INDIGENOUS NURSES AOTEAROA CONFERENCE

Hosted by Te Rūnanga o Aotearoa
New Zealand Nurses Organisation

Friday 6 and Saturday 7 August 2015
Eden Park, Tāmaki Makaurau
Contact:
Atene Andrews, Kaiwhakahaere Whakarata Māori - Atene.Andrews@pharmac.govt.nz
www.pharmac.govt.nz
Freephone Information line (9am-5pm weekdays) 0800 66 00 50
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Kaiwhakahaere message

On behalf of Te Poari o Te Rūnanga o Aotearoa, New Zealand Nurses Organisation (Te Poari), I am extremely proud to welcome you to our Indigenous Nurses Aotearoa Conference in Tāmaki Makaurau.

The New Zealand Nurses Organisation (NZNO) and Te Rūnanga o Aotearoa, New Zealand Nurses Organisation (Te Rūnanga) represent the largest professional nursing association and union for nurses in Aotearoa New Zealand and represent over 46,000 nurses, midwives, students, kaimahi hauora and health workers on professional and employment related matters.

We are really privileged to launch the second Indigenous Nurses Conference Aotearoa, with over 250 indigenous nursing leaders (nurses, midwives, nursing students, kaimahi hauora and health care assistants) committed to raise our hauora aspirations and determined to uphold ‘health is a taonga’ including our whakapapa, wellbeing and the intrinsic relationship we have with health, our environment and our culture.

This year’s conference theme is Our Health, Our Right: Kia Rangatira te Tū which is particularly relevant for Māori nurses as we are well positioned to ensure and advocate for patient safety and for patient satisfaction. We have an amazing range of guest speakers who will inspire us to lift our sights, develop skills and knowledge, and illustrate Māori models of leadership and Māori models of care that underpin the principle of tino rangatiratanga.

As indigenous nursing professionals we are committed to reaffirming our rights under the United Nations Declaration of Indigenous people’s article 3, to self-determine, and this will underpin any future Māori nursing strategy. Just as our early Māori nursing pioneers, like Te Akenehi Hei realised, we have nothing to fear when moving forward, our tipuna made the sacrifice, we must ensure our future mokopuna, whānau, hapū and iwi receive the best health care available in Aotearoa.

If we can’t determine where we want to go as Māori health professionals, and if we can’t determine what is best for us as Māori health professionals then we will not be able to protect our health and wellbeing.

We must remember to have faith in ourselves and to be courageous for our whānau, hapū and iwi hauora aspirations. We must remember to look towards the imagination place to see what it could be.

Ehara taku toa i toa takitahi ēngari he toa takitini my strength is not mine alone, but that of many.

Nāku noa, nā

Kerri Nuku
NZNO Kaiwhakahaere
Southern Welcome

Ka tangi te tītī, ka tangi te kākā, ka tangi hoki ahau, Tihei Mauri Ora.

Tēnā koutou katoa, he mihi mahana ki a koutou, Nau mai, Haere mai ki te Hui ā-Tau o Te Rūnanga o Aotearoa NZNO.

It is an honour and privilege to host the second Indigenous Nurses Aotearoa Conference and I welcome all our manuhiri and Te Rūnanga members to our Hui ā-Tau 2015.

I am always reminded of an incident that was the catalyst for my region decision to tono to host Hui ā-Tau 2015. The flippant remark “but there are no Māori down south, not really...” was the wero we needed to raise awareness of Māori nurses living and working in the southern region, and to tackle issues faced by us and to challenge NZNO commitment to develop and invest in our region.

The Southern region is geographically the largest of NZNO regions and extends from the Waitaki river south to Rakiura and up the West Coast to Big Bay. Our population lives in isolated rural areas with the majority of our members living and working in Dunedin and Invercargill. Our region has many benefits, the nature of wide open spaces, beautiful coastlines and resort towns like Queenstown and Wanaka and hard to believe amazing summers, but it also has its challenges, long distances between our major centres and hospitals, dangerous roads and of course winter... which isn't always as bad as you image.

This year we have faced enormous challenges to organise our hui and conference but I know that you will hear from some amazing Māori leaders from different fields and for the first time we have some exciting international indigenous speakers so I hope you enjoy our hui, to be inspired and to make new friends.

In closing I want to let you know that Southern region has got the commitment from Te Rūnanga that we were seeking, and that we have been fortunate to host a visit from our Kaiwhakahaere and Tumu whakarae and our Hawkes Bay representative. Te Rūnanga Southern has co chaired our Southern regional convention and we are currently working on communication strategies to improve engagement with our members not only in Southern but across the motu.

Have a wonderful hui whānau,
Nāku noa, nā

Pari Tautari
Southern Representative
Te Rūnanga o Aotearoa NZNO
## Programme – Indigenous Nurses

**Venue: Eden Park, Level 4 Lounge**

### Friday 7 August 2015

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<td>9.30am</td>
<td>Pōwhiri</td>
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<tr>
<td>9.50am</td>
<td>Paramanawa (Morning Tea)</td>
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<td>10.10am</td>
<td>Welcome and Housekeeping – Pari Tautari</td>
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<td>10.20am</td>
<td><strong>Kerri Nuku</strong> Kaitiwhakahaere, Te Rūnanga o Aotearoa NZNO</td>
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<tr>
<td>10.50am</td>
<td>Opening address – Hon Te Ururoa Flavell Minister of Māori Development</td>
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<tr>
<td>11.00am</td>
<td>Teresa Wall, Deputy Director General Māori Health</td>
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<tr>
<td>11.10am</td>
<td><strong>Dr Moana Jackson</strong></td>
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<tr>
<td>11.50am</td>
<td><strong>Valmaine Toki</strong> The United Nations Permanent Forum on Indigenous Issues – Reflections</td>
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<td>12.30pm</td>
<td>Kai o te Rānui (Lunch)</td>
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<td>1.30pm</td>
<td><strong>Karen Johansen</strong> Structural discrimination within the health sector following up on...</td>
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<tr>
<td>2.10pm</td>
<td><strong>Maureen Allan</strong> Whānau Centred Services: Whānau living in isolated rural communities...</td>
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<td>2.30pm</td>
<td><strong>Aria Graham</strong> Tika Tonu – Young Māori Mothers’ Experiences of Wellbeing following the...</td>
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<td>2.50pm</td>
<td>Workshop: Tino Rangatiratanga “Māori Nursing”</td>
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<tr>
<td>3.30pm</td>
<td>Paramanawa (Afternoon Tea)</td>
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<td>3.50pm</td>
<td>Summary of the day</td>
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<td>Karakia Whakamutunga</td>
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<td>Tauira breakout room 1</td>
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<td>Buses, Vans depart for Waipapa Marae, Copthorne and Mercure Hotels</td>
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<td>5.00pm</td>
<td>Pōwhiri at Waipapa Marae</td>
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<td>6.00pm</td>
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# Programme – Indigenous Nurses

