

**A quantitative analysis of Tākiri Mai Te Ata
Whānau Ora Collective Kokiri Hauora response
for the community during and following the
COVID-19 Lockdown 2020**



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He mihi nui – Acknowledgements

Nāku te rourou, nāu te rourou, ka ora ai te iwi

With your food basket and my food basket, the people will thrive

This whakatauki fittingly describes the significant collective response by Kokiri Marae, Tākiri Mai Te Ata Whānau Ora Collective (Tākiri Mai) and their communities during and following the COVID-19 lockdown period. Tākiri Mai - Kokiri Hauora whānau ora approach has been key to providing much needed outreach support to the Whanganui-a-Tara communities. It became evident very early on in Alert Level 4 that support needed to be provided “close to the ground”. This holistic approach enabled key services, resources and support to be delivered to over 29,989 whānau/families in the wider Whanganui-a-Tara region. Unsurprisingly, the majority of requests for support were for kai parcels, the rapid rise in requests can be seen in the data sets during Alert Levels 4 and 3.

The leadership and management provided by Tākiri Mai - Kokiri Hauora General Manager (GM) and Managers was a significant enabler in achieving equity and wellbeing for those most impacted by COVID-19. The GM established a kawa early on that ensured all services and support would be provided utilising a “mana enhancing” approach. Whānau were not required to be assessed or “meet a criteria” to access support. Tākiri Mai - Kokiri Hauora kaimahi also used the same premise that as essential workers, they were privileged to be working under the maru of a “mana enhancing” approach for their communities.

Lastly, this is an opportunity to acknowledge and thank all those individuals, agencies and groups who contributed in a meaningful way to ensure our communities were well supported during the recent COVID-19 Alert Levels 4, 3 and 2.

Whānau Ora Commissioning Agency	-	sanitation packages & Whānau Direct grant
Te Roopu Awhaina		Packing the Sanitation Packs for delivery
The Common Unity Project Aotearoa		food, beds, rice, milk, meals, fruit and vegetables
- The Remakery		
Regional Public Health Unit		boxes of fruit and vegetables
Ministry of Social Development		cooked meal packages
Well Homes		blankets
Rimutaka Prison		blankets
Kaibosh	-	food for the food bank
Te Runanganui o Taranaki Whanui	-	Boxes of pork and sausages
- ki Te Upoko o Te Ika a Maui		
Countdown	-	trolleys and bread and milk
Bakery	-	bread

Mormon Church	-	baking
Ora Toa	-	funding to help toward the food bank
Wellington School of Medicine researchers		koha to help toward the food bank
Give a Little page		funds to help toward the food bank
Victoria University of Wellington		Analysed the sanitation pack data for NZDep2018
Capital and Coast District Health Board		PPE equipment
Hutt Valley District Health Board		nursing support
Perpetual Guardian		Funding to purchase immunisations of pneumovax
Hutt City Council		Venue for kai packs, kai funding, \$5000 kai vouchers
Wellington Community Trust		Help for Salary of Patakia Kai
JR Mckenzie		Funding
Todd Foundation		Funding
Wellington Regional Council		Food and Blankets
- Civil Defence Emergency (HCC EOC Welfare)		

To all those whānau who have donated money, resources and time as volunteers thank you without your help we would not have been able to provide the level of support we have been able to.

Na reira tena koutou, tena koutou, tena koutou katoa

Teresea L Olsen
General Manager



**Takiri Mai te Ata
Whānau Ora Collective**

Me mahi tahi tātau, ka ora ai te iwi

26,510 PACKS DELIVERED TO OVER 31,115 WHĀNAU MEMBERS

60,000 MSD packs were distributed to whānau in addition to the above.

**1760
Kaumatua**

**15346
Pakeke**

**12738
Tamariki**

The most affected whānau members needing kai were our Tamariki.



The most identified Ethnicity was Māori
Ngāti Porou and Ngāti Kahungunu were the most comom Iwi



77404 Prepared Meals were provided over the period



Households held from 1 to 22 members.
Most deliveries to Lower Hutt and Upper Hutt, but also Foxton, Kapiti Coast, Carterton and Featherston.



3307 whānau lived in Wainuiomata
1215 lived in Naenae and
680 Taita

THIS DATA WAS COLLECTED IN RESPONSE TO WHĀNAU REQUESTING HELP FROM TĀKIRI MAI TE ATA - KOKIRI HAUORA

THIS WAS A GROUND UP RESPONSE SO THE SAME DATA WAS NOT COLLECTED AT THE BEGINNING OF THE RESPONSE AND DATA SETS WERE NOT THE SAME. FUNDERS SHOULD CONSIDER THAT MAINSTREAM SERVICES ARE NOT NECESSARILY THOSE THAT COMMUNITIES WISH TO ENGAGE WITH.

