Appendix C  Case study: Whānau Ora

**Key points**

- The Government launched the Whānau Ora initiative in 2010, following the report from the Taskforce on Whānau-Centred Initiatives. Whānau Ora is the flagship for improving the responsiveness of social services to Māori. Many iwi and Māori social services operate outside Whānau Ora. Whānau Ora includes a Pasifika dimension.

- The Whānau Ora initiative is about empowering Māori to take charge of their own lives, building on their strengths and aspirations. It is wider than delivery of social services.

- The principles of Whānau Ora trace their history to earlier Māori development initiatives such as Pūao te ata tū, which included a proposal for devolution of responsibility for Māori wellbeing to Māori.

- The Treaty of Waitangi sets an important context for the commissioning, design and delivery of social services and wellbeing. Partnership obligations and duties between the Crown and Māori are central to the Treaty. Who holds mana whakahaere (the power to manage, govern or hold authority) is key to achieving the objectives of the Treaty partners.

- Because of the alignment between family-centric service delivery and a culturally appropriate response to social issues faced by Pasifika peoples, there is a clear case for a Whānau Ora type response for Pasifika peoples.

- Whānau Ora consists of two distinct phases.
  - Phase one from 2010 to 2015 established provider collectives, navigators, and a Whānau Integration, Innovation, and Engagement fund to assist whānau to develop whānau plans.
  - Phase two from 2013 established three not-for-profit commissioning agencies, which commission services from a wide range of organisations through innovative approaches.

- The evolving nature of Whānau Ora has made developing a performance management approach particularly challenging. Te Puni Kōkiri has developed new accountability arrangements for commissioning agencies. Greater transparency of these arrangements would improve understanding and credibility of Whānau Ora.

- Whānau Ora embodies concepts important to Māori and holds much potential to improve Māori and Pasifika wellbeing and mana whakahaere. It would be strengthened by having a more clearly defined population and a dedicated budget based on the assessed needs of that population.

Whānau Ora is one of four case studies that the Commission has selected in response to the inquiry terms of reference. The case studies draw out lessons that can be applied more widely across the social services landscape rather than draw conclusions about the effectiveness of particular services.

**C.1  Purpose of the case study**

This case study describes Whānau Ora, its aspirations, underlying philosophy and its evolution through phase one to phase two. The Taskforce on Whānau-Centred Initiatives (2010) set out a range of outcomes for Whānau Ora. This study does not seek to evaluate whether Whānau Ora has achieved those outcomes. Rather, it discusses its potential to achieve improved Māori wellbeing in the context of this inquiry.
C.2 What is Whānau Ora?

Dame Tariana Turia, as Minister for the Community and Voluntary Sector, established the Taskforce on Whānau-Centred Initiatives in 2009. Its brief was to construct

[a]n evidence-based framework that will lead to:
- strengthened whānau capabilities
- an integrated approach to whānau wellbeing
- collaborative relationships between state agencies in relation to whānau services
- relationships between government and community agencies that are broader than contractual
- improved cost-effectiveness and value for money. (Taskforce on Whānau-Centred Initiatives, 2010, p. 6)

The Taskforce recommended a set of outcome goals and principles (Box C.1). Crucial to delivering on Whānau Ora would be services that were integrated and comprehensive.

**Box C.1 Whānau Ora outcome goals and principles**

Whānau Ora’s six outcome goals will be met when whānau are:
- self-managing;
- living healthy lifestyles;
- participating fully in society;
- participating confidently in te ao Māori and Pasifika communities;
- economically secure and successfully involved in wealth creation; and
- cohesive, resilient and nurturing.

Seven principles support these outcome goals. They are:
- ngā kaupapa tuku iho (the ways in which Māori values, beliefs, obligations and responsibilities are available to guide whānau in their day-to-day lives);
- whānau opportunity;
- best whānau outcomes;
- whānau integrity;
- coherent service delivery;
- effective resourcing; and
- competent and innovative provision.

The Taskforce called for whānau-centred methodologies, commitment across government, strong regional direction and building on existing provider capabilities. It recommended the establishment of an independent trust, which would be “responsible for the administration of a fund … including, but not limited to, Votes Health, Education, Justice and Social Development” (p. 8).

The Taskforce saw barriers to such an approach being fully realised:

Many iwi have successfully competed for contracts with government agencies to deliver a range of services that span two, three or four sectors. Consistent with a holistic philosophy the aim has been to provide whānau with a comprehensive approach that addresses multiple needs with minimal overlap, little inconvenience and no confusion. However, a lack of coherence between sectors, and even within sectors, has led to multiple separate contracts, each with different reporting requirements and expectations that have precluded an integrated approach to service delivery. (Taskforce on Whānau-Centred Initiatives, 2010, p. 20)

Whānau Ora was launched in 2010 and is the Government’s flagship for improving the responsiveness of social services to Māori and Pasifika. It is an inclusive approach and is available to all New Zealanders. A range of iwi, Māori and Pasifika social services exist outside Whānau Ora. Some providers told the Commission that they did not want to be included in Whānau Ora, but they were the exception – most providers endorsed Whānau Ora.

Whānau Ora is an example of an innovative approach to improving Māori and Pasifika wellbeing.

**Common terms and diverse understandings**

The term “whānau ora” has different meanings to different people. The term was used in the 2002 Māori Health Strategy: “The overall aim of He Korowai Oranga is whānau ora – Māori families supported to achieve their maximum health and wellbeing” (Minister of Health & Associate Minister of Health, 2002, p. 1). One inquiry participant, who recalled the term being introduced to the health sector, told the Commission that whānau ora has always had an aspirational element to it; that it was not just about service delivery.

The Taskforce on Whānau-Centred Initiatives noted:

‘Whānau Ora’ is not mentioned in the Terms of Reference … During the consultation process, hui participants often regarded the overall aim of the Taskforce as synonymous with the broad aims of Whānau Ora, even though interpretations of Whānau Ora varied. (Taskforce on Whānau-Centred Initiatives, 2010, p. 28)

Two terms have come to be used largely synonymously:

- whānau-centred service delivery – which refers to service providers working with whole whānau to address challenges, rather than with individual clients in an atomised way; and

- whānau ora – which literally translates as “family wellbeing”.

Unsurprisingly, “whānau-centric service delivery” and “whānau ora” are often used inter-changeably in social services. Whānau Ora, the initiative, uses elements of both. This history has given rise to some confusion about what Whānau Ora is as a government initiative.

