



Te Hau Mārire

Review and Update of the Addiction Workforce Strategic Framework

December 2023

Whare Tukutuku

Te Aka Whai Ora
Māori Health Authority



TE RAU ORA
Strengthening Māori Health and Well-Being

Te Hau Mārire: Review and Update of Addiction Workforce Strategic Framework



TE RAU ORA

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Karakia

Tōkū Piringa Poho - E tū.
E tū rangatira ki te manaaki te iwi o te hau kainga.
Te iwi haere mai nei.
Ā tātou tamariki, ā tātou mokopuna. Ka mate kainga tahi, ka ora kainga rua
E tū, tuia
Tuia i runga, tuia i raro Kia whakawātea.
Kia whakawātea mai te huarahi kia tae mai te iwi nunui.
Kia tangohia.
Kia tangohia atu ngā mea kikino i waenganui i te iwi.
Kia hikitia.
Kia hikitia atu ngā mea kikino.
Kia whiua.
Kia whiua ki te urupā ā ō tātou mātua tūpuna.
Kia taiapatia.
Kia taiapatia ngā mea kikino kia kore e hoki mai anō ki Tōku.
Ki Tōkū Piringa Poho whakararu ai.
Kia pūpurutia.
Kia pūpurutia ngā mea papai o te kainga.
Kia whangaia.
Kia whangaia tonutia ngā taonga mirimiri ā kui mā ā koro mā.
Ko te rangimārie.
Ko te rangimārie me te aroha ēnei.
Kia eke.
Kia eke panuku, kia eke Tangaroa. Tūturu-o-whiti whakamaua ki a tina!
Tina! Haumi e! Hui e! Tāiki e!

The image on the cover represents different aspects from the house of Tāwhirimātea. Tāwhirimātea represents perseverance, connection and transformation. Te Hau Mārire influences and connects Mental Health, Addiction, community as well as Whānau. The patterns show slow movement meaning that over time things will get better but for now the change will take time.

Mihimihi

Acknowledgements

This review was carried out by Anne Bateman for Whare Tukutuku. It would not have been possible without the support of Te Aka Whai Ora, and we appreciate the ongoing partnership with them as well as with Te Whatu Ora. Te Hau Mārire has had ongoing oversight from Te Rau Ora, to monitor and drive progress that will benefit whānau accessing services. The sector workforce centres – Te Pou o te Whakaaro Nui and Whāraurau – are essential partners and we tautoko their commitment.

In completing this review, we acknowledge and appreciate the time and insights from contributors, including:

- Tracey Potiki, Te Rau Ora
- Selina Elkington, Programme Manager Addiction, Te Pou and Whare Tukutuku
- Phyllis Tangitū, Te Hau Mārire Expert Advisory, Emerge Aotearoa
- Dr. Karin Isherwood, Whārarurau
- Tuari Potiki, Te Hau Mārire Expert Advisory, Whare Tukutuku, Te Rau Ora, NZ Drug Foundation, Mental Health, and Wellbeing Commission
- Dr. Vicki MacFarlane, Te Hau Mārire Expert Advisory, Te Whatu Ora Waitematā, Whare Tukutuku
- Terry Huriwai, Te Hau Mārire Expert Advisory, Ara Poutama Department of Corrections

We acknowledge the ongoing mahi of the Te Hau Mārire Expert Advisory group, their insights and guidance as we have gone through the journey of reviewing the strategy. Several of the members of this group have been involved since the original development of the strategy.

The original 2015 framework would not have been possible without the tautoko of the respective organisations. As past service users, family members, practitioners, and leaders in the addiction sector, the reference group brought a vast range of knowledge, skills, and experience. The full reference group were:

- Moe Milne (Te Pou o Te Whakaaro Nui, Auckland)
- Terry Huriwai (Matua Raki, Christchurch)
- Tania Wilson (The Werry Centre, Auckland)
- Lucy Bush (Te Rau Matatini, Wellington)
- Hori Kingi (Project Lead, Te Rau Matatini, Kirikiriroa)
- Phyllis Tangitū (Te Tumu Whakarae, National Reference Group of DHBs Māori Health Strategy Managers)
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Whakarāpopoto matua Executive Summary

In 2023, Te Rau Ora through Whare Tukutuku have been contracted by Te Aka Whai Ora to provide a review of and update to Te Hau Mārire. We have undertaken a process to identify **where we have been, where we are now, and where we would like to be in the future.**

Te Hau Mārire Addiction Workforce Strategic Framework for people working with Māori experiencing addiction-related harm (2015–2025) envisages a Māori addiction workforce able to operationalise addiction-related knowledge and skills from a whānau-centred practice space. Further to this, the strategy aims for a wider workforce able to utilise addiction-related knowledge and skills underpinned by mātauranga Māori. To develop this workforce, simultaneous action across a range of areas were identified.

The strategy recognises a demand for a competent workforce able to utilise mātauranga Māori and/or addiction-related knowledge and skills. Whānau experiencing a substance misuse or problem gambling-related issue present at a range of health and social services. In 2015, Te Hau Mārire projected that the workforce of 2025 will be working in different settings and have addiction intervention-related skills and knowledge appropriate for these settings.

This report provides a snapshot of the progress on objectives, actions, and associated activities in the strategy. To inform this report, insights have been gathered from Expert Advisory group members, Te Rau Ora, Te Pou, and Whāraurau workforce centres, surveys, and external reports in order to provide a broad view of progress and future direction.

Common themes were identified through this process, but do not identify the wide range of responses of individuals. They are not broad changes in the objectives but signal the future emphasis that is needed in the coming two years. The core themes included:

- Strengthening the focus
- The importance of Whare Tukutuku and further development
- Whānau supporting whānau
- Building momentum through leadership
- Staying ahead of new developments
- Te Hau Mārire as a living strategy

Objectives and activity for the remaining term of the strategy have been updated based on the review and feedback. In the refreshed strategy we have remained true to the original. The intent was not redevelopment as this would require a more comprehensive process. Instead, the intent is to provide the next stage of Te Hau Mārire in preparation for future strategic development and to reflect the need to deepen the support to the committed Māori workforce that support whānau across the motu every day.

The Past Background

Te Hau Mārire, published in 2015, is a strategic framework intended to grow, strengthen, and sustain the capacity and capability of those who work with Māori experiencing addiction-related harm. With this update, we are reflecting on the past, reviewing where we currently are, and updating where we need to move to in the future.

Te Hau Mārire¹ was written in 2015 for the Ministry of Health (including Health Workforce New Zealand) on behalf of the addiction treatment sector and the community. It has been particularly relevant for the mental health and addiction workforce centres as well as district health boards and those engaged in growing the capacity and capability of the workforce working with addiction-related harm.



Literally, Te Hau Mārire means 'the sigh of acceptance', but not necessarily of the status quo. The strategy accepts that policy stasis or small incremental change is no longer good enough to address vertical inequity. Te Hau Mārire articulates a future vision, identifying leverage points and activities to create greater momentum for that change – an accelerated transformation approach.

Te Hau Mārire outlines the 'what' and the 'how'. It describes an approach to draw on mātauranga Māori to influence and reshape current individually focused, deficit-oriented practice to create a whānau-centred workforce that minimises addiction-related harm for Māori and contributes to whānau thriving and flourishing.

¹Te Rau Matatini (2015). Te Hau Mārire: Addiction Workforce Strategic Framework for people working with Māori experiencing addiction-related harm (2015–2025). Wellington: Te Rau Matatini.

About Te Hau Mārire

Te Hau Mārire Addiction Workforce Strategic Framework for people working with Māori experiencing addiction-related harm (2015–2025) envisages a Māori addiction workforce that is able to operationalise addiction-related knowledge and skills from a whānau-centred practice space. Further to this, the strategy aims for a wider addiction workforce able to utilise knowledge and skills underpinned by mātauranga Māori. To develop this workforce, simultaneous action across a range of areas were identified.

