

Te Mahere Rautaki o Kia Piki te Ora

(Rua mano tekau mā toru ki te rua mano tekau mā ono)

Kia Piki te Ora Provider Network

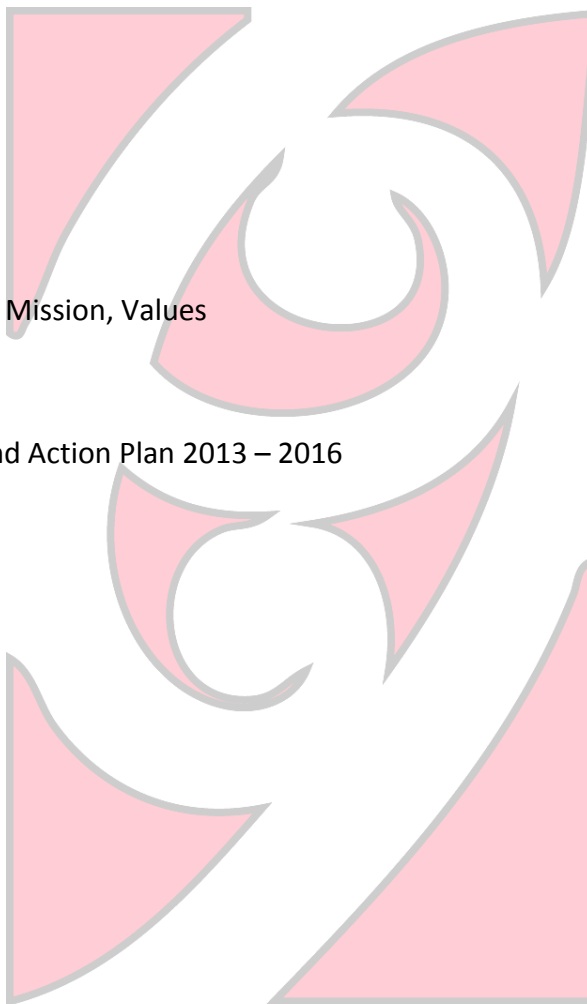
STRATEGIC PLAN

(2013 - 2016)

KIA PIKI TE ORA

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He Karakia

Ko te whakauruora kia Ranginui e tū nei

Ko te whakauruora ki te kauroroa

Ko te uruora ngā atua

Ko te uruora ngā tāngata

Ko te uruora ngā wānanga

E Rongo mā tāne

Whakairihia! Hae!

Hei mua koe i a mātou e Ihoa

Hei tohutohu i a mātou mahi katoa

Ko koe anō hoki hei whakakaha i a mātou

Kia whai korōria ai mātou i roto i āu mahi katoa

He mea tīmata he mea mahi

He mea whakaoti i roto i a koe

Kia whiwahi ai mātou i te oranga tonutanga

I te mea e atawhaitia nei e mātou i tēnei rā

Ko koe hoki tō mātou kaiwhakaora

Āmine (Ihimaera & McDonald, 2009, p 2)



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He Mihi

E ngā mana, e ngā reo,

Tēnā koutou, tēnā koutou, tēnā tātou katoa.

E ngā mate o te wiki, o te marama, o te tau,

Koutou rā kua wheturangitia, haere, haere, haere atu rā

Haere atū rā ki te kainga tūturu mo tāua te tangata

Moe mai, okioki atu

Ki a tātou, ngā kanohi ora ō Rātou mā

Koutou kua takahia i te huarahi

Ngā kaikawe i te kaupapa whakahirahira nei

O Kia Piki te Ora,

Tēnei rā te mihi, tēnei rā te mihi

Kia kaha, kia maia

Kā huri



TE ORA



TE WHAKAURUORA

Rarangahia te taurawhiri tangata kia hua ai te mārāma

Bringing people together so understanding comes to fruition

The Māori world view is that health and well-being is holistic, therefore suicide prevention initiatives must appreciate that the individual belongs to a whānau, hapū, iwi, hāpori Māori and community. As such, the spiritual, cultural, social, physical and emotional aspects are embraced (Ihimaera & McDonald, 2009, p 2).



