



LIKE MINDS, LIKE MINE

Whakaitia te Whakawhiu i te Tangata

Programme to Counter Stigma and Discrimination
Associated with Mental Illness

He Kākano ō Rangiātea He Kete Mātauranga



“E iti noa ana na te aroha.”



LIKE MINDS, LIKE MINE

Whakaitia te Whakawhiu i te Tangata

The slogan Like Minds, Like Mine is a play on the phrase 'we are all of one mind'. It indicates that mental illness can happen to you, me or anyone.

The Māori whakatauki 'Whakaitia te whakawhiu i te tangata' is not a prescribed translation but rather a call to 'reduce your potential to discriminate'.

The design elements of the Like Minds logo reflect the mathematical symbols greater than and equal to, and are used to indicate 'greater than discrimination, equal to others'.

A full list of Like Minds programme providers can be found on our website - **www.likeminds.org.nz**

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He Kākano ō Rangiātea
He Kete Mātauranga

Whakatūwheratanga

Opening statement

Kia hiwa rā! Kia hiwa rā! Kia hiwa rā ki tēnei tuku! Kia hiwa ra ki tērā tuku! Kia apurua koe ki te toto – whakapurua tonu, whakapurua tonu. Kia hiwa rā! Kia hiwa rā!

This ancient whakārāra or chant of our ancestors urging us to be mindful of the need to be alert and aware in case of overwhelming consequences, remains a fitting, timely and relevant call to action.

At our June 2009 hui in Whanganui-ā-Tara, we decided that our group's name needed to reflect who we are as Māori, so with the blessing and extensive consultation with kaumātua across the country, our name has transformed from The Like Minds, Like Mine Māori Caucus to Te Roopu Ārahi o te Kaupapa Whakaitia te Whakawhiu i te Tangata (Te Roopu Ārahi). With this new name, we are truly reflected as the group of leaders currently guiding the Like Minds, Like Mine kaupapa for Māori.

The completion of this document He Kākano o Rangiātea – He Kete Mātauranga, is a huge milestone of achievement for Te Roopu Ārahi and Whakaitia te Whakawhiu i te Tangata

We want to thank the kaumātua who have provided us with the whakaruruhau of shelter and safety: thanks go to Te Wera Kotua for his leadership in inspiring and providing the foreword for this document; also to those past members of our Māori Caucus whānau who were with us during the journey of this document, in particular Manny Downs, Lila Baker and Ellen Yukich.

Thank you to Whaea Philleen Macdonald for her skilled authorship and the many struggles she faced in the writing of this document and the successful completion of this long-awaited taonga – He mihi tino aroha tēnei ki a koe.

We thank our organisations, our respective employers and also the Māori Providers of Whakaitia te Whakawhiu i te Tangata in our respective rohe who tautoko us in this mahi.

We want to thank our whānau of tāngata whaiora all over Aotearoa. Without you this programme would not exist.

Finally, thanks to all of you who have made a contribution to this document in any way – tēnā koutou, tēnā koutou, tēnā rā koutou katoa!

May this document be a significant first step to further awahi us in our very important work to reduce stigma and discrimination associated with mental illness.

Na Te Roopu Ārahi o te Kaupapa Whakaitia te Whakawhiu i te Tangata

Henare Harrison – Te Heamana/ Chairperson
Te Awa o te Ora Trust, Ōtautahi/ Christchurch

Egan Bidois – Te Heamana Tuarua/ Deputy Chairperson
Te Roopu Pookai Taaniwhaniwha, Te Kōwhao & Capital and Coast DHB, Whanganui-ā-Tara/Wellington

Marius Joseph
Te Oranganui Iwi Health Authority, Whanganui

Tipene Taylor
Te Rapuora o te Waiharakeke, Whakatū/ Nelson

Larry Fitzgerald
Te Kupenga Net Trust, Tūranganui-ā-Kiwa/ Gisborne

Carole Marsh
Ngati Kahu Social & Health Services, Kaitaia

Aaron Woolley
Te Korowai Hauora o Hauraki, Kirikiriroa/ Hamilton

Wāhinga Kōrero na Te Wera Kotua

Foreword by Te Wera Kotua

“Ngā hiahia ai ki te tīmatanga ā ka kite ai tātou i te mutunga.”

You must understand the beginning if you wish to see the end.

He Kākano o Rangiatea – He Kete Mātauranga is a foundation document that directly aligns with the fourth Like Minds, Like Mine National Plan and Framework (wherein lies the inspiration of this document).

The vision of the Māori Caucus was to implement a resource specifically for Māori Providers within the Programme to Counter Stigma and Discrimination Associated with Mental Illness. The completion of He Kākano o Rangiatea – He Kete Mātauranga has made this possible. It captures Māori concepts and values to support the work being done by Māori Providers throughout Aotearoa New Zealand.

The wishes and desires of past members of the Māori Caucus were to strive for a specific Māori resource.

Today, with this taonga we have reached the pinnacle of those hopes by introducing He Kākano o Rangiatea – He Kete Mātauranga.

Nō reira he mihi tēnei ki ngā mema o te Kōmiti Māori (Caucus) o mua, tae noa mai ki ngā mema o ināianei, me ngā kaitautoko.

Ko tērā Rangatira ko Darryl Bishop rāua ko Maraea Johns me ērā tāngata katoa o te motu hei tautoko, hei manaaki te taonga nei. Tēnā koutou mo ou koutou tū momo mahi e pā ana ki te whakapuāwaitanga me te momoea ā rātou mā ki te whakaotinga i tēnei taonga.

Mauri Ora ki a tātou. Huri noa, huri noa, tēnā koutou, tēnā koutou, ā, tēnā tātou katoa. Pai Marire.