The strategy recognises a demand for a competent workforce able to utilise mātauranga Māori and/or addiction-related knowledge and skills. Whānau experiencing alcohol and other drug (AOD) or problem gambling-related harms present at a range of health and social services. In 2015, Te Hau Mārire projected that the workforce of 2025 will be working in different settings [as Whānau Ora develops] and have addiction intervention-related skills and knowledge appropriate for their setting. Whānau ora will require service delivery and practice to utilise mātauranga Māori and will be whānau-centred.

Although the addiction treatment sector and the mental health and addiction workforce centres continue to be the core foci for the strategy, the workforce identified in the framework includes both specialists and generalists that work in primary and secondary care settings. Whānau Ora collectives, general practice, social services and Corrections are all potentially important settings where whānau present. Informally, the workforce also includes people in the community who support their own or other people's recovery from addiction-related harm.

Te Hau Mārire acknowledges that tackling addiction-related harm is everyone's responsibility, and every door needs to be the right door for people to get the help they need. Growing the workforce means not only recruiting more people but also ensuring that more people who work with Māori in health and social service settings can identify alcohol and other drug harms and know what to do to help.

Te Hau Mārire identifies six strategic priorities particularly relevant to Te Whatu Ora (and previously the Ministry of Health) and the mental health and addiction workforce centres. They emphasise growing a competent Māori workforce as well as enhancing the responsiveness of those working with Māori. The six priorities are:

- [Systems Orientation](#)
- [Māori Addiction Workforce](#)
- [Māori Responsive Addiction Workforce](#)
- [Māori Responsive Health and Cross sector Workforce](#)
- [Education, Training and Professional Development](#)
- [Evaluation, Monitoring and Research](#)

Workforce development is more than training. To create and sustain an environment that supports an addiction workforce that integrates mātauranga Māori and associated skills and knowledge into day-to-day practice, leadership is essential. Development of resources, training and supervision to promote and deliver care and whānau-centred practice are pivotal to ensuring the addiction workforce can contribute to the well-being of individuals and their whānau.

The Present Current state and review of progress

Te Rau Ora, through Whare Tukutuku have been contracted by Te Aka Whai Ora to provide an update to Te Hau Mārire. We have undertaken a process to identify **where we have been, where we are now, and where we would like to be in the future**. We have collected information, both quantitative and qualitative, including surveys and interviews, as well as reviewing published materials.

Over the course of the strategy, Te Rau Ora have continued to progress the Te Hau Mārire strategy. As part of this, an expert advisory group was pulled together to support a review and update. Te Hau Marire has been informed by the voices of whānau who mahi in the addiction sector as well as the information gathered by Te Rau Ora and other workforce centres. The original plan was commissioned by the Ministry of Health in 2015 as a strategy to inform the shared goals and objectives that would be supported by the workforce centres to ultimately improve access, engagement, and services to whānau Māori impacted by addiction.

There has been significant mahi to advance the vision and goals of Te Hau Mārire since 2015, and this report provides a snapshot of some of the activity and progress to date. Some of the initial actions that were taken are less obvious today, as many of the early work has become embedded in the wider system. However, the review interviewees reported that other parts of the strategy have not been adopted. Interviewees also reported that as the years progressed, the use of the strategy as a sector-wide accountability document has diminished.

Huarahi Matua: Methodology

This report provides a snapshot of the objectives, actions, and associated activities in the strategy. To inform this report, insights have been gathered from Expert Advisory group members, Te Rau Ora, Te Pou, and Whāraurau workforce centres, surveys, and external reports in order to provide a broad view of progress and future direction. Due to timing and requirements, this report has been conducted similar to a 'rapid review' in order to collect information and insights in an abbreviated time period. Prior work, particularly workforce surveys by Whare Tukutuku, had been completed and have been considered as an extension of the data collection in this review.

The review primarily uses a mixed method (qualitative and quantitative) approach, though it is heavily qualitative. This approach is appropriate to the interests of reviewing the strategy and:

- What has been accomplished
- The relevance of Te Hau Mārire as an addiction workforce framework in today's context
- What actions have worked well and not so well
- It's relevance for the Māori addiction workforce

Through extensive qualitative data collection, themes emerged to support our understanding of the strategy's current state and the future direction needed.

There were three core phases for the rapid review which were adapted to suit the timings:

1. A design phase, engaging with stakeholders to finalise scope, refine and confirm key questions, interview approach.
2. An information collection phase, including in-depth semi-structured interviews with key stakeholders and collection of secondary data (primarily reports).
3. Analysis, review, and results, including recommendations supporting the longer-term approach.

Items in the strategy have been rated broadly, based on a basic traffic light system as follows:

Green	Well developed	There is evidence of significant achievement and development.
Yellow	Progressing	There has been some achievement, though significant challenges remain.
Orange	Not progressing	There is little evidence of achievement or progression.

Assessing the outcomes and impact of the strategy within the context of an outcomes framework was not in the scope of the review in the absence of an existing logical framework. However, indicators of outcomes were identified as an area to be explored.

With a short period for the review, there were a total of eight interviews sought and seven completed. Stakeholders were invited to participate via email and interviews were conducted virtually.

Interviews focussed on the objectives as stated in the original strategy. For workforce centre interviews, additional detail was sought on actions that contributed to the achievement of the strategy, and the role of their organisations in those actions. There was limited information available as to direct correlation of the activities of the workforce centres outside of Te Rau Ora and Te Hau Mārire.

The core objectives and actions of Te Hau Mārire are demonstrated in the figure below.



Objective
Encourage more people to join the workforce

Action: Recruit people into the addiction workforce
Action: Retain people in the sector

Objective
Develop the skills of people in the workforce

Action: System Level Development
Action: Develop clinical skills
Action: Developing organisational skills

Objective
Create better relationships between sectors

Action: Engage and support other sector organisations, leadership, and professional groups
Action: Increasing awareness across primary care and other sectors

Objective
Research, evaluation, and monitoring

Action: Collect data on the addiction workforce



Figure 1. Original objectives and actions of Te Hau Marire

Summary of changes that impact the strategy

Since the original publication of Te Hau Mārire in 2015, the addiction sector, as well as the wider health workforce, have seen monumental changes. Most notably, the health system reforms in the years prior to this review have seen the establishment of two government organisations responsible for health; Te Whatu Ora and Te Aka Whai Ora.

In the mental health and addiction workforce development centres, there has been significant change. In 2015, there were four (4) core organisations involved in this strategy delivery: Te Rau Matatini led the strategic framework primarily with the support of Matua Raki, Te Pou and the Werry Centre. Te Rau Matatini is now Te Rau Ora, and Matua Raki's functions now sit with Te Pou (previously Te Pou o Whakaaro Nui) and Whāraurau (previously Werry Centre).

Recent reviews, publications, and legislation have changed the trajectory since the original publication in 2015. Some of these include:

- [He Ara Oranga: Report of the Government Inquiry into Mental Health and Addiction \(2018\)](#)
- [The Waitangi Tribunal's Health Services and Outcomes Inquiry \(Wai 2575\) \(2019\)](#)
- [Health and Disability Commission System Review \(2019\)](#)
- [Pae Ora \(Healthy Futures\) Act 2022](#)
- [Substance Abuse Compulsory Treatment Act \(2017\)](#)
- [Mental Health and Wellbeing Commission Act \(2020\)](#)
- [Whakamaua: Māori Health Action Plan 2020–2025²](#)
- [Oranga Hinengaro System and Service Framework³ \(2023\)](#)
- [Te Whatu Ora and Te Aka Whai Ora Health Workforce Plan 2023/24](#)

Kaimahi work within a changed and changing health sector. Whānau Ora has had years of development and has spread throughout the motu. The health system reforms of recent years are some of the most significant that Aotearoa has seen. This is also within the context of the COVID-19 pandemic which has significantly exacerbated persistent health workforce shortages across the motu.

Responsible organisations from the original strategy have been noted under their current configuration as of 2023. The following primary contributors are noted: Te Rau Ora, Te Pou and Whāraurau.

