

Tikanga Guidelines

MAI TE TIMATANGA (BACKGROUND) TE KAUPAPA (MISSION)

Te Tai Tokerau Primary Health Organisation supports best practice primary health care delivery across the Northland region. Te Tai Tokerau Primary Health Organisation is a key facilitator to connecting health service relationships.

The aim of this booklet is to provide a guideline for working with Maori in primary health care. It will contribute to providing services that are responsive to Maori rights/ rites, needs and interests. It is expected that if these ideas are implemented you will contribute to Maori health gain. This guideline is founded on Maori concepts, views of health, Tikanga (Maori values/ practices) and Te Tiriti o Waitangi.

This guideline outlines key principles of Tikanga and provides practical guidelines and processes

for all members of the general practice team to follow.

Central to this guideline is the expectation that all users of health services are treated with dignity and respect. In turn users of health services are expected to behave respectfully.



REALITY OF BEING MAORI

The Maori population is as diverse and dynamic as any other population and can be described and defined in a number of ways.

In the 2006 census 565,329 (15%) of the total population identified themselves as belonging to the Maori ethnic group. 643,977 people (18%) of the total population indicated they had Maori ancestry. The Maori population is young – 53% are aged less than 25 years. Maori birth rates are higher than non-Maori and well above replacement level, contributing to a growing Maori population, and after a widening gap in life expectancy between Maori and non-Maori over the 1990's the gap has stabilised and is currently about 7.6 years.

In 2010 Te Tai Tokerau Primary Health Organisation had 60959 registered population with 48% Maori enrolled. Of this one third live in deprivation area 5.

Maori have higher rates of illness and living with disease, yet studies show that Maori access primary care less, have less tests and investigations ordered and less follow up than non-Maori. Maori avoid seeking health care, or

present late in their disease process, they miss vital cues to changing health conditions. They are often whakama, shy or unable to articulate their health needs clearly, or they are embarrassed about their poor health circumstance and become fearful and vulnerable to judgement. In summary, Maori have the worst health outcomes of all population groups in New Zealand.

These are all reasons for a sensitive approach and for validating the importance of cultural competence. Awareness of health inequalities should brighten our view of the Maori patient and their whanau, strengthening our resolve to not let them melt into the background.

These guidelines will help you to connect with whanau, be therapeutically effective, and to conscientiously widen the pool of solutions by bridging clinical and social networks in a single visit, in concordance with the patient.

Inequity – is underpinned by social justice. Inequity refers to a lack of fairness while inequality compares groups to each other. Health outcomes for Maori as a population group, indicate that they experience both of these.

3P FRAMEWORK

The Treaty of Waitangi is acknowledged widely as a platform for building partnerships of integrity between mainstream health providers and Iwi Maori Hauora. The principles of *Partnership, Participation and Protection* are renowned in health service delivery as a way of connecting the Treaty of Waitangi to clinical practice. Te Tai Tokerau Primary Health Organisation have reconstructed the engagement framework by shifting the practice paradigm from the common three P's to a new 'P' trio – focusing on *People, Places and Processes*.

Partnership, participation and protection recognise the institutional organisational level and responsibilities towards setting the scene for whanau ora approaches to service delivery. It's about values, policies and relationships. It's about working with broader community Maori groups, so that appropriate valuing of relationships within the community can occur. It's about being open to community feedback with community organisations.

The new 3P trio, brings the high level principles of Te Tiriti o Waitangi down to the interpersonal level of engagement between the health

practitioner and the patient, with emphasis on the *People, Places and Processes*. It's about interpersonal and personal encounters, individualised feedback.

This paradigm emphasises consideration for the *People*, within THE context, or *Place* where the service is being delivered while utilising *best practice Processes* that ensure patients receive quality health care.



TIKANGA

Tikanga is about principle, values and spirituality.

'Tikanga' – tika - right, nga- plural, more than one

Tikanga is: To do many right things, bringing People, Places and Processes together in the best way.

FTQ or First Time Quality is a quality measure of performance guiding the practice of:

- doing the Rights thing,
- with the Right people,
- in the Right way,
- The first time, every time you engage them.

Maori beliefs, values and concepts are inherited, practices and passed from generation to generation. They comprise the Tikanga or the Right things for the whanau and the Right way.

