



## Research Project Impact Case Study

Developing a Kaupapa Māori Framework for Infectious Disease Preparedness and Response  
in Aotearoa, New Zealand

### Short Research Title

A Kaupapa Māori Infectious Diseases Surveillance Framework

#### Key researchers

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## Introduction – March 2025

### Research purpose

The project seeks to develop novel approaches to infectious disease (ID) surveillance, which meet the needs of Māori communities and leverage the strengths of kaupapa Māori health and social service providers. It is evident that the current ID surveillance system is not fit for purpose for whānau Maori; Māori have much higher morbidity and mortality rates from a range of infectious diseases, including from the COVID-19 pandemic. These health inequities have damaging social and economic consequences for Aotearoa New Zealand as a whole.

### Research approach

We have collaborated with the Whānau Ora Commissioning Agency to engage with kaupapa Māori health and social service providers and whānau Māori. We are also collaborating with two other Te Niwha-funded research projects. The project gathers information from focus group sessions and interviews with providers and whānau about their current engagement with the ID surveillance system and the information they need to protect their communities. We are also gathering data through interviews with public health experts about how the current ID surveillance system works, how they engage with Māori communities and what improvements are needed. Using qualitative analysis, this information will be used to develop a kaupapa Māori framework for ID preparedness and response and make specific recommendations about changes to the current ID surveillance system.

### Alignment with Te Niwha

The project aligns with the Te Niwha Investment Objectives by strengthening collaboration between researchers, health agencies and kaupapa Māori providers; improving health outcomes and increasing equity of health outcomes; identifying and addressing key gaps within the ID surveillance system; and enhancing community preparedness and readiness for infectious disease outbreaks.

## Results – March 2025

Data gathering is still in the early stages. However, several key themes have been identified:

- ID surveillance is impacted by disengagement of whānau with mainstream health systems.
- ID surveillance system should be more flexible and decentralised to disseminate and gather data effectively from diverse communities.
- Kaupapa Māori providers need improved access to data to enhance ID prevention and control.
- Te ao Māori systems of manaakitanga and whanaungatanga should be leveraged to enhance ID surveillance systems.
- ID surveillance language needs to change to engage kaupapa Māori providers.

## Impact – March 2025

A feature of kaupapa Māori research is that it must demonstrate impact for participating communities. As part of engagement with providers, we need to demonstrate the benefits of the research for their work with their communities. We will be presenting our findings back to participants. Therefore, this project will have two immediate impacts:

- Improving equity of health outcomes for whānau Māori;
- Supporting kaupapa Māori providers in their ID and pandemic preparedness plans;
- Enhancing whānau understanding of ID protection and control.

From the data gathered through this research, a kaupapa Māori framework for ID preparedness and response will be developed that is responsive to the information needs of kaupapa Māori providers and whānau. This will address a gap in the ID surveillance sector, as there is currently no such framework to guide policy development. The research project will have two key outputs, one joint academic paper published in conjunction with the University of Otago team and a report including specific recommendations. These recommendations are intended to support future ID surveillance policy development.

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Although results are still emerging, we can point to several potential high-level outcomes that align with SSIF areas of research impact:

- Language of ID surveillance becomes more relevant and responsive to the needs of Māori communities.
- Improved communication between the ID surveillance system, kaupapa Māori health and social service providers and whānau.
- ID surveillance system becomes more flexible and decentralised to improve data gathering and dissemination e.g. investment in more community-based testing for IDs, ID data provided specific to needs of each kaupapa Māori provider.
- Kaupapa Māori providers receive the data they need to effectively contribute to preventing and controlling IDs in their communities.
- Workforce capability for managing ID surveillance data at the provider level is enhanced.
- Whānau have a greater understanding of IDs and the steps they can take to protect themselves and their communities.