Na Te Wera Kotua - Mema o mua o te Kōmiti Māori



Ngā Mihi

Acknowledgements

He Kākano o Rangiātea - He Kete Mātauranga (He Kākano o Rangiātea) was inspired by the fourth Like Minds, Like Mine National Plan 2007-2013 and the desire of Te Roopu Ārahi to develop a specific resource for Māori providers within the programme to counter stigma and discrimination associated with mental illness.

Many individuals and organisations need to be acknowledged for their valuable contributions.

- Firstly, a special and significant acknowledgment to all those that walk the path of living with an experience of mental illness, to the tāngata whaiora that inspire and motivate throughout this national programme, he mihi tino nui ki a koutou katoa, he mihi aroha.
- All regional and national providers of the Like Minds, Like Mine programme involved in the process of developing the Like Minds, Like Mine National Plan 2007-2013.
- The Like Minds, Like Mine Te Roopu Ārahi, including past and present members. A noted acknowledgement to standing Te Roopu Ārahi members Henare Harrison (Chair), Egan Bidois (Deputy Chair), Marius Joseph, Tipene Taylor, Carole Marsh, Larry Fitzgerald and Aaron Woolley.
- All Māori regional providers of Like Minds, Like Mine that consulted extensively with Te Roopu Ārahi representatives: Te Awa o Te Ora, Whanganui Kaumātua/Kaunihera, Te Oranganui Iwi Health Authority Service, Whakapiki te Mohiotanga Service, Ngā Tāngata o te Ao Marama ki Whanganui Trust, Hapai Māori Tāngata AOD Services, Te Korimako Health Services, Te Puni Kōkiri, and Putiki Marae Trust.
- The Mental Health Foundation of NZ staff including Judi Clements (CEO), Dean Manley (Like Minds, Like Mine Project Manager) and Tuiloma Lina Samu (Like Minds, Like Mine Liaison).
- Kaumātua Rawiri Wharemate.
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- the late Hemi Takarangi
- Koro Pita Samuels

Rārangi Upoko

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Te Tīmatanga

Introduction

Research shows that mental illness is prevalent among Māori (Baxter 2008) reinforcing concern and prompting response within the New Zealand health sector.

Mental health promotion for Māori needs to be comprehensive, resourced adequately and targeted at working with whānau, hapū, iwi and Māori communities to address the negative impact of stigma and discrimination associated with mental illness.


- The Mason Report (Mason et al 1996) strongly recommended a public awareness campaign to shift attitudes in New Zealand society towards those who live with the experience of mental illness. This inquiry reinforced the need for the New Zealand public to be well-informed about mental illness and emphasised the importance of nurturing and valuing those with experience of mental illness.

The implementation of the Like Minds, Like Mine programme (Like Minds) in 1997 worked towards clear objectives of:

- educating the public
- reducing discrimination against those with mental illness
- challenging discriminatory attitudes and behaviour.

The Like Minds, Like Mine National Plan 2007-2013 supports the development of a specific resource for Māori providers that is culturally relevant. It is recognised that cultural approaches are important to address stigma and discrimination associated with mental illness while engaging with whānau, hapū, iwi and Māori communities. Equally important is the support to sustain Māori aspirations for autonomy and positive development that recognises Māori resourcefulness and uniqueness. This programme supports Māori to work towards a healthier future for Māori where the unique role of whānau is embraced, individual and collective worth is recognised and diverse realities are valued.

He Kākano o Rangiātea recognises the work being undertaken throughout Aotearoa New Zealand by Māori providers of the Like Minds, programme. He Kākano o Rangiātea is a document which directly aligns with the Like Minds, Like Mine National Plan.



“The general public tended not to be informed or aware of mental illness. They were not aware of how they discriminated against people who had a mental illness. Moreover, they did not see it as something that was relevant for them to do anything about.”

(Mental Health Commission 2007)



CONTEXT

Discrimination is experienced in many facets of society. A survey of discrimination faced by people with experience of mental illness in Aotearoa New Zealand (Mental Health Foundation of NZ 2004) found that stigma and discrimination is often present in family and whānau, employment, housing, education, recreational clubs, community organisations, and health and disability services. The survey reported the following results for Māori.

“A quarter of all Māori respondents (25%) reported they had experienced discrimination as parents including losing custody of, or access to, their children.”

“Almost one in five Māori respondents (18%) indicated they had experienced discrimination from government services, particularly Work and Income NZ and the police.”

“Almost one in five Māori respondents (18%) reported experiencing discrimination in education.”

“Almost one in five Māori respondents (18%) indicated they had experienced discrimination in finding or keeping housing”

“Māori respondents report experiencing discrimination in all areas, but most commonly from whānau and friends”

Other reported statistics about Māori experience of mental illness include the following.

***“Over half of the Māori population has experienced a mental illness some time in their life”
(Oakley Browne et al 2006)***

***“Three in five Māori are predicted to experience a mental illness sometime in their lifetime (59.9%)”
(Baxter 2008)***

***“The Māori population experiences greater prevalence, severity and burden of mental illness, and greater lifetime risk of developing a mental illness than others”
(Oakley Browne et al 2006)***

***“Young Māori today are likely to be experiencing higher rates of mental illness than earlier generations of Māori”
(Oakley Browne et al 2006)***

Discriminatory attitudes and behaviour towards people with experience of mental illness is the most common hindrance to recovery – including fears, stigma, a lack of understanding, and rejecting behaviour (Lapsley, Nikora & Black 2002:85).

Tāngata whaiora may experience twofold discrimination - both as people experiencing mental illness and in their everyday lives being Māori. Evidence suggests that Māori experience of ethnic discrimination is a major determinant of health, including mental health (Harris et al 2006).

