



Te Taumata Hauora o Te Kahu o Taonui

Te Tai Tokerau Iwi-Māori Partnership Board

Hauora Policy Manifesto November 2025



TE KAHU O TAONU

Me mahi tahi tātou mō te iwi te take

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Mihi me Tuhinga Tīmatanga *Mihi and Introduction*

Tēnei he pou.

He pou kōrero, he pou hakaaro, he pou ora.

Mā ēnei pou e tū tika ai te Whare Tapu o Ngāpuhi.

Haumī ē, hui ē, taiki ē!

Kei ngā mate huhua o te wā, ko rātou katoa ko ngaro atu, i ngā rā, i ngā marama, i ngā tau kua hipa, haere, haere, haere mai haere.

Te pō ki a rātou mā, te ao hurihuri ki a tātou te hunga ora.

Ki a koutou, koutou e whakatutuki pai i ngā awhero o rātou mā kua wheturangitia, koutou te hunga ora, tēnā koutou, tēnā koutou, huri tēnā tātou katoa.

Hauora and wellbeing for whānau, Iwi, and the communities from Te Rerenga Wairua to the Tāmaki Estuary and the rest of country are of critical importance for Aotearoa now and into the future.

Ensuring the best possible outcomes for whānau requires meaningful change to our health and wellbeing systems and a reorientation of traditional power structures in ways that:

- Honour He Whakaputanga and the commitments made in Te Tiriti o Waitangi
- Take a broad approach to hauora and wellbeing beyond the narrow silos of what we currently refer to as the health system
- Embed Iwi and Māori decision-making at every level
- Reinforce local leadership

Support investment in Hauora Māori growth and development:

- Foster innovation and doing things differently to achieved better outcomes
- Respond to the issues of greatest importance to whānau, Iwi and communities.

This policy manifesto outlines a set of proposals from Te Tai Tokerau and Tāmaki, informed by Iwi, whānau, and communities that can be implemented by the kāwanatanga. It provides a pathway by outlining several broad policy settings that would contribute to significantly improved hauora outcomes.

The policy manifesto has been compiled by Te Taumata Hauora o Te Kahu o Taonui based on whānau voice input coupled with sources of data and intelligence about hauora Māori outcomes. The manifesto is endorsed by the Iwi of Tāmaki and Te Tai Tokerau who form the collective of Te Kahu o Taonui. Te Kahu o Taonui is named for the poropiti, Āperahama Taonui, a founder of the Kotahitanga movement which evolved into the Māori parliaments of the 1890s. He was also a signatory to Te Tiriti o Waitangi and is perhaps most renowned as a visionary leader in the north who is credited with foretelling future events and impacts on Māori communities. One such vision provided warning and remains an important prophecy guiding Iwi of the North:

He taniwha kei te haere mai

He taniwha tae kuhu, tae huna

Kore rawa koe e kitea

Kia kitea rāno koe ki ngā kanohi a ō mokopuna

Ina kite koe

Hipokingia koe to mokopuna ki te korowai aroha o te whānau

A demon is on its way

This demon will arrive by stealth, by deceit

You will not see it coming

Until you see it in the eyes of your mokopuna

When you see it, the only solution will be

To wrap your mokopuna in the loving cloak of the whānau

Nā Āperahama Taonui (as recounted by Dame Naida Glavish)

We, the undersigned, on behalf of the Iwi of Te Kahu o Taonui, and Te Taumata Hauora o Te Kahu o Taonui IMPB, urge the implementation of the recommendations in this manifesto by any current or future kāwanatanga to ensure the hauora of Iwi Māori is improved.