Te Hononga is the joining between people, their important places and their lifestyle through time honoured processes, accessing a 'wellspring' of unlimited health opportunities.

Te Puna Waiora is this metaphorical 'wellspring'. Puna – pool/ pond, Waiora – wellbeing. Four key relationships exist in this puna.

- Mana Atua (Gods, or higher power)
- Mana Tangata (other people - iwi, hapu, and Whanau)
- Mana Whenua (land)
- Mana Tupuna (ancestors)

Mana is the 'power in the bond' between us and our God, other people, our land and our ancestors. These relationships are vital in maintaining balance and empowering individuals and whanau throughout their life journey.

Rituals of connection are the specific activities connecting these relationships together. These include ceremonies of welcome, greetings and language. They can be simple rules that guide practices of respect while also offering sound reason for process.

The purpose of a 'ritual of connection' is to maintain integrity in these four relationships. These rituals support a person to establish quality connections with others.

It's 'the way in'. It's a beginning. It is the door through which other journeys begin and progress. Living by 'tikanga' provides the rite of passage to these relationships holding the power of knowledge and strength to lead our families confidently to places of wellbeing.

Example: Formal rituals of connection can be observed in the process of powhiri – *formal welcome onto a marae*. Engaging the right people to perform the right tasks, in the right way, is essential. Informal processes of welcome, requires similar consideration. In a much less formal way, we maintain the purpose to *facilitate health - joining and connection, through the best process*.

Tikanga - Many Tikanga are commonly understood and shared across Te Ao Maori (the world of Maori). These general practices are shared in this document, as a tool for your practice. Changes in modern lifestyle and a parting from traditional ways, reflects that not **all Tikanga** hold the same value for **all Maori**.

The goal of a clinical intervention is to create and facilitate opportunities, allowing process of health (*joining*) to happen. By respecting the 'mana' of a person we tap into their strength and confidence to 'self manage'. Five simple Tikanga will provide a safe entry to this place of shared confidence: Be kind, be clear, be loyal, to keep promises and say sorry if you do something wrong.

Aroha, Whakapono, Tika, Whakamana



Te tatau pounamu tuwhera
The door that opens to my life and my home
Though small - is precious

TE HONONGA - Te Tai Tokerau PHO CULTURAL PHILOSOPHY



Te Tai Tokerau Primary Health Organisation uses a bridge as a metaphor describing connection between the population and health services. Service delivery requires a strict focus on influencing positive relationship building, intentionally creating and facilitating opportunities that allow processes of connection to occur.

Te Tai Tokerau Primary Health Organisation upholds the bridge building skilfully weaving People, Places and Processes as a framework, to ensure access to health services and to maintain viability of service across complex barriers improving health outcomes for Maori.

Conscientious efforts engaging Maori, improves trust in therapeutic relationships. The practitioner gains increased information and is able to negotiate difference better, through connected styles of communication. The patient in turn has

improved satisfaction of service and is more likely to understand and commit to a collaboratively mapped treatment plan.

'Te Hononga' acknowledges that the better we engage, the richer the quality of connection with whanau, thus increasing possibilities for transformation in the Hauora - health aspect of our service delivery.

Three principle of practice are mapped out to support this pathway

1. **Whanaungatanga:** Connect and grow confidence in the relationship to open the flow of warmth, trust and communication.
2. **Hauora:** provide access to resources, address health needs, answer questions, develop new skills, facilitate processes leading to the patients own healing – SALAME Support/ Assessment/ Linking /Advocacy/ Monitoring / Education
3. **Whanau ora:** Complete comprehensive needs assessment Connect the patient to personal, wider family and service resources – with minimal delays.



CULTURAL COMPETENCE

Providing a quality service is what we are about. Cultural competence is everyone's responsibility and is part of providing a quality service. Being aware of the needs and worldview of others enables us to communicate and understand their reaction to our service.

Cultural competence is the application of knowing and doing the RIGHT things.

The Health practitioners Competence Assurance Act 2003 requires registration authorities to set standards of cultural competence, review and maintain the competence of health practitioner and set standards to ensure ongoing competence.