Though these statistics portray a negative view of Māori and mental illness, there is an optimistic and constructive spin-off. Firstly, they provide a baseline that can be used to track progress over time. Secondly, Māori concepts and values can be translated into mental health promotion such as aroha, manaakitanga, and wairuatanga. Mechanisms of whakapapa and tūrangawaewae can be used to enhance personal identity and recovery, and reduce stigma and discrimination. Lastly, whānau ora can be achieved; where Māori are supported to reach

maximum health and wellbeing including physical, spiritual, mental and emotional health (refer Appendix A).

Many strategic documents released in Aotearoa New Zealand complement the work being undertaken to counter stigma and discrimination associated with mental illness. A description of these documents can be found in Appendix B.

KAUPAPA - RATIONALE

The Like Minds, Like Mine National Plan 2007-2013 endorses specific approaches for Māori. An increase of Māori autonomy in the programme supports tino rangatiratanga, building capacity and increasing skills for a greater Māori influence in reducing stigma and discrimination. Māori providers are aware of the impact of stigma and discrimination and work proactively to address this under the Like Minds programme.

Key individuals within Like Minds have pressed for a greater Māori presence and level of participation. Te Roopu Ārahi was established to provide a Māori perspective to the programme. It has proven to be a key leadership initiative strengthening and increasing Māori aspirations and self governance within Like Minds. Te Roopu Ārahi has worked alongside key stakeholders to oversee the development of He Kākano o Rangiātea.

Māori providers are contracted to deliver activities to meet the outcomes of the Like Minds National Plan¹ -

- A nation that values and includes people with experience of mental illness.
- All organisations have policies and practices to ensure people with experience of mental illness are not discriminated against.
- People with experience of mental illness have the same opportunities as everyone else to participate in society and in the everyday life of their communities and whānau.

1. The overall Like Minds Framework can be viewed in Appendix C



He Kākano o Rangiātea aims to be a living document affirming the work and initiatives already taking place, and a working document that outlines clear practical tasks that can add value to the stigma and discrimination activities undertaken by Māori providers around Aotearoa New Zealand. As Māori we recognise that mana whenua and kawa will dictate and guide the individual Māori providers within their respective rohe.

The intention is that this resource will be used together with the Like Minds, National Plan and other relevant documents to help Māori providers deliver Like Minds services to Māori communities. It is not intended to be a stand alone description of how to deliver Like Minds to Māori.

Māori providers have an investment in the kaupapa of raising awareness about stigma and discrimination and challenging the discriminatory attitudes and behaviour that are often displayed by whānau, colleagues, friends and professionals.

This table describes how the three actions of the Like Minds, National Plan are supported by Māori providers.

Action One	Action Two	Action Three
<p>Māori providers have a desire to change discriminatory attitudes and behaviour by being engaged with whānau, hapū, iwi and communities so that increased contact with people with experience of mental illness occurs.</p>	<p>Māori providers continue to promote the rights of people and whānau and challenge organisations to discontinue discriminatory practices, language and behaviour.</p>	<p>Māori providers continue to deliver effective training and education to address stigma and discrimination associated with mental illness for Māori, integrating Māori experiences and knowledge.</p>

Māori providers continue to align their work to the approaches of the Like Minds National Plan -

- 1. Approaches to increase leadership by people with experience of mental illness.**
- 2. Approaches to address organisational stigma and discrimination.**
- 3. Media work.**
- 4. Specific approaches for Māori.**
- 5. Approaches for specific population groups including Pacific.**
- 6. Approaches to address internalised stigma.**
- 7. Work with partners and allies.**

Te Pae Mahutonga Māori Model of Health Promotion

Te Pae Mahutonga, a health promotion model (refer Appendix D) is community development orientated and practical in its approach.

Combining Te Pae Mahutonga health promotion model with the outcomes, actions and approaches of the Like Minds, programme, Māori providers can address stigma and discrimination associated with mental illness that reflects Māori realities.

Ma pango ma whero ka oti te mahi

TE MANA WHAKAHAERE

Autonomy, group aspiration and capacity for self government.

Approach One: To increase leadership by people with experience of mental illness.

Approach Four: Specific approaches for Māori.

Key Tasks

- Māori providers will assist whānau, hapū, iwi, groups and communities to identify issues of stigma and discrimination associated with mental illness.
- Māori providers will build Māori expertise at local and national levels on all areas of the Like Minds programme.
- Māori providers will contribute to relevant groups and forums to reduce stigma and discrimination.
- Māori providers will advise on effective policies and actions that increase social inclusion and reduce stigma and discrimination.
- Māori providers will recognise their role to facilitate progress in anti-stigma and discrimination by promoting education and informing whānau, hapū, iwi, groups and communities about appropriate non-discriminatory language and behaviour.
- Māori providers will have thorough orientation into roles and leadership responsibilities to ensure individuals are embraced into the kaupapa and supported from the outset.
- Māori providers will develop, gather and distribute relevant information, acting as a resource contact for the community in regards to stigma and discrimination associated with mental illness.
- Activities and initiatives undertaken by Māori providers will promote belonging, identity and whakapapa.

- Elements of tikanga will support tāngata whaiora and recovery with the use of pepeha, whakapapa ties and ancestral links.
- Māori providers will find opportunities for peer capacity building and peer training by tāngata whaiora for tāngata whaiora. Māori providers will resource and support tāngata whaiora in leadership and management roles.
- Māori providers will support tāngata whaiora to further their learning, training, participation and leadership in service management, governance, advisory groups, programme delivery and evaluation.
- Māori providers will look for opportunities to participate in local, regional and/or national initiatives to reinforce the significance of systemic change and reinforce reducing stigma and discrimination associated with mental illness as a kaupapa of importance.
- Peer mentoring, peer review and peer support will be encouraged along with inter-provider training support and capacity building.

NGĀ MANUKURA

Community and health leadership, networking and building alliances.

Approach One: To increase leadership by people with experience of mental illness.