KIA PIKI T

Executive Summary

According to families who have experienced suicide, the pain of losing a family member is immeasurable. Amongst the grief and loss they are left wondering how this could have happened to them and why their family member chose to suicide.

The pain experienced in Māori whānau is no different to other families, however, there are also the added experiences that are felt when whānau talk about the loss of whakapapa, tikanga and kawa relative to mate and tangihanga, ensuring mana is maintained not only for the whānau but also for the whānau member who has completed their suicide.

Solutions require a whole whānau, hapū, iwi, hāpori Māori, community and government approach. Coordination and collaboration at all levels, between all sectors and within all environments. It is critical that the response is practical, helpful and sustainable (Ihimaera & McDonald, 2009; MoH, 2002; 2006).

In 2010 (MoH, 2012a), 522 people were recorded to have taken their lives. Of this number, 104 were of Māori descent. The Māori youth rate was more than 2.5 times higher than that of non-Māori. Self-harm hospitalisation rates for Māori in 2010 was the highest since 2001 (83.6 per 100,000 Māori in 2010). These numbers indicate that for some Māori populations, suicide and self-harm hospitalisations do not appear to be decreasing; in fact suicide and self-harm hospitalisations for Maori are on the increase.

The Kia Piki te Ora (KPTO) program's emphasis is on enabling and building capacity and capability of whānau, hapū, iwi, hāpori Māori and communities to respond to the issues of suicide and whakamomori (MoH, 2010; 2013b). There are currently nine sites delivering this program across the motu.

This strategic plan provides direction for the KPTO network of providers by helping guide our collective approach to reducing or preventing Maori suicide and suicidal behaviours. KPTO intend to implement objectives that support Māori whānau, hapū, iwi, hāpori Māori and communities to enable themselves to respond to suicide and whakamomori in a collaborative and coordinated way (Raukura Hauora O Tainui, 2012a; 2012b). These objectives also align to current Ministry of Health documents such as; New Zealand Suicide Prevention Strategy 2006 – 2016 (MoH, 2006); New Zealand Suicide Prevention Action Plan 2013 – 2016 (MoH, 2013a); Te Whakauruora - Restoration of Health: Māori Suicide Prevention Resource (Ihimaera & MacDonald, 2009).

This plan provides a guide to the growth of leadership within KPTO to provide sound strategic advice that supports building the capacity and capability of Māori communities at local and regional levels. Ensuring that where possible, concepts from an indigenous world view are imbedded throughout the work KPTO delivers from a cultural perspective to influence clinical interventions (Lawson Te-Aho, 1998; Raukura Hauora o Tainui, 2012a; 2012b).

Also, emphasis is placed on ensuring on-going workforce development for KPTO is available that support the overall objectives identified within this strategic plan (Raukura Hauora o Tainui, 2012a;

2012b). This may require KPTO improve current practices and access training opportunities, in order to maintain a high level of program delivery that supports whānau, hapū, iwi, hāpori Māori and community's responses to suicide prevention, intervention and post-vention. These responses are based on whānau ora concepts (MoH, 2002; 2006; Ihimaera & McDonald, 2009; MSD, 2009) that intend to encourage and promote resilience and responsiveness across whānau, hapū, iwi, hāpori Māori and communities.

In order to build and maintain robust evidence not only for Māori suicide and self-harm issues, but for communities in general, KPTO will ensure that partnerships with key stakeholders in research and evaluation are developed and maintained (Raukura Hauora o Tainui, 2012a; 2012b). These relationships should be built on whānaungatanga which supports the implementation of perspectives from both an indigenous and mainstream world view (Lawson-Te Aho, 1997; 1998).

Furthermore, the implementation of the tuakana and teina relationships between the KPTO Coordinators and their supporting organisations (both within the governance and management levels), government funders, whānau, hapu, iwi, hāpori Māori and communities. This will ensure that at all levels, clear communication of the roles and responsibilities of KPTO are shared and truly understood. This supports the provision of strong leadership for KPTO (Lawson-Te Aho, 1998; K.Lawson-Te Aho, personal communication, May 13, 2012; Raukura Hauora o Tainui, 2012a; 2012b).

