

FRAMEWORK

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Durie, M.H., & Maxwell-Crawford, K.M.

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Te Pūtahi-ā-Toi, Massey University
Private Bag 11222, Palmerston North, New Zealand

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TE RAU MATATINI
MĀORI MENTAL HEALTH WORKFORCE DEVELOPMENT

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1. Introduction

This paper provides details of the Te Rau Matatini framework, and is designed to contextualise the projects and associated activities of the Te Rau Matatini Programme.

1.1 Background

Te Rau Matatini was established in December 2001. It was one of a number of initiatives funded by the Ministry of Health to strengthen the Māori mental health workforce as expressed in *Tuutahitia te wero, meeting the challenges: Mental Health Workforce Development Plan 2000–2005* (Health Funding Authority, 2000).

The Ministry expects that Te Rau Matatini will:

- provide sector leadership and advocacy for Māori mental health workforce needs
- analyse Māori mental health workforce needs such as kaupapa Māori provision, bicultural and mainstream services
- foster a strategic and coordinated approach to workforce issues
- effect links to other mental health sector workforce development initiatives
- monitor and evaluate the impact of training and unmet training needs
- create strong operational links to the Māori mental health sector, including service users, service providers, other mental health workforce agencies, education providers and central agencies such as the Ministries of Health and Education, the Mental Health Commission, the relevant colleges, professional bodies, and standard-setting bodies
- establish effective links with Māori including support of iwi and Māori providers, and
- determine appropriate education and training goals, modalities and materials; deliver or arrange delivery of education and training.

1.2 Purpose

The framework of Te Rau Matatini has been developed to ensure:

- a cohesive and strategic direction consistent with Māori and national goals, and

- consistency and internal coherence across all Te Rau Matatini projects and activities.

2. Framework Components

The framework consists of five key components (see Figure 1):

- Wider Environment
- Guiding Principles
- Project Themes
- Key Collaborations, and
- Project Outcomes.



Figure 1. A summary of the framework of Te Rau Matatini

2.1 The Wider Environment

The first component of the framework, the wider environment, acknowledges the Māori development and Māori mental health contexts within which Te Rau Matatini

will operate. The wider environment is not static; changes may serve Te Rau Matatini or may present risks.

Māori Mental Health Need

The historical and current unmet Māori mental health need has been widely documented and publicised (Lawson-Te Aho, 1993; Mason Report, 1996; Te Puni Kokiri, 1996; Stewart, 1997; Dyllal 1997; Blueprint for Mental Health Services, Mental Health Commission, 1998; Earp, 1998; Harcourt, 2000; Ministry of Health, 2000; Durie, 1998, 2001).

In addition to this unmet need, Māori are also under-represented across the range of health disciplines¹. This has been highlighted by a number of Government reports, including the 1997 *Moving Forward* objective to increase the Māori mental health workforce by 50% by 2005; the *Blueprint for Mental Health Services*, which identified workforce deficits and challenges, particularly in Māori mental health (Mental Health Commission, 1998); and the National Mental Health Workforce Coordinating Committee, which in 1999 recommended the proportion of Māori clinical and non-clinical staff should represent the number of Māori who use mental health services.

In 2000, the former Health Funding Authority released *Tuutahitia te wero: Meeting the Challenges. Mental Health Workforce Development Plan 2000–2005*. The Plan contained eleven goals, the first of which is to “strengthen and develop the Māori mental health workforce... [by developing] strategies to achieve a strong Māori mental health workforce [and] specific training initiatives for the Māori mental health workforce” (Health Funding Authority, 2000, p. 2). Te Rau Matatini has been established to help meet the objectives of *Tuutahitia te wero*.

Treaty of Waitangi Relationships between Māori, the Crown and DHBs

The Government’s commitment to the Treaty in respect to Health legislation is explicit in section 4 of the New Zealand Public Health and Disability Act (NZPHD)

¹ A report released by the Health Workforce Advisory Committee (2002) revealed that while Māori comprised 15% of all mental health workers, only 1.3% of clinical psychologists, 6% of registered nurses, 0.6% of occupational therapists, and less than 2% of psychiatrists were Māori.

2000². The Crown's commitment is also evident in the *New Zealand Health Strategy* (Ministry of Health, 2000), the New Zealand Health and Disability Services Act, and *He Korowai Oranga: the Māori Health Strategy* (Ministry of Health, 2002). Taken together, legislation and health policy clearly identify Māori health as a high priority, and an effective Māori workforce is a key means to progress that goal.