Approach Two: Address organisational stigma and discrimination.

Approach Three: Media work.

Approach Five: Approaches specific population groups including Pacific.

Key Tasks

- Māori providers will support the ongoing development and work of the Like Minds Te Roopu Ārahi as a recognised leadership body within the Like Minds programme.
- Māori leaders and champions within the Like Minds programme will be recognised, encouraged and celebrated in the community.
- Māori providers' philosophies will be embracing of past, current and future tāngata whaiora leaders. Each whānau member will be acknowledged and appreciated for their contributions and endeavors.



- Tāngata whaiora, staff and mental health promoters will have the necessary training to enhance their skills, knowledge, and attributes to work effectively in anti-stigma and discrimination work.
- Māori providers will meet annually to share knowledge and expertise regarding anti-stigma and discrimination and mental health promotion.
- Māori models of health such as Te Pae Mahutonga and Te Whare Tapa Whā will be understood and used to inform and structure Like Minds activities.
- Positive media messages reflecting recovery for Māori will be endorsed, increasing visibility of those who live well with experience of mental illness. Negative media coverage will be responded to in a proactive manner.
- Māori providers will make themselves available to work with the media to increase understanding towards Māori who live with mental illness and to highlight the effects of stigma and discrimination.
- Strong alliances with newsprint media, national and local radio and lwi radio stations will be sought.
- Positive alliances will be developed and maintained in various sectors e.g. health, education, justice and social domains, to strengthen collaborative working relationships.
- Strong and positive working relationships with other Like Minds providers, consumer run organisations, and peer support services will be encouraged to exchange information about emerging issues and best practice to reduce discrimination.
- Like Minds Māori providers will work alongside Tāngata Pasifika Like Minds providers and other Pacific organisations, through inclusive practices and supporting community events that reduce discrimination.
- Māori providers will identify key leaders in the community and build alliances with these leaders to support anti-stigma and discrimination work influencing the improvement of policies and practices.
- Māori providers will respect the role of mana whenua in their respective rohe and increase working relationships with these organisations to reduce stigma and discrimination.



MAURI ORA

Access to Te Ao Māori, culture, language and knowledge. Access to resources and societal domains whereby being Māori is nurtured.

Approach Three: Specific approaches for Māori.

Approach Six: Approaches to address internalised stigma.

Key Tasks

- The valued contribution of kaumātua and cultural leaders will be sought.
- Activities to reduce stigma and discrimination will use cultural knowledge and cultural identity. When appropriate workshops and training will integrate but not be limited to: te reo Māori me ōna tikanga
- Anti stigma and discrimination activities will incorporate ngā mea Māori e.g. karakia, powhiri, whaikorero, mihi whakatau, whakawhanaungatanga, waiata, pūrākau, pepeha and poroporoaki.
- When feasible Māori providers will deliver workshops and training in Māori domains such as Marae, Kōhanga Reo, Kura Kaupapa, Māori Tertiary Training Institutes, Māori /Iwi health providers and Māori/ Iwi community based social services.
- Tāngata whaiora will be supported to undertake ongoing training to up skill in areas such as delivery of health promotion activities, presentation skills, project management and governance.
- Workshops and other activities will integrate cultural learning and expression relevant to stigma and discrimination associated with mental illness.
- Training and workshop resources will be developed to reflect Māori diverse realities of mental health issues.

WAIORA

Environmental protection and access to healthy physical environs that enhance our mental, social and spiritual wellbeing.

Approach Two: Approaches to address organisational stigma and discrimination.

Approach Seven: Work with partners and allies.

Key Tasks

- Anti stigma and discrimination initiatives will encourage a balance between physical, mental, social and spiritual health as these impact on the overall mental wellbeing of individuals.
- Māori providers will identify and have an understanding of other complementary health initiatives and their relevance to reducing stigma and discrimination for Māori.
- Māori models of positive health will be shared with Māori whānau and services to demonstrate recovery and inclusion.
- Māori providers will have an understanding of the relationship between promoting good health and wellbeing and reducing stigma and discrimination.
- Māori providers will work collaboratively to reduce the barriers people face in accessing community services, offering stigma and discrimination training and education to organisations such as Housing NZ, Work and Income, Māori Women's Welfare League, Māori Wardens, local recreation and sporting authorities, public libraries, Citizens Advice Bureau, religious and spiritual facilities, local governing bodies and social services.
- Māori providers will endorse and work towards creating environments with zero tolerance to stigma and discrimination associated with mental illness.

TE ORANGA

Participation in society, economy, education, and employment realms.

Approach One: Increase leadership by people with experience of mental illness.

Approach Two: Address organisational stigma and discrimination.

Approach Seven: Work with partners and allies.

Key Tasks

- Māori providers will work towards eliminating stigma and discrimination in the workplace, in education, social, health, housing and government settings.
- Māori providers will promote recovery principles and social inclusion to the general public.
- Māori providers will demonstrate constructive use of language and challenge derogatory terms, forms of exclusion, discrimination and racism in policy and practices.
- Up to date materials and research will be used to enhance Like Minds initiatives. Correct, informative and positive messages will be used to inform the whānau, communities, and organisations Māori providers engage with.

TOIORA

Healthy lifestyles, positive development and increased choice from an individual and group perspective.

Approach Six: Approaches to address internalised stigma.