Delivering Te Hau Mārire – Whare Tukutuku

Whilst Te Rau Ora and the other workforce Centres (Te Pou and Whāraurau) have had initiatives that have progressed the strategic objectives, Te Rau Ora has been a main contributor to the implementation and delivery of the strategy. Whare Tukutuku is the National Māori Addiction Centre that sits within the korowai of Te Rau Ora. Its

² Ministry of Health. 2020. Whakamaua: Māori Health Action Plan 2020–2025. Wellington: Ministry of Health.

³ Ministry of Health. 2023. Oranga Hinengaro System and Service Framework. Wellington: Ministry of Health.

approach is to elevate an alcohol and other drug (AOD) workforce that is whānau-centred and community-focused, and awhi whānau who mahi in the alcohol and other drug space to improve equity of care. The kaupapa encourages pou whānau⁴ to be part of a workforce that is connected to other whānau within their rohe. Whare Tukutuku appreciates the absolute importance of whānau working within their hapori, in places that acknowledge whānau mana, rangatiratanga, and connection to whenua.

The priorities of Whare Tukutuku are:

- **Rangatiratanga:** Leadership – Build and maintain a national leadership voice for Māori AOD harm prevention and addiction-related challenges. This includes an expert oversight group known as the Roopu Whakahaere and a national Māori addiction leadership group.
- **Mātauranga:** Workforce – Develop a training programme for primary care kaimahi that integrates mātauranga Māori as part of best practice when working with whānau.
- **Wānanga:** Community Engagement – Engage with communities to build capacity and capability to reduce AOD harms through the facilitation of addiction wānanga.
- **Rangahau:** Research and Evaluation – Research and evaluation throughout, to ensure continuous improvement and evidence-based value is added to the addiction workforce.
- **Pātaka:** Centre, Platform – Establish community networks and engagement that will include resources and community-led initiatives.
- **Kotahitanga:** Identify opportunities to extend and connect through indigenous relationships and unite to come together for the common and greater good.

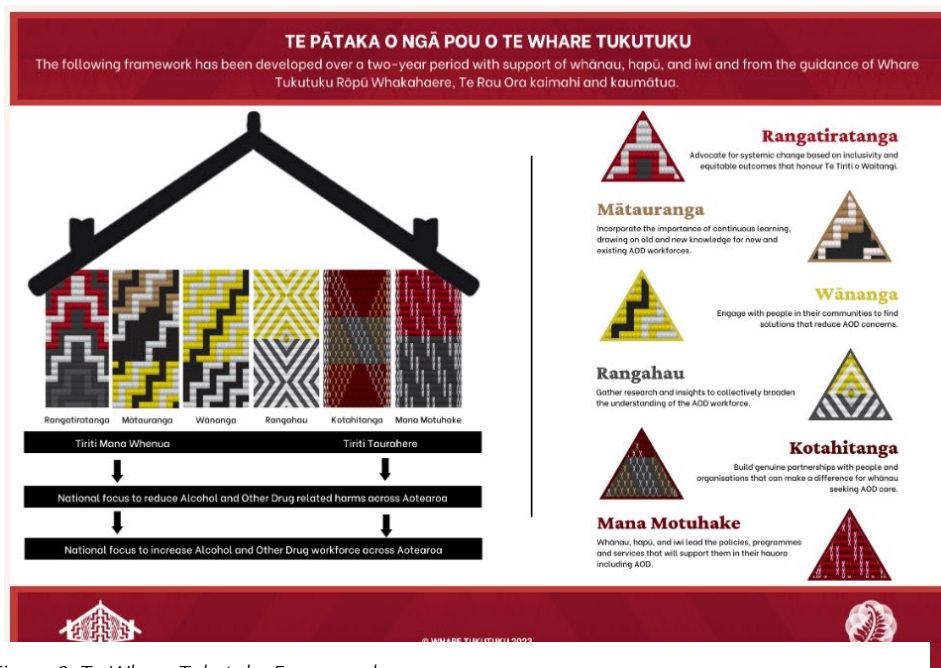



Figure 2. Te Whare Tukutuku Framework

⁴ Whānau supporting whānau.

Objective Encourage more people to join the workforce

Action: Recruit people into the addiction workforce

Supporting Activity	Achievement
Support and promote career pathways in addiction (e.g. scholarship programmes)	
Foster learning opportunities for Māori to enter the addiction workforce (e.g. work based placements)	
Work with education providers to ensure addiction is covered in a variety of core qualifications (e.g. social work, nursing)	

Findings and snapshot of current state

In the wake of COVID-19 there have been significant workforce shortages globally, and existing workforce shortages in Aotearoa have been further exacerbated. The Health Workforce Plan 2023/24 identifies the need to foster and grow the workforce, and to support Māori in seeing themselves in health career pathways. The plan also notes the need for supporting people into addiction and mental health career pathways and various ways of recruitment and training that:

- partner with whānau, hapū, iwi, and communities to strengthen local channels into health
- reduce reliance on classical, academic models of training to grow our health workforce

Hoe Tahi Scholarships

The scholarship programme through Te Rau Ora has seen significant success over many years. The Hoe Tahi Scholarships are for those intending to undertake study in a qualification which contributes to reducing alcohol and other Drug (AOD) harms. This scholarship aims to strengthen the existing and emerging AOD workforce by growing the capacity and capability of those working with whānau who have AOD challenges. There is a high level of interest year on year. For example 50 addiction practitioners have been awarded Hoe Tahi scholarships in 2023. The success of this programme in promoting pathways into the workforce has been supported by Te Aka Whai Ora to increase the pool of funding. There has been a high interest in applications from Māori who are beginning and developing their addictions career.

Establishing a PTE – Te Rau Matatau

Te Rau Ora has established a private training establishment (PTE), Te Rau Matatau. It provides tertiary education programmes that focus on the determinants of health and the shift towards a wellness model of care. Courses for Māori health and community workers will provide opportunities for participants to understand the environments within which Māori live and the opportunities that can be taken to achieve wellbeing. They will also incorporate Te Reo Māori and mātauranga Māori as vehicles for understanding wellness and for lifting the aspirations of whānau.

Te Rau Matatau courses have particular relevance for Māori working in the health sector, especially those in kaupapa Māori organisations. Courses are offered online and in kanohi ki te kanohi (in person) seminars. All courses are underpinned by mātauranga Māori and draw on both written and oral sources. The overall aim of Te Rau Matatau is to ensure that there is a fit for purpose workforce that is culturally capable. This supports kaimahi to better engage with Māori, therefore providing better care and outcomes.

Understanding pathways into AOD mahi to aid recruitment

The recent insights gathered by Whare Tukutuku in Te Wai Tareamea: Māori Alcohol & Other Drug Workforce Report⁵, provides the results of the online Māori AOD workforce survey and qualitative interviews conducted with Māori AOD kaimahi. The survey recognised the knowledge, experience, and needs of kaimahi, whānau, and communities within the AOD workforce.

This report assists us in understanding the workforce and pathways into the workforce support the aim of growing the AOD workforce, especially post-covid. The development (since 2015) of lived experience, primary care, and community roles have grown the AOD workforce though there continue to be shortages. The purpose of the survey overall was to provide more information about the workforce environment as well as the context that supports important areas in need of attention such as recruitment.

The growth of the peer support workforce supplements the option of work-based placements, with approximately 10% of the workforce reporting peer support roles.



Figure 3. Pathways into AOD Mahi from Te Wai Tareamea, Māori Alcohol & Other Drug Workforce Report

⁵ Brausch, S. (2022) Te Wai Tareamea: Māori Alcohol & Other Drug Workforce Report. Te Rau Ora: Wellington, New Zealand.





Additionally, in 2022-2023:

200 Māori trainees are engaged in AOD Peer Support Apprenticeships and are completing the New Zealand Certificate in Health and Wellbeing (Peer Support).

