



KOI TŪ:
THE CENTRE FOR
INFORMED FUTURES

ME TUPU I A WĪWĪ, ME TUPU I A WĀWĀ

An intergenerational project vital to the ongoing growth and success of Ngāti Whātua Ōrākei







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Welcome

Ngāti Whātua Ōrākei Whai Māia is constantly looking at ways to improves the services it provides to Ngāti Whātua Ōrākei (NWŌ) members, with a view to improving hapū health and wellbeing in the long term. We partnered with Koi Tū: The Centre for Informed Futures* to help us better understand the hapū's current state of wellbeing and identify ways to improve outcomes in key areas.

The project aims to generate outcomes that benefit future generations. It takes a holistic, whole lifecourse approach to wellbeing, focusing primarily on ways of improving hapū health. It also incorporates other components of social development such as education, employment, and social services.

We have analysed data from Whai Māia and from publicly available databases, and identified potential additions to the range of programmes and services currently offered to NWŌ members.

We have captured snapshots of key aspects of the hapū's wellbeing, such as education, housing, and physical health, and have calculated population projections to see how the makeup of the hapū is predicted to change over the next 50 years.

The project is ongoing and this interim report details the progress achieved over the past 12 months.†



^{*}Koi Tū: The Centre for Informed Futures is a research centre and think tank at the University of Auckland

[†] This is an abbreviated version of an original report prepared in 2022 For further information please access the full report, available from Whai Māia

MEET THE TEAM



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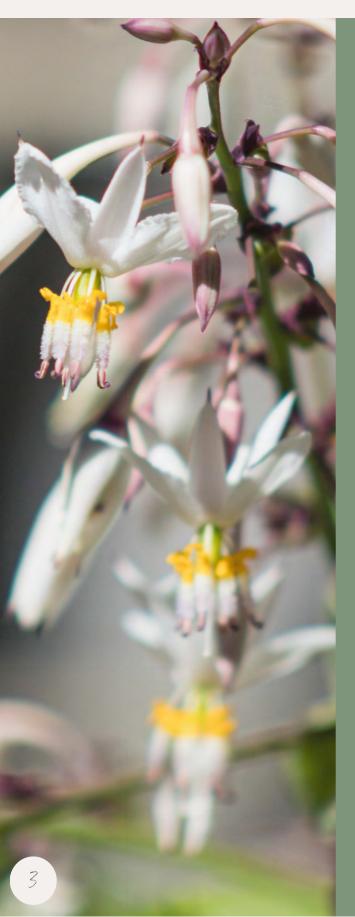


ATAKURA HUNIA



MICHAEL COURTENAY

ME TUPU I A WĪWĪ, ME TUPU I A WĀWĀ



The name Me tupu i a wīwī, me tupu i a wāwā is derived from the whakatauakī o Ihenga, referring to the rengarenga, located geographically in the Kaipara district, heartlands of Ngāti Whātua.

ME TUPU I A WĪWĪ, I A WĀWĀ, TURIA I TE WERA, PIRI KI TE RITO O TE RENGARENGA, WAIHO ME WHAKAPAKARI KI TE HUA O TE KAWARIKI

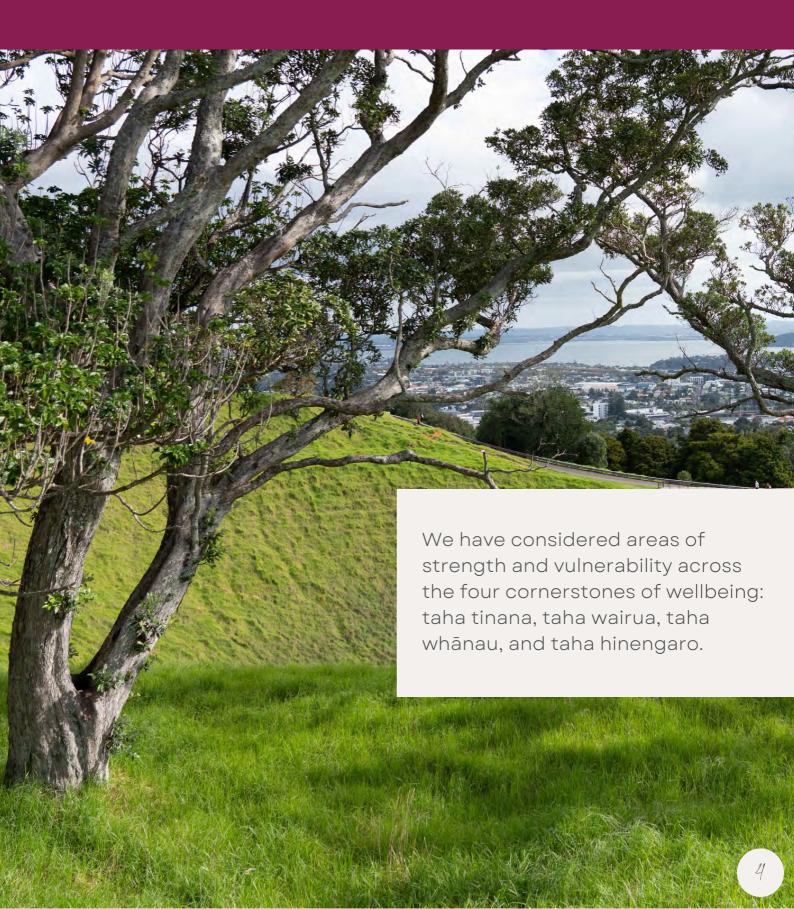
All parts of the rengarenga lily's life cycle, referred to in Ihenga's proverb, are recognised as integral to its survival... the holistic principle of regeneration contained in his saying, with the wider issue of cultural regeneration.

Ihenga likened his own future to the fruiting of the rengarenga. The leader reminded his attackers that his parental status ensured that there would be another generation to look after and protect him, or failing that, to continue where he could not. In Ihenga's mind, each component performed a function vital to the overall life cycle of the plant. He understood that the rengarenga is not able to produce fruit without the flower nor to supply seed without the fruit. Other areas of the plant were important to its survival: the vigorous root structure of the rengarenga enables the lily to multiply quickly through division. However, no one component is more important than another. The masses of white flowers produced on its long stems in summer, although showy, are no more vital to its survival than the unseen roots.

Project name suggested by Atakura Hunia; proverborigin story provided by Rowena Dunn.

CHAPTER 1

HEALTH NEEDS & RECOMMENDATIONS



Taha tinana

The physical health status of pakeke sits roughly mid-way between Māori in general and non-Māori. Adult hapū members appear to be performing relatively well in terms of rates of:



general disability



cancer



heart attack & stroke



diabetes

Less information is available for pepi and tamariki but rates of registration with Tamariki Ora/Well Child services and childhood immunisation are high. There is opportunity for targeted health promotion for rangatahi, for instance around sexual health, alcohol, and the use of tobacco and other substances.