**Venue:** Eden Park, Level 4 Lounge

## Saturday 8 August 2015

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<tr>
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<td>Karakia</td>
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<td>Introduction to the day</td>
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<tr>
<td>8.45am</td>
<td>Dr Misty Wilkie-Condiff</td>
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<td></td>
<td>The Lived Experience of American Indian Organ Donors and Recipients: Stories of Cultural, Physical and Spiritual Triumph</td>
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<tr>
<td>9.20am</td>
<td>Pat Cook &amp; Anamaria Watene</td>
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<td>Whakawhanaungatanga</td>
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<tr>
<td>10.00am</td>
<td>Paramanawa (Morning Tea)</td>
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<tr>
<td>10.30am</td>
<td>Donna Foxall</td>
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<td>Māori Registered Nurses experiences after completing the Nursing Entry to Practice Transition Programme between 2010-2012</td>
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<tr>
<td>10.50am</td>
<td>Grace Wong &amp; Rebecca Ruwhiu-Collins</td>
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<td></td>
<td>Stop smoking health care the way that we need it: Taking patients’ perspectives to nurses</td>
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<tr>
<td>11.10am</td>
<td>Evelyn Hikuroa</td>
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<td></td>
<td>Quit for Good: Reducing smoking among Indigenous nursing students using incentives</td>
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<tr>
<td>11.30am</td>
<td>Dr Heather Gifford</td>
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<tr>
<td></td>
<td>(co-presenters Prof Denise Wilson &amp; Teresa Taylor)</td>
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<td></td>
<td>Māori Nurses and Smoking; exploring the context and opportunities for change</td>
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<tr>
<td>12.00pm</td>
<td>Kai o te Rānui (Lunch)</td>
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<tr>
<td>1.30pm</td>
<td>Janine Mohamed &amp; Dr Roianne West</td>
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<td>Growing the indigenous nursing workforce: an Australian experience</td>
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<td>2.10pm</td>
<td>Jennifer Roberts</td>
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<td>Evaluating the PATU© model - Promoting health and whānaungatanga</td>
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<td>2.30pm</td>
<td>Lisa Hurrell</td>
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<td>Stepping up to the challenge</td>
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<td>2.50pm</td>
<td>Dhyanne Hohepa</td>
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<td>What is the health impact of Methamphetamine on the health of New Zealand Māori?</td>
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<td>3.10pm</td>
<td>Terryann Clark</td>
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<td>Māori youth health trends and disparities over the last decade: Evidence from the Youth2000 survey series</td>
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<td>3.40pm</td>
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<td>4.00pm</td>
<td>Workshop: Tino Rangatiratanga “Māori Nursing”</td>
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<td>5.15pm-6.30pm</td>
<td>Whakawhanaungatanga</td>
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<tr>
<td>6.30pm</td>
<td>Hākari Eden Park</td>
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Speakers

Dr. Moana Jackson
Ngāti Kahungunu, Rongomaiwahine, Ngāti Porou

Valmaine Toki
Ngā Puhi Ngāti Wai
Valmaine Toki, is a legal academic at Te Piringa Faculty of Law, University of Waikato, she is the first New Zealander and first Māori appointed by the United Nations (UN) Economic and Social Council to the UN Permanent Forum on Indigenous Issues. Valmaine is also part of Te Mata Ira Project on culturally appropriate guidelines for BioBanking.

The United Nations Permanent Forum on Indigenous Issues – Reflections

“Māori, the indigenous peoples of Aotearoa, New Zealand continue to figure disproportionately in all social statistics, most recently the fact that Māori men have higher prostate cancer rates than non-Māori. Despite all the government initiatives to ameliorate the disproportionate social statistics they remain unchanged. Māori often seek redress within the international arena. This paper will review the processes of the UNPFII against these concerns.”

Karen Johansen
Rongowhakaata, Te Aitanga a Mahaki, Ngai Tamanuhiri, Norwegian whānau
Karen Johansen has been a New Zealand Human Rights Commissioner since 2008 with particular responsibilities are for the human rights dimensions of the Treaty of Waitangi (New Zealand’s founding document), educating about and advocating for the UN Declaration for the Rights of Indigenous Peoples and for Māori Indigenous Rights. This work has taken her not only all around New Zealand but to New York, Kabul, Beijing, inside the Arctic Circle in Norway and several times to Geneva to attend the annual sessions of the UN Expert Mechanism for the Rights of Indigenous Peoples.

Before joining the Human Rights Commission, Ms Johansen was a teacher and senior leader in secondary schools and particularly at Gisborne Girls’ High School where she was Principal or “Head Learner” for 12 years.

Commissioner Johansen comes from Te Tairawhiti and her maternal grandfather was a plantsman and her love for the land and for the nurturing of plants began as a child beside her koro as he worked in his gardens and in the bush of the Tairawhiti back country.

Structural discrimination within the health sector following up on the work that the HRC has completed on Fair Go

The right to the highest attainable standard of health is a fundamental human right. Yet despite continuing attempts to eliminate disadvantage, health inequalities persist, particularly for Māori, Pacific peoples and other vulnerable groups.

UN bodies have repeatedly urged New Zealand to step up its efforts to address inequalities, including by examining the role of structural discrimination and addressing its root causes.

Research by the Human Rights Commission has highlighted the need for responses to structural discrimination to be targeted, proactive, and underpinned by strong organisational commitment and involve the communities they are intended to serve. Developing cultural capability, building on successful initiatives and effective monitoring are also critical.

A National Plan of Action for human rights (launched in June 2015) provides an online tool to monitor how well government actions are achieving progress on key human rights priorities such as these.

Maureen Allan
Te Rarawa, Ngapuhi, Tainui
Maureen started her nursing career as an Enrolled Nurse at Kaitaia Hospital in the early 1980’s and since then she has worked in a variety of areas including:

- hospital based nursing and as a Public Health Nurse;
- inaugural Manager for Te Hauora O Te Hiku O Te Ika Trust;
- a previous Board Member for Northland DHB;
Speakers

- a member of Northland DHB Hospital Advisory Committee for seven years;
- nurse Integration Leader for Te Tai Tokerau PHO for eight years; and
- a previous member of the Māori Nursing Advisory Group for Nursing Council of New Zealand (NCNZ).

Maureen has a Master of Nursing (Hons) and a Post graduate Diploma Business through University of Auckland and was last year’s recipient of NZNO Te Akenehi Hei Award.

Maureen works as a clinical and practice manager at Whakawhiti Ora Pai, a Māori Health provider based in the Far North. Her nursing team practice in a generalist / Whānau Ora Primary Health model of care which includes practice nursing, mobile nursing, district nursing, PRIME, phlebotomy and Long term conditions. Maureen also sits on NCNZ Disciplinary and Competency Panels. Whānau are very important to Maureen and being a wife, mother, sister and nana.