Key Tasks

- Māori providers will undertake ongoing consultation with tāngata whaiora in community settings to foster inclusion and support for the Like Minds kaupapa.
- Māori providers will highlight the impact of stigma and discrimination especially for those excluded from employment, whānau and marae responsibilities, community activities and accommodation opportunities.
- Māori providers will have an understanding and awareness of other complementary programmes relevant to social inclusion and reducing discrimination.
- Māori providers will know how to access international and indigenous information that supports anti-stigma and discrimination to reinforce key messages of equality, rights and recovery.
- Attitude and behavioral change will be encouraged through education, awareness raising and health promotion initiatives relevant to Māori.
- Māori providers will use information and resources to promote change, and share knowledge to provide insight around stigma and discrimination associated with mental illness.
- Whānau will be supported to access education on mental health issues, so that their capacity to respond and be supportive will increase.
- Tāngata whaiora and whānau are better informed about the negative impact of self stigma.
- Positive information on reducing and managing stress will be made available to enhance individual, whānau and community resilience and recovery to promote whānau ora.

Ā muri ake nei

Future considerations

He Kākano o Rangiātea is a platform that should assist new and experienced Māori Like Minds providers to develop their services. The goals of Like Minds are universal, but understanding how we achieve the goals means the work must be understood in the context of Te Ao Māori.

This resource is a beginning not an end. It will help the Like Minds programme to continue to support the delivery of services by and for Māori. Future considerations to be addressed include -

- Strengthened workforce development and specific Māori orientated training for all Māori providers within the Like Minds programme in addition to current national training.
- Governance training for the Te Roopu Ārahi to enhance leadership skills and participation.
- Championing of issues for Māori in Like Minds by Māori leaders and whānau within the programme.
- Development of resources, training, information database and evaluation methods relevant to Māori within Like Minds.
- Creation of a web link on the Like Minds website dedicated to Māori resourcing and whakaaro, providing general information for Māori communities and support and resources for Māori providers.
- Development of a range of training resources (DVD, toolkits, website) to support workshop delivery by Māori Like Minds providers.
- Creation of media resources and information with attention given to inspiring stories and positive cultural images and messages for Māori whānau, hapū, iwi and communities.



Ngā Paetukutuku Useful websites

www.likeminds.org.nz

A website focusing on reducing stigma and discrimination faced by people who experience mental illness. There are resources, news, personal stories and updates with access to the media campaign footage used to reinforce the objectives of the Like Minds programme.

www.mentalhealth.org.nz

The Mental Health Foundation's website provides information and resources about mental wellbeing and mental health promotion, as well as links to other mental health sites.

www.depression.org.nz

A self help website focusing on personal stories, strategies and information to assist those who live with depression

www.hdc.org.nz

Visit the Health and Disability Commissioner website to find quick links and find recently published material around promoting rights and responsibilities of consumers of health services in New Zealand.

www.headspace.org.nz

Headspace is a community resource with relevant and helpful information about mental health and illness for young people, their family/whānau and their schools.

www.hrc.co.nz

This is the Human Rights Commissioner's website promoting and educating the New Zealand public on human rights issues with a section dedicated to discrimination and complaints.

www.matatini.co.nz

Te Rau Matatini supports Māori workforce development to enhance whānau ora, mental health and wellbeing with a high level commitment to Māori. They provide national and local workforce policy, research, training, career advancement, bursary programmes, scholarships and regularly updated information and resources for people accessing or working in the mental health sector.

www.mhc.govt.nz

The Mental Health Commission's task is to give the Government independent advice on how well mental health and addiction services are meeting the needs of people who access them. The Mental Health Commission also advocates for improvements in the way mental illness and addiction are perceived and responded to, they provide resources and publications that support recovery, inclusion and the reduction of stigma and discrimination

www.moh.govt.nz/mentalhealth

A section of the Ministry of Health website dedicated mental health issues featuring updates and developments, strategic direction, workforce and resource information on mental health and mental illness.

www.outoftheirminds.co.nz

This site explores views on madness, mental distress and mental illness. It focuses on valuing the experience of mental illness and looking at varying perspectives to increase understanding.

www.spinz.org.nz

Suicide Prevention Information New Zealand (SPINZ) is a national information service and its main role is to provide high quality information to promote safe and effective suicide prevention activities. They provide access to a variety of resources about suicide prevention.

www.tepou.co.nz

Te Pou is the national centre of mental health research, information and workforce development. This website provides extensive materials and resources relevant to the New Zealand mental health sector.

www.thelowdown.co.nz

A youth depression website helping young New Zealanders understand and deal with depression. This is a vibrant and interactive site catering to the younger audience with stories, chat and multimedia resources.



Papakupu - Glossary

Aotearoa	Māori term for New Zealand. Directly translates as “long cloud” and referred to as the land of the long white cloud
Awhi	To help or give assistance
Consumer run	Service or organisation that is run by mental health service users with a philosophy based on supporting the needs of service users. All governance, management and delivery responsibilities are undertaken by people who have an experience of mental illness
Culture	The social behaviour, customs and beliefs of a particular people, community or group in society
DHB	District Health Board. 21 DHB’s exist in New Zealand, each responsible for the funding and provision of primary, specialist and other health and disability services in their health district
Discrimination	To treat differently especially unfavourably due to prejudice
Hapū	In the context of this document it refers to subtribes or secondary tribe
Hui	Māori term for gathering or meeting
Iwi	Tribe or nation
Kaimahi	Māori term for worker, a staff member or employee
Karakia	Māori term for blessing, a prayer or incantation
Kaumātua	Māori term for an elder or person of an older generation afforded respect for their cultural knowledge and wisdom. Koroua are the elder males and Kuia the elder females.
Kaupapa	Māori term for theme, strategy, or purpose
Kawa	Protocol, etiquette often attributed to differing tribal areas
Key stakeholders	Individuals, groups and services with a vested interest in a shared purpose, those that have direct or indirect involvement that support and add value to the success of an initiative.
Kōhanga reo	Māori term meaning language nest. This name is given to early childcare centres in New Zealand that communicate their teachings and curriculum in the Māori language
Kura Kaupapa	School operating under Māori custom and using Māori as the medium of instruction
Mahi	Work
Manaakitanga	Māori term for being hospitable and respectful, displaying care for others. It also translates as integrity, to keep your word
Mana whenua	Māori term for territorial rights, power from the land (inclusive of waterways, mountains and forests and sacred sites) - power associated with possession and occupation of tribal land, customary authority of a tribe in their designated tribal area
Māori	Māori term for indigenous, native and natural