It is not uncommon to hear kaupapa Māori providers say “we all do whānau ora”, irrespective of whether they are formally part of Whānau Ora or not. The Commission understands this statement to mean that kaupapa Māori providers:

- are committed to achieving wellbeing for whānau;
- work with clients and their whānau, rather than with clients as individuals; and
- build on whānau strengths and aspirations.

Also inherent in the term whānau ora is the idea of the collective: for one family member to be well, the whole whānau, and ideally the hapū and iwi, must be well.

This commitment to working with whānau and doing what is necessary to achieve their wellbeing – while facing institutional constraints – set the scene for the introduction of Whānau Ora as an initiative in 2010.
Whānau Ora – points of difference

The goals of Whānau Ora (Box C.1) extend beyond the traditional purview of social services providers. Economic and cultural factors are as important as social factors to wellbeing. The Taskforce on Whānau-Centred Initiatives (2010) noted in their report:

The framework is built around whānau aspirational aims consistent with the Whānau Ora philosophy. It recognises the many variables that have the potential to bring benefits to whānau and is especially concerned with social, economic, cultural and collective benefits. (p. 7)

A development rather than a deficit approach

The difference between the “fixing people” focus of many social services contracts and the whānau development aims of Whānau Ora is important. “Fixing people” leads to a focus on narrowly defined “problems” and limits the range of legitimate solutions. It can reduce the ability of relevant parties to take preventive measures by requiring a relatively tight link between the intervention and the specified problem. This will tend to skew delivery away from addressing underlying causes. As the Taskforce on Whānau-Centred Initiatives (2010) noted:

Because sectoral approaches are inevitably problem-oriented there is less room to introduce a developmental approach that builds on existing strengths and fosters self-management. (p. 49)

A whānau-development approach, by way of contrast, gives social services providers much greater freedom to consider what action will improve the wellbeing of whānau, making it less likely that they will encounter crises in future. An essential part of Whānau Ora is whānau planning where members of the whānau, often with the help of a navigator, work out what they would like to do to improve their wellbeing. That may include taking advantage of education and training opportunities, getting a job or starting a business.

Cultural significance

The Taskforce highlighted the cultural dimension of improving Māori wellbeing:

It is critical that the cultural distinctiveness of whānau is recognised in the delivery of services. Despite varying levels of participation in te ao Māori, this is a central component of contemporary whānau experience. Services should be attuned to whānau cultural norms, whānau traditions and whānau heritage, while at the same time recognising the realities and opportunities in te ao Māori and in wider society. (Taskforce on Whānau-Centred Initiatives, 2010, p. 9)

Inquiry participants maintained that cultural considerations are also important for Pasifika who aspire to better outcomes for their people:

The Ministry’s community intelligence in working alongside at-risk youth has told us that as young vulnerable people are reunited with their cultures, their behaviours improve and capacity to engage in meaningful education, training and employment increases. The intrinsic link between Pacific peoples and engagement with the Pasifika dimension cannot be underestimated and going forward it will be essential to improving social services outcomes. (Ministry of Pacific Island Affairs, sub. 244, p. 3)

Whānau empowerment

Finding ways to empower Māori is critical to their improved wellbeing, as one participant submitted:

It is no wonder then that disparity of Māori wellbeing persists as whānau continue to be sidelined observers of decisions made about their lives. Ownership of goals and aspirations is fundamental to whānau reclaiming their obligations and responsibilities and therefore must be recognised in the future framework for more effective social services. (Te Roopu Waiora, sub. 97, p. 4)

The Taskforce on Whānau-Centred Initiatives (2010) concluded, based on the many hui it held around the country:

While from time to time outside assistance is needed by many whānau, a core feature of whānau ora is self-management and self-determination. Long-term dependency on outside agencies is not consistent with Whānau Ora; instead the aim is to enable whānau to assume responsibility for their own affairs. (p. 29)

Whānau Ora has sought to empower whānau through the whānau planning process and control over the actions they will take to achieve those outcomes. Whānau Ora aims to work with whānau to identify their
strengths and aspirations, to assist them to move to a level of wellbeing where they no longer require assistance from social service providers.

Previously, service provision has not always supported this level of self-management:

Sometimes self-management can be undermined by well-meaning agencies that assume leadership roles but without ensuring that whānau leadership is developed to the point that self-management becomes possible. Often whānau leadership is dismissed – sometimes because it is not visible to helping agencies, or presents a threat to them, or because leadership is frequently matriarchal and not necessarily linked to perceived status or obvious power. (Taskforce on Whānau-Centred Initiatives, 2010, p. 44)

**Linking purpose and institutional design features**

Since its introduction in 2010, the design of Whānau Ora has evolved reasonably rapidly. Many of its institutional features reflect its underlying philosophy. Table C.1 outlines the main purposes of Whānau Ora and the institutional features linked to those purposes.

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Institutional design feature</th>
</tr>
</thead>
<tbody>
<tr>
<td>To enable the delivery of whānau-centric services by existing kaupapa Māori and Pasifika providers</td>
<td>Whānau Ora partners that try to bring all the services a whānau might need under one umbrella</td>
</tr>
<tr>
<td>To resource whānau and family development more directly</td>
<td>Navigators who work directly with whānau on plans to help them access services and achieve their aspirations</td>
</tr>
<tr>
<td>To move control and decision making (mana whakahaere) over Whānau Ora further from government and closer to Māori and Pasifika civil society organisations</td>
<td>Three commissioning agencies tasked with achieving the six Whānau Ora outcomes</td>
</tr>
<tr>
<td>To broaden the range of Māori and Pasifika civil society organisations that can help whānau develop</td>
<td>Competitive processes run by commissioning agencies to purchase services and initiatives from providers, provider collectives, enterprises and other Whānau Ora partners</td>
</tr>
</tbody>
</table>

Section C.6 describes the objectives, funding arrangements and structures of Whānau Ora in more detail.

**C.3 Relevant history**

There is a long history of Māori social development initiatives. The more recent antecedents of Whānau Ora, such as Māori Welfare Officers and Mātua Whangai, stemmed from that history of taking a development approach to meeting Māori needs. For example, speaking about the role of Māori Welfare Officers in 1973, the then Minister of Māori Affairs Hon. Matiu Rata stated:

> [Y]our work will continue to be, as in the past, to encourage and assist in matters of housing, education, vocational training, trade training, health and physical welfare, law and order — to name but a few facets. Undoubtedly, this work will continue for some years yet, but the prime role of officers is to work with groups on community development in an effort to prevent casework arising. (Hon Matiu Rata quoted in Stevenson, 1973, p. 14)

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1 This programme to strengthen tribal networks and assist with placing children within whānau was introduced by the Department of Social Welfare during the 1980s. It represented a concerted attempt to assist Māori to develop the capability to take responsibility for permanency planning for children in the care of the State (Garlick, 2012).
Responses to Māori housing needs originated in the Native Affairs Loans between 1929 and 1945, which were part of land development schemes (OAG, 2011). Later, Māori Affairs housing loans were linked to the community development work of Māori Welfare Officers.