Current health investments focus on the provision of primary health care through Ōrākei Health, vaccination centres, and partnerships with external providers such as Whānau Ora and NIB. Utilisation of services has been increasing in recent years but there is room for improvement.



Taha hinengaro

NWŌ has identified mental health as a priority and has planned a Mental Health Strategy and Mahi a Atua programme. In the meantime, the hapū works to support the mental wellbeing of its members through indirect methods aimed at promoting whanaungatanga such as:



e-pānui



podcasts



other social media

More direct mental health referral and support is available via Ōrākei Health and Whānau Ora. However, the NIB programme was designed to cover taha tinana and does not address mental health needs. Additionally, publicly available services may not be meeting the needs of the hapū, particularly for young people. An estimated 43% of female Māori rangatahi and 23% of male Māori rangatahi have some level of compromised mental wellbeing. Youth mental health is therefore an area of particular importance.



Taha wairua

We recognise the critical importance of cultural identity and collective wellbeing, including the role of te reo Māori, and its contribution to the overall wellbeing of the hapū.

We note a range of potential contributors to taha wairua such as a sense of identity or strong community links.

The hapū clearly places great importance on upholding taha wairua and offers a range of targeted programmes and services including:



pēpi packs



marae-based holiday programmes



kapa haka



Taha whanau

Whānau are supported to thrive through hapū investment focusing on:







housing

employment support

education grants

Within the sphere of taha whānau and more broadly across all aspects of wellbeing, the impacts of intergenerational trauma and Aotearoa's colonial history require acknowledgement.

There is a significant opportunity to better equip tamariki and rangatahi to navigate an increasingly digitally-connected world (the planned kura on hapū land offering an ideal setting for this), and to interrupt intergenerational cycles of disadvantage for whānau involved with Oranga Tamariki and the Corrections system.



THERE IS MUCH TO CELEBRATE! ...

Ngāti Whātua Ōrākei is making many positive advances, especially in areas relating to:



Physical health, particularly for pakeke



Cultural and spiritual wellbeing



Housing



Employment support



Education

We acknowledge the wide range of programmes and services that the hapu has put in place, such as the NIB health insurance scheme, vaccination drives, Kāinga Kaumātua, and the establishment of Te Puna Reo Okahukura.

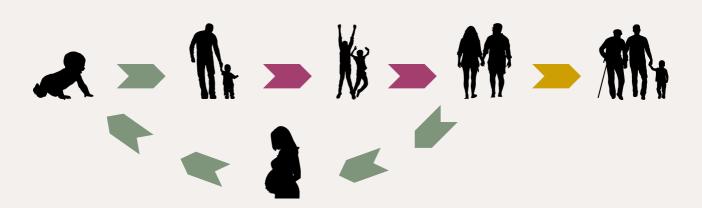
... AND ALSO MUCH TO PROGRESS

Taking a long-term view of the future growth and success of Ngāti Whātua Ōrākei, we conclude that a primary need is to focus on further promoting health and wellbeing in areas that have the clearest potential to improve intergenerational outcomes.



RECOMMENDATIONS

We propose adopting a life course approach to wellbeing through three primary pathways, each tailored to specific parts of the life course. All three pathways intersect and interact, and together will promote intergenerational physical, mental, familial, spiritual and cultural health, and hapū identity.



Pathway 1: From prior to conception through to early childhood
Pathway 2: From early childhood through to young adulthood
Pathway 3: From middle age through to old age

Collectively, these proposed pathways are intended to lead to two key outcomes:

- 1. Parents and guardians are supported to raise tamariki who are mentally and spiritually resilient, who feel connected to their whānau, and who have been supported to reach their potential in regard to brain development with clear life-long positive consequences in terms of education, employment, relationships, and health.
- 2. Enhanced preventive care and health promotion for adults, to reduce the intergenerational impact of trauma and non-communicable disease, and to maintain wellbeing in older age.



A common thread: executive functions

As you read about the 3 pathways you may notice a common thread woven through our recommendations: a strong emphasis on **executive functions development** in pēpi and tamariki.

Early life is the most effective period in which to intervene for lifelong wellbeing and success. This period is critical for brain development, including executive functions. Executive functions are a set of fundamentally important skills that help us to learn, pay attention, exert self-control, and develop good relationships with others.

Having well-developed executive functions is linked to better physical and mental health, school achievement, employment, and quality of life. On the other hand, impaired executive functions are linked to negative outcomes throughout life such as school failure and greater risk of addiction and crime involvement. These negative outcomes may be passed down to future generations, creating a cycle of intergenerational disadvantage.

Impaired executive functions have wide-reaching individual, whānau and community impacts with intergenerational effects. Therefore, focusing on early preventative intervention to ensure optimal executive functions development is a critically important way to enable long term wellbeing across generations.

A note on intergenerational trauma

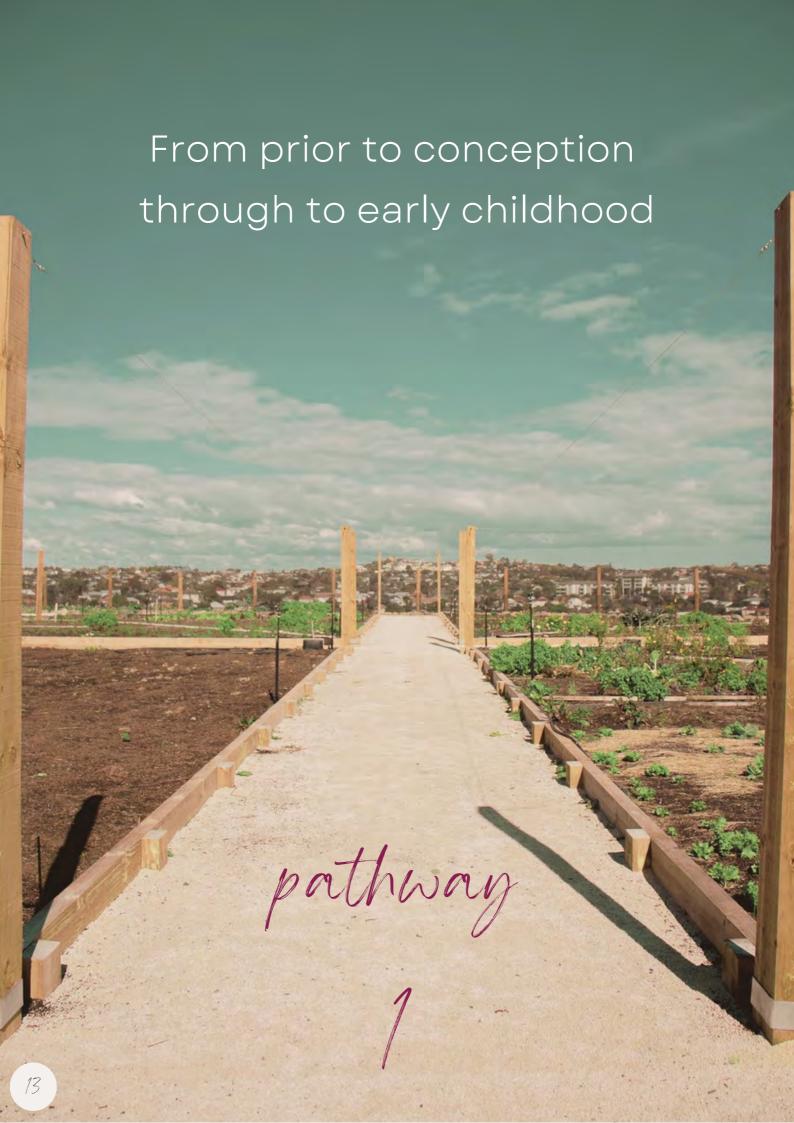
Traumatic experiences during childhood can lead to adverse health outcomes later in life. Recently it has become clear that these adult outcomes are, in turn, related to greater risk of trauma for the next generation.

