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## Acknowledgments

We would like to acknowledge the wāhine Māori whose resilience in navigating the challenges in their lives and hope for a brighter future for them and their children remains a constant source of inspiration. We have tried to capture their indomitable spirit in the title of this document "Ka Pū te Ruha ka Hao te Rangatahi" meaning ushering in a new and fresh approach.

We would like to thank the working group for their commitment, generosity of time, diverse expertise, passion for change and willingness to bring this and so much more to the co-design process and co-creation of the guidance. As a result we are confident the guidance is well placed to help stop smoking services take a holistic wellbeing approach that is responsive and wāhine-led, with a view to reducing some of the persistent health inequities we are still experiencing today in Aotearoa.

The project would not have been possible without the expert facilitation of ThinkPlace who share a commitment to health and wellness for wāhine Māori with the Ministry of Health.

Ka fū te Ruha, ka Hao te Rangatahi

Ushering in a new and fresh approach

### Meaning:

Dr Taiarahia Black has described this proverbial saying as referring to the younger generation taking up the reigns left by their elders. It was chosen to represent this kaupapa because it centres the importance on rangatahi, or young adults, and it also shines a light on moving towards stronger, more inclusive, ways of working.

## Foreword

We all have a role to play in making Aotearoa New Zealand's health system more equitable. Equity in health outcomes is an enabler of overall wellbeing and a key priority for Government. An essential part of making equity real is having a common understanding of equity.

### The Ministry's definition is:

In Aotearoa New Zealand, people have differences in health that are not only avoidable but unfair and unjust. Equity recognises different people with different levels of advantage require different approaches and resources to get equitable health outcomes.

Good work has been made to date yet there are significant disparities we must address. In tobacco control, there has been significant success in reducing smoking among the general population yet we have not made the impact needed to reduce smoking prevalence among Māori to the same extent. Smoking remains a significant reversible driver of Māori: non-Māori health inequity. In the past two years the Ministry has been exploring how to improve stop smoking outcomes for wāhine Māori. The Ministry has identified new insights and ways to make a positive impact on the rate of smoking so that the existing age and ethnicity disparities narrow and the transfer of smoking across generations is halted.

Using a co-design approach, the project has unlocked new insights into the complexities that surround the lives of young Māori women. Partnering with some Māori health providers the insights were used to co-design with wāhine Māori new holistic services tailored to meet their needs. A set of guidance has now been co-created for stop smoking services to work in more responsive ways with young wāhine Māori.

I am confident that, together as we implement the guidance, and in collaboration with wāhine Māori, their support people and whānau, we can start to make significant improvements in achieving equity and increasing wellbeing for them.

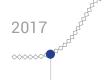
### **Dr Ashley Bloomfield**

Director-General of Health

# Ka Pū te Ruha, ka Hao te Rangatahi; project background

For the past two years, the Ministry of Health has been exploring how to improve stop smoking outcomes for wāhine Māori.

The method undertaken has been a co-design and developmental evaluation process which included engaging directly with wāhine Māori with lived experience of smoking, and then with health providers and quit coaches who have been experimenting with new ways of working with wāhine. Young Māori women smoking cessation journey



## Realisation

Young Māori women continued to have a higher prevalence of smoking than other groups. Inequity was increasing.

"Over the past three years the Ministry has had increasing success helping people to quit. However, we have not done as well helping young Māori women to quit."

- Ministry of Health

## Challenge

We challenged ourselves to deeply understand and do something different.

"We want to identify ideas and opportunity areas that could significantly and positively close the disparity gap and halt the transference across generations."

- Ministry of Health

## One wahine told us:

"I always wanted to get off it [smoking], just to better myself. I'm doing it for my son."

- Young wahine Māori









2018

## Insight

We gained insights through deeply exploring experiences in the community with young wāhine Māori.

Together with wahine, we co-created smallscale, achievable prototypes.