10 Addiction Providers have been selected to support the Hoe Rua Addiction Sector Workplace Internship Programme.

92 Māori practitioners have been supported by their employers to complete Matatini Ora – a level 6 National Diploma in Kaupapa Māori Public Health (Mental Health & Addictions)

Action: Retain people in the sector

Supporting Activity	Achievement
Build resilience and reduce pressure on services in the addiction workforce (e.g. pressure due to job complexity and demand for service; workforce planning)	
Foster effective mentoring and supervision for Māori in the addiction workforce	
Support networks of Māori in the addiction workforce to encourage information exchange and community	
Ensure ongoing professional development opportunities to improve skills and competencies for working with Māori	

Snapshot of representative activities and findings

Whare Tukutuku has been well received by Māori in the addiction sector and is part of a strong network. Opportunities to gather and share information are regularly provided and well attended. Sector intelligence and a recent report by Platform Trust⁶ (commissioned by Te Whatu Ora) support the view that the Māori workforce would benefit from the opportunity to become more involved and receive support from their organisations to do so.

⁶ Platform Charitable Trust (2023). Workforce Development and Leadership for the Addiction Treatment Sector: An environmental scan and future commissioning priorities. Platform Charitable Trust: Wellington, New Zealand.

While Whare Tukutuku as a whole supports retention and builds resilience, the priorities of Whare Tukutuku that particularly support retention in the addiction sector are: Rangatiratanga, Wānanga, Pātaka, and Kotahitanga.

In 2022-23 Te Rau Ora have been able to engage with significant numbers of people working in the sector to support professional development and build networks including:

- 420 Addiction Practitioners have completed training in the application of Pae Tata Pae Tawhiti—a mātauranga Māori-centred AOD early intervention approach to care.
- 450 Māori Addiction Sector Practitioners and Leaders have attended national AOD forums hosted by Whare Tukutuku, including (1) Oraka Ararau: Pre-Cutting Edge Māori Hui in 2021 (2) Ki te Ara Whakamua: Parliament Summit to reduce impacts of Methamphetamine in 2022, and (3) Oraka Ararau: Inaugural National Māori Alcohol and Other Drug Hui in 2023.

These activities contribute to building resilience and reducing pressure on services, however, there have been extraordinary pressures on services and workforce over the past several years due to systemic issues that stretch far beyond the reach of Te Rau Ora and the other workforce centres. The onset and ongoing challenges of COVID-19, health system reform and demand for services are wider systemic impacts on the workforce that are far beyond the scope of the kawa of Te Hau Mārire and could not have been anticipated at the time of development.

Objective Develop the skills of people in the workforce

Action: System Level Development

Supporting Activity	Achievement
Support addiction teams and organisations to shape their processes and practices to Māori resources	
Develop and deliver competency frameworks in the addiction sector (such as the Takarangi Competency Framework)	

Snapshot of representative activities and findings

Te Rau Ora continues to support the wider addiction sector organisations in shaping their processes and practices to Māori resources. Advisory support, partnerships, and relationships within the sector feature in the work that is done at a systems level to aid in further development. Māori networks and leadership work within the sector to support system level development.

However, capacity is limited and there is still a great deal of foundational work that needs to occur to create an organisational platform that supports skill and cultural development in each organisation's mahi. Some interviewees noted that non-Māori organisations and leaders often rely on a select few Māori individuals to carry the load, sometime placing a greater burden than they are prepared to carry.

The Takarangi Competency Framework (TCF) is noted in the actions associated with systems development for the addictions sector, although at this time it is less relevant as a stand-alone framework. TCF was developed by the first Roopū Kaitiaki and is based on mātauranga Māori. It focuses on service delivery and reflective practice, providing a tool for participants to measure their cultural competency when working with Māori. The framework outlines a pathway to build cultural competence, enhance cultural fluency, and analyse workforce needs. TCF can also be used to monitor quality assurance. Since its early development, it has influenced the growth of current and widely used competency frameworks, such as the Real Skills Competencies that are used by Te Pou and Whāraurau.

Since the original publication of Te Hau Mārire and the development of TCF, there have been changes to the workforce and an identified need to develop new frameworks that build capability and are fit for purpose, especially for the Māori workforce. The Whare Tukutuku Framework is one that has been developed, tested and adapted to provide a robust skills development and framework.






Supporting example publications

At the initial publication date of the strategy, peer support and lived experience workforce was largely considered an emergent workforce. Now, the workforce has

grown considerably with an estimated 14% of the total workforce identifying as Māori.⁷

Tupu A Nuku ki te Wheiao: Alcohol and Other Drug Lived Experience Workforce Framework 2023⁸ was recently published to stimulate the kōrero regarding a fit for purpose framework. This environmental scan has identified that existing workforce pathways for people with alcohol and other drug challenges are limited and not well described. This does raise issues of understanding, workforce planning, resourcing, and investment. These concerns are more pertinent when considering the process that colonisation has followed, which has allowed the privileging of some parts of the community over others. Within the time restraints of this review there is no one clear or formal peer workforce approach that Te Rau Ora have found as vital to the addiction recovery space that would flow on to new peers entering the workforce – further highlighting the need for a Māori lived experience workforce framework.

Action: Develop clinical skills

Supporting Activity	Achievement
Support the development of kaimahi capability working with Māori that have co-existing health challenges	
Develop kaimahi capability working with older Māori who have addiction-related challenges	
Develop kaimahi capability working with Māori children of parents experiencing addiction-related challenges	
Develop understanding of and capability in using talking therapies with Māori	
Develop addiction awareness and capabilities in the Whānau Ora sector	

Snapshot of representative activities and findings

Whare Tukutuku as a Workforce Centre has been instrumental in progressing workforce capability and clinical skills for Māori working with Māori. Wānanga and other activities are developed based on structured and unstructured feedback from the workforce. Recent Te Rau Ora hui and wānanga (2022-2023) have been well attended:

⁷ Te Pou. (2022). Te Whatu Ora adult mental health and addiction workforce: 2022 alcohol and drug, forensic, and mental health services. Auckland.

⁸ Whare Tukutuku (2023). Tupu a Nuku ki te Wheiao: Alcohol and Other Drug Lived Experience Workforce Framework 2023. Te Rau Ora: Wellington New Zealand.

- 650 Hauora & AOD practitioners have completed He Puna Whakaata training to improve their therapeutic engagement with Māori whānau using whakatauki to motivate change.
- 200 Māori trainees are engaged in AOD Peer Support Apprenticeships and are completing the New Zealand Certificate in Health and Wellbeing (Peer Support).
- 92 Māori practitioners have been supported by their employers to complete Matatini Ora—a level 6 National Diploma in Kaupapa Māori Public Health (Mental Health & Addictions)

Although kaimahi are keen to participate in workforce development activities, they have expressed capacity challenges that make it difficult, including staffing shortages.⁹

Supporting the Whānau Ora kaimahi and the goals of Whānau Ora (such as by empowering communities and whānau as well as increasing access to resources) has meant there has been more focus on developing the rangatiratanga of those directly supporting those who are experiencing issues related to AOD use. Interviewees noted that whānau are an important part of the continuum of care and are often the first helpers and most consistent in supporting recovery and wellbeing. To further support these objectives, various skill-building and supportive wānanga have occurred. In 2023, 27 community and whānau groups have been awarded funding to implement Māori solutions to reducing AOD Harm through Ki te Ara Whakamua: Māori AOD Community Action Fund.

Whāraurau also noted that there is a workstream that supports working with whānau Māori experiencing co-existing problems. This initiative has been in existence for some time.

Supporting example publications

Whare Tukutuku: Patterns of Practice Whānau Supporting Whānau¹⁰ is a 2021 report by Te Rau Ora and the New Zealand Drug Foundation. The report focuses on embedding practices by Māori for Māori. Specifically, it looks at whānau who act as pou, supporting, advocating, and mentoring other whānau. Some of the pou whānau were operating within the system, while others had taken the best of their system experiences and had adapted this to meet the needs of whānau. There were also those who were working things out for themselves. The themes that emerged from the insight gathering sessions are useful in steering what and how Whare Tukutuku could provide support to whānau¹¹.

Survey Outcome Report: Whakatupu ā tatou māramatanga (2021) gathered brief insights about alcohol and other drugs from whānau who attended Te Pūtahitanga


⁹ Brausch, S. (2022) Te Wai Taramea: Māori Alcohol and Other Drug Workforce Report. Te Rau Ora, Wellington, New Zealand

¹⁰ Te Rau ora and NZ Drug Foundation (2021) Whare Tututuku: Patterns of Practice whānau supporting whānau. Wellington, New Zealand. Accessed from: <https://terauora.com/whare-tukutuku-patterns-of-practice-whanau-supporting-whanau/>.