Tereki Stewart

Chairperson

Te Taumata Hauora o

Te Kahu o Taonui IMPB



Āperahama Edwards

Co-Chair

Te Kahu o Taonui



Katie Murray

Co-Chair

Te Kahu o Taonui



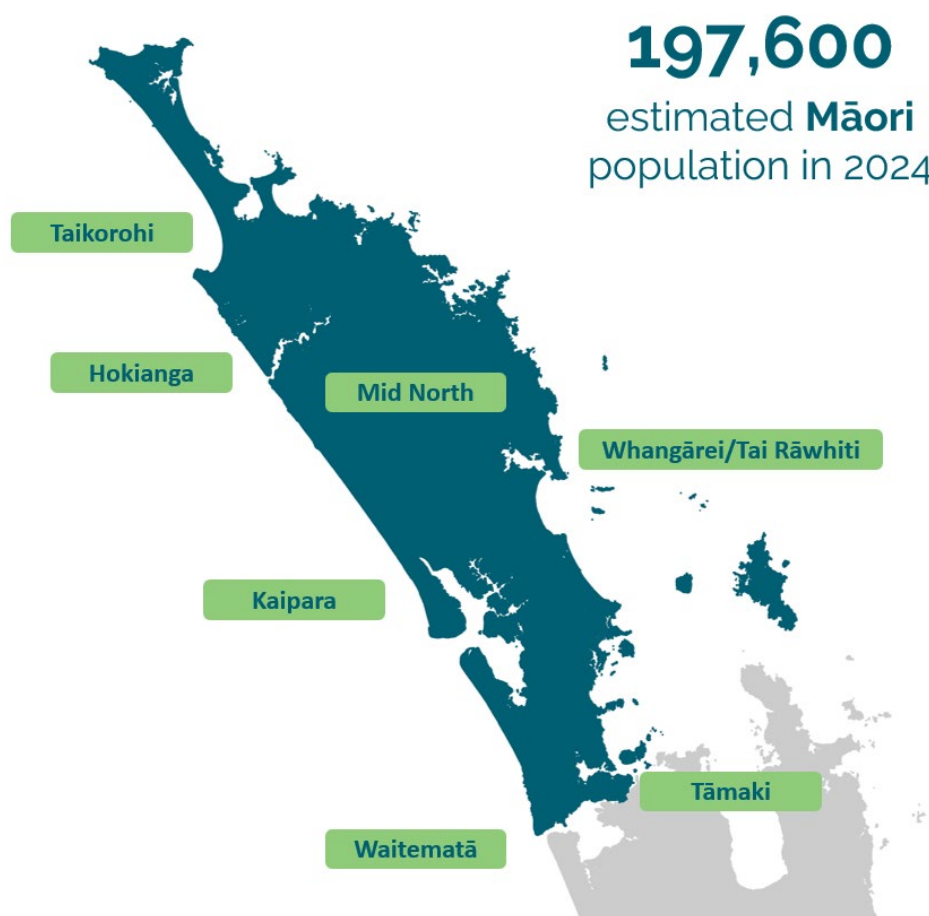
Ko Wai Mātou *About Us*

Te Kahu o Taonui

Te Kahu o Taonui is a confederate of twelve independent Iwi with each Iwi maintaining a Crown-Te Tiriti o Waitangi relationship. The iwi are Ngāti Kuri, Te Aupōuri, Te Rarawa, Ngāi Takoto, Ngāti Kahu, Kahukuraariki, Whaingaroa, Ngāti Wai, Te Roroa, Ngāti Whātua, Ngāpuhi, and Ngāti Hine, acknowledging there are other Iwi within the rohe.

Te Taumata Hauora o Te Kahu o Taonui Iwi-Māori Partnership Board (IMPB)

Te Taumata Hauora o Te Kahu o Taonui is the Iwi-Māori Partnership Board established by Te Kahu o Taonui that brings together Iwi across Te Tai Tokerau and Tāmaki Makaurau to improve hauora outcomes for Māori. Grounded in whakapapa and long-term commitment, the IMPB acts as a strategic partner to Government, advocating for whānau-led, place-based, and future-focused health solutions. As tangata whenua, Iwi are here to stay and to lead. IMPBs engage directly with whānau, hapū, and Iwi to understand local health needs, represent Māori perspectives on service design and delivery, and ensure government agencies address inequities.





Ngā Taunakitanga

Recommendations

Taunaki Tuatahi Recommendation One

Establish He Kōmihāna Ōrite - an independent Māori health equity commission to drive systemic change and strengthen government accountability for health

Taunaki Tuarua Recommendation Two

Champion Iwi Māori data sovereignty and implement Iwi Māori data governance for all Iwi Māori data held by Crown agencies

Taunaki Tuatoru Recommendation Three

Ensure that a minimum of 50% of appointments to Crown entity boards are supported or endorsed by Iwi Māori

Taunaki Tuawhā Recommendation Four

Demonstrate a holistic understanding of the health and wellbeing needs of Māori in government policy and practice and reflect that understanding in government funding and contracting

Taunaki Tuarima Recommendation Five

Reinforce localised Iwi Māori decision-making

Taunaki Tuaono Recommendation Six

Sustainably invest in and actively support Hauora Māori and Iwi provider growth, innovation, and homegrown solutions

Taunaki Tuawhitu Recommendation Seven

Deliver tangible and measurable progress on ten health priorities and demonstrate progress with high quality performance data.

