

Waka Hourua



TE RA O TE WAKA HOURUA
DRAFT STRATEGIC RESEARCH AGENDA



TE RAU MATATINI



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BACKGROUND

Suicide is a major issue that is of real concern to New Zealand communities. Every year approximately 500 people take their own lives by suicide, affecting the lives of many others. These deaths are preventable. Multiple risk factors and life events are involved in a person ending their life. The link between mental illness and suicidal behaviour is well known, but other risk factors include exposure to trauma, a lack of social support, poor family relationships and difficult economic circumstances. The prevention of suicide is both complex and challenging, and no single initiative or organisation can prevent suicide on its own. A comprehensive and coordinated approach is required across government and non-government organisations, and in partnership with the community.

Cross-government suicide prevention is directed by the *New Zealand Suicide Prevention Strategy 2006–2016*. *The New Zealand Suicide Prevention Action Plan 2013–2016* continues to work toward the goals of the Strategy and sets clear objectives to:

- support families, whānau, hapū, iwi and communities to prevent suicide, and reduce the impact of suicide
- improve the range, coverage and targeting of suicide prevention services
- lift the quality of information and evidence for effective suicide prevention.

The action plan also has a clear focus on suicide prevention for Māori and Pacific. One in five people who die by suicide are Māori, rates of youth suicides are two-and-a-half times higher for Māori youth compared with non-Māori youth, and there is growing concern that suicide is increasing among Pacific communities.

The plan includes actions to build the capacity of Māori whānau, hapū and iwi, Pacific families and communities to prevent suicide, supported by stronger leadership and culturally relevant education and training. All agencies will design and implement initiatives in a manner that will be effective for Māori and Pacific, and adopt an approach that empowers people and builds their resilience.

The activities that are to be undertaken for the Programme aligns with Action item 1.1 in the Ministry of Health's *New Zealand Suicide Prevention Action Plan 2013-2016*. Action 1.1 is to support Māori whānau, hapū, iwi, Pacific families and communities to develop solutions to suicide prevention through:

- Building the capacity and capability of Māori whānau, hapū, iwi, Pacific families and communities, to prevent suicide and to respond safely and effectively when and if suicide occurs
 - Ensuring that culturally relevant education and training are available to Māori whānau, hapū, iwi, Pacific families and communities that focus on building resilience and leadership
 - Building the evidence base of what works for Māori whānau, hapū, iwi, Pacific families and communities to prevent suicide, through research carried out by, with and for these groups; and
 - Building the leadership for suicide prevention.
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PRINCIPLES

Te Rā o Te Waka Hourua - The *Waka Hourua Strategic Research Agenda* – provides a mechanism to:

- Build the evidence base of what works for Māori whānau, hapū, iwi, Pacific families and communities to prevent suicide, through research carried out by, with and for these groups; and
- Build the leadership for suicide prevention.

Te Rā o Te Waka Hourua is driven by distinctive Māori and Pacific priorities, aspirations, and values that are underpinned by the realities of Māori and Pacific experience and world views. This document builds on previous material that has provided valuable insights in navigating the research agenda for Māori and Pacific communities including - *Ngā Pou Rangahau: The strategic plan for Māori health research* and *Kato Fetu: Setting a Pacific mental health and addiction research agenda*.

Four principles are integral to the *Te Rā o Te Waka Hourua*. These are:

1. Māori and Pacific Aspirations
2. Building on Gains
3. Excellence and Relevance
4. Knowledge Transfer and Application

Māori and Pacific Aspirations

Te Rā o Te Waka Hourua is Māori and Pacific Governance Research which is owned, driven and directed by Māori and Pacific peoples in the principles of self-determination and autonomy. Fostering Māori and Pacific Governance research acknowledges the intrinsic value of research being owned and undertaken by the community from which it draws.¹ Research exists within the broader context of family, whānau, hapū, and iwi. Māori and Pacific aspirations for research carried out by Māori and Pacific to flourish as Māori and Pacific. These aspirations for health and wellbeing can be encapsulated within the broad concept of Whānau Ora. Implicit within Whānau Ora are whānau, hapū, iwi, and full participation in society with greater control over positive development.^{2 3}