¹¹ Te Rau Ora and NZ Drug Foundation (2021) Whare Tututuku: Patterns of Practice whānau supporting whānau. Wellington, New Zealand. Accessed from: <https://terauora.com/whare-tukutuku-patterns-of-practice-whanau-supporting-whanau/>.

o Te Waipounamu annual symposium in April 2021. It provided an insight into attitudes and understanding of AOD care, as well as skills and confidence in working with whānau experiencing challenges. The survey affirmed participants' knowledge around the need for more support and further training. There were some surprising results indicating the presence of stigma and stereotyping.

Action: Developing organisational skills

Supporting Activity	Achievement
Support and develop Māori addiction leadership capability	
Support Māori in the addiction sector to participate in local, regional, and national forums	

Snapshot of representative activities and findings

Whare Tukutuku mahi and direction is guided by Te Rau Ora leadership, hapori Māori, and the wisdom of the Roopu Whakahaere AOD leadership group.

Collectively, the Roopu Whakahaere strongly advocate for systematic change based on inclusivity and equitable outcomes that honour Te Tiriti o Waitangi. They are prepared to have brave conversations that inform and challenge to increase understanding and improve innovation. Whare Tukutuku support that the rights of whānau, hapū, and iwi be included in decisions that impact on their wellbeing to affirm mana motuhake. Hapori Māori will be supported to take further steps that foster future Māori innovators and leaders. The core philosophy includes:

- Māori must lead our own futures.
- Māori must be involved in all decisions that affect us.
- Māori are courageous in our fight for social justice.

To encourage the development of Māori leaders, scholarships and grants are made available. In 2022-2023, 89 emerging leaders have been awarded a Māori Health Leadership scholarship to support their continued professional development and training.


Supporting example publications

In 2020 Te Rau Ora and NZ Drug Foundation led several different webinar exploring AOD care from a Māori perspective. The kōrero challenged the status quo of a health system failing Māori and promoted Māori pathways of AOD care.

The series of videos of various Māori leaders presenting on a wide range of Māori leadership topics are now hosted on the Whare Tukutuku website, including kōrero related to the AOD workforce, Māori leadership, AOD challenges within the workforce, and how to provide better care for whānau Māori¹².

¹² Material can be viewed on <https://wharetukutuku.com/rangatiratanga/>

Objective Create better relationships between sectors

Supporting Activity	Achievement
Engage and support other sector organisations, leadership, and professional groups to build collaborative working opportunities with the addiction sector (e.g. primary health care, NGOs, social services, MSD, Corrections)	
Increasing awareness of addiction and mental health across primary care and other sectors e.g. MSD, Ara Poutama/Department of Corrections and Primary care	

Snapshot of representative activities and findings

Since the development of Te Hau Mārire, there have been two major initiatives that have strongly influenced services delivered to whānau, and consequently to the addiction workforce as part of the support ecosystem that serves whānau impacted by alcohol and other drug use.


Whānau Ora has had a significant impact on whānau and for kaimahi. The introduction of Whānau Ora has been noted in interviews as a significant shift in practice and an overwhelming positive change that has supported widespread development in kaupapa Māori approaches to strengths-based practice. This has had a ripple effect on the practice within the addictions workforce that has been reinforced by Te Rau Ora.

One of the most significant developments in recent years for the primary health sector as related to addictions (and mental health) has been the rollout of the access and choice programme (primary mental health) by Te Whatu Ora and Te Aka Whai Ora. This rollout has been supported by the mental health and addiction workforce centres. 505 Health Improvement Practitioners and Health Coaches (HIPS) have completed Hua Oranga training and are incorporating it into the delivery of their Access and Choice Integrated Primary Mental Health and Addiction Services.

In addition, Te Rau Ora has developed Pae Tata Pae Tawhiti. Pae Tata Pae Tawhiti is a brief and early intervention framework intended as a guide for practitioners who work in a range of settings from Whānau Ora, primary health, and health and social services. It's particularly helpful for practitioners who want to learn how to work with those with alcohol and other drug concerns, and mild to moderate mental health concerns.

This can involve practitioners from a range of professions and organisations within the primary health sector including (but not limited to): Whānau Ora navigators; Drug and Alcohol Practitioners; HIPS; Health coaches; Awhi Ora support workers; Community Health Workers; Nurses; midwives and social workers. In 2022-2023, 420 addiction practitioners completed training in the application of Pae Tata Pae Tawhiti.

Objective Research, evaluation and monitoring

Supporting Activity	Achievement
Collect data on the addiction workforce	

Snapshot of representative activities and findings

Collecting data and information from the addiction workforce has been ongoing in order to build understanding of the size, scope and needs and future development for the workforce. Previous reports from Te Rau Matatini identified the difficulty in accessing Māori health workforce data, which is still a challenge. The workforce centres continue to collect information and publish insights on the workforce, such as the More than Numbers reports published by Te Pou. Based on interviews, the activities of the other workforce centres were largely seen as activities that were independent of direction provided by Te Hau Mārire.

Te Rau Ora has focussed on the Māori workforce as well as publishing supporting reports on Māori frameworks and approaches to practice that are applicable to all workforce that are working with Māori. The evolution from collecting data to developing outcomes and monitoring current trends is an important developmental progression that surpasses the initial activity of data collection.

Te Rau Ora, previously Te Rau Matatini, administered two surveys in 2017 and 2018 to understand the experiences of the Māori workforce, consider future workforce priorities and inform workforce development opportunities. The 2017 report provided a brief profile of the Māori health and disability workforce, identifying gaps and recommendations¹³. In 2018, Te Iti Me Te Rahi: Everyone Counts Survey report discussed what is essentially valued by the Māori health workforce to work well as kaimahi¹⁴. Two supplementary reports were produced in 2019 utilising Te Iti Me Te Rahi: Everyone Counts' survey results. The first report focused on addiction services while the second focused on mental health services. A key motivation for the supplementary reports was the lack of routinely produced, accurate sources of data that were specifically on the Māori addiction and mental health workforces.

The addition of the Workforce Development Outcomes Framework¹⁵ (2022) further supported movement and understanding of the success indicators and outcomes desired. This framework was designed from the input of over 2000 key stakeholders who defined their aspirations and vision for a workforce. The framework provided Te

¹³ Sewell, J. (2017). Profiling the Māori health workforce 2017. Wellington, New Zealand: Te Kīwai Rangahau, Te Rau Matatini.

¹⁴ Te Rau Matatini (2018) Te Iti Me Te Rahi: Everyone Counts Māori Health Workforce Report (2018). Wellington, New Zealand.

¹⁵ Accessible via <https://terauora.com/workforce-development-outcomes-framework/>

Rau Matatini, and now Te Rau Ora alongside the health and social service sectors with guidance to develop Māori and non-Māori workforce development and service improvement plans.

Example Publications

Some examples of recent publications include *Te Mana o te Kupu: How Words Influence Alcohol and Drug Outcomes*¹⁶ (2023), and *Te Wai Taramea: Māori Alcohol and Other Drug Workforce Report* (2022)¹⁷.

Te Mana o te Kupu: How Words Influence Alcohol and Other Drug Outcomes

The aim of this report is to scope and analyse how stigma, racism, and discrimination is present within the AOD space. It explores definitions of discrimination, stigma, and racism – what types and forms are prevalent and how they manifest within society in relation to AOD. The findings from this report help to inform future Whare Tukutuku initiatives, including:

- Developing educational tools that can be used by whānau Māori and the workforce – building on previous and current initiatives.
- Delivery of public awareness campaigns that utilise Whare Tukutuku and Te Rau Ora media networks to promote messages.
- Extending the scope of the research to include interviews, videos, and website content.