One key pathway by which trauma passes along generations involves parenting styles. A parent or caregiver who has survived trauma may experience mental distress that affects the formation of a strong bond with their child. Tamariki lacking a strong bond with their parent or caregiver are at greater risk of physical and psychosocial problems in adulthood.

We also now know that the children of māmā who experienced even mild to moderate depression during pregnancy tend to have less well developed executive functions, which may have lifelong impact on their health and wellbeing.

While past traumas endured by tangata whenua cannot be undone, their impacts on current and future generations can, at least in part, be reduced through sustained targeted effort.

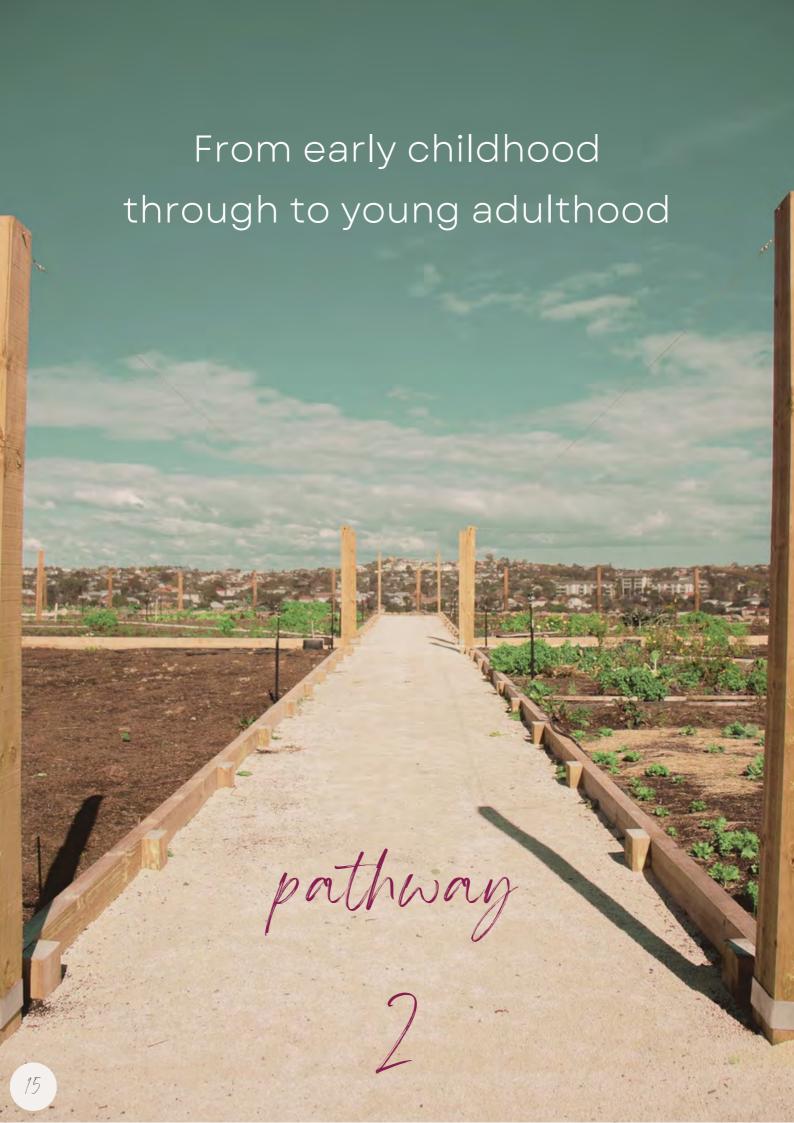
The biggest window of opportunity for effectively tackling the impact of trauma lies in the first few years of a child's life. We therefore believe that pathway 1 – from prior to conception through to early childhood – is particularly important for NWŌ.





In pathway 1, we suggest a focus on the **wellbeing of hapū māmā, pēpi, and young tamariki**, with particular attention paid to promoting executive functions development in young tamariki. Possible strategies include:

- Providing education for future māmā and pāpā starting before pregnancy, on key ways to encourage optimal executive functions development in their tamariki.
- **Minimising stressors** across the perinatal period (before pregnancy through to around one year post-birth).
- Providing access to culturally safe maternity care.
- Screening for mental distress early in pregnancy and providing a choice of management options for women showing even mild symptoms.
- Applying intensive **parent-child interventions** for whānau in need of extra support.
- Promoting quality childcare and early childhood education.



In pathway 2, we suggest a focus on mental health for tamariki and rangatahi using approaches that prevent mental distress or intervene before symptoms become moderate or severe. Possible strategies include:

- Screening tamariki at 4 years of age using a holistic 'Whole Child' panel to assess executive functions development.
- Focusing on **educational approaches** that promote executive functions within the NWŌ-developed kura kaupapa Māori.
- Promoting language development, including te reo Māori, in the first years of life.
- Applying early literacy interventions where needed.
- Screening in late childhood and early adolescence for behavioural and emotional problems.