Whānau Ora was also influenced by previous attempts to reform delivery of social services to Māori, notably Pūao te ata tū (Box C.2)

**Box C.2  Pūao te ata tū (Daybreak)**

_Pūao te ata tū_ was the report to the Minister of Social Welfare, Hon Ann Hercus, of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare. The Committee was led by John Rangihau of Tūhoe and a former senior public servant. The Committee concluded:

At the heart of the issue is a profound misunderstanding or ignorance of the place of the child in Māori society and its relationship with whānau, hapū, iwi structures. While we are recommending significant changes to the policies and practices of Government agencies, with particular reference to giving the Māori community more responsibility for the allocation and monitoring of resources, these will be to no avail unless that community in turn picks up the challenges and significantly strengthens its tribal networks. (The Māori Perspective Advisory Committee, 1986, p. 7)

Its recommendations were far-reaching: “[t]he committee found that problems in the relationship between the state and Māori communities were ‘of crisis proportions’ and recommended a bicultural approach to policy, programmes and services” (Garlick, 2012, p. 114). The report recommended specific amendments to the Social Security Act and the Children and Young Persons Act to better acknowledge Māori beliefs and cultural practices. It identified issues with staff training in Māori cultural perspectives (Māoritanga), equal employment opportunities within the Department and institutional racism.

The then Minister accepted the report in full and the Department began to make the recommended changes. In 1989 Parliament passed the Children, Young Persons, and Their Families Act, which incorporated the principles of whānaungatanga and whakapapa.²

However, these principles and the process of devolution recommended in the report proved difficult to operationalise and 10 years later progress had all but halted. In 1999 “the Department acknowledged that ‘the target of contracting with all 54 priority iwi would not be met, ‘new models’ of service delivery for Māori [had] not emerged, and frameworks for measuring outcomes were yet to be developed” (Garlick, 2012, p. 184).

Yet, _Pūao te ata tū_ remains particularly influential in shaping contemporary views on how Māori should be involved in managing and delivering social services, not least because of the extensive hui process the Committee undertook to arrive at its report and the mana of those who led this work.

Throughout this inquiry Māori participants commented that the issues with, and answers to, the delivery of social services were contained in _Pūao te ata tū_, and that the continuing disadvantage that Māori experience arises from a failure to implement fully the recommendations of that report. _Pūao te ata tū_ included the concept of devolution. Regional committees were set up, with strong Māori representation on them so that Māori could be involved in decision making about children and young people who came to the Department’s attention.

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² These principles meant that whānau, hapū and iwi should be involved with all statutory dealings with children under the Act. In practice it was intended that organisations approved as either an Iwi Authority or a Cultural Authority could exercise a range of powers and duties, including custody or guardianship. These terms were amended in 1994: “Iwi Authority” was replaced with “Iwi Social Service” and “Cultural Authority” was replaced with “Cultural Social Service” (Garlick, 2012).
Whānau Ora seeks to empower whānau and Māori communities. In phase two, Māori are exercising increased control (or mana whakahaere) through the Whānau Ora commissioning agencies. This is strengthening Whānau Ora’s development focus.

C.4 The Treaty context for Whānau Ora

The Treaty of Waitangi sets an important context for the commissioning, design and delivery of social services and wellbeing – and for Whānau Ora (Chapter 2). The Taskforce summed this up:

> Te Tiriti o Waitangi, the Treaty of Waitangi, remains a key instrument to guide national development. It affirms the unique status of Māori as tangata whenua, the indigenous population, while simultaneously conferring, through Government, the rights of citizenship upon all New Zealanders (Taskforce on Whānau-Centred Initiatives, 2010, p. 6).

The Treaty gave the Crown a right of governance, kawanatanga, under Article One. Under Article Two, the Crown promised to uphold the authority, rangatiratanga, of the tribes, which they held over their lands and tāonga. The Crown promised to Māori the benefits of royal protection and full citizenship under Article Three (Waitangi Tribunal, 2015).

Treaty language is important in shaping the obligations of the Crown as well as understanding the aspirations and expectations of Māori as participants in the social services systems. In addition, a number of collective duties arise from tikanga that Māori communities wish to be able to express effectively through social services. These are whānaungatanga, manaakitanga and rangatiratanga. The Treaty and its principles are widely recognised both inside and outside government as forming the basis of the enduring relationship between Treaty partners, Māori and the Crown (Chapter 13). In the context of social services, three Treaty principles stand out – partnership, active protection of Māori interests and active protection of Māori rangatiratanga.

In social services, the relationship between the Crown and Māori is particularly important because of the major funding and delivery role that Government has in health, education and wider social services. Equally, Māori are looking for opportunities to participate actively in this process. Both partners are motivated by a desire to lift the overall wellbeing of Māori. “Obligations [of the Crown] include consultation ‘on truly major issues’ (New Zealand Māori Council v Attorney-General, 1989) and can extend to ‘active steps to protect Māori interests’ (Ngāi Tahu Māori Trust Board v Director-General of Conservation, 1995)” (NZPC, 2014).

Inquiry participants submitted that, under the Treaty, the Crown has duties of active protection of Māori interests and protection of tino rangatiratanga:

> The Crown has an on-going obligation and forward-looking duty to support iwi interests in their own social and economic development under the Principle of Active Protection of Māori Interests and protection of tino rangatiratanga in Article Two of the Treaty. (Te Rūnanga o Ngāi Tahu, sub. DR162, p. 3)

Failure to provide this active protection, leading to loss of land, other resources and culture is the basis for much of the redress through the Treaty settlement process. But active protection is also a forward-looking duty, and may include Māori interests in their own development (both social and economic). While settlements provide a basis for social and economic development, they do not affect the rights of Māori to access government-provided or government-funded social services on the same basis as other New Zealand citizens.

