

# Te Tiriti o Waitangi Responsiveness Framework

1

## Health Coalition Aotearoa



## A LIVING DOCUMENT

*Which may be revised as the need arises. Current October, 2022.*

### Purpose

Health Coalition Aotearoa acknowledges longstanding and persistent inequities in health outcomes for Māori in New Zealand.

The purpose of this policy is to give meaningful effect to Te Tiriti o Waitangi in all Health Coalition Aotearoa activities, with a clear vision and structure for working effectively in partnership with Māori to eliminate health inequity.

### Scope

Health Coalition Aotearoa is a collective of Tāngata Whenua, Tāngata Tiriti, Tāngata Te Moananui-a-Kiwa and tauwiwi organisations and experts working together to support effective policies and actions to eliminate harms to all New Zealanders from tobacco, alcohol and unhealthy foods, and to reduce inequities through a focus on the determinants of health.

Representation and active participation of Tāngata Whenua, Tāngata Tiriti, Tāngata Te Moananui-a-Kiwa and tauwiwi members is a strength of the Coalition especially when advocating at the national level. It is essential that HCA is a safe space allowing all members to participate, contribute and be heard.

HCA does not purport to represent the views of any individual Iwi or Hapu but we ensure that our views are consistent with and reflect the views of Māori across the motu. Tāngata

Whenua are represented in HCA by the Kaitiaki Māori Rōpū (consisting of Māori members and organisations) as a collective voice.

### Policy

HCA is a Tiriti o Waitangi-led coalition. We are committed to demonstrating authentic leadership in our advocacy for public health in Aotearoa New Zealand by upholding the principles and articles of Te Tiriti o Waitangi in our work, as a partnership between Tāngata Whenua members and other members.

We acknowledge that:

- Te Tiriti o Waitangi was signed between Tāngata Whenua and the Crown
- There are two versions of Te Tiriti – the English language version known as The Treaty of Waitangi, and the Māori language version known as Te Tiriti o Waitangi. There are some points of difference between the two. HCA considers Te Tiriti o Waitangi, which was signed by the majority of Māori Chiefs, to be pre-eminent.
- The ongoing process of colonisation on Tāngata Whenua needs to be addressed structurally and culturally through approaches developed under a balanced, power-sharing partnership
- Tāngata Whenua have the right and the responsibility to manaaki all Tāngata Tiriti who come to Aotearoa in a manner that expresses Tikanga Māori and acknowledges cultural worldview difference.



The work and advocacy of HCA will be informed by these principles and consistent with tikanga Māori (customs and values) and kaupapa Māori (philosophy, doctrine and approaches).

All members will be responsible for learning about and understanding the principles of Te Tiriti o Waitangi and how they are applied in the health sector to advance Māori aspirations. Equally, members commit to understanding our policy, principles and tikanga values, and how they apply to the objectives and aspirations of HCA and their own organisations.

## Principles

The Waitangi Tribunal and the Courts have derived a set of principles and provisions from the three articles of Te Tiriti as they relate to hauora. These principles provide guidance on how Te Tiriti o Waitangi can be upheld and honored by the Crown, and by civic organisations, such as HCA. Te Tiriti comprises of three articles:

Article 1 refers to **kāwanatanga** whereby Māori gave the Crown the right to govern of Aotearoa New Zealand.

Article 2 refers to **tino rangatiratanga** which guaranteed Māori signatories, and their hapū and iwi, control over their lands, resources and culture.

Article 3 refers to **ōritetanga** which guaranteed Māori equal rights, as citizens of Aotearoa New Zealand.

The hauora principles that have been derived from the articles are:

- **Rangatiratanga:** Enabling Māori self-determination (mana Motuhake) and recognising the rights of Māori to make decisions concerning their people, health, mātauranga, tikanga, and resources in a way that aligns with Māori customs and values.
- **Equity:** Acknowledging the many systemic and structural inequities that exist for Māori, and acknowledging and pursuing opportunities through our collective to contribute to positive change
- **Partnership.** Partnership means working with iwi, hapū, whānau and

Māori communities to support Māori aspirations.

- **Active protection:** The protection of Māori rights and interests including the protection of tino rangatiratanga and taonga (including culture and language)
- **Options:** Māori have the right to choose their social and cultural path and this must be properly resourced by the Crown.

## Definitions

For the purposes of Health Coalition Aotearoa Te Tiriti o Waitangi Responsiveness Policy:

### Māori members:

- Māori organisations: Governed or owned by no less than 50% Māori, represent Māori interests, and where more than 50% of staff identify as Māori.
- Tāngata Whenua members: Self-identifying Māori who are members of the HCA collective and have whanau, hapu and iwi affiliations. For the purposes of this document Tāngata Whenua does not refer to a specific iwi, hapu or whanau collective of a particular locality.
- Kaitiaki Māori Rōpū members: Tāngata Whenua members and Māori organisations of HCA who represent Māori as a collective voice and will determine a Māori position on issues and campaigns, which will be conveyed to the Board and Expert Groups.

### Tāngata Tiriti members:

- Non-Māori individuals whose home is Aotearoa New Zealand and who have made a formal commitment to respecting and supporting the principles and articles of Te Tiriti o Waitangi.
- Aotearoa New Zealand organisations not otherwise defined as Māori organisations, which have made a formal commitment to respecting Te Tiriti o Waitangi articles and principles.
- Tāngata Te Moananui-a-Kiwa: Organisations representing Pacific peoples, or individuals identifying as Pacific peoples, based in Aotearoa.

### Tauīwi members:

- Tauīwi organisations: Have not yet made a formal commitment to respecting Te Tiriti o Waitangi articles and/or principles. This may include international organisations which have New Zealand operations/divisions.