Figure 1 Support for Tākiri Mai Te Ata COVID-19 response - The Remakery is Part of the Common Unity Project Aotearoa



Figure 2 Thanks from tamariki at Pukeatua School



Introduction

This report provides insights into the significant and comprehensive response of Tākiri Mai Te Ata - Kokiri Hauora in responding to community needs during the COVID -19 pandemic in Aotearoa New Zealand. It covers operational data collected between March through to June and August (last Sanitation Pack deliveries) 2020, and there is a follow up analysis which focuses on the time that New Zealand was in Alert Levels 4 and 3 (the “lockdown”).

The New Zealand Government facilitated a strongly evidence-informed response to the pandemic by declaring restrictions on social and occupational activity with a graded response as indicated by alert levels. Alert levels 4 and 3 placed significant restrictions on the movements and social and physical interactions of residents to halt the spread of the virus. A summary of what was possible at the different alert levels is available here <https://covid19.govt.nz/alert-system/>. The pandemic and the resulting alert levels meant that health and social service providers had to change their response to the community, and in many instances, increase the level of support they provided.

Table 1 COVID-19 Timeline

Timeline of the COVID-19 alert levels at a national level
excluding the August-October restrictions in Auckland (and other parts of the country) due to the localised outbreak

In the early morning hours, different levels of alert were put into place:

Level 4 Thursday 26 March

Level 3 Tuesday 28 April

Level 2 Thursday 14 May

Level 1 Wednesday 12 August (midday)

Levels 4 and 3 were in effect a lockdown which prevented a lot of social and work activity from occurring.

The higher alert levels of 4 and 3 meant that whānau and individuals were highly restricted in their public lives and in terms of interacting with people outside of their household “bubbles” (a concept which has been clearly understood by the public).

Broadly, people could only associate in person for any significant period with people from their own households unless they were considered essential workers. Residents were expected to remain in their homes and on their properties for much of the time, however they were permitted to leave their home to collect groceries, attend important appointments such as visiting a doctor or other healthcare professional, or provide essential support to another person or household. Residents

could exercise outdoors but they were expected to physically distance from other people and they were expected to stay within a reasonable distance of their home environment. The “lockdown” had an impact on people’s ability to socialise and access goods and services and a significant number of New Zealanders had to access support or additional support from Work and Income New Zealand or community-based providers such as Tākiri Mai - Kokiri Hauora. Places such as supermarkets (generally) and healthcare centres enhanced their sanitation practices and reduced the number of people who could visit these settings while also encouraging/enforcing physical distancing.

Tākiri Mai Te Ata Whānau Ora Collective

Since its inception in 1986, this collective included Kokiri Hauora. Keriana Olsen Trust was used as accommodation for street kids, black power gang members, rangatahi on release from Epuni Youth Services, and other youth institutes. For several years, Kokiri Marae has been a Level 1 provider for the Ministry of Social Development (MSD) and taking children into their care from referrals from Oranga Tamariki (OT), over the past 25 years. We have families in the community that are registered with us as caregivers.

In 2010 Tākiri Mai te Ata (Tākiri Mai) Whānau Ora Collective was formed. Tākiri Mai is a collective of eight health, social service, education, marae, homelessness, and housing providers, in the Hutt Valley with some services also reaching into the wider parts of the Wellington region. Kokiri Hauora is part of that collective. The Tākiri Mai organisations have been based in the Hutt Valley, working together over the past 30+ years, and have been responsible for the development of a number of services and programmes servicing the wider Wellington region. <http://www.takirimai.org.nz/>

Tākiri Mai te Ata is a collective that includes:

- Kokiri Marae Keriana Olsen Trust – Kokiri Hauora is part of this
- Kokiri Marae Māori Women’s Refuge
- Mana Wahine
- Naku Ēnei Tamariki
- Tu Kotahi Māori Asthma and Research Trust
- Wainuiomata Marae
- Whai Oranga o te Iwi Health Centre
- Aro Mai Housing First Collaboration (joined the collective July 2020)

The Common Unity Project Aotearoa – The Remakery

<https://www.commonunityproject.org.nz/>

In April 2020, due to the COVID-19 pandemic crisis, The Common Unity Project Aotearoa (Remakery) and Tākiri Mai - Kokiri Hauora formed a partnership to meet the kai needs for whānau in the Hutt Valley community. Both services had been deemed as Essential Services. Many of the food banks in the valley were forced to close due to their volunteer workforce being at risk and requiring their staff and volunteers to isolate. This relationship formed by the Remakery and Tākiri Mai has been a natural merging of common goals and values that aim to meet the needs of whānau in a way that is strengths based and provides education and support to whānau that offers long term aspirational outcomes.