This plan also sets out the values which underpin this document and are based on an understanding derived from a Māori world view to maintain life preservation (Ihimaera & McDonald, 2009; Lawson-Te Aho, 1997; 1998).



Historical Background

Kia Piki te Ora o Te Tai Tamariki was a pilot program funded by the Ministry of Health in 2001, covering six sites but delivering to 11 communities (Lawson-Te Aho, 1998). In 2004, it became a national programme designed and developed to lead suicide prevention strategies with a Māori youth focus.

In 2006, the New Zealand All Age Suicide Prevention Strategy 2006 – 2016 (MoH, 2006) was launched and implemented, changing the focus from youth to include all ages. Despite this change, the philosophies and fundamental values remained the same, that is, KPTO continue to operate as strategic roles, promoting the achievement of whānau ora and toi ora at all levels (Raukura Hauora o Tainui, 2012a; 2012b). KPTO achieve this by working alongside mainstream initiatives but more closely with whānau, hapū, iwi, hāpori Māori and communities in general (MoH, 2010; 2013b).

The Government's approach as determined by the New Zealand Suicide Prevention Strategy 2006 – 2016 (MoH, 2006), is to bring together activities across a range of government and non-government agencies and community groups. It contains seven goals as well as actions that, combined, are likely to reduce or prevent suicide and suicidal behaviours, as described below:

Goals:

1. Promote mental health and wellbeing, and prevent mental health problems
2. Improve the care of people who are experiencing mental disorders associated with suicidal behaviour
3. Improve the care of people who make non-fatal suicide attempts
4. Reduce access to the means of suicide
5. Promote the safe reporting and portrayal of suicidal behaviour by the media
6. Support families/whānau, friends and others affected by a suicide or suicide attempt
7. Expand the evidence about rates, causes and effective interventions

The Kia Piki te Ora National Programme (MoH, 2010; 2013b) promotes the health and wellbeing of Māori and contributes to the reduction of suicide and suicidal behaviours affecting Māori. It has delivered this through the following four objectives extracted from the New Zealand Suicide Prevention Strategy 2006 – 2016 (MoH, 2006):

1. Promote mental health and wellbeing for Māori
2. Contribute to improved mental health services for Māori
3. Reduce the access to means
4. Increase safe reporting of suicide by media

The values and principles that underpin KPTO ranges from influencing policy change, encouraging community development and action, mitigating the risks of further suicides at key decision making forums, and gathering Māori suicide prevention evidence. Predominantly, the role of KPTO is to lead the aspirations and needs of whānau, hapū, iwi, hāpori Māori and communities.




This Strategic Plan is aligned to fit the New Zealand Suicide Prevention Action Plan 2013 – 2016 and other key documents listed below:

1. New Zealand Suicide Prevention Strategic Plan 2006-2016 (MoH, 2006)
2. New Zealand Suicide Prevention Action Plan 2013-2016 (MoH, 2013a)
3. National Provisional Suicide Statistics (MoJ, 2009)
4. Final Document One: Outcomes of a strategic planning session and dialogue with Kia Piki te Ora coordinators at the Kia Piki te Ora National Conference 2012 (Raukura Hauora o Tainui, 2012a; 2012b).
5. Kia Piki te Ora logic model and service specifications (MoH, 2010; 2013)
6. Te Whakauruora – Restoration of Health: Māori Suicide Prevention (Ihimaera & McDonald, 2009)
7. Whānau Ora (MoH, 2002; 2006; Ihimaera & McDonald, 2009; MSD, 2009)
8. Rising to the Challenge (MoH, 2012b)



Kia Piki te Ora Sites

The KPTO National Programme is currently Ministry of Health funded across nine sites nationally.

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KIA PIKI TE ORA



TE RŪNANGA
O NGĀTI
PIKIAO
TRUST

TE RŪNANGA O NGĀTI PIKIAO

Address: 1274 Fenton Street
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te
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Trust

TE AO HOU TRUST

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KIA PIKI TE ORA

Kia Piki te Ora Vision, Mission and Values

Vision:

Te Ahi Kōmau (The buried / volcanic fires)

The smouldering ashes wait to ignite. To reignite the fires of whānau, hapu, iwi, hāpori Māori and communities.