**Whānau Centred Services: Whānau living in isolated rural communities find access to health services a barrier**

Whānau living in isolated rural communities find access to health services a barrier. Whakawhiti Ora Pai is a Māori Health Provider based in the Far North whose goal is to change the mind shift of “whānau having to fit services” to services needing to fit whānau”. This presentation will show how working collaboratively with other services and developing new models of care can enable whānau improved access to health care.

**Aria Graham**

Ngāti Kahungunu

Aria graduated as a Registered Comprehensive Nurse in 2000, and worked for a Māori Health Providers as a Tamariki Ora Well Child visiting whānau in homes and communities settings alongside kaiawhina, and tuakana Māori nurses. These formative practice years integrated quality nursing and tikanga Māori and Ari is currently working on a PhD.

Aria is passionate about Māori wellbeing, in particular whānau ora of Māori women and tamariki, and she is also interested in the advances of Māori nursing and Māori nursing leadership.

Aria is currently the Clinical Nurse Coordinator for Gateway Health Assessment in the Child Development Service of the Hawke’s Bay District Health Board. Aria is married and has two beautiful sons Taamai and Maika. Aria whānau and whakapapa has been an inspiration to her practice and permeating taha wairua and taha whānau and the principles of ‘takitini’.

**Tika Tonu – Young Māori Mothers’ Experiences of Wellbeing following the birth of their first Tamaiti**

Māori women's experiences of wellbeing following the birth of a first tamaiti and the impact of those experiences often determine the short-term outcomes and extended health trajectory for Māori women and their children. However, there is little exploration and information on these experiences of wellbeing of Māori women and therefore little known about their stories and whakaaro. Negative statistics and reports portray Māori mothers as the least capable, least desired and most likely to make unhealthy choices and display unhealthy behaviours. Consequently, Māori women are stereotyped as being deficient.

The health system and models of care based on dominant ideologies delivered to Māori women and their tamariki, fail to recognise the essence of Māori women's wellbeing. Instead these models marginalise and render their aspirations invisible and irrelevant. This research brings to the fore the elements that Māori women signal as vital to their wellbeing.

The research explores the experiences of Māori women as mothers for the first time, the integrity and validity of their experiences and the symbiosis between identity and wellbeing. The research incorporates kaupapa Māori theory, praxis and methodology and through the findings denounces common constructs informed by hegemonic views. The findings signify the power of the female entity, the tamaiti as tohu aroha and vitality and balance between mana tangata. The findings elucidate a guide to appropriate models of wellbeing that place Māori women at the spearhead of wellbeing thus, emancipating Māori women from entrenched stereotypes and advancing Māori women’s aspirations and the lives of their tamariki.

**Dr Misty Wilkie-Condifff**

Dr. Misty Wilkie-Condifff is an enrolled member of the Turtle Mountain Band of Chippewa Indians located in Belcourt, North Dakota USA. She earned her Associate degree in Nursing (Hibbing, Minnesota) in 1997, Bachelor of Nursing (Bemidji State University) in 2001, Master of Science in Nursing (University of North Dakota) in 2003, and a Doctor of Philosophy (University of Minnesota) in Nursing in 2009. Dr Wilkie-Condifff is one of about 24 American Indians with a PhD in nursing.

Dr. Wilkie-Condifff's nursing experience includes long term care, medical-surgical, maternal child health, and emergency care. For the past 11 years she has been a professor teaching 2-year, 4-year and Master’s nursing students.
The Lived Experience of American Indian Organ Donors and Recipients: Stories of Cultural, Physical and Spiritual Triumph

Since 2000, Dr. Wilkie-Condiff has been interested in organ donation and transplantation in minority populations but particularly in American Indians. She has worked with the Ojibwe people to understand their experience with organ donation and transplantation, and how their traditional culture affects these experiences.

Dr. Wilkie-Condiff can be reached at mcondiff@bemidjistate.edu

Background: Half of American Indian (AI) adults are diagnosed with diabetes and are 3.5 times more likely to have end-stage renal disease resulting in the need for dialysis or kidney transplantation. Organ donation and transplantation in AIs is scarcely researched and literature available reports they are unlikely to be organ donors due to cultural beliefs.

Purpose: The purpose is to share the experiences of Ojibwe AIs related to the organ donation and transplantation process formulated through recollection of personal involvement as an organ donor or recipient. Design/Methods: This phenomenological study followed van Manen's (1990) work. Interview transcripts were coded using van Manen's lifeworld existentials. Findings: Ojibwe AIs were willing to be living organ donors and, without regret, encourage others to donate. Intra- and intercultural clashes were evident through living donor experiences but participants were able to find resolution and donate. Deceased organ donation is rarely done the AI population because of spiritual beliefs and lack of personal connection to the recipient. Recipients experienced hopelessness prior to transplantation, and then found hope with their new organs. Waiting, distance to healthcare facilities, and enhanced spirituality were relevant for all donors and recipients. All donors and recipients were grateful to give or receive “a second chance”. Conclusion: Research must be conducted studying other indigenous peoples to acquire adequate knowledge and understanding of their experiences and decision-making processes around organ donation. Healthcare professionals must be aware that indigenous peoples struggle with the concept of transplantation and broach conversations armed with cultural knowledge and sensitivity.

Pat Cook
Ngāi Te Rangi, Ngāti Ranginui

Pat is the General Manager at Te Manu Toroa, Tauranga and has an extensive nursing career including working as a Registered Nurse, and a range of Clinical Nurse Manager and Nurse leader positions at Tauranga Hospital, alongside Te Puna Hauora Māori Health Services and I with Regional Māori Health. Pat has completed her Bachelor of Nursing, and holds Post Graduate certificate in Advanced Māori Health, Post Graduate Diploma in Health Science and a Masters of Health Practice in Māori Health. Pat is a Board member of the NMOPHO Clinical Governance group and on a local Māori trust.

Whakawhanaungatanga

Through a Treaty of Waitangi partnership at Tauranga Hospital a unique secondary health service evolved. One that is delivered predominantly by Māori for Māori but not exclusive to Māori. The Kaupapa Nursing Service developed by Te Puna Hauora and supported by the Iwi of Tauranga Moana implements an indigenous health model that model of care is Whakawhanaungatanga.

This presentation will discuss the evolution, and impact of changing internal and external factors on this unique ward, and prospects for a continuing service in the fiscally challenged health environment of today and the future.

Anamaria Watene
Ngaiterangi

Anamaria is the Clinical Nurse Manager of the Kaupapa Ward (Regional Māori Health Services) Tauranga Hospital and began her nursing career as a mature student at Waiariki Polytechnic Bachelor of Nursing in 1997 when she was accepted as a Kaupapa Nurse into the Nurse Entry to Practice programme (NETP) at Te Puna Hauora (Māori Health Service in Tauranga Hospital). Anamaria has a Master's of Health Practice in Māori Health and has worked extensively in Paediatrics and the Kaupapa Ward.