Self-determination and Positive Māori Development

Although part of a sectoral strategy for mental health, Te Rau Matatini also aims to be consistent with broader aspirations for positive Māori development. In this regard, the Māori mental health workforce should not be divorced from other programmes that will advance Māori people, should incorporate Māori values and ideals, should have a close affiliation with Māori community networks, and should mirror wider Māori aspirations for greater autonomy and positive development. Not only is Te Rau Matatini a health programme, it also has the potential to be a significant contributor to Māori development. While this is more evident in relation to social policy, a strong Māori workforce in health or education has positive implications for the Māori economy (New Zealand Institute of Economic Research & Te Puni Kokiri, 2003).

Māori models of Service Delivery within DHBs by Independent Providers

Health service delivery modules consistent with positive development and autonomy have been increasingly evident within the health sector. Māori delivery systems recognise international best practice and also subscribe to unique Māori values, processes and social institutions.

2.2 Guiding Principles

The activities of Te Rau Matatini will be guided by the following principles, and developed after consultation with several agencies involved in health workforce development and Māori development:

Community Alignment

Te Rau Matatini aligns with the aspirations of Māori for strong and vibrant communities that have initiative, capacity and self-direction. The Māori mental health workforce is intended to reflect the aspirations and ideals of Māori communities, including tāngata whaiora, whānau and the range of social services.

² Effective from 1 January 2001

Integrated Development

Te Rau Matatini will encompass an integrative approach, ensuring it does not operate in isolation from other workforce development programmes, Māori mental health systems, Māori health initiatives, or Māori development aspirations and goals. Te Rau Matatini will also promote mental health in other relevant sectors including justice, education, social services and sport and recreation, in order to enhance inter-sectoral responsiveness. Similarly, within the health sector, the promotion of mental health in primary health care, midwifery and child health will complement efforts in the traditional mental health service arena.

Best Practice

To contribute to best health outcomes for Māori, Te Rau Matatini aims to strengthen the Māori mental health workforce by encouraging a workforce that is committed to best practice based on the highest international clinical standards and underpinned by indigenous values and concepts of healing. The dual benchmarks recognise the reality within which Māori live in modern times.

Sector Congruence

As a workforce development organisation, the fourth guiding principle encompasses the notion of congruence. This is the aspiration of a good ‘person to job fit’ that ultimately contributes to increased retention, job satisfaction and organisational efficiency, because the values, skills, knowledge and competencies of the worker are synonymous with the needs and values of the organisation. To attain congruence at the sector level, this principle must be consistent with the principle of Community Alignment.

2.3 Project Themes

Te Rau Matatini incorporates four overriding projects themes:

Workforce Expansion

The primary aim of workforce expansion is to increase the capacity of the Māori mental health workforce through recruitment and retention across all disciplines, professions and occupations. To achieve this, Te Rau Matatini will promote mental

health as a rewarding career option for Māori school leavers, senior secondary students, tertiary graduates and Māori currently working in other related fields.

Workforce Extension

Te Rau Matatini will also extend the capacity of the Māori mental health workforce by strengthening the expertise of workers in related fields. Mental health expertise is required in many areas of the health sector, such as primary health care, so that early intervention and reduction of disability can be realised without adding demands to already stressed mental health services.

Workforce Excellence

Te Rau Matatini will promote excellence in the Māori mental health workforce through the development of both clinical and cultural expertise. While some Māori mental health services tend to be strong in clinical delivery, others are strong in cultural skills. The aim is to promote dual competency within the Māori mental health workforce so that comprehensive and relevant services are available to consumers. Training that recognises the attainment of both is essential.

Workforce Navigation

Te Rau Matatini will contribute to the development of a co-ordinated approach to workforce development at national and regional levels. An important programme goal is the production of a national strategic plan for Māori mental health workforce development. Te Rau Matatini will endorse a co-ordinated approach across a range of workforce development endeavours, both within the health sector and also more widely across the broader arena of Māori development. This includes strengthening links between training opportunities and service needs.

2.4 Key Collaborations

As part of an integrative approach, collaborations will be strengthened with a range of sectors and groups:

- Central Government (Health, Education, Child Youth and Family Service, Te Puni Kokiri)

- Health sector including the Mental Health Commission, the Clinical Training Agency, DHBs, Māori health services, community mental health services and consumer organisations
- Tertiary educational institutions
- Health professions, and
- Workforce development initiatives.

2.5 Programme Outcomes

The outputs from Te Rau Matatini over a 3-year period will consist of a series of evidence-based reports designed to positively influence outcomes in four key domains:

- National policies that lead to increased Māori participation in the mental health workforce
- Māori participation in DHB and NGO mental health services, consistent with Māori consumer levels
- Inter- and intra-sectoral health responsiveness to Māori mental health needs, and
- Alignment of training and service needs.

The five-part framework will guide the operations of Te Rau Matatini. The framework has been tested in a range of forums, and feedback has helped refine the framework to ensure relevance and applicability at national, regional and local levels, as well as to a variety of providers in both education and health.

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