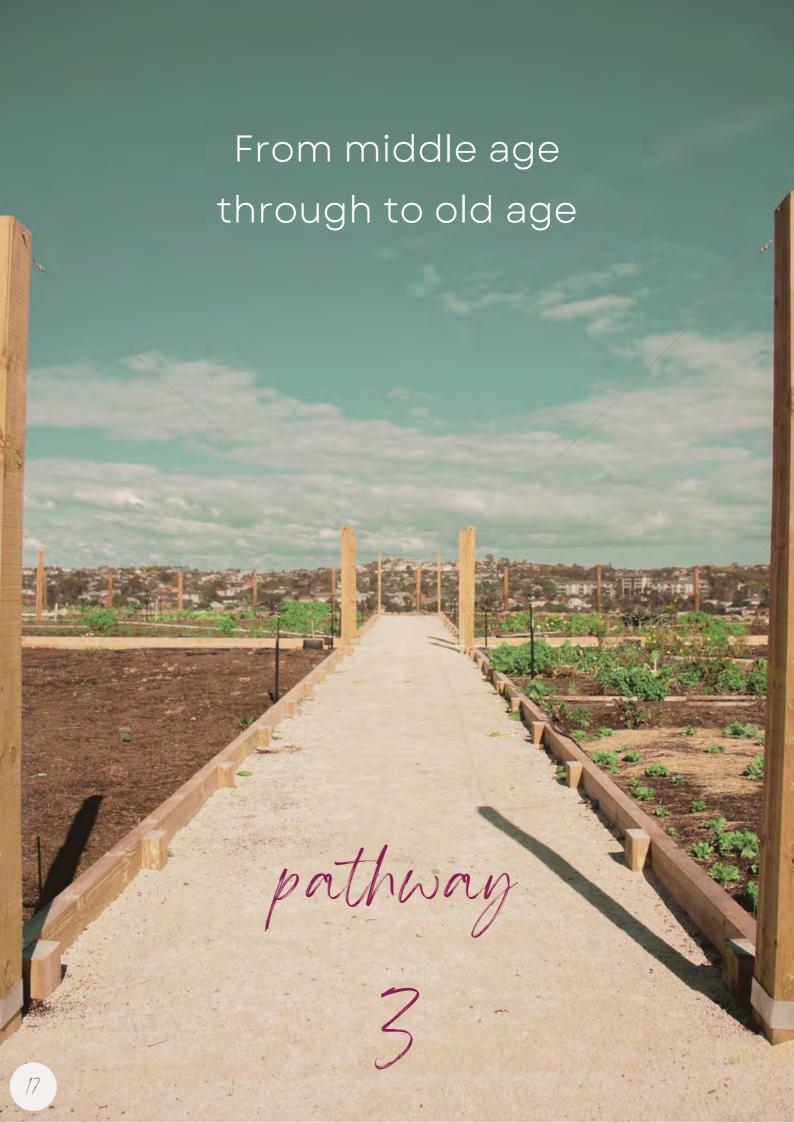
• Developing community-led programmes to identify and alleviate key life stressors for rangatahi.



 Developing a kaumātuarangatahi mentorship programme.

• Promoting identity and engagement through in-person structured social interactions (such as te reo Māori courses and youth groups).





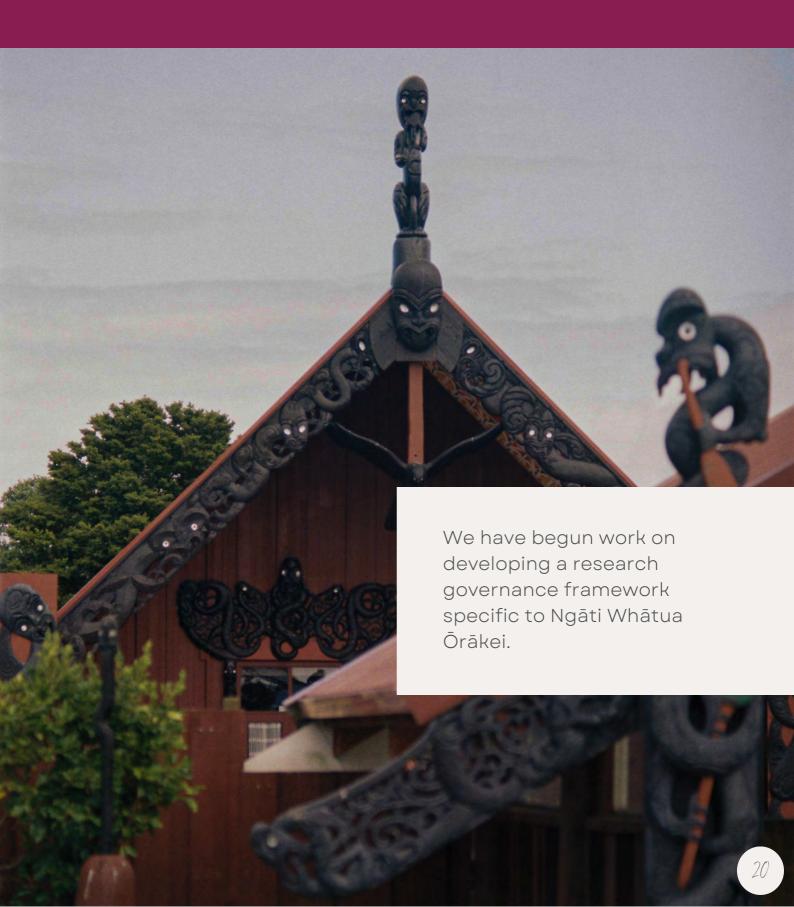
In pathway 3, we suggest prioritising the maintenance of health and wellbeing in later life by focusing on holistic opportunities rather than physical deficits. Possible strategies include:

- Promoting universal access to comprehensive health screening, including screening for musculoskeletal and cognitive health.
- Designing interventions for postretirement members that promote healthy aging and focus on holistic opportunities, such as social and community interactions, exercise, cognitive activities (with a particular focus on mate wareware/dementia), intergenerational contact, and cultural activities.
- Acknowledging and having conversations around intergenerational trauma. Drawing on lived experiences of whānau may help to delve into sensitive and often unspoken issues like family violence. Although this may be challenging, insights obtained could help determine how to interrupt intergenerational transfer of harm and lay a stronger foundation for healthy and successful futures.





CHAPTER 2 RESEARCH GOVERNANCE



CO-DESIGN

Co-design is an approach that underpins all of *Me tupu i a wīwī, me tupu i a wāwā*. It ensures that everything jointly created by Ngāti Whātua Ōrākei Whai Māia and Koi Tū: The Centre for Informed Futures meets NWŌ's needs.

The concept of co-design is of particular importance to the Research Governance part of this project. Ngāti Whātua Ōrākei Whai Māia and Koi Tū: The Centre for Informed Futures have made a commitment to work together to develop a bespoke practice of co-design that is informed by te ao Māori as a first and fundamental principle. Part of the work of the governance strategy is to self-assess and be self-aware about how we are doing that.



What is research governance?

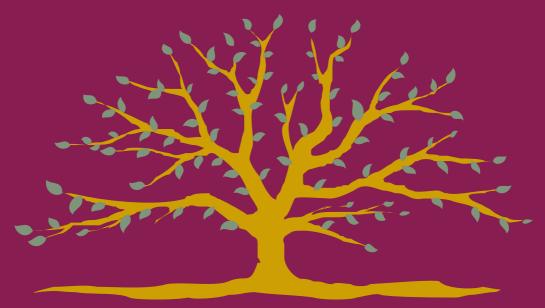
'Research governance' refers to a set of policies and processes which are put in place to ensure that research produces high quality and useful insights in an ethically acceptable way.

A research governance framework applies across the full research lifecycle, from generating new knowledge to how it is applied it in practice.

An NWŌ-specific framework will make sure that research undertaken is done in a way that is consistent with the values, aspirations and tikanga of the hapū. These underlying principles, Ngā Mātāpono, form the basis for all actions.