As iwi and other structures within Māoridom have increased opportunities to lead their own economic and social development, boundary issues can arise between the role of iwi and the Crown. In particular, enabling greater rangatiratanga within social services inherently requires the Crown to step back from “deciding for” and often “doing for” Māori. Yet if the Crown steps back too far, or in the wrong way, then it risks inappropriately leaving iwi to provide services that Māori, as citizens, are entitled to receive from the Crown.

Social services for Māori that are publicly funded and/or based in the institutions of government will reflect a mixture of both kawanatanga and rangatiratanga (consistent with the partnership obligations between Māori and the Crown set out in the Treaty). What is important here is not so much whether any given activity is a
More effective social services

kawanatanga or rangatiratanga responsibility, but instead who should hold mana whakahaere (translated variously as the power to manage, governance or authority) to achieve the objectives of the parties of the Treaty.

Creating opportunities for Māori groups to exercise mana whakahaere in delivering social services has the potential to both improve outcomes and lead to more effective exercise of rangatiratanga. More devolution of commissioning decisions to Māori would help create such opportunities. The Whānau Ora commissioning agencies are one example of devolution.

C.5 The Pasifika dimension

In 2013 Te Puni Kōkiri (TPK) convened an external group to provide advice on ways to strengthen the design and implementation of Whānau Ora for Pasifika families and communities. The advisory group recommended that an organisation be established to develop the strategic direction for Pasifika Whānau Ora and undertake commissioning, and research and monitoring for improved outcomes. This work led to the establishment of a Pasifika commissioning agency, Pasifika Futures, in 2014.

Inquiry participants pointed out that the social and economic outcomes for Pasifika are generally poor:

While there have been improvements in certain areas, an overview of social and economic indicators suggests that when compared to non-Pacific, non-Māori, Pacific people generally have:

- lower living standards
- incomes well below the national average, and subsequently fewer assets and higher debt
- lower educational outcomes
- higher unemployment rates
- low self-employment and business ownership
- low home ownership
- larger households, often with multiple generations living in the same home
- poorer health (Ministry of Pacific Island Affairs, sub. DR244, p. 2).

The Wise Group observed:

If whole organisations and systems are connecting culture and care for Pacific people, we would see better access and service utilisation rates, earlier access of services, a reduction in ‘did not attend’ rates, more satisfaction with services and, ultimately, better outcomes. (Wise Group, sub. 41, p. 26)

Pasifika providers reported similar challenges to those that Whānau Ora is seeking to overcome. These include needing to deliver holistic services not reflected in single service contracts (Tangata o le Moana network, sub. 93), and the challenges of working across funder boundaries and commissioning practices that restrict innovation by Pasifika providers (Wise Group, sub. 41).

Some also claim that government has a special relationship with and responsibilities to Pasifika peoples. A study carried out by the Ministry of Justice (2000) found that although New Zealand does have a special relationship with Pasifika peoples, its responsibilities arise from principles of good government rather than specific legal or constitutional requirements (Box C.3)

Box C.3 What is the nature of the relationship with Pasifika peoples?

The Wise Group submitted:

Indigenous Pasifika populations need to be acknowledged. Pasifika have been part of our New Zealand identity for more than 100 years, with government to government treaties, agreements, obligations and legal commitments. Cook Islands, Tokelau, and Niue are administered under New Zealand, are New Zealand citizens, and utilise New Zealand social services. (sub. 41, pp. 6–7)
Appendix C | Case study: Whānau Ora

Because of the alignment between family-centric service delivery and a culturally appropriate response to social issues faced by Pasifika peoples, there is a clear case for a Whānau Ora type response for Pasifika peoples.

C.6 The two phases of Whānau Ora

Whānau Ora consists of two distinct but overlapping phases. This section describes the objectives, funding, and structure of Whānau Ora in each phase.

- **Phase one (2010 to 2015):** The Government initially set up two Whānau Ora funding streams to be administered by TPK: one to strengthen provider capability to deliver whānau-centred services by establishing provider collectives and a second to assist whānau to develop and act on whānau plans. In 2011 the first navigators were deployed into provider collectives to carry out whānau planning and provide direct support to whānau. Regional leadership groups were established to provide direction and coordination within their regions.

- **Phase two (from 2013 to the present):** In 2013 the Government decided to establish three not-for-profit commissioning agencies to administer Whānau Ora, including one for Pasifika. TPK ran a tender process to select these agencies, appointing Te Pou Matakana (TPM) for the North Island, Te Pūtahitanga o Te Waipounamu for the South Island and Pasifika Futures. TPK contracted the three new entities from 1 July 2014 through three-year Outcomes Agreements, which may be extended for a further two years.

**Phase one**

In Phase One TPK held contracts with the provider collectives for the development of Programmes of Action to achieve whānau-centred service delivery. Funding for delivery of services continued to be held by the mainstream agencies (such as the Ministries of Health, Justice, and Social Development). In addition, TPK administered the WIIE fund. Whānau could access this fund through TPK regional offices or through the provider collectives. Providers who were not part of a collective could also provide services from the WIIE fund if TPK brought them in to assist a whānau that had applied through the regional office.

In a 2000 study into the nature of New Zealand’s relationship with Pasifika peoples, the Ministry of Justice noted that that the following facts made the relationship special:

- the historical relationships between New Zealand and Pacific nations, that in many instances were deliberately fostered by the early colonial aspirations of the New Zealand Government;
- the high proportions of Pacific people in New Zealand;
- the geographic relationships and proximity between New Zealand and the Pacific homelands;
- the fact that New Zealand is host to the majority, and in some instances almost all, of the nationals of some Pacific nations;
- the constitutional links that continue to exist between New Zealand and a number of Pacific nations;
- New Zealand’s identity in the twenty-first century as a Pacific nation. (Ministry of Justice, 2000, p. 54)

The Ministry of Justice concluded that:

These intersecting factors mean that the place of Pacific people, both individually and collectively, in New Zealand society, is unique, and that New Zealand has particular moral responsibilities vis a vis its Pacific people. The special relationship is not, however, a hard core legal obligation, but rather a part of the Government’s responsibility to act reasonably and appropriately towards the individuals and groups whom it governs and with whom it interacts, and its recognition of Pacific people as significant groups in this respect. (p. 54)
Figure C.1 outlines the structure and funding lines of phase one.

**Figure C.1**  Phase one wiring diagram of Whānau Ora

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**Provider collectives**

TPK ran a competitive selection process to collectivise providers that would facilitate the delivery of whānau-centric services. This was seen as an important step towards enabling providers to work holistically with whānau, rather than delivering individual services to individual whānau members. Integrated contracts were supposed to provide flexibility to collectives in how they would deliver services. Collectives were able to reduce fragmentation of services to some extent by pooling resources and expertise. They were more easily able to refer whānau from one provider to another within the same collective where that was appropriate. The selected provider collectives received capability funding to develop a Programme of Action for delivering whānau-centric services.