Te Wai Taramea: Māori Alcohol and Other Drug Workforce Report 2022

Whare Tukutuku want to recognise and understand the knowledge, experience and needs of kaimahi, whānau, and communities within the AOD workforce. Whānau supporting whānau is important and has potential as an emerging workforce. It is vital to broaden the collective understanding of whānau care to improve equity and support the whānau narrative, including gathering kaimahi Māori workforce insights. This report provides the results of Te Wai Taramea online Māori workforce survey and qualitative interviews conducted with Māori kaimahi. The findings from this research provided further insight into the environment of the Māori AOD workforce and also helped to determine development pathways, resource decisions and ultimately a better way of working. It is essential to listen and act on the valuable whakaaro of kaimahi and whānau Māori (within the different research gathered), to ensure the future AOD workforce meets the needs of whānau Māori and supports a future where they are thriving.

¹⁶ Brausch, S. (2023). *Te Mana o te Kupu: How Words Influence Alcohol and Drug Outcomes*. Te Rau Ora, Wellington, New Zealand.

¹⁷ Brausch, S. (2022) *Te Wai Taramea: Māori Alcohol and Other Drug Workforce Report*. Te Rau Ora, Wellington, New Zealand.

The Future Where to from here

Kua tawhiti kē to haerenga mai, kia kore e harere tonu. He tino nui rawa ō mahi, kia kore e mahi nui tonu.

You have come too far, not to go further. You have done too much, not to do more.

Tā Hemi Henare

To identify the direction for the future, leaders who were involved with the development of Te Hau Mārire were interviewed, as well as kaimahi from the workforce centres who were responsible for addiction workforce development. The questions explored:

- What worked well and what didn't work well
- The relevance of Te Hau Mārire as an addiction workforce framework in today's context
- It's relevance for the Māori addiction workforce
- Future direction and emphasis


Common themes were identified through this process, but do not identify the wide range of responses of individuals. They are not broad changes in the objectives but signal the future emphasis that is needed in the coming two years. The core themes included:

- Strengthening the focus
- The importance of Whare Tukutuku and further development
- Whānau supporting whānau
- Building momentum through leadership
- Staying ahead of new developments
- Te Hau Mārire as a living strategy

Strengthen the focus

Te Hau Mārire and the core of its strategic objectives are still seen by interviewees as relevant today. There is still a need to ensure that the non-Māori workforce are supported in their cultural development and ability to engage well with Māori whānau seeking care. The question arose as to where this onus should be placed, and the role of Te Rau Ora as the current primary driver of the actions within the strategy. Eight years have passed since the original strategy was developed and the landscape of Aotearoa, the health sector and its workforce has had monumental change during that time. In the current world, those interviewed felt that shorter time horizons and more focused objectives with measurable, time limited actions with demonstrable impacts and outcomes would be more beneficial.

With new workforce development plans that acknowledge the health workforce crisis and a growing Māori addiction workforce there is an opportunity to deepen the connections and workforce support that will aid the wider addictions sector. Recruiting and retaining workforce will be critical components of providing much needed health and addiction services in the short and medium term. Narrowing the focus of Te Hau Mārire over the remaining two years to the Māori workforce (current and future) would be a strong component in moving toward stabilisation. With Māori representing approximately 28% of the current workforce this focus would prove to be significant.



'There is more of a call for to be supporting Māori clinicians who are working in Māori organizations, in a Māori way.'
Expert Advisory Member

Focus on the Māori workforce does not denote that the non-Māori workforce does not need support or cultural input. With the progression of the other addictions workforce centres (Te Pou and Whāraurau), Te Rau Ora and Whare tukutuku can still have a supporting role and partnership in ensuring wider workforce is culturally capable in order to improve outcomes for whānau Māori.

The importance of Whare Tukutuku and its development

Kaimahi shared that their practice and consequently the outcomes of the whānau receiving services are enhanced by their involvement. Many are registered with the Drug and Alcohol Practitioners Association of Aotearoa New Zealand (DAPAANZ), and benefit from that registration and the opportunities within DAPAANZ. However, the added value to their practice and the Whare Tukutuku practice community is significant in supporting the cultural and clinical extension that is required to achieve

the professional satisfaction, enhanced client outcomes and ultimately retention in the sector. It has been expressed as a place where they are professionally safe to 'fully be Māori.' The desire amongst practitioners in the sector is to see Whare Tukutuku fully supported as a Workforce Centre and to grow its offering and standing according to the needs of the Māori workforce.

'One of the things that always happens [in a hui] is someone gets up and goes 'When is te Rau Ora going to sit up?. We want our own professional body.'... that is theirs through their eyes. That's about them. It's a plus, not a them versus us.'

Interviewee

Whānau supporting whānau

While there are many initiatives that cross structural system silos (such as mental health, domestic violence, child welfare etc), they are not always joined up or truly centred on the identified needs of whānau to support their tino rangatiratanga (self-determination). The success of Whānau ora as well as more recent initiatives in Te Rau Ora that support whānau to be empowered in providing awhi to their own loved one's recovery signal the efficacy of these approaches that recognise the intersectionality experienced in our communities. The role of Whare Tukutuku/Te Rau Ora with this natural emerging 'workforce' has been most successful to date as a supporting function, or 'helping the helper'.

Whānau of those seeking recovery are in many ways an extension of the workforce and highly invested in achieving positive outcomes and enhanced well-being for individuals and hapori. Providing the tools and resources necessary to whānau to achieve these objectives as well as 'connecting the dots' is a unique opportunity as well as a challenge that shows promising results to date and the potential for sustainable change.

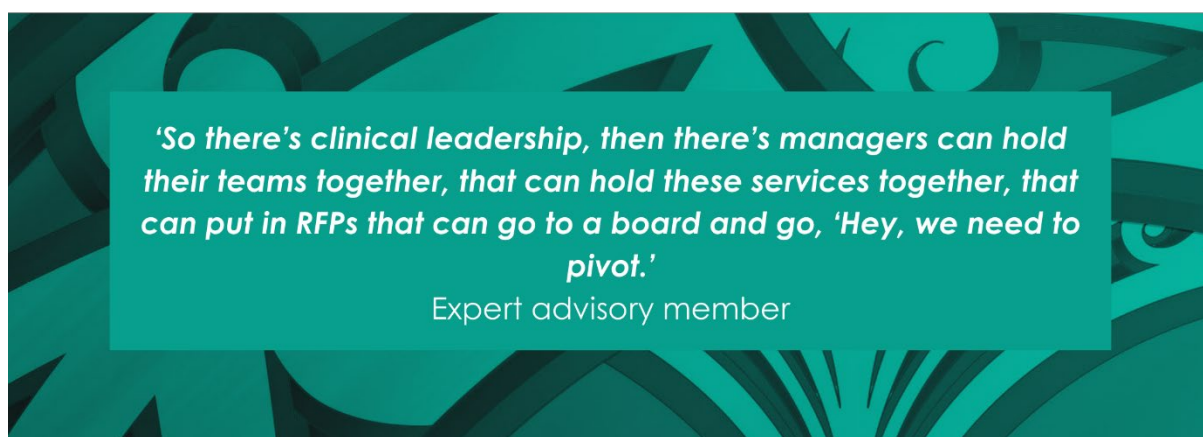
There's an increasing interest of Iwi in supporting the oranga of our people.... How can we support them in understanding what's needed from an addictions perspective?

Expert advisory member

Building momentum through leadership

Leadership throughout the system is considered essential in creating a sustainable shift in whānau outcomes, workforce recruitment/retention, skill development, and capacity growth. Training is only one component of creating a sustainable shift that will reduce the pressures on the health system and whānau, community impacts from addiction. There is also an opportunity noted to expand the scope of leadership development into areas of organisational operation and board management.

There is continuing demand for supervision, mentoring and leadership input from Māori leaders at team, organisational and systems levels in order to meet the needs of those seeking services to support recovery. Māori leadership is strong, but with limited capacity to meet this demand. As with the general health workforce, the Māori health workforce is ageing, requiring succession planning.