Anamaria has 3 children, and ten grandchildren (including a set of twins). Her husband Ron Watene passed away 3 years ago now, and she feels he is with her and watching over her every single day.

Whakawhanaungatanga

One of the most revolutionary innovations in Māori health care in Aotearoa New Zealand was driven by the determination of local Iwi of Tauranga Moana to address health issues of their people in the Western Bay of Plenty.

The Kaupapa unit is the only one of its kind in New Zealand, a unique unit, that is staffed by culturally and clinically competent staff who can provide access to Te Reo Māori and Tikanga Māori best practice. Models of care utilised in the delivery of nursing care to tāngata whaiora (patients) is Te Whare Tapa Whā, Nga Pou Mana o Io and the Whanaungatanga model.
The Kaupapa unit has been operating for 23 years, from small beginnings of four beds in a medical ward to the current standalone unit with 12 beds for Māori patients with the flexibility to increase to 22 beds if required.

Kaupapa Ward Timeline
- 1991-1995 Te Puna Hauora officially opened and supported by Iwi and Kaumātua
- 2007 an official opening of the Kaupapa Ward also known as ward 2A by local Kaumātua
- 2009 a restructure of Bay of Plenty District Health Board (BOPDHB) Māori Health services
- 2010 Regional Māori Health Service implemented

The kaupapa unit has become an institution in itself within the BOPDHB in Tauranga Hospital, but has had to evolve to continue to provide service for Māori under new management. This presentation will discuss the impact of changing internal and external factors on this unique ward, and prospects for a continuing service in the fiscally challenged health environment of today and the future.

Donna Foxall

Tainui, Taranaki

Donna currently works and resides in Kahungunu, Hawkes Bay. For over a decade, now as a senior lecturer, at Te Aho a Māui, Eastern Institute of Technology (EIT) School of Nursing, Donna continues to Tuākana Māori nursing students from the Hawkes Bay and Tairawhiti campuses. In addition she supports colleagues within the school of nursing.

Passionate about improving the health status of Māori, Donna is a private group fitness instructor and recently became a member of the PATU© research team. Patu is a healthy lifestyle intervention programme. On an education front Donna is a member of the EIT education project, aligning kaupapa Māori principles with eLearning practice.

As National Chair of Wharangi Ruamano Māori Nurse Educator group Aotearoa and member of Ngā Manukura o Āpōpō Governance Group this has provided a platform to generate change for whānau, hapū and iwi. “Her goal is to motivate, educate and empower people to navigate an improved health outcome where they can connect and engage resources around the home and community”.

Whāia te māturanga hei oranga mō koutou – Seek after learning for the sake of your wellbeing

Māori Registered Nurses experiences after completing the Nursing Entry to Practice Transition Programme 2010-2012

The purpose of this study was to capture kōrero pūrākau (experiences) of Māori nurses who transitioned from being an undergraduate nursing student to Registered Nurse by completing the 12 month NEPTP. Participants from two District Health Boards, who had completed NETP in 2010-2012, were invited to participate.

The study illustrated the critical processes and systems to mitigate negative impacts during transition and not only make the experience a more positive one, but have a significant impact on retention of staff.

International studies found formal socialisation for new graduates was beneficial to reducing stress, anxiety and improved retention. The majority of participants stated their confidence had grown at the end of the transition programme, despite the challenge of post graduate study.

Grace Wong

Grace's maternal great-grandparents came to New Zealand from China in the late 1800s with her father arriving after World War 2. Grace grew up in the South Island, but has made Tāmaki Makaurau her home since marrying and having children. Grace works at Auckland University of Technology (AUT) and has worked in paediatric and public health nurse. Grace leads the Smokefree Nurses Aotearoa New Zealand and is passionate about Aotearoa being Smokefree by 2025. Grace works in partnership with nurses and nursing organisations to support nurse leadership for helping people to stop smoking. She also teach Primary Health Care (postgrad) and work in the Centre for Migrant and Refugee Research.

Grace specialise in training, treatment and service development and continues to practice stop smoking treatment clinics to communities, which includes individual and group based treatment. This is to ensure continuous improvement with the aim of ensuring health sector capacity and capability remains at the cutting edge of development for stop smoking treatment delivery.
**Rebecca Ruwhiu-Collins**  
*Ngā Puhi, Ngāti Porou*  
Rebecca has experience in Māori hauora, and frontline expertise in the design and delivery of approaches for engaging with Māori, Pacific, and other service users in primary and secondary healthcare, particularly in the areas of tobacco control.

Rebecca uses her strengths – which include process, facilitation, and analysis – to help guide Ruche and other people and their organisations to achieve bigger goals, greater outputs, and better results.

**Stop smoking health care the way that we need it: Taking patients’ perspectives to nurses**

Understanding people's perspectives is an essential element of exploring the “right to access health care the way we need it”. Smokefree Nurses realised that the voices of people who smoke are largely missing from dialogue about reaching the Smokefree Aotearoa 2025 goal.

**Aims:**
- to share the perspectives of smokers about the smoking cessation support they want from nurses;
- to share ways nurses can address smoking cessation needs expressed by smokers; and
- to share the evaluation results for the ‘What Smokers Really Want” campaign.

**Methods:** Smokefree Nurses worked with Jeanine Tamati-Paratene to interview Māori, Pacific and other smokers and recently quit ex-smokers about their stop smoking experiences in primary care and what they would prefer. Some of the interviewees went on to feature in a series of very short films. The films include the Hon Tariana Turia as well as four practising nurses, including Angilla Perawiti and Robyn Griffith of Te Hā Oranga, working with four Māori, Pacific and Pākehā patients. One patient is a student nurse. Smokefree Nurses created a website and campaign which includes resources and professional development for nurses.

An independent evaluator, Jodie Robertson (Tainui, Ngāti Maniapoto, Ngāti Apakura, Ngāti Rora) provided extensive feedback about the project.

**Results:** The presentation includes video clips, independent evaluation feedback and updates from some of the video participants.

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**Evelyn Hikuroa**  
*Ngāti Maniapoto*  
Evelyn is a Senior Lecturer at the Faculty of Nursing and Health Studies Manukau Institute of Technology and teaches Hauora Māori and Nursing in Community Settings in the BN and BN Pacific programmes. Her research interests include the role of nursing in smoking cessation and tobacco control. She is the Māori Strategy Leader for Smokefree Nurses Aotearoa and is committed to reducing the harm of tobacco on whānau Māori me ngā iwi katoa.