The Taskforce envisaged that the provider collectives would receive mainstream funding to support the more flexible approach under Whānau Ora delivery. These “integrated contracts” failed to live up to the expectations of many.

At the end of phase one, there were 34 provider collectives (with 180 providers). The collectives primarily provided health and social services and, to a lesser extent, education, justice and housing services.

**Regional leadership groups**

TPK established 10 regional leadership groups to assess the initial proposals from potential provider collectives and to provide direction and foster communication and coordination within their regions. The groups had between four and seven community members on them and three officials – one each from TPK, Ministry of Social Development (MSD) and Ministry of Health (MoH). The regional leadership groups made recommendations on the proposals to the Governance Group, who made the final selections (TPK, 2011).
The use of regional leadership groups in this fashion was reminiscent of similar groups recommended by Pūao te atā tū and set up by the Department of Social Welfare in 1987, but then disestablished in the early 1990s (Garlic, 2012).

**Whānau Integration, Innovation, and Engagement fund**

The WIIE fund paid up to $5 000 of the expenses to develop a whānau plan and up to $20 000 for activities to implement it. No money was paid into the bank accounts of individuals – it was required to go into the accounts of a legal entity (such as a trust or charitable organisation). A developmental evaluation of phase one noted that whānau had five “pathways” to access the WIIE fund.

- Whānau could self-refer and largely self-manage their application.
- Whānau could self-refer and seek assistance from TPK to apply to the WIIE fund.
- Whānau could make an enquiry to TPK, who would refer them to an organisation that could support the whānau to apply. This happened where the whānau required more intensive support to apply than TPK could provide. These organisations were typically “category two organisations” – such as social services providers, marae, family trusts – that were not part of a provider collective.
- A provider collective approached whānau that it believed would benefit from the whānau planning process (Wehipeihana, 2012).

Some provider collectives were allocated funding from the WIIE fund to carry out a certain number of plans with whānau. These were reported direct to TPK Head Office, rather than through the regional offices.

**Navigators**

Whānau Ora navigators were introduced part way into the implementation of phase one. Navigators work with whānau to help them identify their goals, plan how they will achieve them, and assist them to access services. The Minister for Whānau Ora described their purpose as:

> [T]o increase the capacity of whānau and families to do more for themselves, to become self-reliant, and to make their own decisions for their future. (2014a)

Navigators are discussed further below.

**Governance group**

The Whānau Ora Governance Group comprised three members of the original Whānau Ora Taskforce, and the chief executives of TPK, MSD and MoH. Its role was to advise the Minister for Whānau Ora and to “provide leadership and co-ordination across government agencies and stakeholders” (TPK, n.d., p. 3).

**Whānau Ora at the end of phase one**

By the end of phase one, 8 916 whānau were receiving whānau-centred services, 4 138 whānau were working with navigators, and numerous stories of whānau achieving greater wellbeing had been collected (Minister for Whānau Ora, 2014b).

But achieving integrated contracting had proven fraught. The Commission learned from participants that, in practice, the integrated contracts have not benefited Whānau Ora providers. In essence, the old contract requirements were simply appended as schedules to the new “integrated” contract. This hindered, or at least did not help, flexibility and change in service delivery.

The hoped-for reduction in compliance costs had not eventuated, and individual providers within collectives were still accountable to their funding agencies for delivery of individual services and contracts.

TPK funded navigators, as well as coordination and analytical positions, through Programme of Action contracts with provider collectives, to assist with the changes in systems and processes needed to implement Whānau Ora. Yet most of these contracts ended on 30 June 2015, with some residual contracts due to end on 30 June 2016. This raises questions about the sustainability of services funded in this way.
Achieving the vision of Whānau Ora for phase one required significant changes in practice, both by providers (through collectivisation) and for government agencies (in terms of creating more flexibility through their contracts). In practice, government agencies appear to have lagged.

**Phase two**

The Government decided to introduce new arrangements for Whānau Ora in 2013. This was due in part to concerns that the focus on building the capability of providers and provider collectives was detracting from a focus on building the capability of whānau to transform their lives. The then Minister for Whānau Ora articulated these concerns:

> I guess my determination... is to see that those agencies do not get focused on organisations [but] that they do get focused on making the changes for families, and that the resources should get as close to family as possible if we want to make the difference.

> I fixed a problem just before I finished. That was to encourage people to understand that Whānau Ora does not need to be delivered by a service provider – that there are other organisations, family collectives, family trusts and marae who already deal with people in family settings who could be doing really important jobs. (Hon Tariana Turia, quoted in Bootham, 2014)

The move to phase two involved a shift in focus for Whānau Ora, and a change in some of the structures. Figure C.2 outlines the new structure of Whānau Ora.

**Figure C.2  Phase two wiring diagram of Whānau Ora**

Changes to funding arrangements and governance

The Government decided to establish three not-for-profit commissioning agencies and these were set up through a competitive process in 2014. Each has an independent board. The WIIE fund was disestablished and all funds not under contract were transferred to the funding stream for the commissioning agencies. With the disestablishment of the WIIE fund, the role of TPK regional offices was limited to providing...
information on Whānau Ora and directing whānau to available services. Regional Leadership Groups were also disestablished.

The Whānau Ora Governance Group was disestablished and replaced by the Whānau Ora Partnership Group. The role of the Partnership Group is somewhat different to the role of its predecessor:

The Whānau Ora Partnership Group is a forum of ministerial and iwi representatives. The group determines the Whānau Ora outcomes that Commissioning Agencies need to achieve and identifies opportunities that the Crown and iwi can contribute to, that support the aims and aspirations of whānau, hapū and iwi, in relation to Whānau Ora. (Minister of Finance & Minister for Whānau Ora, 2014)

Navigator funding continued through TPK contracts until 30 June 2015 (though a small number of contracts extended beyond that date). The Government decided to continue to fund navigators from 1 July 2015 and announced an additional $48.9 million over four years in May 2015 for this purpose. The funding, held by the commissioning agencies, is sufficient to cover a workforce of about 230 navigators. However, the proximity of this decision to the end of the financial year created uncertainty about existing arrangements. This caused anxiety to providers whom the Commission visited in June 2015. No doubt the navigators were also made anxious by the uncertainty of their positions. As at August 2015 the commissioning agencies were engaging with Whānau Ora partners and providers regarding the provision of navigator services to target communities.