Building on Gains

Te Rā o Te Waka Hourua builds from the existing evidence base on Māori and Pacific research and evaluation. Research priorities, processes and outcomes must seek to consolidate, maintain and continue to build on the gains - specifically those which have been made in relation to the interface between research, Te Ao Māori and Te Ao Pasifika and indigenous knowledge.⁴ When research outcomes are maximised, foundations for new directions are provided and priorities can become aligned with Māori and Pacific aspirations

¹ Health Research Council Pacific Guidelines, (2005)

² Ministry of Health, (2002)

³ Te Puni Kokiri, (2004)

⁴ Ministry of Research Science and Technology, (2005)

Excellence and Relevance

Te Rā o Te Waka Hourua enhances the evidence base by facilitating innovative and high quality research focused on the distinctive needs and priorities of Māori and Pacific communities.⁵ Relevance and excellence is attained through pre-research consultation to guide the research question, and subsequently the use of appropriate study design, methodologies and analysis. Researchers must have the expertise to understand the findings within the context of Māori and Pacific realities and world views.⁶ Research processes consistent with Māori and Pacific aspirations are not limited by specific methods, research designs, or research teams. However, key elements must be present to ensure processes are consistent with these aspirations. Research processes will: prioritise Māori or Pacific world views; will be Māori/Pacific-centred; Māori/Pacific-initiated and Māori/Pacific-led.^{7 8} Research processes will lead to outcomes and knowledge that will benefit Māori.⁹ In practice this means that this research will consider the need and value of communal relationships, reciprocity, holism and respect in all aspects of the research process.¹⁰

Knowledge Transfer and Application

Te Rā o Te Waka Hourua realises positive outcomes from research outputs requires a focus on fostering greater awareness of and confidence in research within Māori and Pacific communities. In line with this, linkages between researchers and the ability of Māori and Pacific communities to access, and utilise research outputs need to be strengthened. Knowledge transfer and application is critical if Māori and Pacific communities are to utilise research to realise greater control and autonomy over wellbeing.¹¹

⁵ Health Research Council, (2010)

⁶ Durie, (2005)

⁷ Baxter, (2005)

⁸ Health Research Council, (2010)

⁹ Ministry of Research Science and Technology, (2005)

¹⁰ Health Research Council Pac Guidelines (2014)

¹¹ Health Research Council, (2010)

REALISING POTENTIAL

The *Te Rā o Te Waka Hourua* prioritises **Realising Potential** with four dimensions. These are:

1. Realising Potential: Māori and Pacific Development
2. Realising Potential: Cultural Identity
3. Realising Potential: Supporting Recovery
4. Realising Potential: Cultural Knowledge

Realising Potential: Māori and Pacific Development

Whānau, hapū, iwi, Māori and Pacific aspirations include the desire to have greater control over the direction and shape of their own institutions, communities and development as a people.¹² Realising potential will be facilitated by research which builds on the embedded strengths and assets of whānau, family, hapū, iwi, Māori and Pacific communities, supporting the identification of what is needed to facilitate and maintain wellbeing, as well as to prevent mental illness and support recovery.¹³

Realising Potential: Cultural Identity

Among indigenous and minority peoples, identity is a critical factor for wellbeing.¹⁴ An important foundation for mental health and wellbeing lies within the context of identity as Māori and Pacific. This dimension recognises the importance of Māori and Pacific aspirations, values, experience and worldviews, and the need to retain the distinct identity that comes from a unique heritage, common journeys and familiar environment¹⁵. Māori and Pacific people are diverse and the characteristics of 'being Māori or Pacific' are always in a state of dynamic change.

Realising Potential: Supporting Recovery

Whānau ora has been described as a korowai (cloak) for recovery. Understood in its' broadest sense Whānau Ora facilitates relationships and connections which enable participation and engagement in safe, inclusive and non-stigmatising environments. Whānau Ora recognises the differing realities experienced by Māori and Pacific communities.^{16 17}

Realising Potential: Cultural Knowledge

The 'Cultural Knowledge Creation' dimension recognises culture is experiential; a way of seeing, being, thinking and experiencing the world. This dimension recognises the creative potential of mātāuranga Māori¹⁸ and Pasifika and that research innovations will flow from that and other cultural concepts related to knowledge creation.