The Medical council of New Zealand has defined cultural competence as:

Cultural competence requires an awareness of cultural diversity and the ability to function effectively and respectfully, when working with and treating people of different cultural backgrounds. Cultural competence means a doctor, nurse or health professional has the attitudes, skills and knowledge needed to achieve this. A culturally competent health professional will acknowledge:

- That New Zealand has a culturally diverse population
- That a doctors, nurses or health professionals cultural and belief systems influence his or her interactions with patients and accepts this may impact on the doctor/nurse-patient relationship
- That a positive patient outcome is achieved when a health professional and patient have mutual respect and understanding (Medical Council of NZ statement on cultural competence):

In the Health and Disability Code of Rights, Right (13) states 'every consumer has the right to be provided with services that take into account the needs, values and beliefs of different cultural, religious, social and ethnic groups.'

Recommended Best Practice is a term that indicates a method of delivering a product or service in a way that provides optimal outcomes and achieves optimal performance of a process in the majority of instances. It is the best way of doing something, given current knowledge, research, benchmarking and resources.

OTHER COMMON TERMS AND DEFINITIONS

Wairua	Spirit or spirituality – A recognition that Maori view of spirituality is inextricably the wellbeing of the patient.
Aroha	Compassionate love. The unconditional acceptance which is the heart of care and support.
Turangawaewae	A place to stand. The place the person calls home, where their origins are. Must be identified for all Maori patients.
Whanaungatanga	Then extended family. Takes responsibility for its members, their wellbeing and broader inter relationships with others.
Tapu/ Noa	Sacred/ profane. The recognition of the cultural means of social control/norm envisaged in tapu and noa including its implications for practices in working with Maori patients.
Manaaki	To care for and show respect to. Services show respect for Maori values, traditions and aspirations.
Kawa	Protocol of the marae,land, iwi. Determines how things are done in various circumstances. Respect for kawa is very important. If the kawa is not known the Tangata whenua should be consulted.
Karakia	Prayer, blessing, incantation. Shared at almost all occasions and part of lifestyle.
Tupapaku	Deceased person. Deceased is elevated to a position of respect during tangihanga (funeral and burial).
Marae	Place of Maori practice. Place of belonging and link to past generations and the future. Comprising of meeting house, marae atea, and dining room and ablution facilities.
Whakapono	Truth, Loyalty
Whakamana	To make right – empower
Tika	Right



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WHANAUNGATANGA

Kaupapa: To establish a therapeutic relationship with the patient to affect positive health outcomes, by becoming aware of whanau dynamics and responding to the patient holistically.

Principles:

- Establish rapport quickly with a goal to move past the superficial features of 'hello' - open the flow of warmth, trust and communication.
- Increase confidence in yourself and the patient. Begin from where they are, acknowledging what they have, rather than an emphasising what they don't have and what they are not doing.
- Help them, to feel cared for, valued and capable by listening; offering encouragement or praise for achievement and positively noticing changes. Inspire them with hope and possibility.
- Be aware of the realities affecting Maori health outcomes:
 - Maori avoid seeking health care or present late in their disease process



Whanaungatanga
Evaluation

How well did I connect with the whanau?

(Self reflection :Who will tell you how well you connected?)

Did they feel they were treated in a respectful manner ?

- Miss vital cues to changing health conditions
- They are whakama – shy , or unable to articulate clearly their needs
- Or are embarrassed about the poor health circumstances that may have precipitated their illness

Greetings:

- The face of the medical practice is reception. The reception is often the first person a patient sees and the first contact the patient has with your primary care team. Using a welcome phrase like 'kia ora' or 'welcome Mr....' will enhance a sense of welcome.
- Ensure to attempt to pronounce Maori names correctly and ask when unsure.
- Endeavour to use the preferred name of the patient

- Make connections / links with the patient to support rapport building. Emphasis of any linking is to find common platforms for connection and should considerably honour the patient.
- Having Maori images in the waiting room or significant landmarks will give a sense of connectedness with the community and land.
- Having Maori magazines or Te Reo books in the waiting area will give a sense of acceptance of Maori being a part of our community.