Mission:

Te Hā o te ōra (The Breath of Life / Wellness)

To re-kindle and acknowledge practices underpinned by tikanga and kawa that recognises whanau potential.

Values:

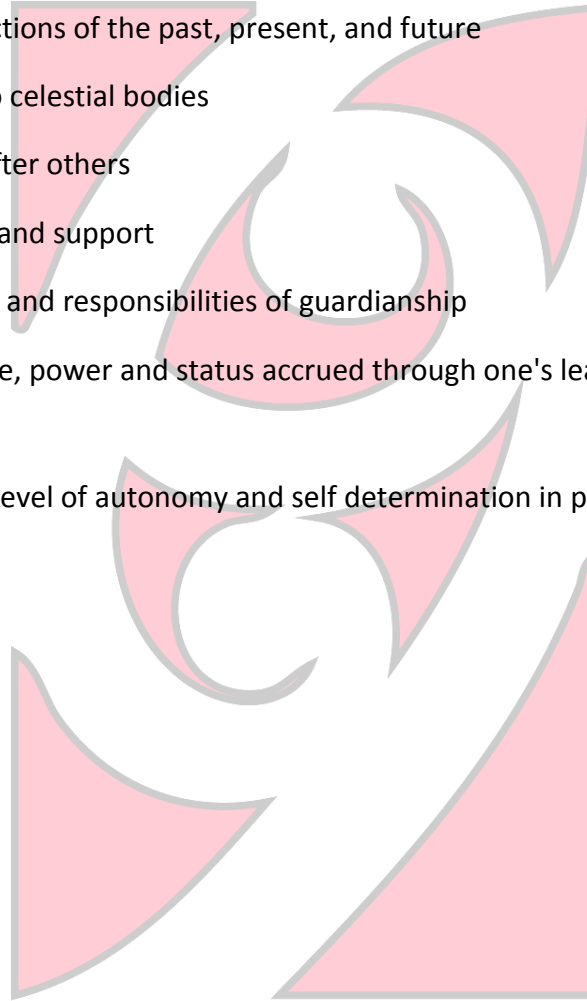
Ngā Hau o te Ora (The Winds of Life / Wellness)

The winds symbolise the Te Ao Māori concepts that 'feed' the fire to sustain us.

Tika	to do what is right
Pono	to stay true and steadfast
Aroha	to show love and appreciation
Awhi	to help
Tautoko	to support
Rangatiratanga	recognise self determination/leadership

KIA PIKI TE ORA

Te Ira Tangata	the human connections of the past, present, and future
Te Ira Atua	the connections to celestial bodies
Manaakitanga	to care and look after others
Wairuatanga	spiritual guidance and support
Katiakitanga	upholding the role and responsibilities of guardianship
Mana Tangata	mana of the people, power and status accrued through one's leadership talents and human rights
Mana Whakahaere	to demonstrate a level of autonomy and self determination in promoting our own wellbeing



KIA PIKI TE ORA

Relationship Principles

The Treaty of Waitangi is recognised as a living document offering adherence to the principles of:

Participation:

KPTO aims to ensure there is equal participation with partner organisations, and Māori participation in decision making, planning and the development of resources and processes

Partnership:

KPTO aims to ensure there are on-going relations between the Crown, its agencies and Māori

Protection:

KPTO aims to:

- Actively protect and promote Te Ao Māori health and wellbeing
- To work together in a way that honours and respects the dignity of each other and maintains the integrity of each partner
- To work transparently and demonstrate trustworthiness