*"We were supported by* the Ministry to try new ways of providing a safe space for wāhine to speak about smoking in their lives. I particularly enjoyed seeing how discussions and creativity thrived in wāhine-led group settings."

- Hikuwai Kelly-Winiata Quit Coach Turuki Health PHO

## Testing

The prototypes were tested in the community with service providers and young Māori women.

We adopted a learning while doing approach.

"We had space to brainstorm and create in a way that we haven't been able to do before ... and it was an agile development process fail fast, learn and adapt quickly."

- Te Puea Winiata CEO Turuki Health PHO

## **Evaluation**

A developmental evaluation was undertaken to support providers to reflect on their prototypes and amplify what worked.

"A strengths based practice starts where wāhine are at, and looks at smoking within the context of wahine aspirations"

- Nan Wehipeihana Kinnect Group

## **Co-design**

2019

We tested the principles from the evaluation and the wāhine insights in a working group comprised of service providers, Ministry of Health and ThinkPlace.

The result of the co-design sessions are outlined in this document.

"Moving forward we need leadership and clear direction, co-design *multi-disciplinary* approaches and innovative thinking."

- Prof. Hayden McRobbie National Training Service

## Intent of Ka Pū te Ruha, ka Hao te Rangatahi

The aim of this guidance is to open up the permission space for stop smoking services to work in more responsive ways with young wāhine Māori.

#### The time is right for change.

- There is a whole of government focus on health equity, with a special focus on Māori health equity and in particular equitable outcomes for young Māori women. There is growing expectation pushing us to answer to disparities, a high authorising environment, and a nationwide Smokefree goal for 2025.
- There have been significant, positive changes in our service landscape over the past three years. There are currently 16 providers delivering stop smoking services across Aotearoa with great success in the general population. In contrast, these providers have been less successful in helping young Māori women to stop smoking.
- We have shifted towards a focus on equity and wellness. Achieving this requires new and innovative service elements. This isn't sufficiently supported by the current measures, training or culture.

- There are pockets of innovation that aren't recognised, and incentives that can drive negative behaviours such as only targeting the 'quick wins'. We currently have only two quantitative measures for services: CO monitoring and 4 week quit rate. Apart from these, we don't know what the service offer is or why services aren't working for young Māori women.
- There is limited systematic connect with these providers and others in the health sector (such as midwives and PHOs).

## Things are changing.

This document contains some practice guidance that was co-created by a working group of whānau-based health services, quit smoking coaches, smoking cessation experts, the Ministry, Māori evaluators, a cultural anthropologist, a specialist researcher and service designers.





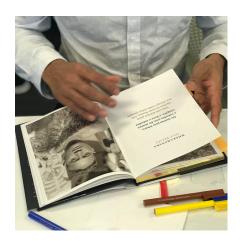










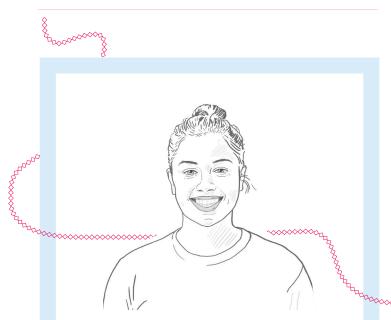




## **Core values**

Supporting wāhine Māori to quit can encompass a variety of approaches and support people. When working with wāhine Māori, consider how you can incorporate these three core values into your practice:

## Wāhine voice is constant throughout



## As much as possible, the service experience should be co-designed or wāhine-led

Being wāhine-led is about putting the power and choice into the hands of the wāhine herself or her whānau. When possible, be flexible and provide choices or ask what might work best for her.



## 2 Match the diverse needs, preferences and lived realities of young Māori women

Similar to being wāhine-led, attention should be given to individual circumstances and experiences; wāhine shouldn't be treated as the same.

# **3** Stop smoking advice should be considered in context of other life goals and needs – it may not work to solely focus on stop smoking

Too much emphasis on quitting smoking may ignore more pressing issues and not lead to the best outcome. Explore wider needs and address them or find out who can help support those needs.