Commissioning agencies continue to engage provider collectives in a variety of ways.

Mainstream agencies such as MSD and MoH continue to fund providers to deliver services. Providers submitted that this mainstream funding is not well-aligned to Whānau Ora.

Table C.2 sets out the main features of the transition to phase two of Whānau Ora.

**Table C.2** Change of focus between phase one and phase two of Whānau Ora

<table>
<thead>
<tr>
<th>Phase one</th>
<th>Phase two</th>
</tr>
</thead>
<tbody>
<tr>
<td>Development of service provider capability to achieve whānau-centred delivery</td>
<td>Develop whānau and family capability</td>
</tr>
<tr>
<td>Investment in service providers directly on behalf of the Minister by Te Puni Kōkiri</td>
<td>Devolution of responsibility for achieving the six Whānau Ora outcomes to three not-for-profit commissioning agencies</td>
</tr>
<tr>
<td>Investment in a network of 180 primary health and social services providers across 34 provider collectives</td>
<td>Commissioning agencies contracted to Te Puni Kōkiri under an outcomes agreement</td>
</tr>
<tr>
<td>Navigators introduced to work direct with whānau</td>
<td>Navigators retained</td>
</tr>
</tbody>
</table>


**Whānau Ora today**

Whānau Ora has retained several features of phase one architecture and integrated them into phase two. Responsibility for navigators now lies with commissioning agencies. These agencies have retained whānau planning, a form of provider collectives and added new approaches.

**Commissioning agencies**

Each of the three commissioning agencies has adopted a different approach to commissioning. All three approaches are experimental in nature, to some extent. TPM is strongly influenced by its backbone partner Te Whānau o Waipareira and is able to leverage off its administrative and service delivery capability. Pasifika Futures has built on 20 years of the Pasifika Medical Association delivering health services, which won the tender to establish the new commissioning agency. Te Pūtahitanga’s investment strategy reflects the values and aspirations of its governing board, formed by the nine iwi which jointly own the commissioning agency.
The commissioning agencies bring a range of expertise and capability to Whānau Ora that was not previously available:

In the Whānau Ora context a commissioning approach purchases the expertise, networks and knowledge of NGOs, which act as brokers to match the needs and aspirations of families and whānau with initiatives that will assist them to increase their capability. (Minister for Whānau Ora, 2013, p. 6)

Te Pūtahitanga and Pasifika Futures are working on supporting, amongst other activities, whānau enterprise and reducing high levels of debt to third-tier lenders, colloquially known as “loan sharks”. TPM has adopted a collective impact approach, recognising that, to support whānau success, a response may be required from multiple providers across such sectors as education, justice and housing (Chapter 3). Under such approaches, the commissioning agencies support whānau wellbeing from a different angle than the mainstream delivery of social services (Figure C.3).

**Figure C.3** Commissioning agencies can draw on a wider range of supports for whānau

![Diagram](image-url)
Table C.3 summarises the different approaches taken by the commissioning agencies.

<table>
<thead>
<tr>
<th>Te Pou Matakana (TPM)</th>
<th>Pasifika Futures (PF)</th>
<th>Te Pūtahitanga o Te Waipounamu (TPoTW)</th>
</tr>
</thead>
</table>
| TPM has three streams of activity: collective impact, Whānau Direct (small grants up to $1 000) and navigators. Under Collective Impact, TPM established 13 Whānau Ora Partnerships across the North Island with more than 80 Whānau Ora partners to deliver initiatives. These are in education, housing, health, financial literacy and financial security through employment, and te ao Māori. TPM plans to create regional hubs with its 13 partners, bringing all three streams together for delivery. | PF has three streams of activity: navigators, an innovation programme and a small grants programme. PF has a strong focus on evidence. It has an outcomes framework derived from consultation with 600 Pasifika families. PF also works in non-traditional areas such as economic wellbeing through debt reduction. | TPoTW has four priorities for investment:  
• enterprise and job creation;  
• education and leadership;  
• whānau wellbeing; and  
• inspiration and catalysts. TPoTW has other programmes. For example, it is planning to set up a low-cost GP clinic offering wider social services. TPoTW funds navigators to work with whānau. |

A feature of TPM is its ability to draw on back-office support of Te Whānau o Waipareira, giving it access to ready administrative and operational capabilities.

Participants told the Commission that they were impressed by the sophistication that the commissioning agencies were bringing to needs identification, purchasing strategies and performance measurement. The agencies have significant reach into their communities, giving them the ability to respond to emerging needs relatively quickly. The organisational cultures of the commissioning agencies are different from the culture within government agencies, particularly regarding their attitudes to:

• what can be done;
• how soon it can be done;
• how it can be done; and
• how measurable the outcomes are.

Provider collectives

Provider collectives are adapting to phase two arrangements. The Commission heard of one case where a provider collective was planning to merge formally into one legal entity; another one was expecting to de-collectivise; and yet another was actively discussing its future in response to the end of its phase one contracts. However, the situation is highly dynamic; and much will depend on commissioning agencies approaches.

TPM has contracted with 13 “Whānau Ora Partners” and is planning to develop regional hubs with these partners, a number of which are provider collectives:

TPM proposes to set up regional WOPs or Whānau Ora Partnerships across the North Island to deliver Collective Impact, Kaiārahi [navigators] and Whānau Direct …

WOPs role and responsibilities are to:

• Deliver TPM’s commissioned products and services for priority whānau; and
• Report [on all activities] … (TPM, pers. comm., 2 September 2015)
C.7 Performance management and accountability arrangements

Phase one

TPK developed an outcomes framework for Whānau Ora based on the outcome goals and principles that the Taskforce identified for the purposes of performance reporting and accountability (Box C.1). TPK used a mix of reporting mechanisms to report on goal achievement. These include:

- whānau stories;
- action research;
- surveys of whānau on their goal progression and experience of Whānau Ora; and
- reporting by provider collectives.

This reporting and measurement effort is in addition to reporting by those providers to their respective mainstream funders, such as District Health Boards, MoH, MSD and the Ministry of Justice. MoH does further analysis and reporting on the performance of general practices in Whānau Ora collectives.