The framework will guide NWŌ's own research practice as well as projects undertaken with collaborators from outside the hapū such as university or government researchers, to be consistent with kaupapa Māori approaches.





Ngā Mātāpono: underlying principles



Kaitiakitanga

Tino Rangatiratanga

We stand strong as Ngāti Whātua Ōrākei, now and forever.

Ahi Kā

We uphold the unique and maintains across Tāmaki Makaurau.

Rangatiratanga

We are positive leaders and influencers.

Manaakitanga

development. Our host responsibility to

Kotahitanga

We stand as one

Mana Taurite

All hapū members have equal access

Whanaungatanga
We embrace our whakapapa and relationships



5 components

TO A CONVENTIONAL RESEARCH FRAMEWORK

For public sector researchers in tertiary education or government institutions, there are rules to follow that help ensure research meets national and international standards, that the people and nature involved are protected, and that the public can benefit from the knowledge gained. Typically, the framework looks like this:



REGULATORY REVIEW: Aims to ensure research upholds all protections and obligations according to national and international laws including: human rights, privacy protections, environmental regulations, and others.



ETHICS REVIEW: Aims to ensure research upholds the physical, mental and spiritual safety and dignity of participants, according to all applicable ethics guidance.



QUALITY & RELEVANCE REVIEW: Aims to ensure the proposed research is based on internationally recognised methodologies that are appropriate for the research question, and that the expenditure and effort is justified.



IMPACT REVIEW: It is difficult to predict impact from the outset, but at the very least, 'engagement with end-users' is now mandated by most research funders in an effort to assess public benefit and impact.



KNOWLEDGE MOBILISATION REVIEW: Helps ensure accountability by research teams that they will work toward appropriately disseminating the knowledge.



5 components

TO AN NWO-SPECIFIC RESEARCH FRAMEWORK

For Ngāti Whātua Ōrākei, we want to benefit from the research framework but also make sure the aims, aspirations, expectations and practices of our hapū are met. That is why Koi Tū and our Research Kahui Rangahau have been thinking about an NWŌ-specific framework that reflects Ngā Mātāpono. The framework could look like this:



TE TIRITI: Te Tiriti obligations, and the rights of the hapū along with wider laws are respected in an NWŌ context. NWŌ maintains ownership of data and information is kept private with all relevant protections and regulations.



MANA ENHANCING ETHICS: The research upholds the mana of participants. Potential consequences, both intended and unintended, of the research for NWŌ are considered.



HIGH QUALITY KAUPAPA-LED RESEARCH: The hapū are enabled to decide for themselves the type of research that is relevant to them. Methods used are grounded in Mātauranga Māori and/or NWŌ-based norms and values.



WHAI PĀNGA: Knowledge produced has a beneficial impact on NWŌ. NWŌ either owns and directs the research, or has strong and authentic input into research carried out in partnership with external groups.



AKO-BASED KNOWLEDGE SHARING: New knowledge and recommendations are shared in ways that make sure they are useful and meaningful to the NWŌ community.



UNIQUE NGĀTI WHĀTUA ŌRĀKEI FACTORS

Ngāti Whātua Ōrākei has unique values and beliefs, ways of knowing, priorities, and processes. Examples of how these unique factors have influenced each of the 5 components of the NWŌ-specific research framework are listed below. These are sourced from the hapū's guiding documents including Kākahuria Te Whare, Ngā Mātāpono, and the NWŌ Long Term Plan.



The NWŌ Trust Deed requires that whakapapa is maintained and protected on behalf of the hapū.



Mātauranga forms and shapes our beliefs, our values, our worldview and how we engage with the environment we live in.



Whakapapa is central to the identity of Ngāti Whātua Ōrākei. We celebrate and perpetuate our identity, culture, and histories through the identification, repatriation, archiving and/or research of taonga.



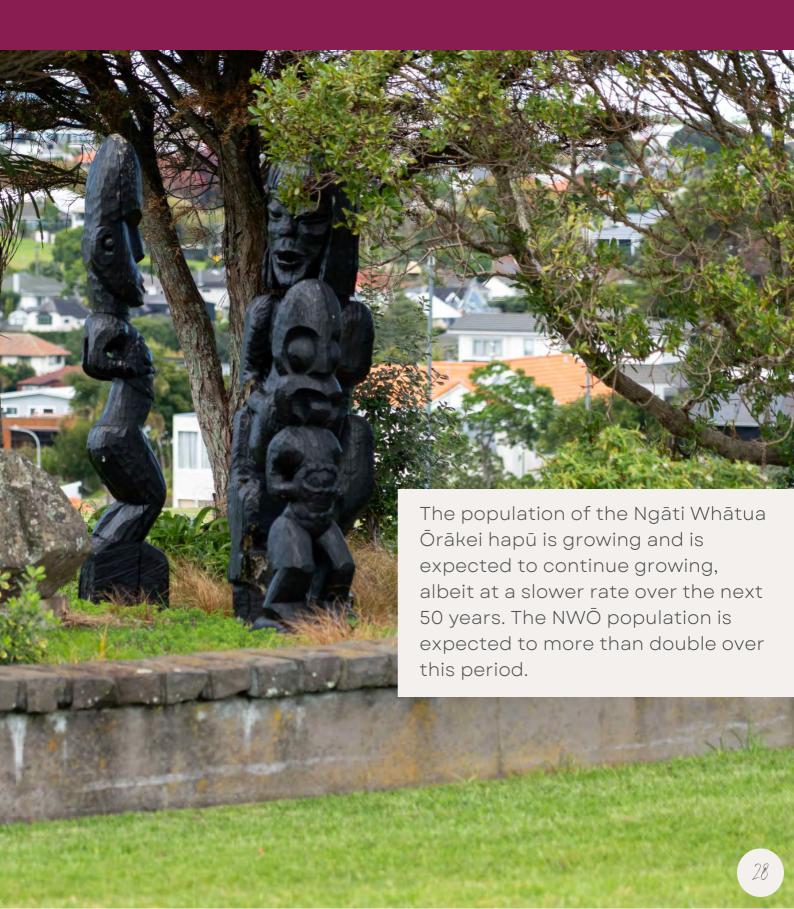
Whānau wellbeing is a critical aspect as defined in the NWŌ 2050 Long-Term Strategy: 'To support our whānau to live healthy, wealthy, and happy lives. They are connected to each other through whanaungatanga and feel a strong sense of belonging.'



Mātauranga bridges the past to the future, the spiritual world to the physical realm and is continually adapting and remodifying itself.

CHAPTER 3

DEMOGRAPHY & WELLBEING DATA



NWŌ DEMOGRAPHIC PROFILE

Where is the hapā now?