**Quit for Good: Reducing smoking among Indigenous nursing students using incentives**

Māori adult smoking rates are still higher than non-Māori (36% vs 15.5%) (Ministry of Health, 2013). Similar disparity exists between Māori nurses and their non-Māori colleagues. Nurses’ own smoking is a significant barrier in their ability to deliver smoking cessation interventions in their nursing practice (Radsma & Bortloff, 2009; O’Donovan, 2009). As role models for their clients, nurses who are themselves addicted to tobacco can experience feelings of shame, guilt and hypocrisy (Radsma & Bortloff, 2009). This conflict is compounded for Māori nurses who are seen not only as examples for their profession but importantly for their own people.

Our Quit for Good study tested the efficacy of financial incentives, in the form of a scholarship, to achieve smoking cessation in a cohort of Māori nursing students and whānau members. Participating students and a quit mate of their choosing received a 24 week programme of cessation support. Incremental scholarship payments were made based on biochemically tested smokefree status of both the student and their mate at regular check points throughout the programme. A Kaupapa Māori cessation service delivered the first 12 weeks of support including access to nicotine replacement products via hui at the marae where students were undertaking their nursing education.

Seven of the 11 students and their whānau quit mates had quit smoking by the end of the programme. Creating supportive environments for student nurses to adopt positive health behaviours is an opportunity nursing education providers should capitalise on. Our study is an example of one approach to achieve smoking cessation among Māori student nurses and their whānau members.
Janine Mohamed & Dr Roianne West

Janine Mohamed is a proud Narrunga Kaurna woman from South Australia. Over the past 20 years she has worked in nursing, management, workforce and health policy, and project management in the Aboriginal and Torres Strait Islander health sector. Many of these years have been spent in the Aboriginal Community Controlled Health Sector at state and national levels. Currently, she is the CEO of the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM).

Janine has a passion for both increasing and supporting the Aboriginal and Torres Strait Islander health workforce, in particular, Aboriginal and Torres Strait Islander Australians in the health workforce; in fact, this has been a primary focus in all of her state and national work. She has initiated and/or managed many Aboriginal and Torres Strait Islander health workforce projects, including in workforce development and cultural safety, and has been a representative for both NACCHO and CATSINaM on The National Aboriginal and Torres Strait Islander Health Workforce Working Group and numerous Health Workforce Australia Projects and Committees.

Roianne West was born and raised Kalkadoon on her mother's country in North-West, Queensland. Roianne has over 20 years of experience in Indigenous health. A university trained Registered Nurse with a Masters in Mental Health Nursing and a PhD which explored the factors that impact on Indigenous Australian successful completions in Higher Education. Roianne was the first in the country to be appointed to the position of Nursing Director for Indigenous health and then to the Professor of Indigenous Health and Workforce Development in a joint position between a Hospital and Health Service and Griffith university, School of Nursing and Midwifery. The position entails providing expert advice, high level strategic leadership and community engagement on Indigenous health and Indigenous health research*.

Jennifer Roberts

Jennifer Roberts is the Assistant Head of School for the School of Nursing at the Eastern Institute of Technology based in Hawkes Bay. A registered nurse and active researcher Jennifer has a passion for nursing education in New Zealand. Jennifer is currently undertaking an Educational Doctorate at Massey University exploring Māori nursing student success and culturally safe models of nursing education. Jennifer is part of a bicultural research team evaluating the PATU © model and presents the work of the team to date.

Evaluating the PATU© model - Promoting health and whānaungatanga

The development of successful culturally appropriate models of health care is vital to fight health inequalities in Aotearoa. PATU© is a model of health and fitness education developed by Māori for Māori. Levi Armstrong, a Bachelor of Sport and Recreation graduate, designed PATU© as a Māori specific intervention to improve Ngāti Kahungunu health outcomes. PATU© combines a high intensity exercise programme with health promotion activities delivered using te reo me ōna tikanga Māori concepts.

An evaluation of PATU©, funded by a Health Research Council Māori Health Development grant aimed to capture qualitative phenomenological data from PATU© participants through interviews. Participants were in two cohorts, one primarily Māori at the PATU© gym and the other at a Hastings workplace where sessions were run for employees. In Addition, anthropometric data from all participants in the programme were captured.

The principal finding from this evaluation are that Māori align themselves well with the PATU© model. PATU© was seen as an ‘urban marae’, where people wanted to go for more than weight loss, fitness and lifestyle education. Although weight loss was not the main motivator for attending quantitative findings indicate physical measures improved. The Whanaungatanga created through PATU© was described as the critical factor in the success of the PATU© model which is in increasing demand across Aotearoa. The findings from this evaluation have implications for health providers wanting to design and implement successful health promotion models for Māori.

Lisa Hurrell

Lisa Hurrell is a Registered Nurse working at Rolleston Medical Centre and the Selwyn Skin Cancer Practice. She completed her Bachelor of Nursing at the Christchurch Polytechnic Institute of Technology in 2005. She has worked in a number of areas but has found that the community setting is where her heart lies and has held a position at the medical centre for the last 5 years. She helped one of the general practitioners to set up and establish the Selwyn Skin Cancer Practice which is separate from the general medical practice in 2013 after assisting him during surgical procedures for a number of years. She has found the surgical side of this work fascinating and has developed her skills, becoming the first nurse in New Zealand to hold her Certificate of skin cancer medicine and surgery. She currently resides in her home town Christchurch with her husband and two young sons.
### Stepping up to the challenge

The idea to present this talk was first brought up at one of our local hui meetings after I was discussing my journey through my nursing career, the challenges I have faced and the achievements I have made. Isn’t it amazing what you can achieve when you are encouraged and supported? Looking back at my training and how students were expected to fit into a neat and tidy box and not rock the boat which I didn’t fit into, the fact that I nearly didn’t make it until I learned to mould into what they wanted. Now, I am working for a great employer who encourages me to speak my mind, has recognised and supported me to develop my skills and helped push me to stand up for myself when others have tried to keep me in the ‘accepted box’, pushing the boundaries of what nurses ‘can do’ and stepping up to the challenge of realising my potential and passing on those benefits to colleagues and my patient. This is my journey.

**Dhyanne Hohepa**  
*Ngāti Raukawa ki Wharepuhunga*

Dhyanne graduated with her bachelor in health science in 2007 and has worked predominately in primary health care settings including: general practice, Marae based clinics, accident and medical clinics and currently as a prison staff nurse working at Auckland Regional Women’s Correctional Facility. Dhyanne absolute passionate about Māori health, and gets inspiration from her own whānau and because she believes that Māori clinicians can make a real impact for our people. Dhyanne completed her Masters of nursing this year in June and her presentation is part of her Masters dissertation. Dhyanne next goal is to become fluent in Te Reo Māori and to eventually begin her journey to Nurse Practitioner registration. Dhyanne has a loving family; mum, dad brothers and sisters, two handsome nephews and four beautiful nieces, a loving partner and an absolutely love to travel.