## **Good Practice Guidance**

The following pages contain more detailed recommendations and potential ways of working with wāhine Māori to stop smoking.

## Proactively invite

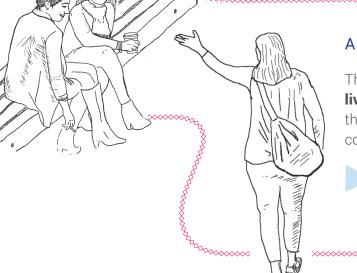
## young Māori women

## "Our biggest hurdle is to find these women."

- Stop Smoking Service Provider

Wāhine Māori are more likely to respond when they are proactively sought out and invited into the service. We know that women aren't aware of what is available to help them.





## A light touch but a warm enquiry

The environment where young Māori women **live, learn, socialise, work and belong** is also the environment in which they learn to smoke, continue to smoke and try to quit smoking.

Go to the places where young Māori women live, learn, socialise, work and belong

## How you could get started:

Use social media, e.g. boosting Facebook posts, Instagram and social media ads

Tap into existing hauora programmes with existing linkages e.g. weaving sessions Working through known wider networks, e.g. identify wāhine in other internal services or contact other service providers working with wāhine

Use enrolled provider's clients and word of mouth

## Harness creativity

 for example, send out a personalised invitation package that includes a voucher incentive, and a simple information form that is in a nice envelope and gets hand delivered

## **Create opportunities for**

## support people to engage

Including people like whānau, friends, or workmates during the stop smoking journey creates a supportive and positive environment for wāhine to thrive in.

E.g: Involve whānau in

welcome at visits

Nā koutou itangi nā tātou katoa

When you cry, your tears are shed by us all

celebrations/milestones

E.g: Put forward an invitation to whānau. Make sure wāhine know a support person is



Implementation scale:

Intensive

Light

Ask wāhine, 'What does this look like for you?' at each moment. Always adopt if needed

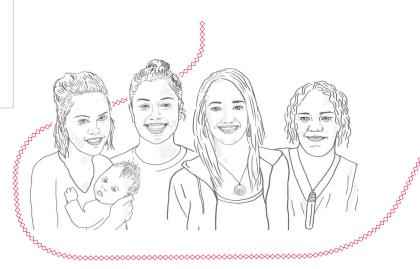
E.g: Hold whānau evenings/groups

ර්ර It felt like smoking was my only friend.

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# Mates matter for young wāhine

Wāhine want to be with their friends. Success may be amplified if they feel connected to peers who are also on a stop smoking journey.



	How you could get started:	Offer choice of group, and/or individual sessions	Buddy system - bring a friend along	Encourage use of social media to share successes with wider mates network
		Utilise networks wāhine may be involved in e.g. netball team, kapa haka	Create fun games and incentives with their friends and networks	

# Find out what makes the process fun and creative, it's not just about stopping smoking

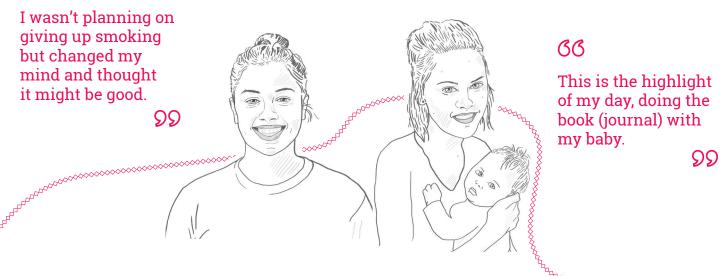
Wāhine with lived experience told us that they like being involved in things that are fun and engaging.

Providers have the opportunity to work collectively (and individually) with wāhine to develop goals, explore education and employment options, and work to address issues and challenges facing them - as well as providing education and support to stop smoking.  Ask wāhine! What would be fun for them? Explore their wishlists

Create a safe, supportive environment for wāhine to come together with their mates, and where they can make new friendships

"It shouldn't be called a quitting smoking programme, it's a 'better yourself'/ 'change-your-life' programme."