Figure 3 Te Whare o te Kotahitanga Common Unity Project - The Remakery



The Remakery and Tākiri Mai te Ata worked together cooking, packaging and delivering organic cooked vegetarian meals to whānau every Tuesday and Friday from the 6th April 2020 to 19th June 2020. Over this period the joint operation delivered 995 kai parcels of varying sizes (small, medium and large) to 2842 individual whānau. This equates to approximately 19000+ individual meals.

Figure 4 Remakery kai meals



Many of the whānau receiving kai have been kaumātua, whānau living in emergency housing (without the use of a kitchen), whānau who have cancer or other serious illnesses who require healthy kai, whānau who have been affected by the COVID-19 crisis due to loss of employment, etc. From July 2020, the Remakery have continued prepared this kai and are freezing 500 meals per week at the Pātaka Kai who are including these meals in the Kai parcels for whānau.

Facebook Tākiri Mai - Kokiri Hauora links to video regarding the Pātaka Kai

<https://www.facebook.com/KokiriMarae/videos/263075818363841/>

<https://www.facebook.com/CampbellBarryMayor/videos/2276599082649989/UzpfSTExMjY1MjQ1NzAxNjQ1OToxNDA5MDUyNTc1MjQ1MTI/>

Moving forward with The Remakery

Tākiri Mai - Kokiri Hauora have secured premises at St Peters Church on Wise Street in Wainuiomata to establish a permanent Pātaka Kai and Maara Kai to support whānau accessing Tākiri Mai – Kokiri Hauora services who are in need of kai. The relationship we have developed with The Remakery is key to the success of this new service.

The Remakery are supporting Tākiri Mai - Kokiri Hauora in the establishment and development of the social enterprise model that will underpin the ongoing sustainability of the Pātaka Kai and Maara Kai Service. The aim is to work together teaching each other and supporting each other in partnership to reach aspirational goals of kai sovereignty for the whānau of Wainuiomata and the Hutt Valley who are accessing the services of Tākiri Mai - Kokiri Hauora.

The Tihei Rangatahi programme (a Kokiri Hauora Youth Service) and the local Intermediate and High School will also be a big part of the Pātaka Kai and Maara Kai moving forward.

The intention of this service is to act as a Pātaka Kai and to develop sustainable options for kai for whānau. This will include Maara Kai at the venue and at whānau homes. Providing support and education to enable whānau to be more resilient in the face of pandemics, earthquakes, unemployment, cancer, ill health, trauma and other stressors or disasters that whānau may face is paramount.

Food Sovereignty is an aim of this new service. For Māori food sovereignty is the practice of ensuring food-secure futures for whānau, independent of multinational and national food systems and in harmony with Te Ao Tūroa (the natural world).

Other Supporting Agencies

Whānau Ora Commissioning Agency (WOCA)

<https://whanauora.nz/>

The Whānau Ora Commissioning Agency provide a whānau centered approach to wellbeing that is focused on working with the whole whānau so they can realise their own goals and aspirations.

The Whānau Ora Commissioning Agency (formerly Te Pou Matakana) established in 2014 supports the aspirations and dreams of whānau “by:

- *commissioning kaupapa that support whānau to achieve their goals.*
- *working alongside our Whānau Ora partners to build on the strengths and assets of whānau and their communities.*
- *seeking co-investment, co-design and co-production opportunities that support whānau aspirations.”(Whānau Ora,2019 (Whanau Ora Commissioning Agency , 2020))*

A news report identified – “

WOCA On Track to Deliver 90,000 Hygiene Packs By End of April the

Whānau Ora Commissioning Agency is on track to meet its target and deliver supplies for a total of 90,000 hygiene packs to Whānau Ora distribution centers up and down the North Island by the end of April.

It has been a massive job and Whānau Ora workforce have stepped up to the challenge and responded quickly.

Over ANZAC Day weekend, many partners were still quietly working away, including Te Roopu Awhina Ki Porirua who completed packing a further 2900 hygiene packs on behalf of their collective in Wellington” (Whanau Ora Commissioning Agency , 2020).

This roopu is the collective that Tākiri Mai - Kokiri Hauora belongs to and where our Sanitation packs came from.