**What is the health impact of Methamphetamine on the health of New Zealand Māori?**

**Aim:** To determine what is the impact of methamphetamine on the health of New Zealand Māori?

**Methodology:** Integrative review of literature searched through Medline Ovid, psychINFO, Cinahl plus and Google scholar using the PICO framework. The Māori model of health was used to classify each health impact.

**Results:** Methamphetamine has a significant impact on the holistic wellbeing of the individual. The utilisation of Te Whare Tapa Whā, a Māori model of health, identified that the impact of methamphetamine affects all four cornerstones of health. It affects the physical, spiritual, mental and whānau aspects of holistic health. There is a significant emphasis on the physical effects methamphetamine has on the individual with most common being hypertension and specific cardiovascular diseases. Other physical effects include neurological effects, oral and sexual health effects along with weight loss insomnia and methamphetamine death. Mental health effects included psychosis, depression, suicidal behaviours and paranoia as common themes that induced detrimental effects on the user and their whānau. The spirit is effected by the development of aggressive behaviours essentially producing violent episodes. The whānau withstand a great burden from the methamphetamine user where relationships, child safety, and family structures are compromised.

**Conclusion:** Conclusively methamphetamine has a significant and detrimental effect on the health status of New Zealand Māori. Compounded with poor existing health statistics, the effects are greater than expected. Methamphetamine significantly effects all four dimensions of health that represent Te Whare Tapa Whā and tangata Māori. The implications are substantial and require further research and investigation.

**Terryann Clark**  

Terryann is a senior lecturer at the School of Nursing, The University of Auckland. She is the principal investigator of the Youth’12 national youth health survey and a founding member of the Adolescent Health Research Group. She is a nurse and working in youth health. Her major research interests are: youth health, indigenous and Māori health, chronic illness and disability for teens, mental health, sexual health, healthy youth development and resilience.

**Māori youth health trends and disparities over the last decade: Evidence from the Youth 2000 survey series**

**Aim:** To present the health status, trends and disparities for Māori youth attending secondary school.

**Methods:** Utilising Youth2000 survey series data (undertaken in 2001, 2007 and 2012), prevalence of major health and wellbeing issues, trends in healthcare and an examination of health disparities compared to NZ European/Pākehā youth will be described.

**Results:** Māori youth report significant improvements in suicide attempts, smoking, and marijuana use, being sexually active, gambling, and being a passenger with a drunk driver, being hit or harmed on purpose, sexual abuse and coercion.
However some things have not improved including; access to healthcare, not using contraception and condoms, depressive symptoms, teachers expecting students to do well, having an adult outside their family they could talk to, feel safe in their neighbourhood. Significant disparities persist compared to NZ European students including suicide attempts, being in a passenger with a drink driver, smoking, alcohol use, marijuana use, using contraception and being exposed to violence.

Conclusions: While Māori youth have made significant improvements to their wellbeing over the past decade, there still remain areas that put young people at risk. Nurses have a role in ensuring that culturally and youth specific strategies are utilised to address and narrow these persistent disparities.

Dr Heather Gifford, Dr Amohia Boulton, Prof Denise Wilson and Teresa Taylor

Dr Heather Gifford (RN, MPH, PhD)
Ngāti Hauiti, Te Atihaunui a Pāpārangi
Heather is the Co-Director of Whakauae Research Services in Whanganui and the principal investigator for the research. Her area of interest is tobacco control research from a public policy public health perspective.

Dr Amohia Boulton (PhD, MA (App), Soc Sci Res)
Ngāti Ranginui, Ngāi te Rangi, Ngāti Pukenga
Amohia is the Kaiārahi Rangahau for Whakauae Research Services and currently Acting Research Director for Whakauae. She has experience in public policy and academia with a commitment to Māori health.

Professor Denise Wilson (RN, BA SocSci, MZ (Hons), PhD)
Ngāti Tahinga (Tainui)
Denise is the Professor for Māori Health and the Director of Taupua Waiora Centre for Māori Health Research at AUT University. Her research and publication activities are focused on Māori/indigenous health, family violence, cultural safety and health (particularly Māori) workforce development.

Teresa Taylor
Ngāti Kahungunu ki Wairarapa, Ngāti Raukawa ki te Tonga
Teresa is a Co-Director for T & T Consulting Ltd and has experience in the field of hauora Māori as well as a background in training, facilitation and co-ordination with particular emphasis in Māori Tobacco Control and smoking cessation.

Māori Nurses and Smoking: exploring the context and opportunities for change
Heather and a team of researchers from NZNO and AUT have been working with Te Rūnanga o Aotearoa (NZNO) for the past three years on a research project exploring issues and reviewing options for reducing smoking among Māori nurses. The presenters will discuss the final results of this research and will talk about the next steps; an intervention with student nurses. This research is funded by the Health Research Council. offers a set of recommendations to improve these statistics for our nurses.
Workshops – Tino Rangatiratanga – Māori Nurses workshop

Tino Rangatiratanga – Māori Nurses workshop

The tensions of being a nurse and being a Māori nurse, has often been raised at Te Rūnanga hui. The ability to work in two worlds has been long reflected in our bicultural heritage which has long documented the tensions between western ideologies and Māori models of wellbeing.

Operating in Te Ao Māori and bringing a Māori perspective to the nursing profession is what we do as Maori nurses. We need to define what a Māori nurse is, protect it and have the courage to not backing down. To teach us to build resilience and challenging status quo and how do we change from is currently seen as normal.

As indigenous nursing professionals we are committed to reaffirming our rights under the United Nations Declaration of Indigenous people's article 3, to self-determine, and this will underpin any future Māori nursing strategy. Just as our early Māori nursing pioneers, like Te Akenehi Hei realised, we have nothing to fear when moving forward, our tupuna made the sacrifice, we must ensure our future mokopuna, whānau, hapū and iwi receive the best health care available in Aotearoa.

As we affirmed at our inaugural conference last year “if we can't determine where we want to go as Māori health professionals, and if we can't determine what is best for us as Māori health professionals then we will not be able to protect our health and wellbeing”.

The purpose of the workshop is to articulate and determine for ourselves what makes us unique as Māori nurses, so that we can build and develop resilience and the confidence in ourselves to show that these Māori models of health add value and make a difference. We must remember to have faith in ourselves and to be courageous for our whānau, hapū and iwi hauora aspirations.

We need to own who we are, we need to determine and protect it and we are not backing down. This is who we are.

Workshop questions for consideration:

• How do you describe what you do?
• How do you deliver “patient centred care”? Or who is central to your care?
• What word would you use to describe what you do? And why? (e.g. Nurse, Nēhi, Tapuhi)

In preparation for the workshops on ‘Tino Rangatiratanga Defining Māori’ please can you read the following articles.

