

**Te Tatau o te Whare Kahu ki Hine Pae Ora
Aotearoa Midwifery Project**

**Gateway to a Tiriti o Waitangi-led Review of the
Aotearoa New Zealand Midwifery Regulatory Framework**



Midwifery Council
Te Tatau o te Whare Kahu

Cover photo of Baileyreign: The next generation is watching.

1. Introduction

Te Tātau o te Whare Kahu ki Hine Pae Ora¹ is the Māori name for the Aotearoa Midwifery Project which is a key strategic piece of collaborative work of the Midwifery Council of New Zealand.

The purpose of the Aotearoa Midwifery Project is to steer an evidence-based review of the scope of practice of a midwife, the competencies for entry to the register of midwives, and pre-registration standards for midwifery education. Key inclusions are law changes relevant to midwifery practice and international shifts in evidence to protect the health and safety of wāhine, their pēpi and whānau in New Zealand, through an effective and efficient regulatory framework (Midwifery Council of New Zealand, 2020)

New Zealand's midwifery practice environment is changing. Key outcomes for the Review include incorporating regulation that improves equitable health outcomes across Māori, Pacific, disability and mental health populations. The Project will also introduce revisions to incorporate recent amendments to the Health Practitioners Competency Assurance Act (2003) (Midwifery Council of New Zealand, 2020) and changes to other laws relevant to Midwives.

The Midwifery Council has established the Aotearoa Midwifery Reference Group which has a key function to “expertly guide the Council’s review of the regulatory framework by enabling ways of working together to achieve a point of difference that includes:

- providing midwifery counsel that focuses on improved outcomes for wāhine, their pēpi and whānau.
- contributing information, ideas and networks to support the successful implementation of the Aotearoa Midwifery project.

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- guiding the development of revised amendments to the midwifery regulatory framework and implications for recertification and preregistration education for the midwifery profession across the next 5 - 10-years.”

(Midwifery Council of New Zealand Te Tatau o te Whare Kahu, 2020)

The full complement of the Reference Group is still being worked through, but the majority of appointments have been advised, made up of a cross-section of midwives and consumers.

The Midwifery Council supports a Treaty-led approach to the Review process and the Reference Group co-chairs, Judith McAra Couper and Hope Tupara, are confident midwifery is ready to pave a co-design approach that deliberately moves from Treaty rhetoric to the Treaty in action.

2. Te Tatau o Te Whare Kahu ki Hine Pae Ora (Explanation)

The Māori name for the Aotearoa Midwifery Project gives some insight into the Treaty-led co-design framework. In 2006 the Midwifery Council of New Zealand adopted a Māori name, Te Tatau o Te Whare Kahu, which is an analogy for a entranceway like the waharoa or gateway leading onto a pā (traditional Māori settlement) (Midwifery Council of New Zealand, 2016).

Māori protocols require new arrivals to interact with the host in rituals of encounter at the gateway, after which they are formally welcomed, and eventually visitors are able to participate on the pā as if they are locals.

The imagery of rituals of engagement at a gateway are likened to the processes that occur for entry to the midwifery profession. Midwives need to satisfy the Midwifery Council that they are fit for entry into the profession and their ongoing certification to remain in midwifery practice.

The addition of the words “ki Hine Pae Ora” to the Midwifery Council’s Māori name, represent the objectives of the Aotearoa Midwifery Project, to modernise the regulatory framework that uplifts the wellbeing of all women. Hine refers to women, pae means horizon, and ora refers to being safe and healthy. Pae ora is also the Government’s vision for Māori health so it not only an appropriate addition to the Midwifery Council’s Māori name, it also aligns with the purpose of the Aotearoa project, and the Governments wider strategic objectives to ensure equity for all.

Pae ora encourages those in the health and disability sector to work collaboratively, to think beyond narrow definitions of health, and to provide high-quality and effective services.

Pae ora is a holistic concept and includes interconnected elements:

mauri ora – healthy individuals

whānau ora – healthy families

wai ora – healthy environments.