Staying ahead of new developments

The COVID-19 pandemic brought a swift and urgent need to change the way care was delivered, and increased pressures on the workforce. Some interviewees noted that the swiftness of the pandemic and associated challenges in adapting care delivery were an indicator that more work is needed in anticipating upcoming changes, especially in application to the AOD sector working with Māori and for Māori practitioners.

Virtual care has rapidly accelerated over the past few years. Some felt that the rapid development in this area and how care is delivered virtually for Māori whānau still needs exploration. Within a virtual environment, practice skills (such as engagement, whanaungatanga, etc) have not yet established best practice and strong guidance for the workforce. Anticipating future development in the virtual care space and required skills should receive some focus.

Similarly, health system changes have been swift and there are many enabling roles (for both Māori and non-Māori) that strongly influence service for the Māori workforce and whānau seeking recovery. Scoping the workforce and developing

culturally relevant capacity and capability were seen as areas of exploration for Te Rau Ora and the other workforce centres.

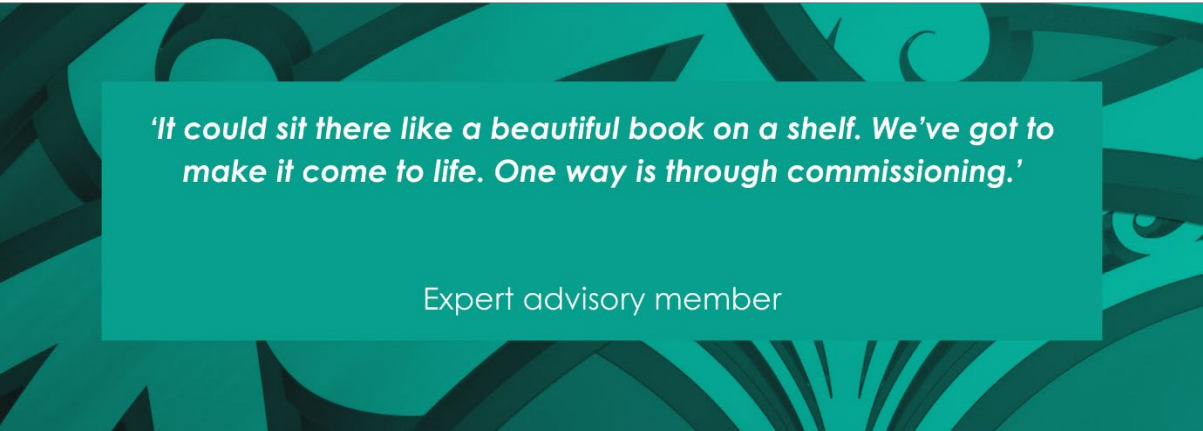


'People all around the country are being supervised by people in different parts... what's our curriculum of learning needed, if we're going to grow the mātuaranga Māori?'

Expert advisory member

Workforce pressures and the workforce crisis were noted as areas that will need continued consideration and development. Within this context as well as future changes to the AOD system of care (inclusive of primary care), interviews saw an opportunity to investigate and consider the needs that may arise and anticipate the workforce support that will be needed, especially for Māori working in the AOD sector.

It was generally agreed by those interviewed that long-horizon strategies are currently not as relevant as short to medium-term strategies which are targeted and 'do-able' and deliver demonstrable impact. With the end date of this strategy coming in 2025, it was felt that the two-year period would offer time to continue with an adjusted focus and then allow for new strategies to evolve and develop. The settling in of the changes associated with the health reforms and the change in government were seen as significant factors in developing a next-stage strategy for the future workforce.



'It could sit there like a beautiful book on a shelf. We've got to make it come to life. One way is through commissioning.'

Expert advisory member

Updating the strategy

Te Hau Mārire, its objectives and actions were seen as still relevant though with a need to shift direction in the short term, as detailed above. With the changes in the sector as well as in adjacent sectors (justice, police, child welfare and primary health) interviewees felt that the objectives of the strategy and the accomplishments should not only be consolidated but promoted to increase awareness and cohesion. Some felt that impact frameworks could assist in building awareness, highlighting accomplishments, and gathering support that would enhance workforce development.

The original strategy was set as a ten-year term, and there are less than two years left to the term of the strategy at the time of writing. Current thinking on strategy favours shorter time frames, especially in times of significant change. Contributors also felt that the time frames associated with Te Hau Mārire should be short (approximately two years).

In this light, we have briefly updated the strategy, maintaining the core objectives and adjusting some of the actions for the current environment and stage of the strategy:

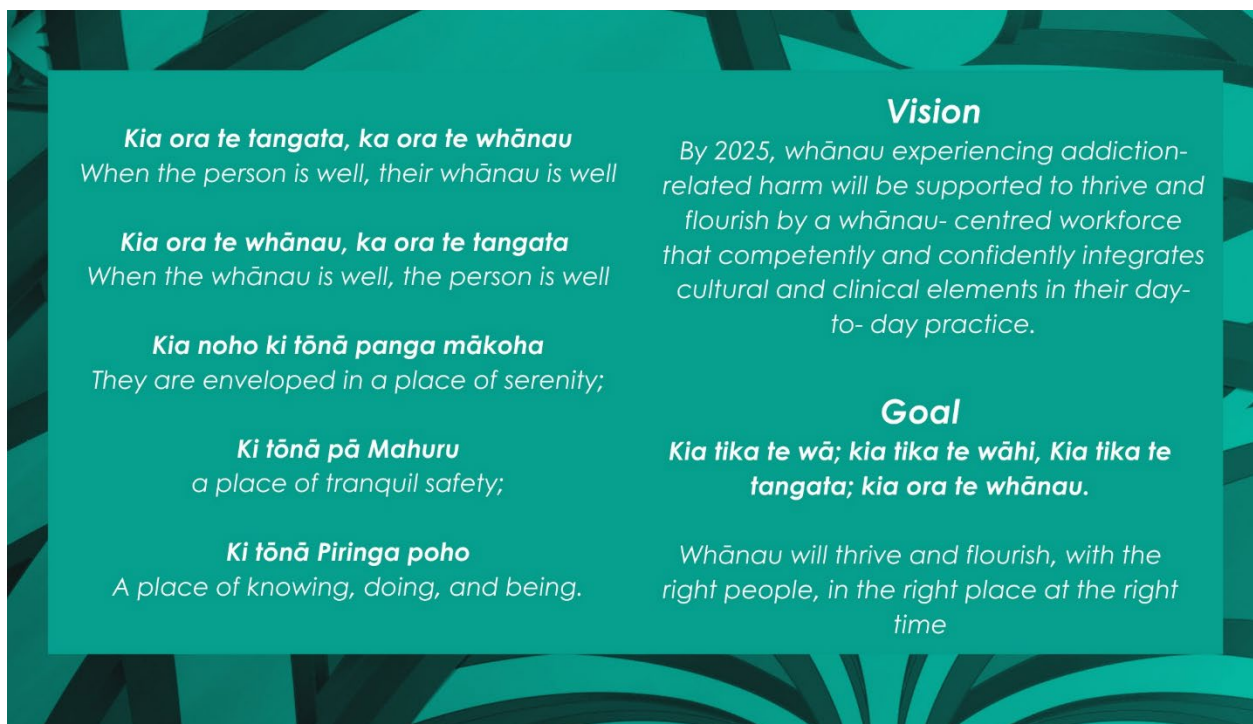


Figure 4 The original vision and goals of the strategy. Acknowledges the mana of others. Service delivery and practice is mana enhancing and mana protecting.

Principles

Manaaki

- Acknowledges the mana of others. Service delivery and practice is mana enhancing and mana protecting

Rāranga Tahī

- Whānau-centred practice explicitly recognises integrated practice. This includes the integration of mātauranga Māori with addiction-related knowledge and skills; co-existing problems integration across different teams, organisations and sectors; and the weaving together of complementary strands of practice, understandings and knowledge

Tiaki

- Embraces spiritual and cultural guardianship, and entails active exercise of responsibility in a manner beneficial to resources and the welfare of people. Whānau-centred practice emphasises responsibility and working with whānau to secure their future.