**Framework of tikanga values**

<b>TIKANGA PRINCIPLE</b>	<b>ACTION</b>
<p><b>Rangatiratanga/Mana Motuhake</b> Maori leadership and the right to self-determination and self-management</p>	<ul style="list-style-type: none"> <li>• Tāngata whenua and Tāngata Tiriti share governance of HCA. This means a there will be a Māori Chair or Co-Chair on the HCA Board.</li> <li>• Each panel shall appoint a Māori chair or co-chair, or convene an advisory rōpū of Kaitiaki Māori to ensure that Māori perspectives are appropriately considered and represented in all activities undertaken.</li> <li>• Whānau, hapū and iwi Māori have the mana and will lead the advocacy for public health policies that protect Māori health in a way that accords with Māori values and perspectives</li> <li>• Māori members are actively mentored and provided opportunities to move into leadership positions in HCA</li> </ul>
<p><b>Kotahitanga</b> Unity. While people may hold diverse views, it is important to identify a shared sense of purpose that contributes to positive outcomes for all.</p>	<ul style="list-style-type: none"> <li>• Our diversity is our strength and although the collective may have different perspectives and values, we acknowledge that we come together for a common purpose.</li> <li>• When consensus is not reached, we commit to working together in a respectful way guided by the HCA tikanga principles, to come to a reconciliation within the required timeframe</li> <li>• When a decision needs to be reached on a matter in which consensus cannot be reached, the HCA Kaitiaki Māori collective must be satisfied with the decision</li> <li>• Where there is an issue of contention that specifically affects Māori, the Kaitiaki Māori have the final decision, which will be guided by evidence.</li> </ul>
<p><b>Kaitiakitanga</b> Guardianship of the wellbeing of our communities through advocacy for stronger public health systems and tougher policies to reduce the harm from tobacco, alcohol and unhealthy food.</p>	<ul style="list-style-type: none"> <li>• Support and advance Māori aspirations for health, which includes guardianship of the environment</li> <li>• Actively engage with Māori health organisations to align our work with Māori aspirations</li> <li>• Understand the impacts of colonisation and identify instances of colonisation in the health system</li> <li>• Understand the concepts of health equity and equality and identify public health measures that address equity</li> <li>• Consult with Kaitiaki Māori on the most appropriate way of supporting and affirming Māori interests on public health issues</li> </ul>
<p><b>Wairuatanga</b> Recognition that the holistic wellbeing of an individual has a spiritual aspect relating to cultural identity and connection to the whenua</p>	<ul style="list-style-type: none"> <li>• Māori conceptions of health, taking a holistic collective-centred approach, are prioritised when these concepts are different to prevailing Western concepts of health</li> <li>• Māori wellbeing is enhanced when Māori have opportunities to express and practice tikanga (culture), kawa (traditions) and mātauranga Māori (traditional Māori knowledge) in everyday life.</li> <li>• Likewise, all people benefit from being able to freely express their cultural values in everyday life</li> </ul>



TIKANGA PRINCIPLE	ACTION
<p><b>Whakapapa</b> Connections and relationships</p>	<ul style="list-style-type: none"> <li>• HCA recognizes that relationships are important for effective advocacy, take time to develop and must be nurtured.</li> <li>• New relationships start with a whakawhanaungatanga process to build respect and trust</li> </ul>
<p><b>Manaakitanga</b> Mutual respect. Work together with fairness and integrity to advocate for public health systems that protect all people living in Aotearoa/New Zealand.</p>	<ul style="list-style-type: none"> <li>• HCA is a safe space for all where there is a climate of mutual respect for diverse viewpoints</li> <li>• Māori members are able to speak (safely) about Māori interests</li> <li>• Māori members are not expected to represent the voice of all Māori at all times</li> <li>• Tāngata Tiriti members will awahi and support Kaitiaki Māori and Tāngata Whenua members, who may have multiple demands on their time and limited capacity, to deliver equitable outcomes for the Aotearoa/NZ public</li> </ul>
<p><b>Whakamana i te Tāngata</b> Showing respect by understanding and supporting Māori tikanga and kawa, recognising that there are regional and iwi differences in practices.</p>	<ul style="list-style-type: none"> <li>• All members will be responsible for understanding and applying these principles in their work with HCA</li> <li>• Use of appropriate tikanga, kawa and reo is standard practice</li> <li>• All HCA Board and panel members are able to lead meetings and events using the appropriate tikanga and manaaki manuhiri so that the responsibility does not always fall on the shoulders of Māori members</li> <li>• HCA Members should regularly reflect on their cultural competency level and put in place a personal improvement programme</li> <li>• Kaitiaki Māori members are the first port of call for guidance on the most appropriate tikanga and kawa for different settings and events. This must be considered well in advance of the need</li> </ul>
<p><b>Kanohi ki te kanohi</b> “a face seen” communicates the importance we place on people and our mahi</p>	<ul style="list-style-type: none"> <li>• Face-to-face conversations (either virtual or real) are the preferred form of communication and networking</li> <li>• Digital face-to-face meetings are encouraged as environmentally and health protective</li> </ul>

**Endorsement**

This framework was developed in partnership by Māori and Tāngata Tiriti members of HCA, including a rōpū of Māori members, and an interim version presented to the 2022 AGM. The current version is endorsed by the HCA Board.

**Contributors**

*Lisa Te Morenga, Anaru Waa, Christina McKerchar, Warren Lindberg, Jenn Lawless, Catherine Manning, Grant Berghan, Boyd Swinburn, Raawiri Ratu, Shayne Nahu*