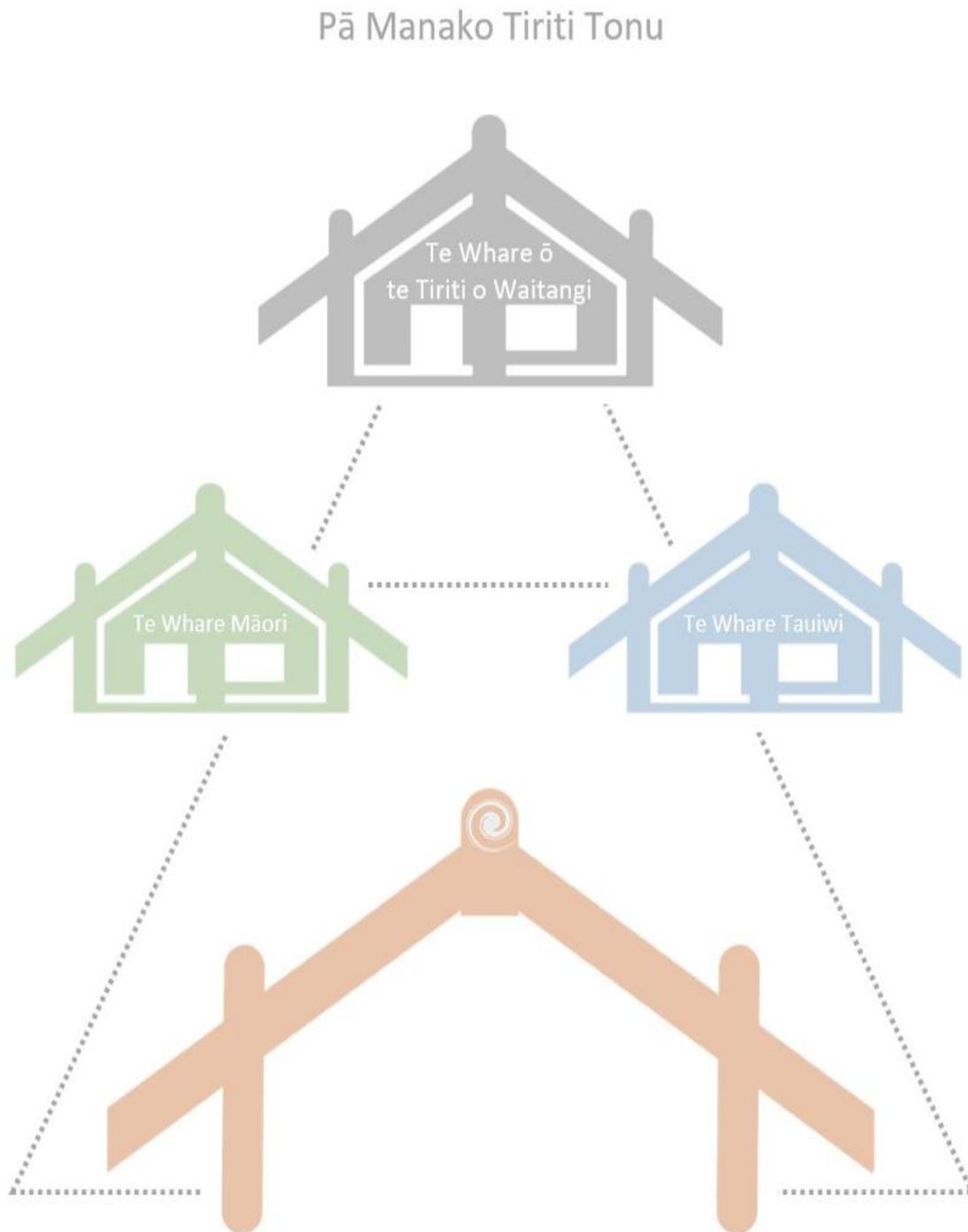
All three elements of pae ora are interconnected and mutually reinforcing, and further strengthen the strategic direction for Māori health for the future (Ministry of Health, 2015).

3. Conceptualising a Treaty-led Co-Design and Engagement Framework.

The foundation for relationships between Māori, as the original inhabitants of Aotearoa, and other peoples, represented by the government, is Te Tiriti o Waitangi/The Treaty of Waitangi. Using our country's history, the Aotearoa Midwifery Project is drawing on the intent of the Treaty of Waitangi to shape the way forward. Persistent health inequities for groups like Māori women and their babies, tell us that the Health and Disability sector including midwives, need to do better. The Midwifery Council is keen to engage differently for the purpose of the regulatory review and to have trust in midwives and women through the formation of the Aotearoa Midwifery Reference Group, to guide the review process.

Fig 1 conceptualises the Treaty-led co-design and engagement framework for the Aotearoa Midwifery Project. The gateway represents the Midwifery Council as its Māori name suggests. As you pass the gateway there is the Māori house to the left, which favours Māori and equity. The house to the right side, is the tauīwi house, to acknowledge different peoples, perspectives, knowledge, philosophy and conventions in Aotearoa New Zealand. The decision making house is the Treaty house, where groups come together from their own houses, with their own thinking, needs and priorities. Like in any house, occupancy in the Treaty house is dynamic, involves give and take, debate, negotiation, tolerance and compromise. A Treaty-led framework means that everyone participates from the same starting time, power is shared, and decisions occur by mutual agreement.

Figure 1: Conceptualising a Tiriti/Treaty-led framework



Created by Tupara and Tahere (2020). Adapted from the Three House Model developed at Te Wānanga o Raukawa in 1984 by Ngāti Raukawa, Ngāti Toa Rangatira, and Te Āti Awa (Winiata, 2005).

4. A Treaty-led Co-Design and Engagement Analysis

As the Aotearoa Midwifery Project begins to unfold and the Reference Group settles into its work, and prepares to seek counsel with professional groups, with midwives, women and their whānau, the Reference Group we will need to embark on an analysis of being Treaty-led. Ultimately tangible as well as intangible outcomes are being sought that enriches the midwifery profession while eradicating potential for health inequities by the profession. The type of analysis needed to measure Treaty-led success, will take us to new ground, but we are moving into an environment of change and positive transformation.

5. References

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