A further 30,000 packs were delivered following the delivery above, with a total of 120,000 pack delivered to partners throughout Aoteroa.

Regional Public Health

<http://www.rph.org.nz/>

Regional Public Health (RPH) is the public health unit for the greater Wellington region (Wairarapa, Hutt Valley and Capital & Coast District Health Boards). Their purpose is to improve and protect the health of the population in the greater Wellington region with a focus on achieving equity. They provided information on the COVID-19 response and gave daily boxes of fruit and vegetables.

Ministry of Social Development

<https://www.msd.govt.nz/what-we-can-do/community/food-secure-communities/>

Supporting communities to become food secure while addressing additional demand on foodbanks, food rescue and other community food services resulted in the Ministry of Social Development investing \$32 million over two years to provide support for foodbanks, food rescue and other community organisations who are distributing food.

Demand for food has significantly increased for foodbanks since COVID-19 restrictions were implemented. Increased levels of unemployment and economic hardship resulted in more people vulnerable to food insecurity. (Ministry of Social Development, 2020)

Well Homes

<http://www.rph.org.nz/public-health-topics/housing-well-homes/>

Provides a "free housing assessment ... in ...[the] home, offers useful tips and advice to stay warm and healthy, save power, and treat and prevent mould. [They] also look at your physical house, discuss health and social support, and check options for housing transfers.

[They] ... may be able to provide items directly - such as curtains, heaters and bedding - if funding allows. [Well Homes will] ... engage landlords around heating, insulation and other upgrades and - for homeowners - [can] check eligibility for large discounts off heating and insulation. Well Homes is a housing coordination service for the Wellington region that brings together Tū Kotahi Māori Asthma [and Research] Trust, Sustainability Trust, Regional Public Health and He Kainga Oranga to deliver one of nine Healthy Housing Initiatives under the Ministry of Health's Rheumatic Fever Prevention programme." (Regional Public Health, 2020)

Rimutaka Prison

<http://www.rph.org.nz/news-and-events/news-and-media-releases/2020-04-23-nga-mihi-maioha-ki-te-whare-herehere-o-rimutaka/>

“The Well Homes partnership (Regional Public Health, Tu Kotahi Māori Asthma and Research Trust, Sustainability Trust and the University of Otago He Kāinga Oranga housing programme) and Rimutaka Prison have enjoyed a long partnership whereby the skills and workmanship of inmates are utilised to provide local whānau with essential items to help keep their homes warm, safe and dry.

Over 59 per cent of inmates participate in this employment and industry training, with those involved gaining and developing some useful skills for future opportunities. Some of the products made for the programme have included single and cot bedding sets for tamariki, warm blankets, door snakes, fire bricks and kindling.

We know this will make a significant difference to the health and wellbeing of our whānau and communities and again thank the team at Rimutaka for responding to our needs at these difficult and uncertain times” (Regional Public Health, 2020).

Figure 5 Pictured left to right: Dina Awarau (Well Homes Programme Co-ordinator), Steve Luey (Manager Industries, Rimutaka Prison) and Cheryl Davies (Manager, Tu Kotahi Māori Asthma and Research Trust).



Kaibosh

<https://www.kaibosh.org.nz/>

"Operating in Wellington, the Hutt Valley, Kāpiti and Horowhenua, Kaibosh is New Zealand's first food rescue organisation.

[Kaibosh] link the food industry with community groups that support people in need ensuring that quality surplus food reaches those who are struggling rather than being needlessly discarded. This benefits both our community and our environment.

Kaibosh has three branches in Wellington City, Lower Hutt and Paraparaumu. With the help of a dedicated team of more than 270 volunteers, we rescue and sort food seven days a week. We redistribute up to 40,000kg of quality surplus food each month to charities and community groups that support people in need. This is the equivalent of 114,000 meals provided to those who need it most, as well as a 14,400kg reduction in carbon emissions." (Kaibosh, 2020)



Kaibosh provided bulk food and the loan of multiple freezers to store frozen foods.

Te Runanganui o Taranaki Whanui ki Te Upoko o Te Ika

Mana Whenua for the Hutt Valley supported with kai and volunteers. The runanga donated boxes of meat which were included in the whānau food boxes.

Countdown

Wainuiomata Countdown the local supermarket provided significant support to the provision of kai with bread, trollies given, and some support was also given by Lower Hutt Countdown.

The Church of Jesus Christ of Latter-day Saints

The Wainuiomata Mormon Church helped the response with gifts of kai and volunteers to support the response.

Ngāti Toa Rangatira (Ora Toa Health Services)

Ngāti Toa Iwi has a large community health services and supported with funding for the response.