Tautuhinga Pūnaha *System Settings*

Taunaki Tuatahi *Recommendation One*

Establish He Kōmihāna Ōrite - an independent Māori health equity commission to drive systemic change and strengthen government accountability for health.

Whānau, Iwi, and all citizens expect the government to make informed decisions about health and wellbeing and to improve outcomes in a way that is fair, equitable and in line with He Whakaputanga and the commitments made in Te Tiriti o Waitangi.

A necessary requirement of good government is for the government to work in partnership with Iwi Māori, in ways that recognise Iwi Māori tino rangatiratanga.

Currently the health system lacks an embedded and independent Māori voice at a whole-of-system level. Having a system-level partner of this kind would support the government to achieve its hauora objectives, while also allowing Māori to have trust and confidence in health policy and publicly funded healthcare.

We recommend that an independent Iwi Māori health equity commission (He Kōmihāna Ōrite) is established. While the commission would be set up and governed by Iwi (through Iwi appointed board members), national level policy settings and appropriate funding must enable a range of He Kōmihāna Ōrite functions including:

- Working with government agencies (including the Ministry of Health, Ministry of Social Development, and the Ministry of Housing and Urban Development) on policy and direction setting
- Working with relevant government agencies on budget and investment decisions
- Monitoring performance and overseeing government agency activities to advance hauora and wellbeing for whānau Māori
- Reinforcing (but not replacing) local hauora and wellbeing decision-making
- Having a relationship with independent audit and oversight agencies such as the Office of the Ombudsman and the Office of the Auditor General.

Taunaki Tuarua *Recommendation Two*

Champion Iwi Māori data sovereignty and implement Iwi Māori data governance for all Iwi Māori data held by Crown agencies.

Iwi Māori data sovereignty refers to Māori rights and interests in the collection, ownership, and application of Māori data (Te Mana Raraunga, 2018). Iwi Māori data governance is a complementary concept, referring to the various ways (for example through accountability mechanisms and policies) that Iwi Māori can exercise control over Māori data.

The health system collects a wide range of administrative and survey data about New Zealanders. This data can be used to understand health status, health needs, service access, and service performance. Such data is also used – through tools like the Integrated Data Infrastructure – to target and tailor solutions to complex problems of hauora and Māori wellbeing.

However, the collection, storage, use, and dissemination of this data is not grounded in Māori values and tikanga and it can cause harms that disproportionately impact Māori. These harms are amplified by a lack of high-quality ethnicity, iwi-affiliation, and whakapapa data in government collections, especially for sub-populations like tāngata whaikaha Māori (Māori with lived experience of disability).

We recommend both a focus on the improvement of high-quality Māori health data (through health sector administrative data, and through Statistics NZ's approach to population statistics and the Census) and that the Māori data governance model developed by Te Kāhui Raraunga is adopted and implemented within the health system, with support from Statistics NZ, to ensure Iwi, at national level (for example through He Kōmihāna Ōrite) and local levels can exercise data sovereignty appropriately and that Iwi Māori data is protected.

Taunaki Tuatoru *Recommendation Three*

Ensure that a minimum of 50% of appointments to Crown entity boards are supported or endorsed by Iwi Māori.

To make good decisions, health sector Crown entity boards must have a wide range of skills and experiences. This includes business and commercial expertise, clinical and health professional expertise, ability to use and interrogate data, an understanding of and connection to whānau, hapū, and Iwi, and a range of lived experiences (including lived experience of disability). However, health Crown entity boards are increasingly being appointed in ways that are not transparent and – as indicated in the Healthy Futures (Pae Ora) Amendment Bill – without any skill or expertise requirements.

We recommend increasing the number of Māori on health sector crown entities, to a minimum of 50% of all new appointees, to ensure a mix of skills and expertise that is fit for purpose for the hauora and wellbeing system now and into the future. This recommendation requires transparent processes that allow Māori – for example, through Te Kōmihāna Ōrite – to have direct input into the appointment processes.