Māori Warden Association	Māori Wardens provide a number of specialist services to the community generally on a voluntary basis, which can include: crowd control, traffic management, safety patrols event management, advisory, general security, patrolling marae duties as required, and protocol information
Māori Women's Welfare League	To promote fellowship and understanding between Māori and European women and to cooperate with other women's organisations, Departments of State, and local bodies for the furtherance of these objects, reviving and preserving culture and the arts and advising on different social initiatives
Marae	Māori term for the open area or courtyard in front of the whareniui (meeting house), where formal greetings and discussions take place. An important focal point of interaction for whānau, hapū and iwi
Mental Health Promotion	Actions and strategies undertaken to protect and improve mental health ranging from policy development to community based initiatives and education. It is enabling people to improve and have control over their health, and applies to the whole population, not just for those who may live with a mental illness
Mental Health Sector	Organisations and individuals involved in mental health at any level
NGO	Non-government organisation
Papatūānuku	Personal name given by Māori to Mother Earth known as the wife of Rangi-nui and the parents of all living things
Peer Support Services	An organisation providing support to tāngata whaiora to set goals, learn skills and increase wellbeing. Those employed in these services have the necessary professional skills and attributes and lived experience of mental illness
Pepeha	Māori term for tribal saying or proverb usually relating to a tribe
PHO	Primary Health Organisation
Poroporoaki	Māori term for farewell
Pōwhiri	A Māori ritual of encounter, a welcoming ceremony and process
Pūrākau	Māori term for legends and stories, often used to teach and reflect life lessons
Rangatira	Māori term for someone of high status, noble, a chief or leader concerned for the welfare of their people
Rangi-nui	Māori name given to the Atua (God) of the sky and husband of Papatūānuku, from which union originate all living things
Recovery	Living well in the presence or absence of mental illness and the grief and losses that can be associated with it. Living well is defined by each individual and a process not a state of being. The core of recovery in mental health is an approach that embraces hope, self determination, and citizenship

Resilience	The quality of being resilient and having physical and mental stamina to cope with suffering and hardship. It is an ability to cope and to overcome
Rohe	Māori term for a region, territory or boundary of land
Social inclusion	The ability of a society to enable all groups and individuals to realise their full potential and contribute to their communities and society
Stigma	A mark of shame, branding people and creating people who are seen as unacceptable or disgrace to society
Tāngata Pasifika	A diverse group of people originating from the Pacific region including Fiji, Cook Islands, Tonga, Samoa, Tokelau and Niue
Tāngata whaiora	Māori term used in mental health to denote an individual who is seeking wellness, a mental health service user or consumer
Tautoko	Support
Te Ao Māori	The Māori world, Māori paradigm
Te Pae Mahutonga	The Southern Cross star constellation. Also a model of Māori health promotion
Te whare tapa whā	A model of Māori health depicting four cornerstones of Māori health: whānau (family), tinana (physical health), hinengaro (mental and emotional health) and wairua (spiritual health)
Tikanga	Māori term for customs and cultural code of conduct, the overarching rules that enable Māori to engage in rituals of significance
Tino rangatiratanga	Māori term for self determination
Waiata	Māori term for song, also means to sing or chant
Whakaaro	Māori term for thought, an opinion, to think, plan or consider
Whakaruruhau	Umbrella, canopy for shelter
Whakataukī	Māori term for proverb/saying
Whānau	Māori term for family, extended family and recognised as the foundation of Māori society. Family plays an essential role. In modern times it has extended to close friendships, peer groups and affiliations
Whānau ora	Phrase to capture Māori families supported to achieve their maximum health and wellbeing. Each whānau member is valued, each whānau connects to a hapū and iwi
Holistic	Consideration of the whole person and their environment in the treatment or support of their condition
Work and Income NZ	A service provided by the Ministry of Social Development providing financial assistance, business support, and community needs

Appendix A

MĀORI CONCEPTS AND VALUES

These concepts are important when implementing initiatives for Māori within the Like Minds programme. To gain full benefit they can be adopted by all tāngata whaiora, Like Minds providers, and associated staff to reinforce a positive message around mental health and addressing stigma and discrimination.

Aroha	Manaakitanga
<p>A genuine concern and ability to sympathise with those that you work with and work alongside.</p>	<p>Being respectful in your dealings and ensuring comfort and care, being hospitable and responsive to processes.</p>
Wairuatanga	Whakapapa
<p>Acknowledging the realm of spirituality and presence of our tupuna, the roles of kaumātua, rangatira and tohunga and respect for differing perceptions. This element is about connectedness to a greater source.</p>	<p>We each bring a story and journey, we all have a beginning and whakapapa reinforces and solidifies our belonging and whānau and kinship ties.</p>
Tūrangawaewae	Whānau ora
<p>A source of identity, a place to firmly stand to know what is important to oneself.</p>	<p>Whānau reaching their potential, having access to resources that benefit their spiritual, physical, mental and emotional wellbeing.</p>



Appendix B

NATIONAL STRATEGIC DOCUMENTS

Several national documents have provided the strategic foundation for building gains in Māori mental health over the last 10 years.

All of these documents reiterate the same key messages around mental health and the elimination of stigma and discrimination associated with mental illness.

BLUEPRINT FOR MENTAL HEALTH SERVICES IN NEW ZEALAND

Released by the Mental Health Commission in 1998 the Blueprint offered a service development plan for mental health services in New Zealand. The Blueprint introduced the recovery approach to the sector and distinguished that the prevalence of mental illness was higher for Māori.