- THE HAPŪ IS GROWING
 The population of the Ngāti Whātua Ōrākei hapū is estimated at over 6,400 members in June, 2022, up 12% since 2018.
- A YOUNG POPULATION

 More than a third of hapū members are under the age of 15.
- DECLINING FERTILITY RATES

 The ratio of children aged 0-4 to women in their reproductive years is declining.
- The proportion of NWŌ hapū members residing overseas (~15% of the total NWŌ population) has remained stable for the hapū since 1990.
- AN AGEING POPULATION
 Hapū members are
 living longer.
- DECLINING AGE
 DEPENDENCY
 The dependent
 population has
 been declining
 in recent years.



POPULATION HIGHLIGHTS

6,471

Total hapū members (as at June 2022)



GENDER

48.94%

51.01%

0.05%





OTHER

A YOUNG POPULATION

20-24 Median age group for both males and females





More than 1/3 of hapū members are under the age of 15

WHĀNAU PRIMARILY LIVE IN NZ & AUSTRALIA

84.78%

14.69%

0.54%











EDUCATION HIGHLIGHTS

BACHELOR'S DEGREE OR HIGHER

16%

ATTENDED KÖHANGA REO FACILITY

22%

LEVEL 2 CERTIFICATE OR LOWER

43%

NO FORMAL QUALIFICATION

20%

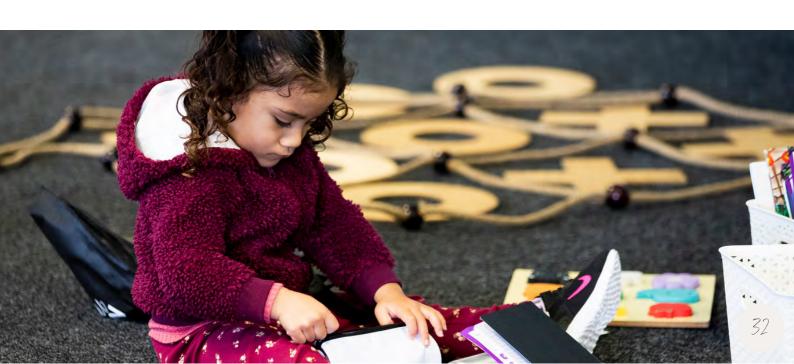
Roughly 16% of NWŌ members have a bachelor's degree, equivalent qualification, or higher qualification. This compares to around 27% for non-Māori New Zealanders and around 11% for the rest of the Māori population.

Only 6% of the children of at least one NWŌ parent did not attend any form of early childhood education (ECE). This is the same figure as for Māori in general, and twice as high as for non-Māori New Zealanders (3%).

22% of NWŌ pre-school aged tamariki attend a Kōhanga Reo facility, as opposed to a Kindergarten, playcentre or the like. This is higher than for Māori in general (14%) and unsurprisingly far higher than for the non-Māori population (0.4%).

43% of NWŌ tamariki leave school with a level 2 certificate or lower, whereas the figure for other Māori tamariki is 41% (and 32% for non-Māori children).

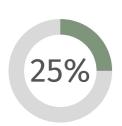
Only 20% of NWŌ school aged tamariki leave school with no formal qualification. This is noticeably better than for Māori in general (25%), but again is still less good than for non-Māori (17%).





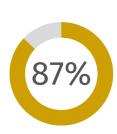


HOUSING HIGHLIGHTS



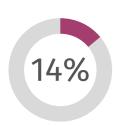
HOME OWNERSHIP

25% of NWŌ members fully or partially own the home they live in (either privately or through a family trust). This is lower than for Māori in general (31%) and substantially lower than for non-Māori (55%).



ACCESS TO AMENITIES

87% of NWŌ members report having access to all basic amenities (electricity, toilet, bath or shower, refrigerator, kitchen sink, cooking facilities and tap water that is safe to drink). However, 3.1% report having no access to a refrigerator, and slightly over 2% do not have drinkable tap water. The number of NWŌ members reporting a lack of access to a refrigerator in particular is high relative to non-Māori New Zealanders (1.5%) and slightly higher than for Māori as a whole (2.7%).



LIVING ARRANGEMENTS

Only 4% of NWŌ members (or around 200 people) live alone. That is lower than for Māori in general (6%) and non-Māori (10%). On the flip side, around 14% of members live in multi-family households of some description, which suggests a degree of overcrowding.



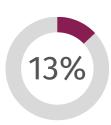
LIVING IN DEPRIVED NEIGHBOURHOODS

38% of NWŌ members live in the two most deprived levels of meshblock. This is notably better than for the Māori population overall (43%), but worse than for the rest of New Zealand (17%).



DAMPNESS

10% of whānau report living in a house that is always damp, and a further 33% in a house that is sometimes damp. This is higher than for Māori in general (7% and 27%) and far higher than for non-Māori New Zealanders (2% and 17%).



MOULD

13% of NWŌ members report having an area of mould in their house greater than an A4 piece of paper all of the time, and a further 22% some of the time.



INCOME HIGHLIGHTS



FAMILIES EARNING
MORE THAN \$100,000
PER ANNUM



INDIVIDUALS
EARNING MORE THAN
\$100,000 PER ANNUM

Data from the most recent census show that 67% of families comprising at least one NWŌ parent earn more than \$100,000 per annum. That is the same figure as for non-Māori New Zealanders, and notably higher than for the rest of Māori in general (which sits at 54%).

However, when one looks at the income of individual NWŌ members, rather than that of families, the picture is slightly less positive. Only roughly 5% of NWŌ members earn \$100,000 or more annually, compared to 3% for the rest of Māori and 8% for non-Māori New Zealanders.

EMPLOYMENT HIGHLIGHTS

49% of NWŌ members (the full membership, not just the working age population) are in full time employment, and a further 14% are in part time employment. These figures are very close to those of non-Māori New Zealanders (50% full time and 15% part time).

However, there are a greater proportion of non-Māori New Zealanders not in the workforce (32%) relative to NWŌ members (28%). As a result, unemployment for NWŌ members, which sits at 9%, is notably higher than for non-Māori New Zealanders (3%).





A HAPŪ IN TRANSITION?



The data suggest that NWŌ whānau are roughly mid-way through a process of economic transition. The gap between the financial and economic wellbeing of NWŌ members and that of non-Māori New Zealanders looks to be steadily closing. Further, that gap currently looks to be closing more quickly for NWŌ members than for the rest of Māori. However, further time (most likely several decades) and effort is needed for the majority of NWŌ members to close that gap completely.

This picture of a people 'in transition' is supported by the education and occupation data. The evidence we have seen (in particular from the socioeconomic disadvantage work undertaken by the University of Auckland) strongly suggests that economic wellbeing is determined first and foremost by the type of paid work that people undertake. In turn the type of work undertaken is heavily determined by the type and level of qualifications gained. It is therefore positive that the data show that a greater proportion of NWŌ members are gaining higher qualifications than Māori in general, while still less than the rest of the NZ population. Similarly, a greater proportion of NWŌ members are in higher paying occupations than for Māori in general. For example, around 3% of NWŌ members hold CE or General Manager roles compared to 4% for non-Māori New Zealanders and 2% for the rest of Māori in general.