The Controller and Auditor-General has recently reported on phase one of Whānau Ora. The report applauded the initiative, acknowledging it as “an example of innovation and new thinking in service delivery” (OAG, 2015, p. 4). Yet it was critical of some features of its implementation, including the inability of all agencies involved to provide a consistent explanation of its aims – which led to unclear reporting. The Office of the Auditor-General (OAG) report also commented on the inflexibility demonstrated by the mainstream agencies to adapt their contracting models to support Whānau Ora:

> When we did our work, the Ministry of Health and Social Development had no plans to change to a funding model that would take advantage of the effort and $68 million paid to providers to help them shift to whānau-centred service delivery”. (p. 5)

The Commission does not intend to go over the same ground as OAG (2015). Yet several comments are germane, based on the Commission’s engagement with participants and the wider analysis in this inquiry.

- TPK was an early adopter of an outcomes approach to contracting (Chapter 12).
- There was no opportunity or time to develop sufficient intervention logic to support the high-level outcomes sought. A further challenge was aggregating information on outcomes that whānau specified for themselves. Together, these factors meant that it has taken time for Whānau Ora to begin measuring outcomes effectively.
- Outcomes contracting is still in its early development and few government agencies have adopted it, let alone proven its success (Chapter 12).
- Outcomes contracting does not work well for people with multiple, complex needs (Chapter 12).
- The top-down approach using a contracting-out model has its limitations (Chapter 6).
- Whānau Ora was designed to receive support through mainstream government agencies, but this has not been readily available. Further, contracts with mainstream government agencies were output-based which put them at odds with the Whānau Ora outcomes approach.
- No incentives were put in place for mainstream agencies to change their approach to align with Whānau Ora, and they appear to have made little attempt to do so.
- The delivery of Whānau Ora relied to some extent on the intrinsic motivation of providers and collectives to achieve change.
The evolving nature of Whānau Ora made bedding in a performance management approach particularly challenging. The Minister noted in her report to Parliament:

> Since its inception Whānau Ora has been a continually evolving approach. During the four years that Whānau Ora has been operating, we have moved from a focus on building whānau-centred social services and engaging whānau and families to a focus on building whānau and family capability to be self-managing. I expect that the focus of Whānau Ora will continue to evolve over time to suit the changing circumstances of whānau and families (Minister of Whānau Ora, 2014 (b)).

MoH is developing a Whānau Ora IT system to collect and report on relevant data. Initially, MoH planned that provider collectives would provide data to it for this purpose. These plans need to adjust to the changing structure of Whānau Ora in Phase Two.

TPK has conducted an analysis of the phase one Whānau Ora research and monitoring results (TPK, 2015). The report details findings from the research and monitoring programmes undertaken during the first four years. Overall it provides evidence that whānau-centred approaches delivered by Whānau Ora are effective ways for improving whānau wellbeing.

**Phase two**

New accountability arrangements were required with the establishment of commissioning agencies. TPK developed several new instruments including an annual letter of expectations, outcomes agreements with a term of three years, annual investment plans and quarterly reports. Building on the research and monitoring results for phase one, TPK is also developing a measurement framework. Figure C.4 sets out the accountability flows for phase two.

**Figure C.4   Whānau Ora – Phase two accountability**
Letters of expectation are a standard instrument for arm’s length agencies such as Crown entities. This is likely to be the first time they were used with not-for-profit organisations.

The contract with each commissioning agencies is for three years, with the possibility of a two-year extension. The commissioning agencies must submit annual investment plans, detailing the programmes that the agencies will fund, the activities within those programmes, the results sought and their Key Performance Indicators (KPIs). The Commission understands that those plans have a mix of output- and outcome-based activities, and include incentive payments. In this way, the plans are a step towards contracting for outcomes. (Chapter 12 discusses contracting for outcomes.)

The incentive payment is a form of bonus for successful delivery. That incentive payment could be for outcomes, but in the establishment years the payment may be made on the basis of outputs. TPK’s investment plan guidance notes an intention to move the incentive payment to an outcomes basis across the term of the three-year contract.

Commissioning agencies also produce annual reports; the first reports are due in October 2015.

C.8 The potential of Whānau Ora to improve Māori and Pasifika wellbeing

This section comments on the potential of Whānau Ora to improve outcomes for Māori and Pasifika. It draws on Chapter 10 of the inquiry report, which describes what a model for good integrated services might look like.

The importance of devolution

The Treaty of Waitangi and its principles shape how Māori think about social services (section C.4), as does the history of social services delivery (section C.3). Inquiry participants expressed the view that Māori need to be involved in decision-making about their own wellbeing:

A collaborative partnership between iwi, hapū, whānau and the Crown should invest control and decision making (mana whakahaere) over the transformational approach of Whānau Ora further from government and close to Māori organisations. (Te Rūnanga o Ngāi Tahu, sub. 162, p. 4)

Dame Tariana Turia reflected:

I was listening to the kōrero this morning about Pūao-te-ata-tū from Bill and Kingi and Maatua Whangai – programmes the Government commandeered and never saw through in a real sense.

It was a framework for whānau, hapū and iwi to restore their rights to determine their future. I suppose in a way I am sad that it took 26 years to be able to move forward.

Whānau Ora in essence, is about taking back control and responsibility. (Minister for Whānau Ora, 2014c)

A number of participants referred the Commission to earlier examples of devolution of social services, such as occurred during the 1990s and early 2000s under the Regional Health Authorities and the Health Funding Authority. These approaches led to innovation and empowerment of Māori groups and users of social services who have a high interest in improved wellbeing for their people. A regression to top-down approaches to social services delivery has to some extent reversed the gains of those years:

We have long and direct experience to a forerunner of the Whānau Ora commissioning model, known as Māori Co-Purchasing Organisations (MAPO) which operated in the northern region from 1995 to 2010. What we contribute to the inquiry is a critique based on first-hand experience of the successes and challenges of independent Māori-led organisations working in partnership with government funders to maximise health and economic benefits to communities, whānau and families. (Te Tai Tokerau Whānau Ora Collective, sub. DR227, p. 1)

Empowering whānau to be more self-determining has been widely identified as critical for making progress on the disparity between Māori and other populations. For example, Sir Mason Durie’s Te Pae Mahutonga model of public health promotion noted two important pre-requisites for effectiveness – ngā manukura (leadership) and mana whakahaere (the power to manage):
No matter how dedicated and expertly delivered, health promotional programmes will make little
headway if they operate in a legislative and policy environment which is the antithesis of health, or if
programmes are imposed with little sense of community ownership or control. Good health cannot be
prescribed. Communities – whether they be based on hapū, marae, iwi, whānau or place of residence –
must ultimately be able to demonstrate a level of autonomy and self-determination in promoting their
own health. (Durie, 1999, p. 5)

The development aspirations of Māori, their desire to improve the outcomes of whānau, and the tikanga
around manaakitanga, whānaungatanga and rangatiratanga mean that iwi and other Māori groups are
obvious candidates for active participation in devolved arrangements, whether as commissioning agencies
or as providers.