Taunaki Tuawhā *Recommendation Four*

Demonstrate a holistic understanding of the health and wellbeing needs of Māori in government policy and practice and reflect that understanding in government funding and contracting.

The narrow definitions of health and health services do not serve Māori whānau, Iwi, and communities, nor do they serve the wider population. By focusing on illness and clinical services (as in current health sector targets) the government misses out on opportunities to have a greater impact on hauora across the life course and for generations to come, for example by protecting Te Taiao, supporting access to kai Māori, Māori kai practices, and traditional kai sources, and supporting whānau connection.

Such a holistic view, built on whakapapa, whenua, and whānau, is not new to Māori whānau, Iwi, and communities – but it consistently challenges public agencies who struggle to work outside their funding silos.

We recommend adopting a holistic view of health that encompasses the idea of Hauora and wellbeing. This builds on the recent [Public Health Advisory Committee report](#) that notes “...health starts in our homes, schools and communities. Strong connections with our whānau and community, and where we live, work, learn and connect with the environment all have a greater influence on our health and wellbeing than health care”.

Specifically, **we recommend** that the holistic approach to health be incorporated in health sector policy and reflected in contracting practices (allowing providers to benefit from common-sense, integrated, contracting that reduces unnecessary administrative burdens).

Rangatiratanga ā-rohe *Local Leadership*

Taunaki Tuarima *Recommendation Five* Reinforce localised Iwi Māori decision-making.

To be effective, local decisions on hauora and wellbeing need to reflect partnership with Iwi and be informed by local intelligence, whānau voice, and on-the-ground insights – not just what is held on central data bases. This requires local Iwi and Māori leadership and formal structures that guarantee Iwi Māori voices are heard and influence decision-making (including decision-making on health sector commissioning).

The IMPB model as it was originally implemented in 2022, provided a strong base of local leadership. Our experience in Te Tai Tokerau and Tāmaki was that the IMPB model challenged the status quo in a way that continues to show promise in locality development and service planning. To fully realise the promise of a local Iwi-led model, the ability for local Iwi Māori groups to hold a budget to commission services directly is warranted.

We recommend that localised Iwi/Māori decision making is reinforced. This would require policy and legislative changes that:

- Allow for the operation of local Iwi Māori decision-making networks with direct – mandated – links to local health decision-making, relevant performance data, and the ability to amplify and champion whānau voices across the health system.
- Expand localised Iwi/Māori decision making functions to move beyond ‘strategic commissioning’ to include directly commissioning services and budget holding.

This recommendation also requires improved data sharing arrangements so that local Iwi/Māori decision-makers (such as IMPBs) have access to relevant health sector data (from primary health care to hospital level care and specialist services) that tracks performance by ethnicity and allows informed decision making and the appropriate exercise of Iwi Māori data sovereignty. This recommendation is linked to recommendation two.

Te Whakarato Ratonga Hauora Māori *Hauora Māori Service Provision*

Taunaki Tuaono *Recommendation Six*

Sustainably invest in and actively support Hauora Māori and Iwi provider growth, innovation, and homegrown solutions.

Since the first hauora Māori services were contracted to deliver primary and community health care they have been sector leading in terms of supporting whānau to achieve their health needs and aspirations, despite consistent evidence of underfunding (see for example, the Waitangi Tribunal's Hauora Report (2019)). Forty years later, and we have numerous strong Māori service providers, across the health and social sectors, that have a wide range of skills, expertise, and resources that provide the government necessary capacity and capability.

The maturity and contribution of Hauora Māori providers must be recognised through increased trust and widened investment. This includes both extending the services contracted through hauora Māori providers (with accompanying infrastructure support) and providing funding opportunities for innovative homegrown solutions – including the development of technological solutions such as AI.

We recommend greater, more equitable, investment in hauora Māori and Iwi providers so that they can continue to innovate and deliver a wider range of comprehensive services that support access for whānau. This investment could come both either public sector sources and from private investors (which in turn may require facilitation or other support from government agencies).

This recommendation builds on current health service research to, for example, optimise the benefits of immunotherapy for Māori delivered closer to home and investment in diagnostic services by Iwi Māori providers so that travel to urban-based hospitals (e.g. Whangārei or Auckland) is less of a barrier to essential care.

Ngā Whāinga Hauora *Health Priorities*


Taunaki Tuawhitu *Recommendation Seven*

Deliver tangible and measurable progress on ten health priorities and demonstrate progress with high quality performance data.