Wellington School of Medicine researchers and Give a Little page

“The research groups within the [University of Otago] at the Wellington campus carry out a range of research on critical public health issues. These [areas] include cancer and screening, healthy eating, health services research and prioritisation, housing, sustainability and the environment, inequalities, infectious diseases, Māori health and tobacco.” (University of Otago, Wellington, 2020)

Tu Kotahi and Wellington School of Medicine have a long-standing partnership that supports ongoing research with Māori in Tākiri Mai - Kokiri Hauora services. This resulted in the School of Medicine researches supporting a Give-a-Little page to support the efforts Tākiri Mai - Kokiri Hauora delivered in the response to COVID-19.

Hutt Valley District Health Board

Figure 6 DHB visit Pataka Kai: From left to right Keri Brown(DHB) and tamariki, Dominique Va’a, Andrew Blair(DHB), Ken Laban(DHB), Renee Davies, Fionnagh Dougan(CE, DHB), Josh Briggs(DHB), Janis Awatere and Kerry Dougall



The Hutt Valley District Health Board work with other health care providers to plan, fund, and provide a range of healthcare services for people in the Hutt Valley. They provided nurses to support the Flu immunisations of whānau.

Capital Coast District Health Board

Capital Coast District Health Board supported this response by providing personal protective equipment for the immunisations completed,

Hutt City Council

Figure 7 Mayor of Lower Hutt Campbell Barry and Janis Awatere coordinator of the Pataka Kai with a volunteer in the background



As the local authority they were interested in Tākiri Mai - Kokiri Hauora response to COVID-19 and supported with a large venue for the foodbank operations that enabled bulk deliveries, storage and preparing the food parcels. The council also donated money to help purchase the resources needed.

Wellington Community Trust

<https://wct.org.nz/>

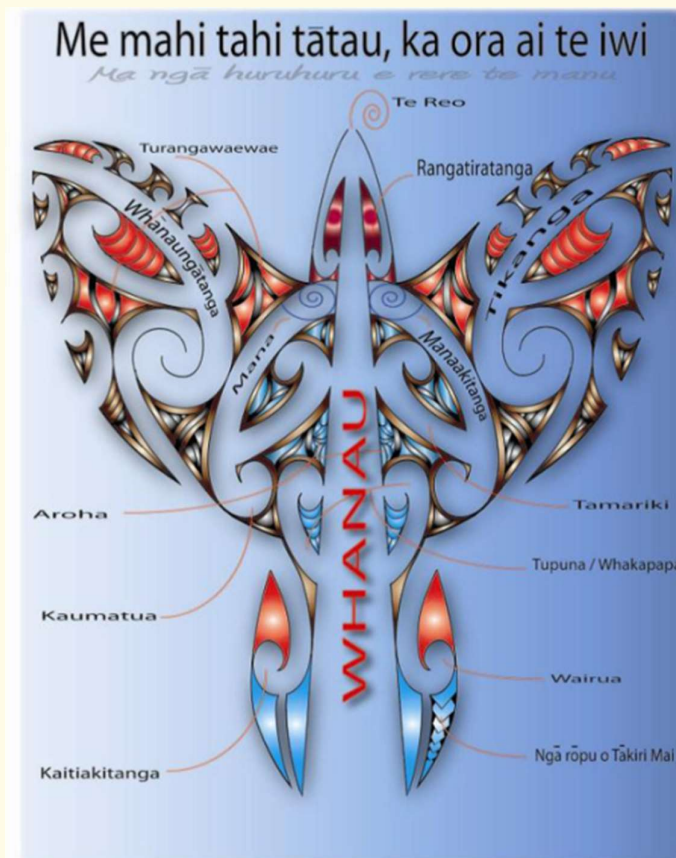
This funder is an organisation supporting communities in the Wellington region. They established a special fund for the COVID -19 response. An application was successful to support the ongoing staffing of the Pataka Kai.

Support provided by Tākiri Mai - Kokiri Hauora

Tākiri Mai - Kokiri Hauora and its programmes provided a significant amount of support to the community. People who had already accessed Tākiri Mai - Kokiri Hauora programmes were aware of its presence in the community, and word spread to many other people who had never interacted with Tākiri Mai - Kokiri Hauora before.

Utilising the values of the Tākiri Mai - Kokiri Hauora framework, Tākiri Mai - Kokiri Hauora's primary aim was to provide mana-enhancing and unconditional support to any person who requested it.