¹² Ministry of Health, (2002)

¹³ Health Research Council, (2010)

¹⁴ Durie, (2003a)

¹⁵ Durie, (2003b)

¹⁶ Ministry of Health, (2002)

¹⁷ Te Puni Kokiri. (2004)

¹⁸ Royal, C. 2005

SCOPE OF RESEARCH

The **Scope of Research** to be funded directed by the **Principles** of *Te Rā o Te Waka Hourua* and identified through the **Realising Potential** priorities aims to explore the following:

Realising Potential: Māori and Pacific Development

1. Social and physical environments which support whānau development, the realisation of potential, and protection from risk. This includes exploring the relationship between access to Te Ao Māori and Te Ao Pasifika and realising positive health outcomes.
2. Relationship between inclusion and connectedness, with a focus on taiohi development, intergenerational awareness and connectedness to family, whānau, hapū, iwi and Māori and Pacific communities.
3. Enhance understanding of how advances in technology (for social media) impact both positively and negatively on mental health and wellbeing.

Realising Potential: Cultural Identity

4. Application of Māori and Pacific cultural concepts which support positive mental health and wellbeing, including the role of collective cultural identity and pride.
5. Pathways which can lead to positive mental health outcomes. This will include exploring how outcomes in education, health, housing, employment impact on positive mental health and wellbeing.
6. Enhance understanding of relationship between sexuality and suicide.

Realising Potential: Supporting Recovery

7. Expand knowledge about rates of suicidal behaviour, risk and protective factors and effective prevention and interventions for Māori and Pacific people.
8. Best practice in relation to building whānau and community responsiveness to mental ill health, addiction and distress, with a focus on enhancing early intervention through building whānau and community capacity to identify and intervene at early stages of mental health problems.
9. Understanding pathways to suicidal behaviours/thoughts and effective pathways to recovery.
10. Access to effective mental health services can prevent negative outcomes.

Realising Potential: Cultural Knowledge

11. Relationship between healthy physical environments and positive mental health and wellbeing for whānau.
 12. Existing positive community attitudes to mental health and wellbeing, their relationship to Whānau Ora, and the means by which these strengths can be effectively maximised
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REFERENCES

- Baxter, J. (2005). *Issues to consider in the analysis and interpretation of data pertaining to Maori within MH-SMART (DRAFT)*. Dunedin: Ngai Tahu Maori Health Research Unit.
- Durie, M. (2005). Putaiao: Tides of discovery. In *Nga Tai Matatu : Tides of Maori Endurance* (pp. 136-162). Auckland: Oxford.
- Durie, M. (2003a). Contemporary Maori Development: Issues and Broad Directions. In *Nga Kahui Pou: Launching Maori Futures* (pp. 87-104). Wellington: Huia Publishers.
- Durie, M. (2003b). Te Pae Mahutonga: Mental Health Promotion for Young Maori. In *Nga Kahui Pou: Launching Maori Futures* (pp. 141-156). Wellington: Huia.
- Health Research Council (2010) *Nga Pou Rangahou, The Strategic Plan for Maori Health Research 2010 – 2015*, Health Research Council New Zealand
- Health Research Council. (2005). *Guidelines on Pacific Health Research*. Auckland, New Zealand. Health Research Council.
- Le Va. (2009). *Kato Fetu: Setting a Pacific Mental Health and Addiction Research Agenda Summary*. Auckland, New Zealand: Le Va.
- Ministry of Health. (2002). *He Korowai Oranga: Maori Health Strategy*. Wellington: Ministry of Health.
- Ministry of Research Science and Technology. (2005). *Vision Matauranga: Unlocking the Innovation Potential of Maori Knowledge, Resources and People* Wellington: Ministry of Research, Science and Technology.
- Royal, C. (2005). *Exploring Indigeneous Knowledge*. Paper presented at the The Indigenous Knowledge Conference, Victoria University, Wellington, 25 June, 2005.
- Te Puni Kokiri. (2004). *Strategic Direction: Maori Succeeding as Maori*. Wellington: Te Puni Kokiri.
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