‘ora’ is the Cook Island word for ‘life’. [↑](#footnote-ref-2)
3. Faiva Ora 2010–2013; Faiva Ora 2014–2016. [↑](#footnote-ref-3)
4. Pacific ethnicities include Samoan, Tongan, Niuean, Cook Island, Tuvaluan, Tokelauean and Fijian. [↑](#footnote-ref-4)
5. Result 1: Reducing long-term welfare dependence; Results 2–4: Supporting vulnerable children; Results 5–6:  
   Boosting skills and employment; Results 7–8: Reducing crime; Results 9–10: Improving interaction with government. [↑](#footnote-ref-5)
6. www.stats.govt.nz/Census/2013-census/profile-and-summary-reports/quickstats-about-national-highlights/cultural-diversity [↑](#footnote-ref-6)
7. The carer support subsidy can only be paid to someone who provides support to a disabled person and who does not reside in the same address as the disabled person. [↑](#footnote-ref-7)
8. There are two Pasifika-specific disability services: one provides a national information advisory service and the other is a home and community support provider serving the South Auckland area. [↑](#footnote-ref-8)
9. Pasifika services are ‘for Pacific, by Pacific’ organisations. These are led and governed by Pasifika people and have Pasifika people as staff and adopt Pacific models of support which recognise Pacific culture, language and settings. They also recognise the importance of families in achieving outcomes for the individuals. [↑](#footnote-ref-9)
10. Physically handicapped, abled bodied. [↑](#footnote-ref-10)
11. This group started in 2010 and comprises Pasifika disabled people, family and caregivers, Pasifika community leaders and Pasifika disability workers. This group has provided advice on key Ministry-led programmes to ensure they are relevant for Pasifika people. [↑](#footnote-ref-11)
12. This guideline profiled examples of some disability organisations and their response to meeting the needs of their Pasifika clients. [↑](#footnote-ref-12)
13. Pasifika models of support recognise Pacific culture, language and settings. They also recognise the importance of families in achieving outcomes for the individuals. [↑](#footnote-ref-13)
14. www.stats.govt.nz/Census/2006CensusHomePage/QuickStats/quickstats-about-a-subject/pacific-peoples/religion.aspx [↑](#footnote-ref-14)
15. www.ssc.govt.nz/bps-next-priorities [↑](#footnote-ref-15)
16. See the 2013 and 2014 Disability Support Services Client Demographic Reports, and the Disability Support Services Provider Analysis Report 2015. [↑](#footnote-ref-16)
17. These approaches include Individualised Funding, Enhanced Individualised Funding, Choices in Community Living, and Enabling Good Lives. [↑](#footnote-ref-17)
18. [www.resourcingfamilies.org.au/learn-about/building-support-networks/circles-of-support](http://www.resourcingfamilies.org.au/learn-about/building-support-networks/circles-of-support)/ [↑](#footnote-ref-18)
19. [www.naric.com/?q=en/rif/Community%20Conversations%20Can%20Bring%20Diverse%20Stakeholders%20Together%20to%20Build%20Consensus](http://www.naric.com/?q=en/rif/Community%20Conversations%20Can%20Bring%20Diverse%20Stakeholders%20Together%20to%20Build%20Consensus) [↑](#footnote-ref-19)
20. With a specific focus on Waikato, Wellington and Christchurch. [↑](#footnote-ref-20)
21. From a religious belief perspective, Pacific people believe that disability is a divine punishment from God due to sinful acts by the person with a disability and/or their family. Pacific people also hold cultural beliefs that disability is a curse on the individual and their family due to wrongdoing by family or ancestors. [↑](#footnote-ref-21)
22. This is the United Nations Convention on the Rights of People with Disabilities (UNCRPD) training programme for the disability support workforce. Delivered by people with disabilities, this programme aims to promote the rights of people with disabilities. [↑](#footnote-ref-22)