KIA PIKI TE ORA

Kia Piki te Ora Goals and Action Plan 2013 – 2016

GOAL	OBJECTIVES	ACTIONS	Responsibility	IMPACT
<i>i. Growing KPTO Leadership</i>	1. To grow and build leadership by ensuring consistency of information and understanding of KPTO kaupapa across funded sites.	A. Develop a KPTO induction package for new KPTO sites, management and coordinators. A1. Identify develop and produce relevant and current information regarding the role and responsibilities of KPTO.	KPTO Collective Sites / MoH KPTO Coordinators	Retention of KPTO Coordinators, knowledge and expertise Delivery of information is consistent across KPTO, communities, and key stakeholders Improved contribution to Maori suicide Prevention and Maori Health Outcomes
	2. Provide guidelines and support for KPTO collective members representing KPTO at local, regional, and national levels.	B. Develop and produce guidelines and responsibilities for KPTO representatives at local, regional, and national levels.	KPTO Collective Sites / MoH	
	3. Understanding key strategic relationships with stakeholders at local, regional and national level (refer to page 21).	C. Conduct an internal KPTO training that identifies the key roles and responsibilities with key stakeholders (refer to action point A).	KPTO Coordinators	

GOAL	OBJECTIVES	ACTIONS	Responsibility	IMPACT
ii. An Indigenous Approach	4. Identify cultural best practise models relative to Maori suicide prevention.	D. Ensure KPTO are aware of training opportunities that may include, Te Whakauruora, Mauriora, Maori Public Health and Health Promotion, and Anamata (Refer to Goal: iii, iv & v).	KPTO Coordinators	Delivery of cultural best practice models are consistent across KPTO, communities, and key stakeholders
		E. Identify and attend indigenous conferences that assist in building on Maori cultural best practice models (Refer to Goal: iii)	KPTO Coordinators	Improved contribution to Maori suicide Prevention and Maori Health Outcomes
iii. Workforce Development and Training	5. Work alongside other work programmes across Government that share a similar focus on the risk and protective factors for suicide.	F. KPTO seek training opportunities on health, education, justice, and social determinants that impact on Maori Suicide Prevention e.g. Better Public Services, The Prime Minister's Youth Mental Health Project; Whanau Ora; Addressing the Drivers of Crime, Social Sector Trials; Children's Action Plan; Coroners Act 2006, Local Government (alcohol Reform) Amendment Act 2012; Mental Health and Addiction Service Development Plan 2012 – 2017; and education sectors Positive Behaviour for Learning.	KPTO Coordinators	Contribution to achieving the New Zealand Suicide Prevention Action Plan 2013 – 2016 outcomes

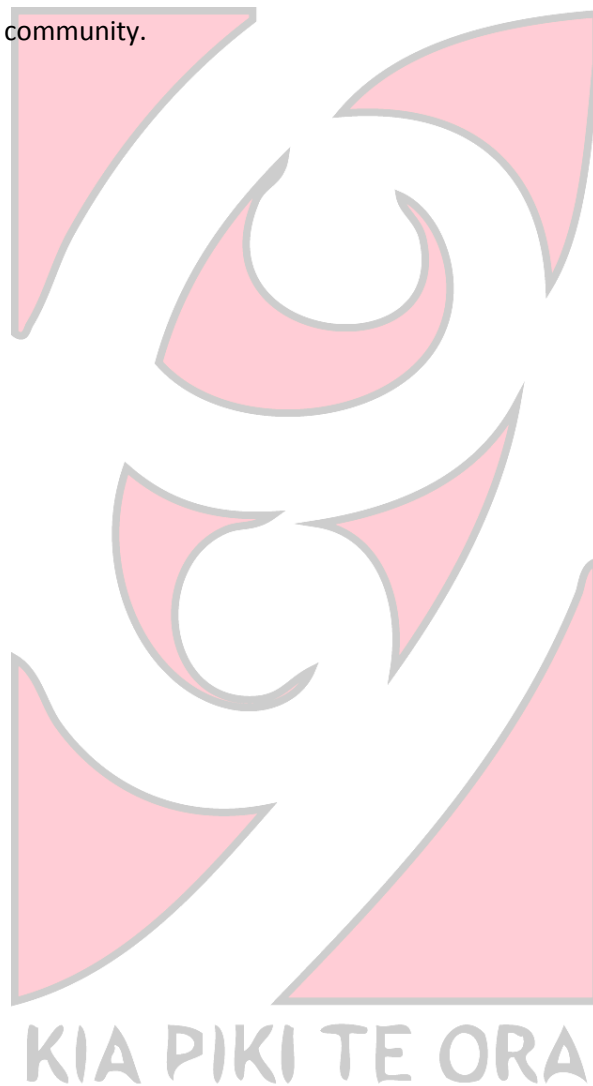
GOAL	OBJECTIVES	ACTIONS	Responsibility	IMPACT
iv. Building Māori Community Capacity	6. Support the development of locally driven strategies to address community issues.	G. Complete a stock take of current KPTO Coordinator resources	KPTO Resource Committee	Established national KPTO resource data base Contribution to achieving the New Zealand Suicide Prevention Action Plan 2013 – 2016 outcomes Improved contribution to Maori suicide Prevention and Maori Health Outcomes
	7. Ensure good, quality information and resources are accessible and available to whānau, hapū, iwi, hāpori Māori and communities.	H. Complete an evaluation of the above resources e.g. Media – video, television, website, newsprint, health promotion, programs, wananga. I. Develop a KPTO tool box for whānau, hapū, iwi, hāpori Māori and communities.	KPTO Resource Committee KPTO Resource Committee	
	8. Support the development of a KPTO National Coordination Service.	J. Engaging with the National Suicide prevention programme: Maori and Pasifika Communities.	KPTO Collective, Management/MoH	
v. Building the Evidence Base through Evaluation and Research	9. Develop partnerships/relationships with research partners to improve and build the Maori Suicide Prevention data base	K. Identify and engage with key research and evaluation partners.	KPTO Collective/Researchers	Contribution to achieving the New Zealand Suicide Prevention Action Plan 2013 – 2016 outcomes Improved contribution to Maori suicide Prevention and Maori Health Outcomes
		L. Support the development of appropriate research, evaluation and measurement tools alongside key partners.		

