

WHERE TO FROM 2008 FOR THE MĀORI CAUCUS

The Māori caucus of the PHA remains a vehicle to launch the aspirations of many people with an interest in Māori health and want things to change. The Māori caucus has been a forum for many years and I attended my first in 1995 (see photo). Since the 1995 Māori caucus hui many things have happened, people have come and gone and much has changed. From the plan outlined about some of the target were not met. Without the plan we would not know.

Is a lack of change a bad thing? It is a bad thing for this disadvantaged by the status quo in terms of Māori health, no change means Māori carry a disadvantage and this remains the reality for many, from mother to child, from nanny to moko. The contribution the PHA has made to addressing the health disparities that burden Māori has been to keep these issues in the front of decision makers, to adapt the organisation for facilitate Māori membership, and to facilitate the development of workforce competencies, policy models for NGOs and provide a brand of leadership that sustains Māori membership. By providing a sustainable forum for those Māori who wish to contribute to the PHA,



Knox College, Otako 1995 – Back row: John Broughton, Benita Wakefield, ?, Keriatia Stuart, Kim Workman (partially obscured), Tim Rochford, Andrew Sporle (HRC), Johnny Whaanga (MOH), Chris Cunningham, Richard Tankersly, Maurice Gray, Paora Howe (TPK), Te Kani Kingi, Peter Morrison, Daphne Ropiha (MOH), Thomas Maniapoto, John Waldon. Middle Row: unknown supporters (2), Aroha Terry, Connie Hassan, Elizabeth Cunningham (yellow scarf), Annemarie Gillies. Front row: Christine Maxwell, and whānau tautoko

the PHA has extended its support beyond its membership into the Māori community. The Māori caucus at the PHA's annual conference has and I hope will always remain open to any person who has an interest in Māori. This has been mainly the domain of Māori, however from time to time non-Māori contributed in areas where Māori expertise had yet to emerge. Government has supported the development of the Māori caucus. Through the support of the Ministry of Health and Ministry of Māori Development the Māori caucus completed forward planning and negotiated resources to sustain this development for the first five years of

its life. These resources have yet to be exhausted but I feel the time has come to re-evaluate the plans drafted by the early Māori caucus and plan ahead, not only for the PHA but also for the Māori caucus.

The Māori caucus is an important part of the future of the PHA and it has an even more important role in giving effect to Māori development through improving the health and well being of Māori. This can be best done with our eyes looking forwards to the future and plans set to measure our progress along the way. Kia kaha, kia maia, kia manawanui e hoa maa.

■ John Waldon

HE WHAKATŪRANGA MO TE HAUORA TAMARIKI

John Waldon recently completed his study which investigated the way in which tamariki Māori, and their peers, rate their own health. The study was an investigation of a self administered health assessment questionnaire by children, and the significance of the translation from English into te reo Māori. The translation of a child health questionnaire was undertaken to produce a health survey tool that could be completed by a child over the age of 8 years in English or in te reo Māori. The questionnaire was pre-tested then used in a survey to determine both reliability and validity. The parents and caregivers of the children surveyed were also interviewed. The parent's responses were compared with those of their children.



John Waldon

The research undertaken has provided a new opportunity for tamariki Māori to take a central role in research into their own health. Tamariki Māori contributed as key experts, focus group participants and translators of the child questionnaire, alongside adults in some cases. Tamariki Māori

provided a new perspective of their health and well-being by translating the questionnaire. This child-centred process added depth to the research of questionnaire validation and testing. The questionnaire was shown to perform adequately as a survey tool.

New research is required in order to theorise beyond the questionnaire's original focus on physical and psycho-social health and to develop clinical and public health applications using a child-centred research process. The translation provided by the children demonstrated they are informed participants, who have an interest in their own health, are reliable and understand their health in a different manner to adults.

John argued that the direct and full involvement of participants in research that is designed to investigate their health is critical if new knowledge is to emerge. It also concludes the self administered questionnaire can be useful tools to understand the health of Māori speaking children.