Whanau support

- Be mindful that the term whanau can be broad to include others in the home not just blood relatives.
- Patients and whanau should be actively encouraged and supported to be involved and included in all aspects of care and decision making.
- If the patient seems reluctant to talk , include the support whanau in the conversation
- Be aware that a patient or whanau may wish to nominate a person to speak on behalf of the patient. This may happen when a patient is receiving palliative care in the home.

- The general practice team will acknowledge and actively involve the nominated person.
- A doctor will give serious consideration to whanau who ask to be present during a procedure.
- Whanau will always be around when death is expected and/or imminent. The patient will never be left alone, not even at night.

HAUORA

Kaupapa: To provide excellence in health care treatment and intervention. This includes ease of access to service, appropriate information and treatment, empowerment through education and well monitored care.

Principles:

- Whanaungatanga comes first. Connect with the patient and connect the patient to their own system of wellbeing. Te Hononga, means to actively make these connections.
- Whanau / Patient centred care
- Comprehensive assessments – First time every time
- Consider knowledge translation methods – sharing information in an empowering way
- Principles of partnership apply
- Lao Tzu says: 'If you give a man a fish, you'll feed him for a day. But if you teach him how to fish, you will feed him and his whanau for a lifetime'. This mantra is the practice of self reliance and is the difference between a transactional



Hauora
Evaluation

Were the patient's needs met?

RIGHT Information, RIGHT time, in the BEST way, The FIRST time EVERY time.

Did they have their questions answered?

- relationship where we exchange goods and services to transforming a whanau's capacity to self manage.
- Training in Motivational Interviewing Techniques can help you to address and overcome issues of ambivalence, preparing the patient and whanau to grow and change.

Information and support:

- Doctors, nurses and reception staff should introduce themselves and explain their role
- When obtaining registration details, accept that the Maori concept of 'next of 'kin' may be broadly interpreted.
- Check that the ethnicity data is correct
- Where appropriate, ensure that patients are offered an interpreter or made aware of the right to have an interpreter.
- Ensure that outreach nursing services and health lifestyle support are part of the care available to the patient and the whanau.
- Ensure information will be delivered clearly and in terms the patient and whanau understand
- Ensure the patient and whanau understand the information given
- Provide information in more than one way where possible eg. Spoken and written, Maori and English
- Inform patients and whanau of the advocacy services provided by the PHO - Primary Health Organisation and the Advocates Trust
- If a health advocate is required , make referral
- Staff will provide verbal and written information and support regarding complaints procedures.
- Always** check the patients' questions have been answered.

Karakia (Blessings/prayer)

- Be open to the offering of karakia before, during or at the end of a consultation. This will properly happen before a patient comes to the medical practice
- If a procedure is to be done or bad news is to be given during a consultation- encourage whanau support to be present and ask if the patient would like to start with a karakia
- Allow time for karakia if you know it is needed. The doctor/ nurse does not have to be present
- Karakia will not be interrupted unless the physical care of the patient is compromised
- Access to appropriate water and containers will be made for the purpose of spiritual cleansing.

Specific needs: Just Ask

- Always** ask – how does your whanau deal with health issues like the one you are experiencing right now? Is there anything we need to do, before we proceed with any further treatment?
- It is ok to ask patients and whanau if they have any special cultural, spiritual, language or other needs you can assist them with to ensure the care they receive is safe from their perspective.
- These needs will be documented in the relevant notes. Actively seek to ensure they are met.
- Often rongoa (Maori methods of healing) use is not disclosed, yet this could impact on the care being provided. Respect and support the importance and use of rongoa during care.
- Be open to negotiate, document and work collaboratively with Maori healers, patient and whanau regarding the use of rongoa.
- A simple request and explanation will be given and consent obtained from a patient before touching them anywhere on the body and especially on the head.

Food and storage of vaccines:

- Food will never be passed over the head
- Fridges/ Freezers used to store or medication for human consumption will be clearly identified and not used for any other purpose
- Do not store vaccinations in the same fridge as food
- Microwaves used for food will not be used for heating anything that has come into contact with the body.
- Tea towels will only be used for the purpose of drying dishes
- Anything that comes into contact with the body or substances should be kept separate from food
- Receptacles used for drinking water will be solely used for this purpose.
- Do not sit on tables or workbenches and particularly on surfaces used for food or medication.