Figure 8 Tākiri Mai Te Ata framework



In turn, many people from the community who accessed support from Tākiri Mai - Kokiri Hauora have contributed to the ongoing response by helping with transportation of goods, donating goods such as kai and fruit trees, and generally giving their time. The community has come together.

Some of the support that Tākiri Mai - Kokiri Hauora provided to the community included:

- Kai according to the size and needs of a whānau (provided on-site and delivered; including supplies for babies and or period products for wahine for instance)

Figure 9 Kai being collected and assembled into packs for whānau



- Supermarket vouchers so that whānau could purchase kai
- Support for people who could be particularly vulnerable to the effects of the virus or with long-term conditions

Figure 10 Support included hanging out washing for kaumātua



- Support with filling prescriptions for medication
- Flu vaccinations and pneumonia vaccinations; particularly for Kaumātua and people with conditions that made them vulnerable to poorer health or more vulnerable to the effects of COVID-19

Figure 11 Flu Immunisations were delivered to the door of whānau



- Support to pay power bills
- Larger food parcels for people having tangihanga

Figure 12 Packs ready to go and kaimahi in action



- Provision of blankets (around 350 were gifted by the Well Homes programme and the Rimutaka prison; and more were purchased by Tu Kotahi Māori Asthma and Research Trust and Tākiri Mai - Kokiri Hauora)

Figure 13 14 Pictured left to right: Dina Awarau (Well Homes Programme Co-ordinator), Steve Luey (Manager Industries, Rimutaka Prison) and Cheryl Davies (Manager, Tu Kotahi Māori Asthma Trust) and some of the blankets given.



- Provision of clothing (for example, children's pyjamas, socks, underwear)

- Packs of sanitation goods so that whānau could keep their home environment clean and prevent the spread of germs

Figure 15 Sanitation packs



- Linkage to health services and other agencies that could provide support to a person (e.g. community-based kaimahi had the opportunity to identify issues, like a person who was in poorer health)
- General support and encouragement for whānau of all ages who were stressed or isolated.

Figure 16 Support included hanging out Kaumātua washing and even our own Rangatahi helped



Rangatahi were instrumental in supporting the Pataka Kai.



Pataka Kai – Kokiri Hauora

One of the key activities of Tākiri Mai - Kokiri Hauora was to establish a Pataka Kai in Wainuiomata which has now found a permanent base at St Peter’s Church and Hall in Wise Street, Wainuiomata. During the pandemic, many Wellington foodbanks that are often staffed by older volunteers did not operate. For some whānau, there are barriers to accessing foodbanks and other practical supports of this kind. Strict criteria and limits on use are part of the protocols that many agencies as well as Work and Income New Zealand operate under. When people engaged with the Pataka Kai, Tākiri Mai - Kokiri Hauora did not want to present any barriers to access.

Figure 17 Pataka Kai



The Pataka Kai provided drop-in collection for kai as well as delivery of kai parcels and other kai items to whānau all around the Hutt Valley and Wellington. The kaupapa is different to that of a mainstream foodbank: it is a community resource which provides to the community and holds and upholds community resources so that many people can enjoy the resources that are already held within the community. The more permanent base at St Peter’s Church and Hall has a community space where people can socialise and enjoy a hot drink and something to eat, a stall of high quality clothing for people of all ages, an outdoor area that will provide seating and a community garden; as well as a large storehouse of kai, sanitary items, and household supplies that are provided to any person who requires support.



Figure 18 Teresea Olsen General Manager

Providing a crucial distribution mechanism

Tākiri Mai - Kokiri Hauora also provided a crucial distribution mechanism for resources made available by other local and central government entities. For example, a large volume of nutritious and appealing frozen meals were provided by the Ministry of Social Development. Tākiri Mai - Kokiri Hauora stored these frozen meals in commercial freezers and distributed them gradually to whānau. Tākiri Mai - Kokiri Hauora's practical approach and knowledge of the community meant that this nutritious kai was provided in volumes that suited the limited freezer space that most households have.

Figure 19 MSD frozen meals



Reaching out to people with housing insecurity

The outreach of Tākiri Mai - Kokiri Hauora to whānau who experienced housing insecurity and homelessness was noteworthy. They provided support to people who were housed in hotels and motels during lockdown. In some instances, Tākiri Mai - Kokiri Hauora assisted people who were rough-sleeping and had no house to stay in.

Kai vouchers were provided to whānau enrolled in the Homelessness Prevention Service during lockdown with ongoing support to manage any healthy housing and tenancy issues.

A proactive approach was taken with hotels and motels to identify the level of cooking facilities available to people. The contents and quantities of kai parcels and pre-cooked meals were changed accordingly.