In addition to improving system settings and investments, there are some clear areas of health priorities for whānau, Iwi, and communities that should be given prominence at a national and local level. For Te Tai Tokerau, we recommend action against ten health priorities.

1. **Invest in services closer to home** and reduce barriers to care for those living outside of main urban centres. This priority is closely connected to recommendation six as its implementation relies on shifting more resources from public hospitals to Hauora Māori and community-based health providers.

2. **Removing barriers to screening programmes** for whānau Māori. This includes widening the age range for the national screening programmes (such as Breast Screen Aotearoa, the Bowel Cancer Screening programme, and cardiovascular risk screening) where evidence indicates Māori have poorer outcomes at younger ages than non-Māori.
3. **Improving access to medicines** for Māori and ensuring PHARMAC apply factors for consideration that adequately reflect Māori health need and inequity, using decision-making processes that reflect a commitment to partnership with Māori.
4. **Improving stroke prevention, support, and rehabilitation.** Stroke is a leading cause of disability in Aotearoa, but the supports available vary across the country. For Māori, who experience stroke at younger ages (10-15 years earlier) than non-Māori/non-Pacific populations, this has an extra impact as much of the support available is linked to age-related supports for people over 65 years. This health priority requires an investment in technology and innovation (to support stroke diagnosis and intervention), improved funding systems for post-stroke support, and equitable entitlements (in line with supports offered through ACC for injury).
5. **Oral health.** Fifty four percent of Māori adults have unmet need for oral health care (compared to 45% of the total population), according to the latest NZ Health Survey. While there are funded oral health services for children and rangatahi up to the age of 18, adult oral health services are – by and large – not subsidised and the cost of oral health care is often cited by whānau as the main barrier to care. A fundamental change to the oral health system is required so oral health is seen as part of universal primary health care. As a minimum this would mean dental visits for those who cannot routinely afford them (such as those with a community services card) and those with additional oral health needs (such as hapū māmā) would be eligible for subsidised oral health care.
6. **Investing in health research.** Māori knowledge and expertise have been at the cutting edge of health research for decades and has been influential both nationally and internationally in health policy and practice. However, reductions to Health Research Council (HRC) funding and new research funding rules are compromising the ongoing viability of Māori-led research. We recommend that HRC funding be reinstated and a return to the approach of having targeted Māori health research funding. This funding can also support necessary Māori health innovations and the ethical use of new technologies such as AI.
7. **Oranga hinengaro, oranga wairua.** All whānau deserve to be living mentally well and free from addictions. Mental health is a priority for whānau in Tāmaki/Tai Tokerau, with the rate of hospitalisation for mental health disorders for Māori in our rohe twice that of non-Māori. As part of this priority area we seek to increase the focus on rangatahi suicide prevention and increase treatment and support for whānau impacted by addictions (in particular methamphetamine addiction). We support a holistic approach to mental health and addictions that recognises the need for whole-of-whānau support that includes addressing the determinants of oranga hinengaro such as access to healthy housing, good employment and education opportunities, and excellent mental health services.
8. **Reinstate and strengthen Tobacco legislation** to reduce tobacco and vaping harm. This should be supported by public health and evidence-informed campaigns.

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9. **Safe, dry, accessible, healthy housing** is necessary for the hauora and wellbeing of all whānau. However, in Te Tai Tokerau and Tāmaki, such housing is not consistently available for everyone, especially rural whānau and tāngata whaikaha Māori. Significant investment is required to improve the stock of social housing across the country, with an emphasis on increasing the availability of accessible housing for tāngata whaikaha.
 10. **Mokopuna ora.** By 2040, we envision a generation of rangatahi - today's pēpi and mokopuna - fluent in te reo Māori, confident in their identity, whakapapa and tikanga, and thriving as adults. Realising this aspiration demands a sustained, whole-of-whānau approach that embeds intergenerational wellbeing and excellence. To ensure every child born today flourishes, whānau, hapū, Iwi and government must invest in whānau-centred models of care, address all other health priorities, eliminate racism in all its forms, and create inclusive pathways to collective success. This commitment upholds mokopuna rights to grow in environments that nurture their language, culture and holistic wellbeing, grounded in He Whakaputanga, Te Tiriti o Waitangi and kaupapa Māori values.