GOAL	OBJECTIVES	ACTIONS	Responsibility	IMPACT
vi. KPTO Infrastructure	10. Strengthen the infrastructure processes for KPTO.	<p>M. KPTO develop and implement processes on selection of representatives</p> <p>N. Develop processes for consultation and making collective decisions</p> <p>E.g. teleconference, national hui, reporting/feed back, email correspondence, media responses, kanohi ki te kanohi.</p>	KPTO Collective/MoH	<p>Improved contribution to Maori suicide Prevention and Maori Health Outcomes</p> <p>Contribution to achieving the New Zealand Suicide Prevention Action Plan 2013 – 2016 outcomes</p> <p>Sustainable KPTO National Profile</p>
	11. Support a KPTO National Coordinator role	O. Support KPTO management and MoH in developing a framework for a KPTO National Coordinator	KPTO Collective, Management/MoH	

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Key Relationships

KPTO will continue to establish and maintain strategic relationships with key stakeholders at local, regional and national level including Iwi, hapū, whānau, hapori Māori, government agencies, non-government groups, and community.



Glossary



aroha	benevolent, compassion. Love, appreciation
awhi	to help
hāpori Māori	Māori community with diverse relationships
kaitiaki	trustee, minder, guard, custodian, guardian, keeper
karakia	a prayer, to pray
kaumātua	elders
kotahitanga	unity/unified approach
mana atua	from atua sacred spiritual power
mana motuhake	right to control one's destiny
mana tangata	rights of the people
mate	be dead, sick, ill, ailing, overcome, beaten, defeated, killed, in want of, lacking, overcome, deeply in love.
mauri	life force, life essence
mihi	greetings
motu	island, country, land, clump of trees, ship
resilience	ability to recover readily
Taha Māori	Māori knowledge
taitemariki / taiohi	youth, young people
tamariki	children
tapu	divine, hallowed, holy, off limits
tautoko	to support
teina	younger sibling, younger in terms of knowledge
tika	correct, right
tīpuna, tūpuna	ancestor
toiora	wellness, wellbeing
tuakana	elder sibling, elder in terms of knowledge
Te Ahi Kōmau	the buried / volcanic fires
Te Hā o te Ora	The Breath of Life / Wellness
Ngā Hau o te Ora	The Winds of Life / Wellness
whakaaro	thought, a stream of thought
whakapapa	genealogical (bloodlines) ties
whakawhānaungatanga	relations, relationship

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