The Blueprint highlighted discrimination as a barrier to recovery from mental illness and disclosed that ridicule, harassment, abuse and inequality suffered by those with the experience of mental health issues hindered their ability to recover from mental illness. The Blueprint clearly identified that discrimination was present in all echelons of society including families, neighborhoods, employers, police, the justice system, health professionals and services and government departments.

This document affirms that 'everybody has a responsibility to treat people experiencing mental illness with respect'. For Māori, wellbeing needed to be promoted and a greater community understanding of mental illness was required to reduce discrimination.

HE KOROWAI ORANGA: MĀORI HEALTH STRATEGY 2002

He Korowai Oranga is the framework for the health sector to take responsibility for the part it plays in ensuring and supporting the health status of Māori whānau. He Korowai Oranga encourages all agencies and organisations involved in health to work collaboratively for better and improved outcomes for Māori.

The framework recognises Whānau Ora: "Māori families supported to achieve their maximum health and wellbeing". It acknowledges that whānau is the foundation of Māori society and acts as a source of strength, support and identity, contributing to good health.

The outcomes in this strategic document for Māori are that whānau experience physical, spiritual, mental and emotional health, that they have control over their destinies, live longer, enjoy quality of life and can participate in Te Ao Māori and wider society.

He Korowai Oranga identifies that "as a population group, Māori have on average the poorest health status of any ethnic group in New Zealand". A call to reduce inequalities in health is made by identifying a population health objective to improve mental health of Māori and to recognise mental health as a Māori health priority.



TE TĀHUHU - IMPROVING MENTAL HEALTH 2005-2015: THE SECOND NEW ZEALAND MENTAL HEALTH AND ADDICTION PLAN 2005

Te Tāhuhu sets the direction for the mental health sector, reflecting the government's strategic investment and interest in mental health.

The overall outcomes identified in Te Tāhuhu include that people with experience of mental illness and addiction have the opportunity to fully participate in everyday life, alongside whānau and their communities, that they have the same opportunities and can maintain their own wellbeing.

The promotion and prevention section in Te Tāhuhu prioritises mental health and wellbeing. The powerful statistic of “one in five New Zealanders experience a mental illness or addiction” is emphasised to raise an awareness of its commonality.

The government recognises that discrimination is a major barrier to successful participation in society. Discrimination excludes groups and individuals and reduces their chances of having a healthy life. Most importantly Te Tāhuhu encourages increasing people's awareness of mental health and mental illness, challenging society to be supportive and inclusive.

TE PUĀWAIWHERO: THE SECOND MĀORI MENTAL HEALTH AND ADDICTION NATIONAL STRATEGIC FRAMEWORK 2008-2015.

Te Puāwaiwhero provides direction for everyone involved in mental health and addiction to address Māori mental health need. Its implementation requires leadership at all levels of the sector.

Te Puāwaiwhero places particular emphasis on the important role that both the Like Minds Like Minds Te Roopu Ārahi work alongside, Māori providers in supporting whānau to live longer, enjoy a better quality of life without experiencing discrimination, and being well informed about mental health and wellbeing.

Again the concept of 'whānau ora' is highlighted, supporting the aim of Māori whānau reaching their potential for good health and overall wellbeing. There is a strong call for the health sector to improve Māori health and reduce existing inequalities.

This document reiterates Māori and mental health as priority areas for the government, identifying that Māori bear a disproportionate burden of risk for mental ill health due to socio economic disadvantage.

LET'S GET REAL: REAL SKILLS FOR PEOPLE WORKING IN MENTAL HEALTH AND ADDICTION 2008.

Let's get real is a framework for those that work in or access services in mental health and addiction. It is a clear and comprehensive document that supports "Workforce and a Culture of Recovery".²

Let's get real reinforces the skills required to work effectively in the mental health and addictions sector. It outlines the knowledge, skills and attitudes that are needed to deliver effective services.