Taonga (valuables)

- Only remove taonga (valuables/ heirlooms) if leaving them on places the patient at risk; however possible taonga will be taped to their person.
- If risk is involved , consent will be obtained from the patient or whanau before removing taonga
- The patient and the whanau will have the option of removing and caring for taonga.

Linen:

- Differentiate pillows for the head and those used for other parts of the body eg. White pillows for the head and dark coloured pillows for other parts of the body.

When going to the Hospital:

- Whanau support services are provided in the hospital by Maori health support teams. The role of these teams is to bridge the relationship between patient/whanau and clinical staff, to ensure that the patient's needs are understood by the clinician and the clinicians message is understood by the patient. In addition the role of clinical staff is to effect best health outcomes in the shortest time.
- If it is a planned admission ensure the patient and whanau have all the relevant information needed about their primary care, ie. Care Plus folder, list all medications, GP's name and practice records.
- If the patient will not be able to communicate encourage them to nominate a spokesperson to speak on their behalf and advise hospital staff on admission.
- If the removal, retention, return or disposal of body parts and/or tissue and/or substances is required, ensure the Whanau support services are contacted. They will guide the whanau through the hospital process.
- If an autopsy is required – Whanau support services will guide the process.
- Take time to explain the process involved in going to hospital. This will alleviate any unnecessary worry.

When going into a Patient's Home

- Remember that you are a guest in the Patient's home and will be honoured as such.
- Ensure to attempt to pronounce Maori names correctly and ask when unsure
- Endeavour to use the preferred name of the patient
- If there are shoes at the front door , take your shoes off as well
- Be prepared to share a 'cup of tea' with the patient , as hosting is important
- Acknowledge others in the room (a nod and 'kia ora')
- Do not sit on tables or workbenches and particularly on surfaces used for food or medication
- Differentiate pillows for the head and those used for other parts of the body. Do not sit on a pillow.
- Be aware that if death is expected or pending the preference is for care in the home.
- If death is pending , food will not be consumed around the patient
- Pending a following death, allow time for the whanau to exercise their beliefs and practices.

WHANAU ORA

Kaupapa: The Whanau Ora service model optimises the strength of whanau to provide a healthy support structure for the whanau and to access the full range of services available in the least restrictive way and with minimal delays.

Principles:

- Know how much you can do – what is your contribution towards the patient journey? What will you encourage them to do for themselves?
- Extend naturally occurring resources – enhance problems solving and coping skills
- Build robust communication systems for easy reporting and reliability. Eg Referral and feedback processes
- Utilise all the skills available in your team/ community.



Whanau ora
Evaluation

Did the patient and /or whanau members receive a comprehensive needs assessment?

Were those needs met by complementary services with minimal delays?

- Build relationships with other services – know your community.

Referrals

- Appropriate and timely referrals
- Monitor progress – is there a pathway for monitoring progress
- Ensure referrals are managed promptly and feedback is given to both the referrer and the patient- keep all parties involved

OTHER IMPORTANT TIKANGA GUIDELINES

Projects and Research – involving Maori Data

The Treaty of Waitangi principles of partnership, participation and protection will be actively addressed and undertaken in good faith when planning projects targeted to or including Maori. This will occur from the outset of the project, ie from the negotiating and formulation of the research to the final outcome.

Informed consent (written and verbal) must be

sought from Maori participants and/or whanau involved in the project or research. This includes requests for body parts/tissue and/or substances (including genetic material) to be collected for research purposes.

Participants in the project or research will be informed of the outcomes in a meaningful way.

Ideas to improve your Te Reo

- Te Reo Maori is an official language of New Zealand and many Maori words are part of common New Zealand language. Learning Te Reo Maori enables you to communicate in a familiar way to Maori.
 - Greet people using 'Kia ora'
 - Put up post-it-notes with the Maori word written on it for items around your practice
 - Learn Waiata / songs
 - Watch and listen to Maori language programmes or music
 - Practice Maori words (names) or phrases safely in your office or home.
- This booklet is a guide only and members of your PHO team are available to provide further advice, support and resources to help. Cultural training is also available through Te Tai Tokerau PHO. We can be contacted on phone 09 408 3142.