National SCIENCE Challenges

Healthier Lives for all New Zealanders

HEALTHIER LIVES

He Oranga Hauora

He Pikinga Waiora Implementation Framework

A tool for chronic disease intervention effectiveness in Māori and other indigenous communities

Presented by Moana Rarere
1st Asia-Pacific Conference on Integrated Care
6-8th November 2017, Brisbane, QLD, Australia

He Pikinga Waiora research team:
Prof John Oetzel, Dr Nina Scott, AProf Maui Hudson, Dr Bridgette Masters-Awatere, Moana Rarere, Dr Jeff Foote, Dr Angela Beaton, Terry Ehau

National SCIENCE Challenges

He Pikinga Waiora team

HEALTHIER LIVES

He Oranga Hauora

Maori health providers, community researchers, Wintec, Universities, PhD student, DHB, ESR, psychology, nursing, systems expert, community research expert, public health, Kaupapa Māori methodology, community members

Outline

- Background – why important?
- The He Pikinga Waiora Implementation Framework
- Application of the Framework
- Results & conclusions

Health burden & inequity

- 40% burden → CVD, cancer, diabetes & obesity
- Inequity Māori:non-Māori
  - Obesity 47% : 29%
  - Diabetes 7% : 5%
  - CVD mortaility 2 x higher for Māori
  - Cancer mortaility 1.5 x higher for Māori
  - Health burden 1.8% higher for Māori

National Science Challenges – 'Healthier Lives'

- NZ Govt research funding for science-based issues
  - Scalability and nationwide impact
- Healthier Lives
  - Right prevention to the right population
    Right treatment to the right patient
  - ↓ the burden of chronic/NCDs by 25% by 2025
  - ↓ inequities for Māori & other communities

National Science Challenges | HEALTHIER LIVES | He Oranga Hauora

Translational research & implementation science

- ✓ achieving health equity

- Translation, dissemination, uptake & implementation → transitioning innovative health research into policy & practice BUT

- Include community/stakeholder knowledge

HE PIKINGA WAIORA IMPLEMENTATION FRAMEWORK

CULTURAL - CENTEREDNESS

Ko tōku reo, tōku ohooho,
Ko tōku reo, tōku Māpihi Maurea

Community voice

Community is involved in defining the problem and developing the solution.

Reflexivity

Implementation team is reflexive and identifies adjustments to the intervention as a result.

Structural transformation and resources

The intervention results in significant structural transformation and resources which are sustainable over time.

COMMUNITY ENGAGEMENT

He urunga tangata he urunga pāhekeheke,
he urunga oneone mau tonu

Partnering between researchers and community members/ organizations in all phases of the project. Guided by principles of action, social justice, and power sharing.

Decision-making and communication is shared and a strong partnership is identified throughout the intervention process. Relationships build capacity of communities and researchers.

KAUPAPA MĀORI

He oranga ngakau, he pikinga waiora

The Framework has indigenous self-determination at its core. All four elements have conceptual fit with Kaupapa Māori aspirations and all have demonstrated evidence of positive implementation outcomes.

A coding scheme derived from the Framework was applied to 13 studies of diabetes prevention in indigenous communities in Australia, Canada, New Zealand, and the United States. Cross-tabulations demonstrated that cultural centeredness (p=.008) and community engagement (p=.009) explained differences in diabetes outcomes and community engagement (p=.098) explained difference in blood pressure outcomes.

The Framework is intended as a planning tool to guide the successful development and implementation of interventions. Funders can use the Framework to assess the likely effectiveness of proposed interventions. Community organizations can use the Framework to work with researchers or policy makers to strengthen each of the four elements.

Please let us know how you are using the Framework and any feedback you may have:
hpwadmin@waikato.ac.nz

HEALTHIER LIVES | He Oranga Hauora | National SCIENCE Challenges

SYSTEMS THINKING

He tina ki runga, he tāmore ki raro

Systems perspectives

Intervention considers multiple perspectives, world view and values. It considers multiple causes, has a broad focu and offers multiple solutions.

System relationships

Demonstrates strong understanding of the comple relationships between variables including feedback loop time delays and multi-level effects.

Systems levels

Intervention targets change at the macro, meso and micr levels.