Communication Channels

Prior to COVID-19, Tākiri Mai - Kokiri Hauora did not regularly update their Facebook page, however, both Facebook and Zoom have been used daily over the past 7 months.

Through Facebook, a 9am virtual karakia was provided to the community with important messages for the day and this still continues today. This communication channel provided Tākiri Mai - Kokiri Hauora with a way of reassuring people, encouraging people to contact them, using a free 0800 number, if they were hungry or needed support, and it was a useful way of reinforcing the Ministry of Health messages and how they applied to Māori. For example, some people in the community perceived that they should not go to a GP during the early stages of the pandemic, and Tākiri Mai - Kokiri Hauora reassured people that they should still seek medical help and that it was safe to do so. Impacts on tangihana and other changes during lockdown were constantly updated.

It was not unusual for Tākiri Mai - Kokiri Hauora to be supporting whānau who did not have their own phone/cell phone, or who relied on cell phones with limited credit and data allowances. Social isolation was a common issue.

Who accessed Tākiri Mai - Kokiri Hauora support?

At hui, Tākiri Mai - Kokiri Hauora staff spoke about the ethnic background of people accessing their services prior to COVID-19 and during the pandemic response. After the introduction of COVID-19, kaimahi perceived that many more people who do not identify as Māori have engaged with Tākiri Mai - Kokiri Hauora. Large numbers of people from other ethnic backgrounds, European/Pākehā and Pacific peoples for instance accessed support from Tākiri Mai - Kokiri Hauora. This analysis provides some insight into the ethnic make-up of whānau accessing support in that time.

It is important to note that ethnicity data was not recorded for every person who accessed Tākiri Mai - Kokiri Hauora support. Tākiri Mai - Kokiri Hauora did not have a relational database available to support and monitor their work during the early stages of the pandemic which made it challenging to consistently collect and link ethnicity and other demographic information to whānau interacting with Tākiri Mai - Kokiri Hauora. The lack of a relational database significantly limits Tākiri Mai - Kokiri Hauora's monitoring and reporting and could make their day-to-day operations challenging.

Information About Whānau

The data collated in this report was collected in order to provide whānau with food/kai and sanitation packs during the COVID-19 alert level 4 and 3. What was collected evolved as the

response progressed and funders required further data. Verbal consent was given to collect the data as whānau needed to contact Tākiri Mai - Kokiri Hauora to initiate the delivery/pickup.

Tākiri Mai - Kokiri Hauora collected a significant amount of information about whānau and individuals accessing support both to support their operational response while it was in progress, and to collate the information and reflect on the response for their own learning, that of other Māori providers and Whānau Ora collectives, as well as funding organisations and other entities interested in the health and social services sector. There were huge constraints on capacity of kaimahi to collect information as the primary drive was to compile and deliver packs. Though some whānau did come and pick up their own packs the vast majority were delivered so that is the foundation of this reporting. What was recorded in fact was the request for help and core information so Tākiri Mai - Kokiri Hauora could deliver on their request.

Tākiri Mai - Kokiri Hauora demonstrated a lot of adaptability and resilience in promptly setting up Google Sheets workbooks to support their operational response and record information for later reporting and evaluation. In some instances, staff had little familiarity with using data Google Sheets.

The following information was often collected:

- The person's first and last name
- Their address
- Their phone number
- The support they received (e.g. a sanitation pack was delivered, a kai box was delivered, some kai from Remakery was provided)
- The date of the support
- The household size
- The makeup of the household in terms of age: Kaumātua (50+), Pakeke (19-49), Rangatahi (12-18 years), and Pepe and Tamariki (birth to 11 years).

Some information is available in the workbooks about ethnicity and iwi, although this improved over time. As noted, the lack of access to a relational database and capacity of kaimahi to collect data hampered the ability of Tākiri Mai - Kokiri Hauora to systematically collect data about demographics and household make up from whānau accessing support.

Some information was also recorded about health issues, stressors, or social issues that whānau experienced. While this information was not always recorded in great detail, Tākiri Mai - Kokiri

Hauora knew or got to know whānau needs with consistent contact and visits within their communities.

Recording of data

Google Sheets, workbooks and worksheets were used to collect information about whānau.