- Stop Smoking Service Provider

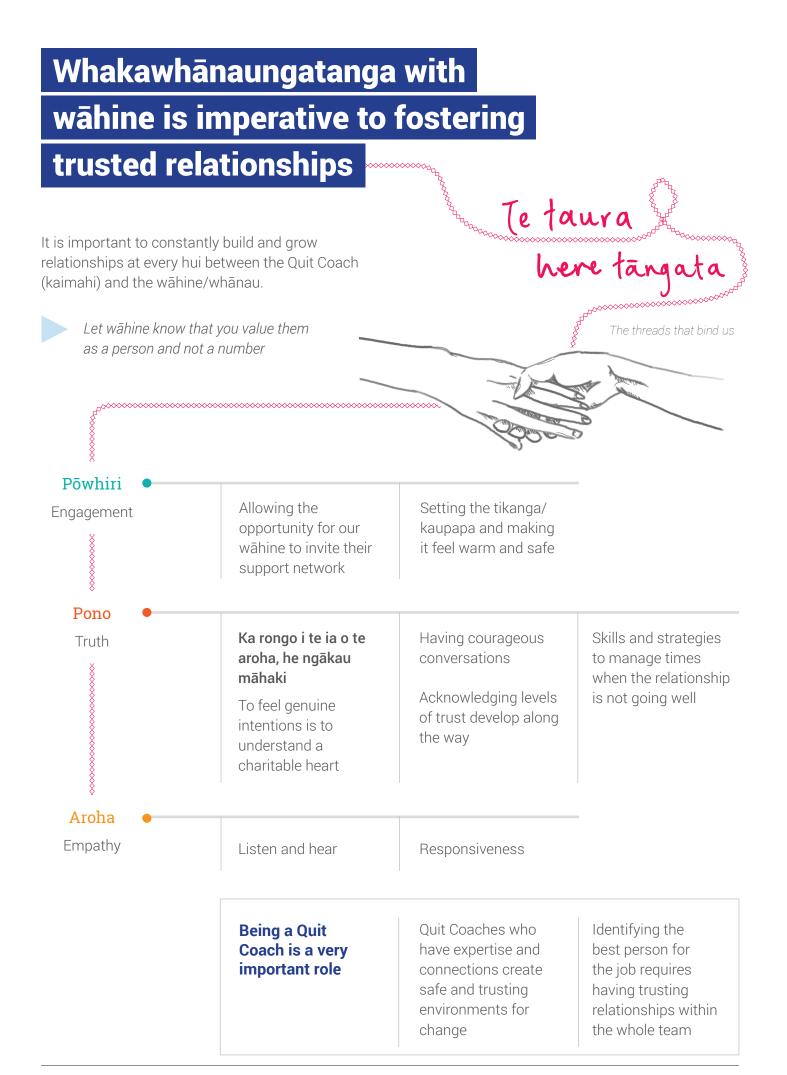


## How you could get started:

Things that wāhine wouldn't typically do or have e.g. pampering session, hākari, screen-printing shirts

Whakamana. Identify strengths and talents within the group to share with others Ice breakers, games or activities for young wāhine that are group based e.g. crafts, walks, cooking and nutrition, wahakura wānanga Replacing social triggers to smoke with triggers to be Smokefree, e.g. spending time with another adult having a cuppa, sharing stories and talking about stresses

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# Support wāhine to attend sessions and activities by removing barriers

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I could only come because my Quit Coach picked me up.

*Flexible working hours can enable better opportunities for wāhine to engage* 



Ask wāhine when and where is best for them, and what support they need to get there

Consider flexible practices in HR that affirm the mana of Quit Coaches and wāhine

Ask wāhine what they need and awhi them to get them there

"One of the barriers is wāhine getting anxious about babies. Next time we will have kids and family come for kai."