Nursing in Aotearoa New Zealand: A Definition

Measuring Maori Wellbeing - Paper by Prof Mason - Treasury Guest Lecture - Aug 2006 which can be found at http://www.treasury.govt.nz/publications/media-speeches/guestlectures/pdfs/tgls-durie.pdf

POWHIRI
WAIATA: Whakatake te hau
Whakatake te hau ki te uru,
Whakatake te hau ki te tonga.
Kia mākinakina ki uta,
Kia mātaratara ki tae.
E hi ake ana te atākura he tio,
he huka, he hauhunga.
Haumi e! Hui e! Tāki e!

KERRI NUKU
WAIATA: Te Pūtōrino
Te pūtōrino a Raukatauri
Iri piri runga peka e
Kei roto ko te puhi o te tangi
Korowhita whita e
Te tangi hotuhotu mokemoke
Mo te tāu kua rere e (x2)

TERESA WALL
WAIATA: Ehara i tea mea
Ehara i te mea
Nō ināianei te aroha
Nō ngā tūpuna
I tuku iho i tuku iho
Te whenua te whenua
Hei oranga mo te iwi
Nō ngā tūpuna
I tuku iho i tuku iho
Whakapono tūmanako
Te aroha te mea nui
Nō ngā tūpuna
I tuku iho i tuku iho

DR MOANA JACKSON
WAIATA: Mo te Tai Rāwhiti
Ko Waiapu te awa
Ko Ngāti Porou te iwi
Tāku manawa ko Te Tai Rāwhiti
Tāku whānau hoki
Kei konei tāku kainga
Tāku mana tangata
Tāku whānau hoki
Ko Waiapu te awa
Ko Ngāti Porou te iwi
Tāku mana tangata
Tāku whānau hoki
Ko Waiapu te awa
Ko Ngāti Porou te iwi
Tāku mana tangata
Tāku whānau hoki

VALMAINE TOKI
WAIATA: Ngā kōrero o te Wānanga
Ngā kōrero o te wānanga
Ngā kōrero o te wānanga
Hei Amiorangi i tēnei whare
Te o Tē Roa, Te Aroha o Te Wai
Pounamu
E rere nei ko te karanga
I raro i te maru o tēnei rōpū rangatira
Te Rūnanga o Aotearoa
Kia māhi atu ki ngā waka no ngā hau e whā
(o te motu nei)
Ko te tauri, koutou ngā kuia, kuia
mōrehu
Repeat Verse 1

KAREN JOHANSEN
WAIATA: Purea nei
Purea nei e te hau
Horoa e te ua
Whiti whitiria e te rā
Māhea ake ngā pō raruraru
Makere ana ngā here
E rere wairua e rere
Ki ngā hau o te rangi
Whiti whitiria e te rā
Māhea ake ngā po raruraru
Makere ana ngā here

MAUREEN ALLAN
WAIATA: Ngā Puawaitanga o Ngāpuhi
Whakarongo mai ki te reo e tangi nei
E ringihia mai ana mai i āku kamo ngā roimata e
Whiti mai tē rā ngaro ana tē mana
Ngaro noa tē pōuri kaua e mau riri
Anei anō he rā
Maranga mai e tē rā ngā hau e whā
Ngāpuhi
Kia mau, kia ū, kia pukupu ai
Ki ngā akoranga nui
Takahia tē ao ka ketea tē iwi
E tō tangata tō mau tōngi rōpū iwi orā i rātou kua mene ki te pō
Tēnei tē mihi ki ngā kaiawahea
Ki ngā wha, ngā mātua anēi ra ko ngā hau
E puāwai tē mai anēi
Maranga mai e tē iwi o ngā hau e whā
Ngāpuhi
Kia mau, kia ū, kia pukupu ai
Ki ngā akoranga nui
Maranga mai e tē rā
Maranga mai e tē rā
Maranga mai e tē rā

ARIA GRAHAM
WAIATA: Born of greatness
He kākano ahu
I ruia i Rangiātea
And I will never be lost
I am a seed
Descended from a line of chiefs
He kākano ahu
Chorus

MARANGA MAI E TĒ IWI
Kia māhi atu ki ngā waka no ngā hau e whā
(o te motu nei)
Ko te tauri, koutou ngā kuia, kuia
mōrehu
Repeat Verse 1

KARAKIA
WAIATA: Piriponotia
Piriponotia i roto i ngā mahi
Mahi tupuna, mahi wairua hoki
Kia mārama ai te hinengaro o te iwi
Māori
Aue me hōnō
Ngā hau e whā o te motu
I te ara whakaaro nui
o tātou… tātou e
Chorus

DAY 2 HUI ā-TAU
KARAKIA
WAIATA: He Honore
He hōnōre
He korōria
Maungarongo ki te whenua
He whakaaro pai e
Ki ngā tangata katoa
Ake ake, ake ake
Āmine
Te Atua, Te Piringa, Tōku oranga

DR MISTY WILKIE-CONDIFF
WAIATA: E ngā iwi e
Ngā iwi e! Ngā iwi e!
....
Kia kotahi ra te Mo-a-na nui a Kiwa e-i-a-i-e --

Kia mau ra! Kia mau ra!
ki te mana motuhake me te aroha
E tama mau ra! E tama mau ra!
E tama tū, E tama tū, tama orana!
Ngā iwi e! Ngā iwi e!
Kia kotahi mai te Moana-“nui”a -kiwa

EVELYN HIKUROA
**WAIATA: Tahni nei taru kino**
Tahi nei taru kino
Mahi whaiāipo
Kei te wehenga
Aroha kau ana
Haere mai rā
Kia ahau nei rā
Te aroha tino nui
Haere mai
Tūtiro atu au
Tahuri kē koe
Kei roto i a koe
Pirangi mai ana
Haere mai rā
Kia ahau nei rā
Te aroha tino nui
Haere mai

LISA HURRELL
**WAIATA: E te Hokowhitu**
E te Hokowhitu a Tū
Kia kaha rā
Kati rā te hingahinga
Kī raro rā
Mā ngā whakaaro
Kei runga rawa
Hei ārahī ki te ara
E Tīka aia
Whirinaki, whirinaki
Tātou katoa
Kia kotahi rā
Ngā marae e tū noa nei
Ngā maunga e tū noa nei
Aue rā e tama mā
Te mame te pōuri rau
E patu nei i ahau ina
Ngarimu aue
Anei to iwi e
E tangi nei e

DHYANNE HOHEPA
**WAIATA: He putiputi pai**
He putiputi pai katohia
Hei piri ki te uma e te tau
He tau aroha koe, koronga roa
Kia kaha i te aho
Kia piri tonu mai
He putiputi pai katohia

TERRYANN CLARK
**WAIATA: Ka Mārama**
Ka Mārama i roto
Ka tahi ko waho
Hei kaitiaki mauri e
He Moemoeā, ke kaupapa
Mauri kōrero ki te whānau, hapū,
Mauri mana, tapu tikanga
Wairua whakapapa e
Hehe iho i ngā atua
Ēnei kupu ki te tangata
Hei Kaitiaki mō te ao Hurihuri nei

KARAKIA
**WAIATA: Wairua Tapu**
Wairua tapu tau mai rā
Wairua tapu mai runga
Uhia mai ngā taonga pai
Homai to aroha
Wai hia kia tika
Akona mai rā kia u ki te pai
Kororia kia mā tonu rā
Homai te tino kororia

**PAT COOK & ANAMARIA WATENE**
**WAIATA: Tauranga Moana**
Tauranga Moana,
Mauao te Maunga,
Ngāti Ranginui, Ngai te rangi e mihi nei e tau nei
Rapua e te e
Puritia e hine,
a ngā wawatanga, a ngā tipuna,
I roto i tēnei ao hou
Puritia kia mau, kia mau
Ngā taonga mauri e
Mauri e.