THE POTENTIAL TO SAVE LIVES IS IN THE HANDS OF WEAVERS

Since 2006, the Wahakura has been promoted by Dr David Tipene-Leach as an intervention for high risk babies to prevent SIDS. The Wahakura is a flax bassinette for babies from birth to 6 months. Based on traditional design, the Wahakura has been developed for a modern context. The wahakura provides a protected space for baby where the combination of maternal smoking and co-sleeping is present. The Wahakura is an indigenous, homegrown response to a problem that affects Māori.

Māori infants are at highest risk of SIDS (Sudden Infant Death Syndrome) than other ethnic groups. Although the Māori SIDS death rate has fallen, it is still 1.5 times higher than Pacific Island infants and 6 times higher than all other ethnicities. SIDS remains the major cause of infant death in the postneonatal period.

Maternal smoking combined with an infant sharing a bed with a parent who smokes, significantly increases the risk of SIDS. Despite best efforts to promote smokefree pregnancies, maternal smoking remains high among Māori women. The lethal combination of these risk factors is more common for Māori infants than other infants in New Zealand. The Wahakura mitigates these combined SIDS risk factors and also protects baby from being accidentally smothered by another person or blankets in a co-sleeping situation. Furthermore, mother and baby can still enjoy close proximity with one another, important for bonding and breastfeeding.

The common evidence based SIDS advice should not be forgotten and apply to the wahakura also:

- Back to sleep is the safest sleeping position for babies
- Babies face should be kept clear of blankets, soft toys or clothing
- Clean, smokefree air at home (and in the car) is best for baby

Added to this:

- A firm mattress should be used (with no gaps between mattress and sides of the wahakura)
- The wahakura should be kept blanket / pillow / bumper and toy-free
- Baby should not be over wrapped with excessive blankets

(to avoid overheating)

- Any person under the influence of drugs, alcohol or who is excessively tired should not be allowed near a baby in a wahakura
- Every caregiver should be informed and reminded of these rules

For New Zealand, the potential of the Wahakura to save lives and promote health is significant. The widespread use of Wahakura requires significant resourcing and encouragement among whānau, and support from the wider community. The first Wahakura project was instigated in Gisborne where local weavers produced 100 wahakura to be distributed to whānau by Ngā Māia midwives. The evaluation of this project highlighted the positive experiences of whānau who used the wahakura, perceived health benefits to infant development and the opportunities for midwives to promote health messages.

In 2008, the Māori SIDS team coordinated a national wānanga at Gisborne, and the first regional wānanga at Tauranga. The making and distribution of Wahakura draws on the unique skills of both the weaving and health communities. At learning wānanga throughout the country, weavers and health workers are invited to learn the art of making Wahakura and the information on safe use of the Wahakura for protection against SIDS.

For 2009, Waikato, Taranaki and Manawatu regions will host Wānanga Wahakura. Providers from regions including South Auckland, Te Taitokerau, Wellington and the South Island have registered their interest in hosting wānanga. The wahakura will be promoted at Te Matatini National Kapahaka Competition in Tauranga – the foremost Māori event in the world attracting 30 000 spectators. A Wahakura workshop will also feature at WOMAD in New Plymouth – an international festival that celebrates the world of music and dance. For more information and opportunities to discuss the potential of the wahakura for your community, please contact the Māori SIDS team.

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Wahakura

STEVEN TE MONI – MĀORI CAUCUS OBSERVER

Pepeha:

Ko Tarawera te Maunga
Ko Tarawera te roto
Ko Hinemihi te Marae
Ko Ngāti Hinemihi te Hapu
Ko Ngāti Tarawhai te iwi
Ko Te Arawa te waka

Position: Health Promoter, Tipu Ora Charitable Trust

PHA Position: Māori Caucus Observer

Interests: All sports, gym, Kapahaka, cars, gardening

Marital Status: Married with 2 children (2001 Subaru Impreza WRX Sti; and a cat named Henry)

Likes: Honesty, loyalty, anything chocolate, and Banrock Station Crimson Cabernet (red wine).