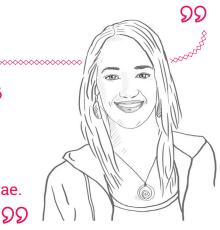
- Quit Coach

"Sometimes all it takes is sending a text at dinner time because I know that's their trigger time."

- Quit Coach

I have to work 9-6 so I only started going when they started weekly evening drop-in clinics at the marae.

GG



# Tungia te ururua, kia tupu whakaritorito te tupu o te harakeke

Set fire to the undergrowth so that the new flax shoots may sprout

How you could get started:	ed: wāhine Māori already available are and make it easy Facebook for them to make you or Messer part of their routine, of working e.g. drop-in clinics and at social places	Consider being available by phone, Facebook, WhatsApp or Messenger outside	Being available by phone, Facebook, WhatsApp etc.
		of working hours	Car pooling to quit smoking events
	Link in with other services, especially those who provide support for children and whānau	Recruitment processes for Quit Coaches that allow for 'working outside of the box'	Provide support for childcare

# Measure the change wāhine are making to their wellbeing and smoking

Understanding what success looks like to wāhine is critical to ensure the provision of tailored guidance and support.

"Whānau Ora services often hold the relationships with young Māori women. We reach out and build trust with Whānau Ora so that we can walk alongside wāhine together. Whānau Ora calls us when we are needed and most impactful."

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- Stop Smoking Service Provider

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I want change and need help but smoking is not my number one issue at the moment.

# Ko te pae tawhiti whāia kia tata, ko te pae tata whakamana kia tina

Seek out distant horizons and cherish those you attain

## How you could get started:

The Waitangi Wheel is an indigenous selfassessment tool similar to a spider diagram that maps hinengaro, putea, whakawhānaungatanga, wairua, and tinana.

Encourage wāhine to write about their change, e.g. journal writing or video diary Look to Whānau Ora to brainstorm: 'How might we tell our story of success?' 'How might we all know we are making a difference?'

Creating a 'journey' or 'narrative' of wāhine overtime Use whānau or wāhine plans and check in to identify progress

Incorporate stop smoking measures

# Co-create opportunities to celebrate small achievements along the way

Wāhine are on a journey toward a Smokefree life, we need to affirm the positives and celebrate at any chance we get. Success may not just be about quitting, but the quit attempts and other milestones.

Find out what is meaningful to wāhine Māori

Aim to extend connections with whānau



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I'm actually looking forward to quitting. I bought a money jar, so the money I spend on smokes has got to go in there because I want to go on holiday.

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## How you could get started:

Find out what success looks like and develop minicelebrations or rewards. It may not be about smoking

Gamify quitting; Pā Wars! Give up smoking challenge (Wero), "Biggest Loser" for nicotine testing Create milestones of achievement and sharing with whānau and friends

Promoting wāhine success stories on social media – videos, stories, images

Monetary incentives to quit

# Consider extended timeframes



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I knew where to go when I started smoking again.

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Four weeks of engagement is likely to be too short. The journey should be flexible, tailored and whānau centred, with wāhine-led support. Relapse is part of the journey for many.



Make sure there is a space to fall off the wagon and not penalise wāhine

## "You are in charge and I am going to help you where I can."

- Quit Coach

## How you could get started:

Flexibility with service "exit" is key: wāhine should always feel they can come back The time of engagement could be determined with the wāhine and her whānau