### Conclusion

The key impact of this research project is to increase equity of outcomes for whānau Māori in terms of ID morbidity and mortality rates by identifying and addressing the shortcomings of the current ID surveillance system. Developing a kaupapa Māori framework for ID preparedness and response will help to inform specific recommendations for improvements to the current system. This will in turn enhance Aotearoa New Zealand's overall infectious disease preparedness.

### **Update – December 2025**

When the mainstream infectious disease surveillance system in Aotearoa engages with whānau Māori and Māori communities, the data it collects tends to reflect deficits; high rates of respiratory infections, GAS infections, STIs, gastrointestinal infections, low rates of immunisation, and limited access to health information. What it fails to capture are the strengths of te ao Māori; the systems of manaakitanga that connect and protect not only Māori, but non-Māori alike. It was these systems of collective action that came to the fore during COVID-19, and it is these systems that need to be recognised and supported if we are to respond effectively to current infectious disease challenges and prepare for future pandemics.

The objectives of this research were to identify gaps in existing surveillance activities and consider how activities undertaken by kaupapa Māori organisations during the COVID-19 pandemic, and in the years since, can offer opportunities to address these gaps. We have offered recommendations along these lines. However, what our research has identified is that a more profound change is needed in the surveillance system beyond filling gaps. In the words of one of our participants, the challenge is to “turn your whole surveillance thinking upside down” so that the needs and voices of communities are centred. This shift requires more than improving engagement with mainstream systems, it involves placing communities at the centre of surveillance activities and places surveillance tools directly in their hands.

There is already innovative work that is being done towards placing more control and technology into the hands of local communities, much of which is taking place within Te Niwha-funded projects. However, these efforts are currently fragmented, and it is not always clear how the data that is being collected can be accessed or applied by communities. This highlights the need to ask more questions about why data is being collected, who it is for, and how it can be used in ways that support the aspirations of the communities it represents.

Guided by a kaupapa Māori approach, our study explored how data around infectious disease is collected, shared, and used, while also considering funding mechanisms and concerns around data sovereignty. The research aimed to identify gaps in the current surveillance system while also demonstrating that localised, tikanga-informed and community-led approaches build trust and engagement with the surveillance sector. This in turn generates more meaningful data and effective public health information that benefits all New Zealanders. With the pressure on

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governments worldwide to prepare for the next pandemic in ways that will produce equitable outcomes, these understandings will challenge how existing surveillance systems are applied within communities.

We generated a number of key insights that will inform the development of a kaupapa Māori framework for infectious disease preparedness and response and will support improvements to the sector. This will in turn enhance Aotearoa's overall infectious disease surveillance.

- The term “surveillance” does not reflect how Māori understand health and wellbeing and creates a mismatch between mainstream public health language and Māori concepts of hauora.
- Discussions about infectious disease were consistently framed in holistic terms of hauora, rather than narrow biomedical models of illness.
- Whānau and kaupapa Māori providers respond to infectious disease through ao Māori values, especially manaakitanga, which should be recognised as a strength and used to improve how the system understands Māori experiences.
- Much current data is collected in mainstream health facilities. Because many whānau are not well connected to mainstream services, their experiences are missing from the national surveillance picture.
- Kaupapa Māori providers want whānau-level data to better target immunisation and protect those most at risk. However, many providers lack support to understand what data exists or how to use it effectively.
- COVID-19 showed what is possible when data is shared with communities and local leadership is supported, but short-term funding and contracting have made it hard to continue these approaches in normal operations.
- For Māori, protection from infectious disease is built through relationships and collective responsibility (whakapapa, manaakitanga, kotahitanga), not through top-down monitoring systems.
- National health targets based on aggregated data are not working for the most vulnerable communities, as they hide regional, ethnic and socio-economic gaps and prevent effective local action.

Our research has highlighted the need for whānau and community involvement, rather than individual responsibility for pandemic preparedness and response. Our findings, congruent with Māori health philosophies, demonstrate that understanding infectious disease is critical to supporting the development and delivery of a more collaborative and cohesive surveillance sector.