

Final report summary

COVID-19 and National Immunisation
Programme research

Submitted by

Te Hauora o Tūranganui a Kiwa

Project title

PROP-048 Turanga Tangata Rite

Section 1: Contact information

1.1 Point of Contact for this report

Item	Detail
Contact person	Shirley Keown
Position	Clinical/ Research Lead
Phone number	06 869047
Mobile number	0272831677
Email address	shirley.keown@turangahealth.co.nz

Section 2: Reporting

2.1 Overview

Tūranga Health is built around providing equity and access to health systems for Māori in Tūranganui-a-Kiwa (Gisborne). During the COVID-19 pandemic, the iwi health provider was successful at delivering a wide range of interventions that enabled whānau to protect themselves and feel supported. This included a novel strategy toward vaccination, such as holding clinics where there were “familiar faces in familiar places”, using non-clinical vaccinators (kaiāwhina) and holding clinics in mobile settings. Tūranga Health provided 18% of all COVID-19 vaccinations in Tairāwhiti, 23% of vaccinations to Māori, and 19% of vaccinations to people in NZ Dep areas 8-10. Ethical approval for the project was obtained from the University of Otago Human Ethics committee (H22145).

2.2 What is the problem or issue that your research investigated?

Against the backdrop of past pandemics, where Māori communities bore a disproportionate burden of mortality, Tūranga Health recognised the urgent imperative for action. Institutional racism and systemic barriers had long hindered Māori access to healthcare, and projections for COVID-19 painted a bleak picture of even higher fatality rates. Tūranga Health was successful in reaching those who are often overlooked by the traditional health system, specifically those living in areas of rurality, high deprivation, and gang whānau. This project describes and evaluates Tūranga Health’s COVID-19 response that helped to close the health equity gap in Tairāwhiti, to inform responses to future pandemics.

2.3 What are the practical solutions and implementation options that you recommend?

Trust Māori Providers/ Integration of Māori providers in Decision-Making: Māori providers should co-decide in the crafting of national health strategies, moving beyond mere consultation during implementation phases. Genuine Māori input should be included in all decision making, ensuring the formulation of culturally adept strategies.

Automatic Essential Service Status for Māori Health Providers: Explicit acknowledgment of appropriate Māori health providers as essential services recognises and emphasises their expertise in community health. With Tūranga Health eventually being designated as an essential service, it enabled us to enact a swift response to COVID-19 pandemic and a local response on Day Two of Cyclone Gabrielle. It is imperative that government and publicly funded agencies actively reassess their criteria for designated essential services for future pandemics, disasters, and community emergencies. Such a review ensures the services deemed essential are relevant to the situation and address the needs of every segment of the population, facilitating a more equitable and effective approach.

Expansion of the kaiāwhina (non-clinical health worker) workforce: Kaiāwhina contribute a distinctive set of skills and knowledge that complement clinical care, helping to reach corners of the population that healthcare providers often struggle to make meaningful contact with. Increasing the kaiāwhina workforce, with pay parity, and providing education and pathways would enhance professional development, expand the healthcare workforce and recognise other ways of knowing. This would require significant investment in education and career development, but the costs would be outweighed by the value that kaiāwhina bring to community health. At Tūranga Health, 12 kaiāwhina vaccinators delivered 51.8% of all Covid vaccinations. And through the expansion of scope into a more technical role, more kaiāwhina have been trained to vaccinate for COVID-19, influenza, and childhood immunisations, as well as administering health checks. Kaiāwhina have continued to be an instrumental part of the operation of Tūranga Health, and a few kaiāwhina have stepped into more clinical pathways by choosing to study nursing as well.

Importance of real-time, microlevel data on vaccination rates: Capacity building within the larger health system is needed to manage and extract real time data that is useful for targeting vaccination, capacity building is needed within Māori health providers to utilise that data. Access to real-time, relevant location data enables organisations to make swift, informed decisions, allowing them to respond to evolving situations or emergencies with greater agility. However, the experience during the COVID-19 pandemic highlighted significant shortcomings in the vaccination data provided—it was not location-specific, often outdated, and difficult to access, resulting in an inefficient and scattergun approach. Improving data management and access streamlines these processes, ensuring more strategic and effective health interventions.

Build capacity for mobile health services: Bolstering the capacity for mobile health services emerges as a beacon of hope for underserved populations. By closing gaps in access, mobile health services serve as a lifeline for individuals facing structural, practical, and systemic barriers to healthcare, thereby advancing equity in access and outcomes.

2.4 What considerations need to be taken into account when implementing the solutions?

1. Trust Māori providers/ Integration of Māori providers in decision making:

- a. The health system needs to provide space for Māori health providers to lead, for they offer the best insight that align with community aspirations.
- b. Māori providers offer culturally competent care, addressing the needs of marginalised communities who face social exclusion and high deprivation. Meaningful access to vaccination and other services is vital to reach targets and improve health outcomes.
- c. Cost Implications: Resource allocation to Māori providers is necessary to facilitate appropriate pandemic responses including achieving vaccination targets.
- d. Equity Contribution: Inclusion of Māori providers enhances trust and accessibility, improving equity in health access and outcomes for priority populations.

2. Automatic Essential Service Status for Māori Health Providers:

- a. Impact on People: Māori providers deliver essential goods and services to whānau, especially during crises like pandemics. Recognition as an essential service validates their holistic health model and ensures timely access to necessary resources.

- b. Equity Contribution: Recognition acknowledges the vital role of Māori providers in the healthcare system, addressing systemic undervaluation and promoting equity in service provision and recognition.
- 3. Expansion of the kaiāwhina (non-clinical) workforce:**
- a. Impact on People: Kaiāwhina facilitate vaccination and healthcare access for a wider range of people, fostering trust and connection within communities.
 - b. Equity Contribution: Kaiāwhina's role in reaching marginalised populations enhances equity by addressing barriers to care and building trust within communities (as a role model for their whānau and communities)
- 4. Importance of real time micro-level data on vaccination rates:**
- a. Impact on People: Up-to-date data enables targeted vaccination efforts, ensuring resources are allocated efficiently and clinics are accessible where needed most.
 - b. Equity Contribution: Targeted vaccination strategies address disparities and improve access for underserved populations, enhancing equity in vaccination rates and health outcomes.
- 5. Build capacity for mobile health services:**
- a. Impact on People: Mobile health services increase access for individuals facing structural, practical, and systemic barriers to healthcare, such as those with mobility issues or limited access to traditional healthcare settings.
 - b. Equity Consideration: Mobile health services play a crucial role in improving healthcare equity by bridging access gaps, especially for individuals who might otherwise encounter barriers to receiving care. To support this, providers should have the autonomy to allocate funding towards necessary practical resources, such as gazebos for shelter and vehicles with towbars. Additionally, it is essential to recognise and value specific skillsets of employees, like the ability to manoeuvre a trailer and local knowledge. These competencies are vital for navigating and addressing the unique needs of the communities they serve, underlining the importance of both adequate resources and specialized skills in enhancing healthcare delivery.

For further information, please contact Dr. Shirley Keown (Shirley.keown@turangahealth.co.nz) and Reweti Ropiha (reweti.ropiha@turangahealth.co.nz).