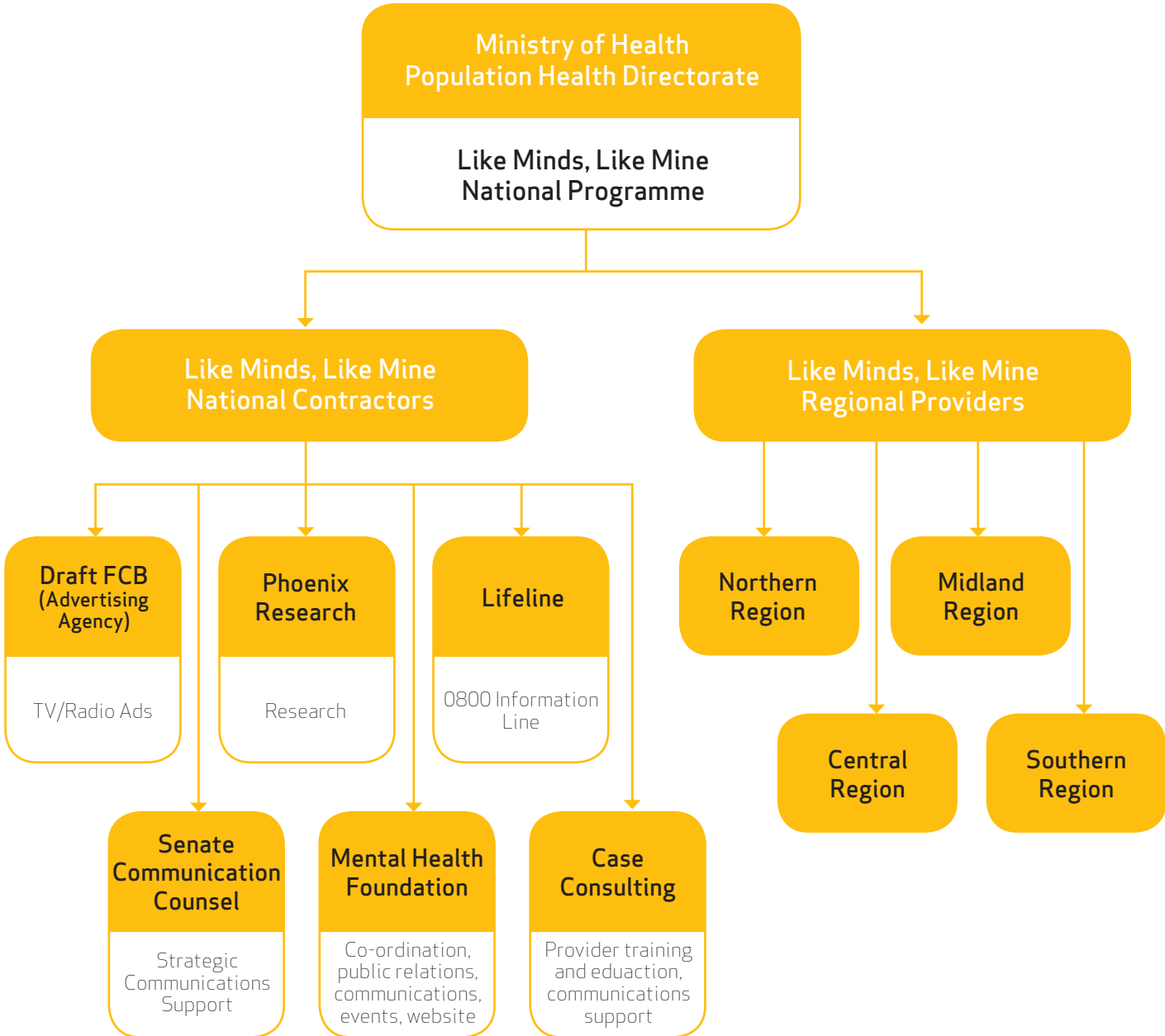
The core values in this document are: respect, human rights, service, recovery, communities and relationships. Three of the seven real skills identified that are relevant to Like Minds are: working with service users, working with Māori, and challenging stigma and discrimination.

² "Workforce and Culture of Recovery" is one of the 10 leading challenges identified in the Ministry of Health Te Tāhuhu and Te Kōkiri mental health strategic documents informing the mental health sector in Aotearoa New Zealand.



Appendix C

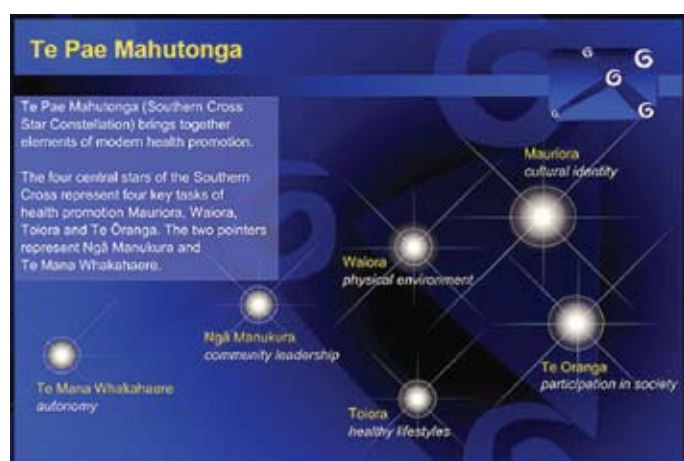
LIKE MINDS NATIONAL FRAMEWORK 2009



Appendix D

TE PAE MAHUTONGA

This is a Māori framework applicable to health promotion and developed by Professor Mason Durie (1999). It represents the constellation of stars referred to as the Southern Cross. It has four central stars and two pointers. Each of the four stars represents a key health promotion goal, while the two pointers explain how these goals are to be achieved.



Taken from: <http://www.maorihealth.govt.nz/moh.nsf/pagesma/446>

Te Mana Whakahaere

Te Mana Whakahaere pertains to autonomy within any given group, community or situation. This is about community ownership and control, whereby community autonomy is reinforced and acknowledged before health promotion expertise or qualifications.

It relates to the participation of people, and level of control they have over the promotional initiative. It also reflects the need and desire of that community whether it be based at hapū, marae, whānau or community level.

Ngā Manukura

This represents leadership in health promotion; it is about skills, expertise, influence and knowledge. Significant gains in health promotion can only be successful with appropriate leadership and positive alliances between groups and promoters.

Effective leaders and kaimahi in health promotion work must be able to engage with community members and key stakeholders. They must have a solid working relationship with professional leaders and know how to conduct themselves in environments that may have socio-economic differences, language and cultural barriers.

Mauriora

This reflects a secure cultural identity and the facilitation of all Māori having access to the Māori world. Mauri ora endorses links with tribal land, access to marae and activities, te reo Māori me ōna tikanga.

A secure identity in one's culture reinforces a sense of belonging, inner strength, vitality, and the sharing of social and economic resources.

Waiora

This is linked with the cosmic, terrestrial and water environments. It is related to nature and how individuals interact with the environment. It directly links to the role of Rangi-nui and Papatūānuku and how these domains are protected to ensure our personal wellbeing.

Te Oranga

Te Oranga directly connects to participation in society, access to resources and having the capacity to make healthy choices. This component identifies the confidence people have to access good health services, schools, sport, and recreation.

Toiora

Healthy lifestyles are the focus of Toiora. It is about identifying health and safety issues and reducing and or eliminating risk associated with behaviour. Toiora is dependent on personal behaviour and actions.

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“New Zealand has pioneered the way by crossing boundaries, working intersectorally and developing a campaign noted for creativity, excellence and the participation of service users”

(Mental Health Commission 2007)



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