INTEGRATED KNOWLEDGE TRANSLATION

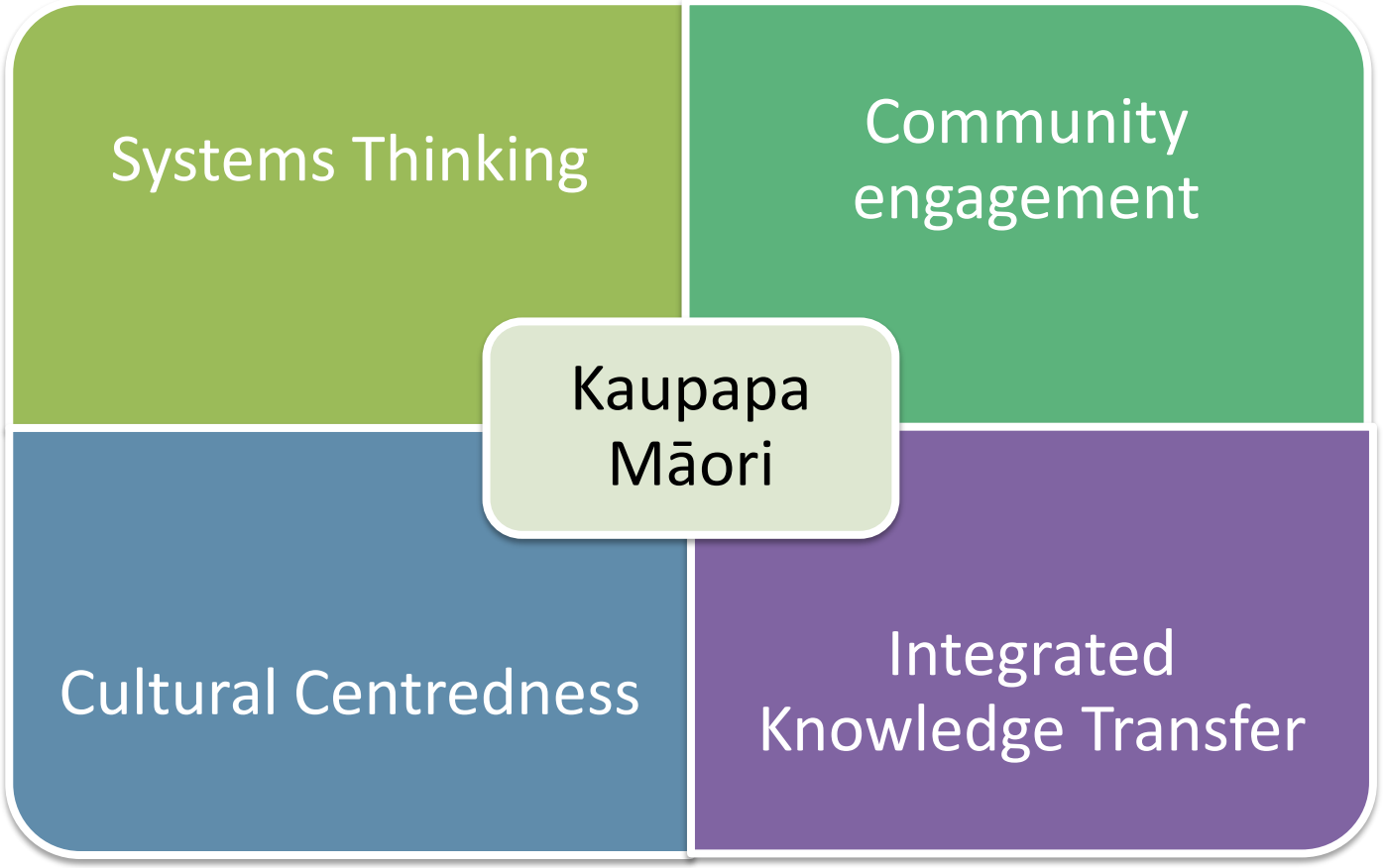
Toi te kupu, toi te mana, toi te whenua

Integration of knowledge translation activities within th context of the community in which the knowledge is to b applied.

There is a process of bi-directional learning established that information is tailored to knowledge users needs.

Kōrero Tahi October 20

He Pikinga Waiora Implementation Framework



Kaupapa Māori

- Self-determination at core
- Importance of cultural protocols (tikanga) & cultural knowledge (mātauranga)
- 3 aims:
  - Address unequal power
  - Priorities cultural protocols & knowledge in relationships & programmes
  - Community participation

Culture Centredness

- Community involved → defining problem & identifying solution

- 3 characteristics
  - Community voice
  - Reflexivity
  - Structural transformation & resources