Te reo Māori me ōnā tikanga

- Te reo Māori me ōnā tikanga is the preferred medium to express Māori relationships to wairua and the universe. 'Kei roto i te reo, tetahi rongoā hei mirimiri te wairua me te hinengaro.'

Tū Rangatira

- Leadership by example and service, with visions and aspirations for self-determination, integrity and knowledge of benefit to people. Whānau-centred practice affirms whānau as self-determining in relation to paths taken and choices made.

Wairua

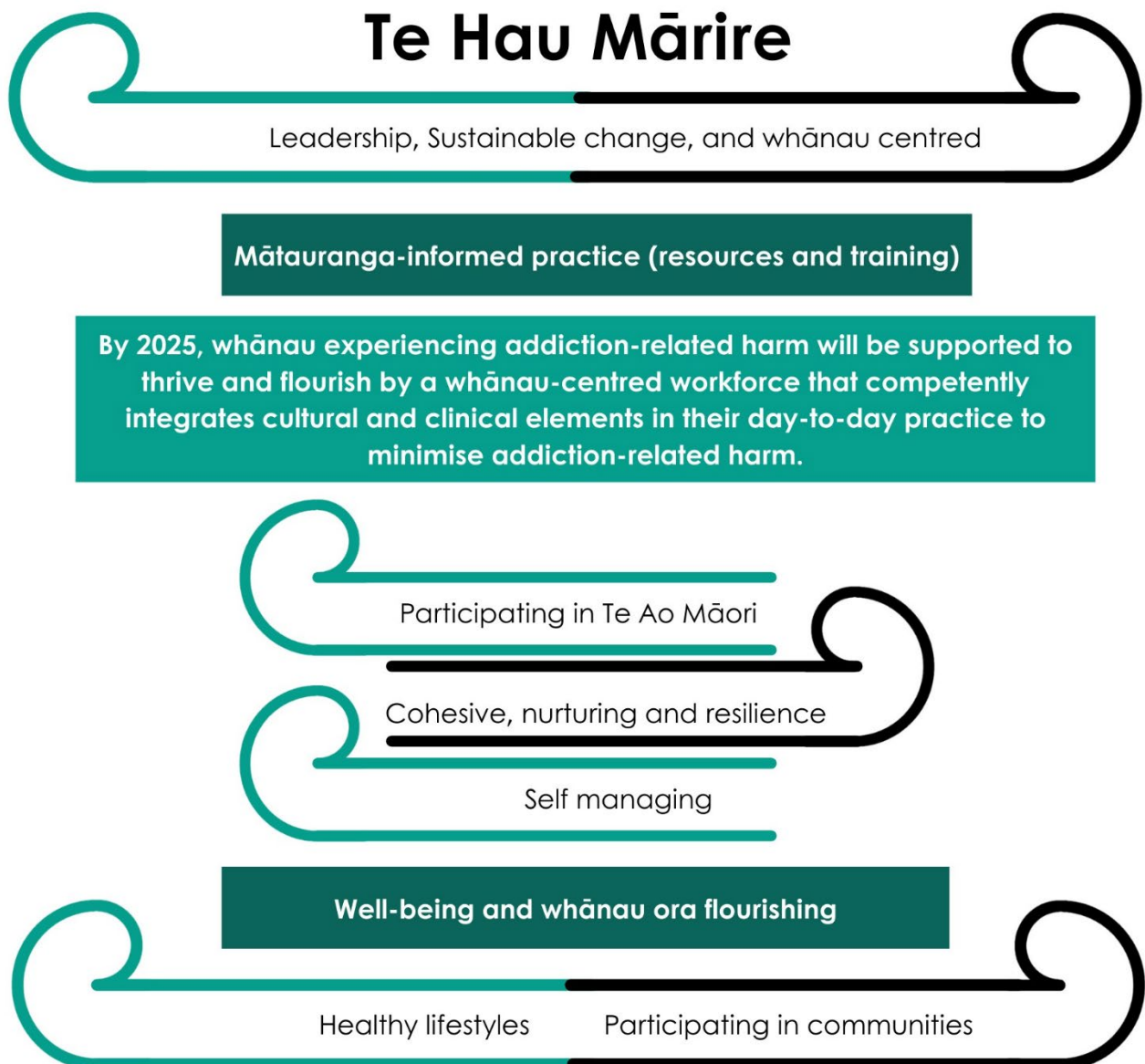
- A central element of identity and wellbeing.

Whakawhanaunga

- Connects individuals and groups. It guides responsibilities and obligations, and our place in the world, to those who come after us. Whānau-centred practice emphasises the centrality and dynamics of interconnectedness and relationships to identity and achieving wellbeing.

Theory of Change

This modified theory of change represents how the objectives and actions of the strategy are intended to impact whānau Māori and communities. The theory of change in the original strategy is presented below and presents a conceptual model that connects Te Hau Mārire to the system goals of Whānau Ora. In future developments, interviewees noted that this could be updated and expanded upon to support a logical framework to include impact measurement.



Summary of Updated Objectives and Supporting Activity

Objectives and activity for the remaining term of the strategy have been updated based on the review and feedback. In the refreshed strategy, we have remained true to the original. The intent was not redevelopment as this would require a more comprehensive process; rather, the intent is to provide the next stage of Te Hau Mārire in preparation for future strategic development and to reflect the need to deepen the support to the committed Māori workforce that support whānau across the motu every day.

The updated objectives and activity are as follows:

Objective: Increase recruitment and retention of Māori in the workforce (wānanga)

1. **Recruit people into the AOD workforce**
 - a. Support and promote pathways into the AOD workforce.
 - b. Foster learning opportunities for Māori to enter the AOD workforce
 - c. Acknowledge whānau Māori and lived experience as an emerging workforce
 - d. Work with education providers to ensure AOD and cultural capability are embedded in a variety of core qualifications (e.g. social work, nursing)
2. **Retain people in the sector**
 - a. Foster effective mentoring and supervision for Māori in the AOD workforce
 - b. Support networks of Māori in the AOD workforce to encourage information exchange and community
 - c. Ensure ongoing professional development and training opportunities for Māori

Objective: Develop the skills of people in the workforce (mātauranga)

1. **System Level Development**
 - a. Act as advisory to addiction teams and organisations to shape their processes and practices to Māori resources
 - b. Develop and deliver frameworks to increase capability within the AOD sector based on mātauranga Māori
2. **Skills Development**
 - a. Support the development of kaimahi capability for working with Māori
 - b. Develop an understanding of and capability in using pūrākau to promote change
 - c. Develop addiction awareness and capabilities in support workforce environment
 - d. Invest in the existing workforce through pathway scholarships and work based placements.

Objective: Foster leadership (rangatiratanga)

1. Support and develop Māori leadership capability, building in succession planning

2. Support Māori in the AOD sector to participate in local, regional, and national forums

Objective: Create stronger connections between sectors (kotahitanga)

1. Increase the capability of Māori in other sectors who are working with Māori that have AOD challenges by building collaborative relationships with other sector organisations, leadership, and professional groups (e.g. primary health care, NGOs, social services, Ara Poutama/ Corrections)

Objective: Research, evaluation and monitoring (rangahau)

1. Collect data on the Māori Alcohol and Other Drug (AOD) workforce
2. Develop a theory of change, logical framework and monitoring framework for Te Hau Mārire.
3. Continue to investigate workforce trends, emergent care provision and opportunities to extend understanding and use of effective interventions to increase equity of addiction treatment outcomes.

Glossary

Hapori	Community
Hapū	Subtribe
Iwi	Tribe
Kaupapa	Initiative
Kawa	Customs
Kōrero	Discussion
Kotahitanga	Unity, togetherness
Mana	Prestige, spiritual power, influence
Mana Motuhake	Autonomy
Mātaruanga	Knowledge
Motu	Country
Pātaka	Storehouse
Rangahau	Research
Rangatiratanga	Leadership, chieftainship
Wānanga	To gather and discuss
Whakaaro	Opinion or understanding
Whānau	Family group, extended family
Whanaungatanga	Relationship, kinship
Whenua	Land



TE RAU ORA

Strengthening Māori Health and Well-Being

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