PHYSICAL HEALTH

Smoking is an area where NWŌ members are clearly faring well relative to Māori as a whole; **23% of NWŌ members report smoking regularly**, compared to 28% for Māori as a whole, and 11% for non-Māori.

CHRONIC HEALTH CONDITIONS

In terms of chronic health conditions, the data are more mixed. NWŌ exhibits better statistics than Māori in general in most instances, but not all. Moreover, where the data show NWŌ faring better than Māori in general, it is not possible to rule out the possibility that this is driven by lower rates of testing, rather than a truly lower incidence of disease.



GENERAL DISABILITY

Slightly over 7% of the overall NWŌ population report a general disability, relative to over 8% for Māori in general.



STROKE

0.2% (of the entire NWŌ population over the last ten years) have had a stroke detected, relative to 0.4% for Māori in general, and 0.5% for non-Māori New Zealanders.



CANCER

0.6% of NWŌ members (over the last ten years) have had a positive diagnosis relative to 0.8% for Māori in general and 1.5% for non-Māori.



HEART ATTACK

0.8% of NWŌ members were diagnosed over the last five years relative to 0.9% for Māori in general and 1.5% for non-Māori.



DIABETES

2.2% of the NWO population has been diagnosed over the last ten years relative to 2.6% for Māori in general and 2.3% for non-Māori.



TRAUMATIC BRAIN INJURY

0.33% of NWŌ members have had a positive diagnosis over the last five years, compared to 0.27% for Māori in general and 0.18% for non-Māori.



GOUT

2.4% of NWŌ members have had a positive diagnosis over the last five years, compared to the same rate of 2.4% for Māori in general and 1.8% for non-Māori.

MENTAL HEALTH



About 1 in 5 whānau members (21%) self-report either some or a lot of difficulty remembering things.



Accessing mental health care services

Only a relatively small proportion of NWO members have accessed specialist mental health or addiction services over the past 5 years. More specifically, 1.3% look to have accessed community adult mental health services, a further 0.4% child, adolescent and whānau mental health services, and 0.6% alcohol and drug services. These numbers sit roughly mid-way between the figures for non-Māori, and those for Māori in general.

Turning to the mix of mental health and addiction services that whānau receive, the data suggest that they may be receiving lower levels of acute, crisis or inpatient support than Māori in general. However, these differences are not large, and may simply represent natural fluctuations that tend to occur in relatively small populations. Moreover, even if these differences do ultimately persist over time, it is currently not possible to determine whether they reflect a lower level of need, or more worryingly that NWŌ members are receiving a lower level of support relative to their need. These issues require further analysis.

1.3%

have accessed community adult mental health services 0.4%

have accessed child, adolescent and whānau mental health services 0.6%

have accessed alcohol and drug services





TAMARIKI

TAMARIKI FACING UNIQUE CHALLENGES

Data from Oranga Tamariki (OT), which deals with children that may have suffered some form of abuse or neglect, suggest that roughly 275 NWŌ children were found to have been abused or neglected in some way over the four and a half calendar years from 2017 to August 2021. This equates to 5.4% of the total population (not just the 0 to 16-year-old population). That number is slightly smaller than for Māori in general (6%), but far higher than for non-Māori (1%).

Where a specific type of abuse has been recorded, the most common forms for NWO tamariki were emotional abuse (27% of the total confirmed cases) or neglect (17%). At 12% of total confirmed cases, physical abuse is less common, and sexual abuse significantly less common (even over a five-year period the figures for sexual abuse are too small to allow us to report them). While the overall level of all types of confirmed abuse of NWŌ tamariki is lower than for Māori in general, the data suggest that NWŌ tamariki experience higher levels of physical abuse (12% compared with 8% for Māori in general) and neglect (17% compared with 11% for Māori in general). It is difficult to know without further analysis whether this reflects a real underlying difference or whether, given the relatively small number of tamariki involved, it is simply an artefact of natural year to year variation.



12%

27%

NEGLECT

17%

NWO POPULATION PROJECTIONS

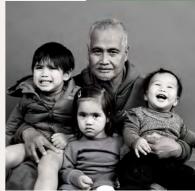
Preparing for the next 50 years...

... and beyond







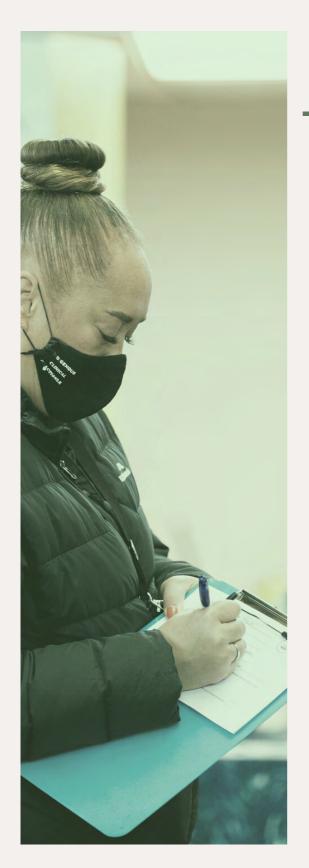












Disclaimer

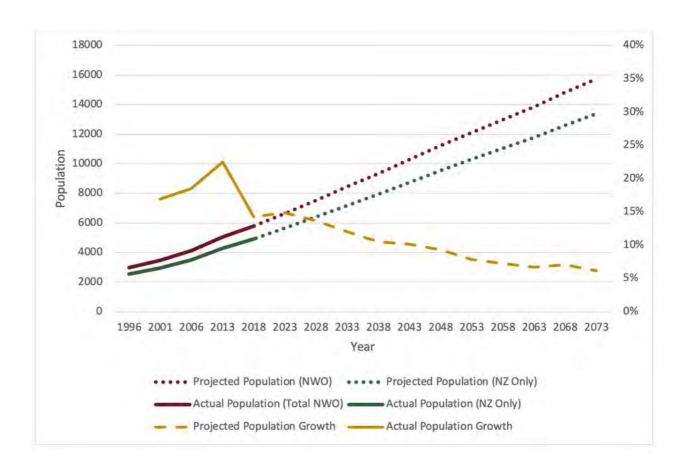
The population projections presented in this report are not predictions of future population. They are designed to be a guideline for future demographic trends for the Ngāti Whātua Ōrākei hapū in order to facilitate short- and long-term planning.

For ethnic groups with small populations, deriving robust measures of the components of ethnic population change (namely, fertility, mortality and migration) is challenging. Hence, the projections are based on assumptions about future demographic trends using the best available data. Although great care has gone in to establishing the assumptions, the projections are subject to uncertainty.

This section presents a general overview of the population projection analysis. For the full analysis, including the impact that alternative future scenarios (e.g., higher vs lower fertility rates) might have on the principal population projection, and details on the data and methodology used, please refer to the full report available from Whai Māia.