Whānau Ora commissioning agencies are an example of devolution to communities of interest; that is,
devolution to people with a shared interest and identity that can be wider than living in the same place
(Chapter 5).

Service integration as an integral part of Whānau Ora

Phase two design of Whānau Ora particularly emphasised the importance of integrated services:

Whānau Ora places whānau and families at the centre of service delivery, requiring the integration of
services like health, education and social services. (Minister for Finance & Minister for Whānau Ora, 2014)

Iwi leaders also highlighted the importance of integration:

We are of the view that the defining point of the Whānau Ora approach is an integrated and seamless
coordination centred on whānau. (Iwi Chairs for the Whānau Ora Partnership Group, sub. DR168, p. 3)

Many whānau have more than one or two issues they wish to address. An often called-for response is
integration of services at the point of delivery. Essential characteristics of effective integration initiatives
include (Chapter 10):

- decision-making close to clients (ie, by those with information about their specific and evolving
circumstances);
- capability to engage with the family/whānau and their wider social context;
- a navigator to prioritise and sequence services;
- a dedicated budget that is adequate to cover the range of services needed; and local decision rights
over the use of that budget;
- allocation of resources to where they have the most effect, and information to support allocation
decisions;
- devolution (so that close ministerial and departmental control does not lead to over-reaction to
individual cases, or to over-specification of services);
- sufficient contestability to reward good providers and replace those that are not delivering;
- experimentation and learning; and
- accountability for outcomes.

The next section examines which of these essential characteristics Whānau Ora already demonstrates and
where it could be strengthened.

Whānau Ora as a devolved architecture to provide integrated services

Whānau Ora has a number of the characteristics for a model to provide effective, integrated services for
families with multiple, complex needs and aspirations. For example, navigators or kaiārahi (sometimes also
called kaitorotoro) are a key feature of Whānau Ora:
Kaiārahi are practitioners who work with whānau and families to identify their needs and aspirations, support their participation in education, primary health and employment, and link and coordinate access to specialist services. Once whānau are past immediate crisis, kaiārahi also work with whānau to build their capability to be self-managing in a range of areas. (TPM, pers. comm., 2 September 2015)

Navigators are not unique to Whānau Ora. Box 10.2 describes a generic navigator service that, among other things, can develop a relationship of trust with the family and understand their history.

As well as navigators, Whānau Ora has several other characteristics necessary for an integrated services model. These are decision-making close to the client/families, engaging with the whānau and their wider social context, devolution away from tight ministerial and departmental control, sufficient contestability to reward good providers, and experimentation and learning.

Other essential integration characteristics include a dedicated budget based on assessment of what is needed, local decision rights over the use of that budget, and effective resource allocation to where resources can have the most effect.

Several experienced social services providers told the Commission that Whānau Ora provided the flexibility to work with families in ways that met their needs. Further, they would like to have more dedicated funding and flexibility to deliver to more families. Te Taiwhenua o Heretaunga, a Hawkes Bay provider, described the need for a system of effective integration that extended the Whānau Ora approach:

The Centralised Hub approach can build provider networks that extend beyond the role of TToH as a provider. Working with our whānau ora collective, Takitimu Ora, we have started to extend the reach of services for our clients. This is only possible due to our willingness to use our existing resources, some support from Te Pou Matakana (North Island Whānau Ora Commissioning Agency) to support this development. The lack of funding support to organise and lead systems at a local level contributes to ongoing fragmentation and reduces the opportunity. (Te Taiwhenua o Heretaunga, sub. DR189, p. 3)

Another provider described Whānau Ora:

…many Māori families have “forgotten how to dream”. Members of some of these dispossessed families have never even had a piece of ID. No ID means no bank accounts, no driver’s licence, no job, no benefits, and no connection with the system. Basic needs can be assisted by Whānau Ora, but it’s flexible enough to allow for more: it might pay for someone to sit a driver’s licence, for example, which will open a whole new door on their life. (de Boni, 2015)

Participants also told the Commission that greater involvement in Whānau Ora by mainstream government agencies was essential if Whānau Ora was to succeed:

At its end we would hope that Ministers would also endorse and embrace an intergovernmental approach to Whānau Ora…The Minister of Social Housing could be promoting [a] Warrant of Fitness as creating healthy lifestyle opportunities for whānau. The Minister for Conservation could be promoting relationships between protection of our environment and contribution to mental health. The Minister for Economic Development could be championing whānau base entrepreneurship. (Iwi Chairs for the Whānau Ora Partnership Group, sub. DR168, p. 3)

We are also disappointed that across government agencies, other than Te Puni Kōkiri, it would not yet appear that the transformational potential of Whānau Ora is being supported in cross-sectoral investment. (Te Pūtahitanga, sub. DR152, p. 4)

The Taskforce on Whānau-Centred Initiatives (2010) noted that success for Whānau Ora would require strong commitment across government agencies. Currently, the level of commitment appears to be lukewarm in some agencies (Flavell, 2014; OAG, 2015). Further, some government agencies have programmes in place that overlap with Whānau Ora, such as Social Sector Trials and Year 9 Plus (Box 10.3) in terms of who they are targeting. A future challenge will be to deliver services more effectively for defined populations. This will require rationalising programmes that have similar aspirations for overlapping, but poorly-defined, populations.

Chapter 9 discusses the need for a decision-making framework that prioritises investments to achieve the best outcomes and Chapter 10 discusses the need for good accountability mechanisms. The annual investment plans of commissioning agencies may go some way to meeting the first of these requirements.
Greater transparency of the new accountability arrangements put in place in phase two (Figure C.4) would improve understanding of and credibility of Whānau Ora.

Conclusion
The Commission finds that Whānau Ora embodies concepts important to Māori and holds much promise to tackle long-standing issues for improving Māori wellbeing and mana whakahaere. It has many of the characteristics required for a devolved model to promote integrated services for families with multiple, complex needs and aspirations. Its kaupapa Māori orientation is especially important because of its development approach, its focus on empowering whānau and because it acknowledges the cultural significance of wellbeing for Māori and Pasifika. It would be strengthened by a more clearly defined population; a dedicated budget based on the assessed needs of that population; and better dissemination of information on results.

References