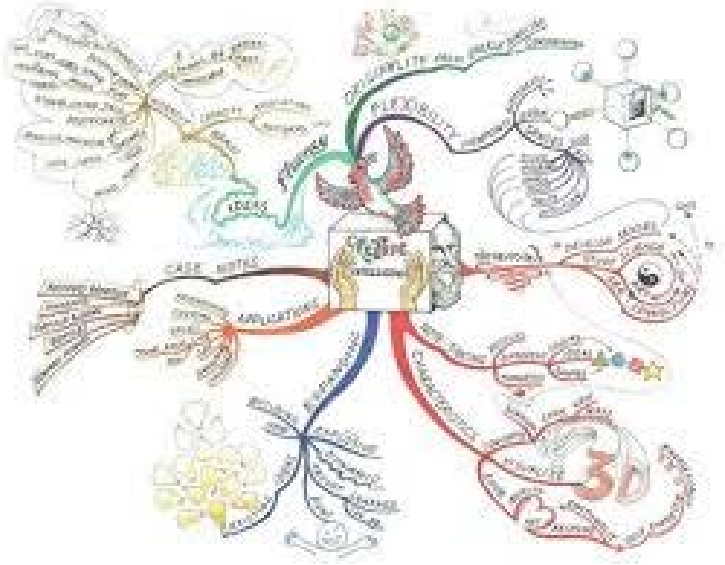
Community Engagement

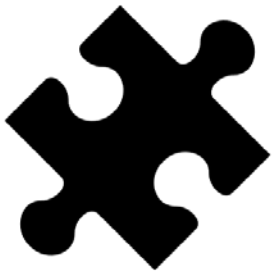
- Collaboration
- Partnership

Community Researchers/health professionals

- Across all phases of research & intervention development

Systems Thinking





Integrated Knowledge Transfer

- Co-innovation
- Knowledge users Researchers

- Adapt to Māori/indigenous communities

Application of Framework

- Coding scheme applied to 13 studies of diabetes prevention in indigenous communities.
- Cross-tabulations:
  - Culture centeredness (p=.008) & community engagement (p=.009) explained differences in diabetes outcomes
  - Community engagement (p=.098) explained difference BP outcomes

Conclusion

- The He Pikinga Waiora Implementation Framework appears to be well suited for advancing implementation science for indigenous communities in general and Māori communities in particular

- The Framework has promise as a policy and planning tool for designing and evaluating effective interventions for chronic disease prevention for indigenous communities

Publication: Open Access

Implementation framework for chronic disease intervention effectiveness in Māori and other indigenous communities.

Oetzel J., Scott N., Hudson M., Masters-Awatere B., Rarere M., Foote J., Beaton A., Ehau T.

Globalization and Health. 2017;13:69. doi:10.1186/s12992-017-0295-8.

Kia ora

HE PIKINGA WAIORA IMPLEMENTATION FRAMEWORK

	Variable	High	Medium	Low	Negative
Cultural Centeredness	**Community voice** How groups, that the intervention is focused on are involved in defining the problem and solutions.	Community involved in defining the problem and developing the solution.	Community involved in either defining the problem or developing the solution.	Community only informed but has no direct involvement in the definition of problem or solution development.	Intervention implemented in the face of significant community opposition.
	Reflexivity How the power and privilege of the researcher, relative to the community, is recognised and dealt with.	The implementation team explicitly states their reflexivity and identifies adjustments to the intervention as a result.	The implementation team identifies efforts to engage in reflexivity or states they were aware of it; adjustments to the intervention are unclear.	No evidence that the team was reflexive about its processes or no changes made in response to team learnings.	Victim blaming, unintended bias or overt racism in intervention design, implementation or evaluation.
	Structural transformation and resources How much the system is improved to better fit community needs.	Significant structural transformation and resources which are sustainable over time.	Intervention receives significant resources but has a limited focus on structural transformation.	Intervention receives minimal resources and is only sustainable over a short term.	Less resources available or lower quality resources as a result of the intervention compared with no intervention.
Community Engagement	**Community engagement** The level of involvement, impact, trust and communication with community members.	Strong community or bi-directional leadership. Decision-making and communication is shared and strong partnership is identified throughout the intervention process.	Communication is two-way and there is co-operation to implement the intervention with a partnership becoming apparent.	Communication primarily flows from intervention team to community and the intervention team has ultimate control over the intervention and relevant communication.	Intervention is placed in the community with no consultation with community organizations or stakeholders responsible for implementation.
IKT	**Integrated knowledge translation** How involved the people delivering the intervention (knowledge users) are in designing the intervention.	There is a process of mutual or bi-directional learning established so that information is tailored to knowledge users needs.	Medium level support for knowledge user by intervention team for implementing the intervention. Intervention is not tailored to the knowledge user.	Minimal or no support for implementing intervention or outsiders implement the intervention for the knowledge users.	Knowledge users have major concerns which they are not able to discuss with the intervention team.
Systems Thinking	**System perspectives** How much the team show they understand that there are multiple ways of viewing issues and solutions.	Intervention includes all three of the following: 1) multiple causes, 2) broad focus/multiple solutions; and 3) multiple perspectives, world views, and values of multiple actors.	Intervention includes only 2 of the 3 factors in the high category.	Intervention includes only 1 or none of the 3 factors in the high category.	Intervention has a negative impact due to a lack of consideration of multiple perspectives necessary to support implementation.
	System relationships The degree that relationships between variables/factors are prioritised.	Demonstrates a strong understanding of the complex relationships between variables including feedback loops, time delays and multi-level effects.	Demonstrates moderate understanding of the complex relationships between variables including feedback loops, time delays and multi-level effects.	Limited or weak understanding of the complex relationships between variables including feedback loops, time delays and multi-level effects.	Intervention has a negative impact due to lack of consideration of system relationships important for implementation.
	System levels The degree to which different levels of analysis are taken into account.	The intervention targets change at the macro, meso and micro levels, and provides sufficient rationale and context for each level.	The intervention targets change at 2 levels with some rationale and context for each level.	The intervention targets change at 2 levels or less without providing rationale and context.	Intervention has a negative impact due to lack of consideration of systems levels necessary to support implementation.