NWO POPULATION PROJECTIONS

Census Years 2018 (base) to 2073



INSIGHTS



CONTINUED POPULATION GROWTH

From an estimated 2023 population of about 6,634 (projected), the size of the NWŌ population is projected to consist of more than 15,000 total members by 2073, with ~13,000 residing within Aotearoa.

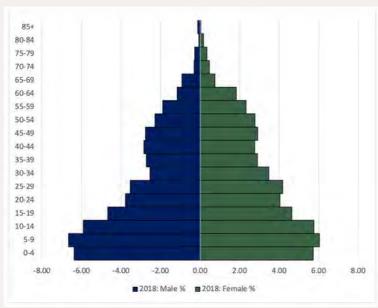


SLOWING POPULATION GROWTH

The rate of population growth is expected to slow over time reflecting decreasing fertility rates coupled with an ageing population. As the projection horizon extends further into the future, projection estimates become increasingly uncertain. A slowdown in the growth rate of the NWŌ population has already been observed and this will likely continue due to decreasing fertility rates. A similar trend is also apparent for the broader New Zealand population.

CHANGES TO THE POPULATION STRUCTURE

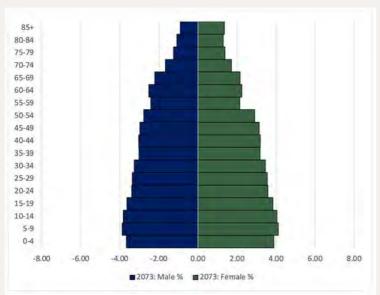
NWŌ Population Structure (2018, actual)



There is expected to be marked changes in the age structure of the hapū over the next 50 years. This change is observed from comparing the population pyramid for the base year (2018) to the projected population pyramid for 2073.

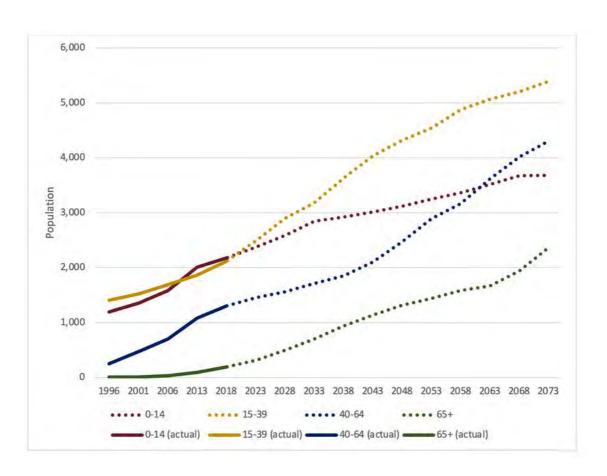
- In line with the New Zealand population, the NWO population structure is expected to become narrower, as the gap between births and deaths narrows.
- The median age group is expected to rise over the next 50 years as the population ages and fertility rates fall. Compared with the median age group of 20-24 years for both males and females in the hapū in the 2018 base year, the 2073 population projection shows that the median age group would likely increase to 30-34 for both males and females.

NWŌ Population Structure (2073, projected)



AGE DISTRIBUTION OF NWO

(TOTAL POPULATION) Census Years 2018 (base) to 2073



INSIGHTS



INCREASE IN THE NUMBER OF CHILDREN BEING BORN

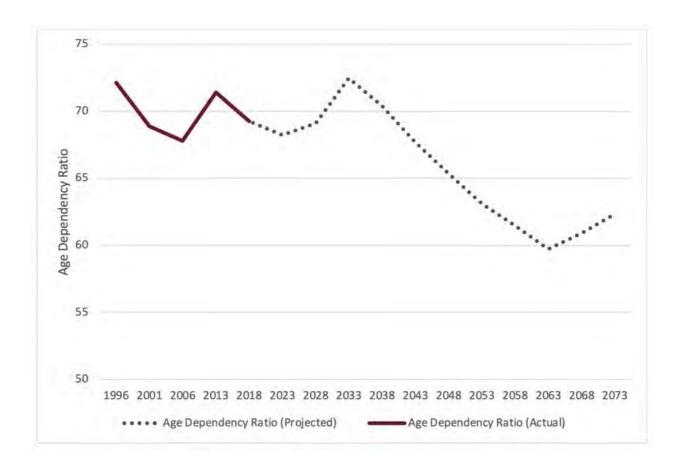
Although a decline in the fertility rate is expected, a high proportion of hapū members currently under the age of 15 will continue to age over the coming decades, meaning that there will be increase in the number of people in the population transitioning into their main reproductive years over that time. The larger cohort of women of childbearing age will likely result in an increase in the absolute number of children being born in the hapū over the next 2-3 decades.



GROWTH IN THE PROPORTION OF ELDERLY IN THE HAPU

High growth is also expected in the 65+ group as life expectancy increases, likely due to advances in healthcare and improvements in diet and lifestyle.

TREND IN AGE DEPENDENCY RATIO (2018 to 2073)



INSIGHTS



AGE DEPENDENCY WILL INCREASE BEFORE DECLINING TO LOWER LEVELS

Age dependency is expected to increase initially as life expectancy increases, but is expected to slow as fertility rates fall and the young population is aged up into the working age group (15-64). This aging up process will lead to more people in the 15-64 age cohort relative to the dependent population (i.e., under 15 and over 65). In 2018, there were ~69.25 dependents per 100 working age population in the NWŌ population. This is expected to peak over the next 2-3 decades as the elderly populations grow, then follow a general downward trajectory and decline to towards 2063 with the growth of the 15-64 age group relative to dependent age groups. This will likely be followed by an upward swing in the long term (towards 2068 and beyond) as the large 15-64 age cohort continues to age and mortality rates fall.

50

THE FUTURE OF NGĀTI WHĀTUA ŌRĀKEI: INSIGHTS FROM THE POPULATION PROJECTIONS



A large proportion of hapū members will transition into their early reproductive years in the upcoming decades. This suggests a need for specialised healthcare services (including maternal mental healthcare services) for childbearing in the upcoming years.



A growth in the absolute number of children expected to be born suggests a need for more services to meet the needs of children, including child support services (e.g., day-care), schools, recreational services, and primary healthcare services.



An ageing population suggests a need for more aged care facilities, such as high quality and accessible healthcare services (including psychological services), housing options to meet specialised needs, spiritual support services and specialised transportation options. Retirement planning services (e.g., timely financial planning services to help prepare hapū members for a stable retirement experience) could also be of benefit.





NEXT STEPS

Where do we go from here?

This page outlines the strategy for continuing the good mahi done so far.



Acknowledgements

We acknowledge the contributions of the people who worked on this project.

Special thanks to:

Whai Māia board members

The Me tupu i a wīwī, me tupu i a wāwā researchers and practitioners

for their valued input.

We thank you for your continued support in our efforts to progress as a hapū.

This report was designed by Chloe Wilkinson and Dawnelle Clyne.