Dislikes: Dishonesty, unhealthy food, laziness.

Favourite food: Canned fish, veggies.

Favourite Drink: Whey Protein.

Favourite TV Programme: Toi Whakaari

It was by chance that I just happened to meet Māori Caucus Members Peter Thomas and Manaia Paki King, at the Māori Workforce Development Hui, following the Health Promotion Forum Symposium held in Rotorua this year.

After the hui, to my surprise, I was approached by Peter to be a part of the Māori Caucus, by offering me the position of Observer to the Māori Caucus. I would like to say it was because of my strong input to the hui, and my overwhelming knowledge of Public Health that I was nominated, but that is not the case. Nonetheless I am very grateful to Peter for this opportunity, and hope to live up to his expectations.

At present I am an employee at Tipu Ora Charitable Trust as a Health Promoter within the Kohanga Reo of Te Arawa, delivering Health Promotion and Health Education to the Tamariki, fully in Te Reo Māori. I cover health issues such as health and nutrition, oral health, physical activity, hearing loss, breast feeding, and even hand washing and nose blowing. A part of my role is reviewing, updating, and helping Kohanga Reo to implement Health and Nutritional Policies.

As the year is coming to an end, and with Te Arawa re-entering the



Steven Te Moni

Kapahaka scene, there is a huge focus of Health and Nutrition within the Te Arawa whanau, especially those performing at Te Matatini next year, including myself!!! Members of Council may have seen me with my cans of Tuna and Bananas, all going towards a great cause, as I am a member of the Kapahaka Manaia, a new group to Te Matatini, and one to watch out for.

I look forward to meeting other members of the PHA, other Caucus representatives, and wish to absorb all I can from some of the most passionate and knowledgeable people I have met...

Noho ora mai, Season's Greetings, and until we meet again.
Noho ora mai.

FAREWELL TO RIMA – WHAKAPIKI AKE ASSISTANT MANAGER

Ko Whakapāpātinga ki runga
Ko Waikato ki raro
Ko Te Arawa te waka
Ko Tahu Matua te tangata
Ko Orākei Korako te kainga
Ko Ngāti Tahu te iwi me ōna
kārangatanga iwi o Ngāti
Tūwharetoa, Ngāti Maniapoto me
Te Arawa
Ko Rima Amua Wharekawa-Hogg ahau.

Tēna anō koutou katoa,

It is with great regret that I have to inform you all that I will be resigning from my position as Assistant Manager to the Whakapiki Ake Project at the University of Auckland.

My partner and I have always planned on doing some overseas travelling, working and living so... we're jetting off!! We are making our first move to

Melbourne, Australia in early January 2009 which we are both very excited about. The world is our oyster and although we don't know where we may end up, we are looking forward to an adventure!!

I have had an absolute fabulous time working with my brilliant recruitment team, Whakapiki Ake Project, within Te Kupenga Hauora Māori at the University of Auckland and I appreciate all the friendships that I have made along the way.

As a recruitment Project, the relationships and networks we have with all of our contacts is what makes this mahi a success and without all the hard work you all put in and without all of the support, we would not be able to do what we do, so I thank you all for that. The mahi and kaupapa

that comes along with this project is fabulous and I will truly miss the contact with our fantastic school's, Career Advisors, District Health Boards, Community contacts, external providers, Universities, Poly Tech's, our amazing and talented rangatahi, whānau and all those who have supported our project to help promote health career's within our community for our rangatahi and whānau.

The best part about working for this wonderful Project and what I will take away with me is that what we all have done has helped so many rangatahi make good choices for themselves and their whānau for the future. I will forever be grateful that I have been a part of this.

Thank you for all your help and support and keep up the fantastic work.