Work alongside the wāhine and their Whānau Ora navigator

## Guiding young wāhine Māori on a Smokefree journey

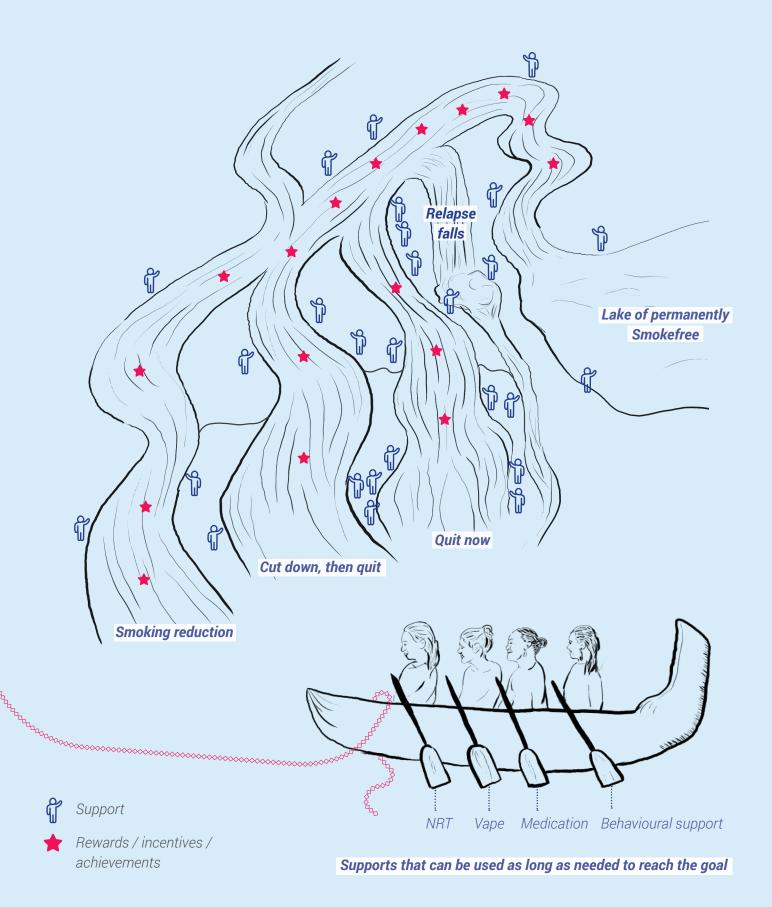
The smoke-free journey has many pathways, twists and turns, and is not obvious to navigate. It is helpful to describe it as paddling towards a goal. "There are various ways to get to the end point. Our job as Quit Coaches is to help support wāhine along the way and be there for them when the journey becomes difficult. Above all else, we should not see relapse as a failure but as a point that many people will pass through on their journeys to becoming Smokefree."

- Prof. Hayden McRobbie

E hur, to aroaro ki te ra

Tukuna toa ātārangi ki muri i a koe

Turn and face the sun and let your shadow fall behind you



# What mindsets might we need to adopt to put these principles into practice?



Wellbeing centred, wāhine-led

**Experimental mindset** Think big, start small, act fast

## One size fits one

**Collaboration** - practitioners, managers, leadership and local and government services working together

Permissive environment driven by leaders

**Responsive, valuable measurements** to show evidence of being on track / improvement, and seeing quitting as a part of an overall wellness journey

**Prioritising aspirations** in the order that wahine want to achieve them

**Prioritising wāhine** by listening to them and sharing their experiences and journeys



## Illness centred, service-led

**Fixed mindset** Larger projects with lengthy planning, staying wedded to an idea

### One size fits all

**Patch protection and silos** - working in isolation as practitioners, managers, leadership, and services; patch protecting

Outcomes focussed culture and fear of failure

**Short-term focussed measurements** driven by targets or data that doesn't show the full picture. Measuring only smoking outcomes

Pre-determined, limited service time

Assuming we know what is best for wahine

## Now is the time for change!

Koinei te wa mo te huringa!

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We must be alert to the disparities that have characterised the picture of Māori health for too many decades and successive generations... we must be vigilant, absolute in our determination that as long as there are inequities; as long as there are disparities and entrenched deprivation; as long as there is the long-standing impact of institutional racism – then Māori health must remain of the upmost priority.

- Dame Tariana Turia in her speech at the launch of a refreshed He Korowai Oranga in 2014 during her time as the Minister responsible for Whānau Ora.

Ministry of Health. 2018. Achieving Equity in Health Outcomes: Highlights of important national and international papers. Wellington: Ministry of Health.

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