**DONNA FOXALL**
**WAIATA: Tai Aroha**
Ko te aroha anō he wai
E pupū ake ana
He awa e māpunia ma ana
I roto i te whātū manawa
Ko tona matapuna, he hôhonu
Ā ina ia ka rere anō x 2
He taimu, he taimu
He tiao e, he tiao e
He tainui

**GRACE WONG & REBECCA RUVHUI-COLLINS**
**WAIATA: Ma te Kahukura**
Rere tōtika rere pai (x3) rere runga rawa rā e
Ma te kahukura ka rere te manu (Ma ngā huruhuru nei)
Kia rere koe (Rere runga rawa e)
Kua tae ake ko koe ki te taumata
Whakatau mai rā e
Chorus
Mau anā ō tākō aroha
Whai ake i ngā whētū
Rere tōtika rere pai
Rere runga rawa rā e
Rere tōtika rere pai (x3) rere runga rawa rā e

**JENNIFER ROBERTS**
**WAIATA: Māku**
Māku e mihi atu
Kia koutou te iwi Māori
Nō reira te tēnei te mihi
Kia koutou, kia ora rā
Ka tangi te manu tioriori
Ka tangi te ngākau tangata
Nō reira tēnei te mihi
Kia koutou, kia ora rā

**LISA HURRELL**
**WAIATA: E te Hokowhitu**
E te Hokowhitu a Tū
Kia kaha rā
Kati rā te hingahinga
Kī raro rā
Mā ngā whakaaro
Kei runga rawa
Hei ārahī ki te ara
E Tīka aia
Whirinaki, whirinaki
Tātou katoa
Kia kotahi rā
Ngā marae e tū noa nei
Ngā maunga e tū noa nei
Aue rā e tama mā
Te mame te pōuri rau
E patu nei i ahau ina
Ngarimu aue
Anei to iwi e
E tangi nei e

**DHYANNE HOHEPA**
**WAIATA: He putiputi pai**
He putiputi pai katohia
Hei piri ki te uma e te tau
He tau aroha koe, koronga roa
Kia kaha i te aho
Kia piri tonu mai
He putiputi pai katohia

**TERRYANN CLARK**
**WAIATA: Ka Mārama**
Ka Mārama i roto
Kia tahi ki waho
Hei kaitiaki mauriora e
He Moemoeā, he kaupapa
Mauriora ki te whānau, hapū, iwi
Mauri mana, tapu tikanga
Wairua whakapapa e
Hehe iho i ngā atua
Ēnei kupu ki te tangata
Hei Kaitiaki mō te ao Hurihuri nei

**JENNIFER ROBERTS**
**WAIATA: Māku**
Māku e mihi atu
Kia koutou te iwi Māori
Nō reira te tēnei te mihi
Kia koutou, kia ora rā
Ka tangi te manu tioriori
Ka tangi te ngākau tangata
Nō reira te tēnei te mihi
Kia koutou, kia ora rā
Conference and venue information

Hākari
The Hākari will held on Saturday 8 August at Eden Park, Level 4 Lounge. The venue will re-open at 6:00pm. Pre-dinner refreshments will be served from 5:00pm in the East Foyer, as well as a mini-tour of Eden Park for those who wish to participate.

The Hākari is strictly for conference attendees only. The conference name badge is your entry to the Hākari. Additional tickets purchased for guests are in your name badge pocket.

The Hākari will conclude by 8.00 pm. Buses will be leaving promptly to take members travelling back to accommodation (further information will be provided on the day).

Venue
The conference is being held in the Eden Park Function Centre, Level 4 Lounge. This is a non smoking event.

All sessions will be held in the Level 4 Lounge. Morning tea, lunch, afternoon tea and the Hākari will also be served in this area. The exhibitors are located at the rear of the room.

Level 4 is accessible by lifts and stairs outside by the registration desk.

Toilet facilities are located out in the registration area.

Attendees are welcome to go out on to the balcony (weather permitting) which is accessible behind the exhibitors.

Field
You must stay off the playing fields at all times while you are onsite at Eden Park. A fee applies to any persons found accessing the fields.

Parking
Free parking is available in car park P5, off Reimers Avenue.

Emergency preparedness
In the unlikely event of an emergency, please follow the directions of the Eden Park venue staff. An emergency card is included in your name badge holders, please also complete this as soon as possible and keep in your name badge holder.

The evacuation meeting point is out on Reimers Ave through Gate G.

Feedback
Your feedback on the conference is welcome. A survey will be available after the conference. In the meantime, if you have any additional feedback please feel free to send this to the Conference Organiser.

Diana Geerling
New Zealand Nurses Organisation
email: dianag@nzno.org.nz.
NZNO is both a professional association and trade union, one of the biggest and strongest in New Zealand because of our active membership.

How does joining benefit you?

- There are a diverse range of benefits from NZNO membership
- Industrial Services - wage and working conditions' negotiations and help with any disciplinary issues. Campaigning on the key issues affecting members.
- Professional Services - 20 special interest colleges/sections providing professional leadership, support, advice and advocacy
- Legal Services - a team of experienced lawyers and a competence adviser to represent members through investigations
- Kai Tiaki Nursing New Zealand - keeping members in touch with the world of nursing and health
- Indemnity Insurance - comprehensive insurance specially designed for the work members do
- Scholarships and Grants - there’s a wide range available to members
- Education - training seminars, study days, conferences and workshops on ethical, legal, professional and industrial issues for career development
- Publications including standards, code of ethics, position statements, advice and guidelines
- Advocacy through policy development, submissions, representation on external organisations and advisory groups
- A comprehensive research programme to support the aspirations of members
- A comprehensive library - resource material often not available elsewhere
- Supplier benefits e.g. gym membership, Resene Paint, Travel and Health Insurance, etc

For more information and for membership conditions, please visit our website:

www.nzno.org.nz