



Te Ao Auahatanga Whanau Ora Project

Summary of findings South Taranaki Region

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Summary provided by:

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Background

This summary has been compiled by the Te Ao Auahatanga (TAA) Whanau Ora Project team in response to the DHB project Alive and Well in South Taranaki. The information gathered has been extracted and analysed from information collected through the engagement process with whanau, service providers, and the wider communities of South Taranaki participants.

Context of information

The data that underpins current understanding of the experiences of health care within South Taranaki is well documented. The TAA Whanau Ora project team are able to provide a summary of anecdotal perspectives through the collection of qualitative data collected via face to face engagements. Our engagement and consultation process within South Taranaki, has taken place over a period of 4 months. Therefore it is in its infancy acknowledging the term of the project is over a three year period. The summary presented is inclusive of a view from whanau and providers of services.

Service Impacts, satisfaction and value

In general overall satisfaction and value of current health services is not being experienced by whanau and service providers. Sustainable actions alongside continuing proposed interventions, fail to meet the needs of many families. Many factors contributing to improvements would have to include provision from outside of the South Taranaki boundaries as current capacity within the South is limited. Service provision is often bound by set funding specifics which in turn reduce the ability for services to be provided in a holistic manner. Service criteria work against a whanau ora approach to care pathways.

Success factors

Whanau experience differing successes. These successes do not necessarily have a disease focus. It is clear from the information gathered, that education and better understanding of whanau dynamics would improve successes experienced by whanau. Increased knowledge improves the ability of whanau to experience success; therefore knowledge of services available is critical. The

success experienced is also based on sector knowledge of each other, as professionals we assume a pathway that is provided by someone else this leads to a negative experience in some cases due to the transfer of wrong information.

Key Themes

The following are key points that were identified in the consultation process. These key points highlight the issues that impact on their experience of health services and the inability to be involved in seamless pathways of care

- Limited affordable GP services those that can be afforded have a long waiting list for appointments other appointments can be sourced elsewhere however due to financial restraints this is impossible for many whanau
- The inability to deliver a service within a cultural context
- Unobserved cultural paradigms re the appointment of overseas doctors /specialists culturally appropriate practise
- Understanding of Whanau dynamics
- Normalisation of institutional racism this is not addressed internally within mainstream organisations. It becomes unintentional as unless experienced it goes unnoticed
- Workplace practitioner visits need to be considered as getting time off to address health needs is very hard and time can be docked
- Better working relationships with workplaces to promote the value of wellness to employees is necessary
- Victim blaming mentality of providers needs to be addressed
- Having co-morbidities often leads to reduced offers of services
- Intersectorial relationships need to occur. Each sector must have an understanding processes e.g. WINZ benefits that need doctors certificates can nurses not approve and action this process. Aligning pathways that are patient / community centred

Conclusion

In the current economic environment information gathered in the consultation process has appeared to be somewhat negative. Positive experience seems to reduce when financial constraints are evident, however throughout our consultation to date systematic change and policy change may be a more proactive stance rather than the an increase of funds.