Very good principles were used in collecting data:

- Information about the person or whānau was recorded in rows.
- Key information such as support, household size, date, phone number etc was collected in columns.
- Good guidelines were used for recording information about whānau and storing this systematically (e.g. household size, and then number of kaumatau, pakeke, rangatahi, and pepe/tamariki).
- There were several workbooks, this created some challenges in structuring workbooks and logging information for easy batching or analysis throughout the response, or later on during reporting and evaluation. It would be helpful for Tākiri Mai - Kokiri Hauora to have some in-organisation support over a period of time until they have revised their strategy for data storage and reporting in the longer-term.
- On 17th September 2020, four workbooks of information were provided to the Department of Public Health (University of Otago, Wellington) for analysis. These work books were protected and a confidentiality agreement was signed in order to protect whānau data. The sheets provided were:
 1. Delivery of sanitation packs
 2. MSD kai
 3. Remakery kai deliveries
 4. Pataka Kai Deliveries (only partial data)

At the beginning of November Tākiri Mai - Kokiri Hauora kaimahi added all further data relevant to the response from March to the end of June. Having a picture of the full three-month period was deemed a priority.

To support this research additional data sheets were added of:

5. Pataka Kai Deliveries (all data to the end of June)
6. Flu vaccinations

7. Kohanga deliveries

8. Flu Immunisation

In the deliveries workbooks listed above, many whānau received support on more than one occasion. There was not enough capacity in this particular project to restructure all of the data to reveal exactly how much support was provided to the community through these channels.

The approach of Tākiri Mai - Kokiri Hauora was to provide proactive support and a holistic response. This means that many whānau who received sanitation packs also received kai parcels or other kai or supplies (and vice versa). While all of the data could not be looked at in-depth, it is likely that this analysis provides useful insights into Tākiri Mai - Kokiri Hauora's overall response

Scope of the analysis

Each workbook had a different structure. Within the allocated time, it was most straightforward to firstly focus on each workbook and reformat the data as needed and produce some key analyses. This was also a good first step because the workbooks collected different information in different formats at times.

It was not feasible in this time to provide a really comprehensive dataset that included the people who featured in all of the separate datasets and drew together the different kinds of support each whānau was provided with. With further resource, it will probably be possible to develop a multi-faceted dataset of the support provided to each whānau. Note that there could still be data gaps for some whānau (e.g. ethnicity, household size).

This report focuses on:

1. An analysis of the delivery of sanitation packs
2. An analysis of Pataka Kai deliveries
3. An analysis of kai provided by MSD
4. An analysis of Remakery kai deliveries
5. An brief analysis of Flu Immunisation and
6. Kokanga deliveries are reported

An events-based approach rather than a whānau-based approach

Related to the points about not having a relational database, the following analyses usually takes an *events-based approach*. It was more feasible to focus on all the events of support (which included

whānau and individuals who accessed a mix of support or the same kind of support multiple times) rather than doing calculations on information about “unique whānau” or “unique individuals”.

When aggregated together, this initial analysis still provides a detailed picture of the suburbs and areas that Tākiri Mai - Kokiri Hauora supported as well as the diverse household types that were supported and it provides insights into the need of the community and breadth of Tākiri Mai - Kokiri Hauora marae’s response.

Evaluation questions that guided the analysis

Broad questions were posed to guide the analysis, and these were tailored according to what was in the workbook/spreadsheet.

- What was the “size and breadth” of Tākiri Mai - Kokiri Hauora’s response?
- What was the geographic spread of whānau who received support?
- How many people who were homeless or in emergency housing were supported by Tākiri Mai - Kokiri Hauora?
- What was the ethnic and cultural makeup of people supported by Tākiri Mai - Kokiri Hauora? Which iwi did Māori identify with?

Data reformatting and cleaning

Data from the original worksheets were copied and reformatted into Microsoft Excel so that they were amenable to analysis using formulas and the Pivot Table function in Excel.

In some instances, it was necessary to check entries of data for extra spaces after words or numbers so that seemingly identical terms would not be treated as different entries. For example, if a space was entered after the town name ‘Wainuiomata’ this would be treated as a different entry when doing a Pivot Table analysis. Several checks were run on spelling of place names and the correspondence of suburb with town (e.g. Naenae should be classified as being in the town of Lower Hutt and not Wellington). In some instance only the street was given and the town, so the suburb was manually searched in Google maps. Additional columns were created for ethnicity and iwi to clearly count the number of whānau identifying with different iwi and ethnic groups. Ethnicity was coded according to level 1 in the Statistics New Zealand 2005 classification system.¹ Tākiri Mai - Kokiri Hauora staff appraised iwi data.

¹ Information about the Stats NZ ethnicity classification can be found on this webpage <http://archive.stats.govt.nz/methods/classifications-and-standards/classification-related-stats-standards/ethnicity.aspx#gsc.tab=0>

Delivery of sanitation packs

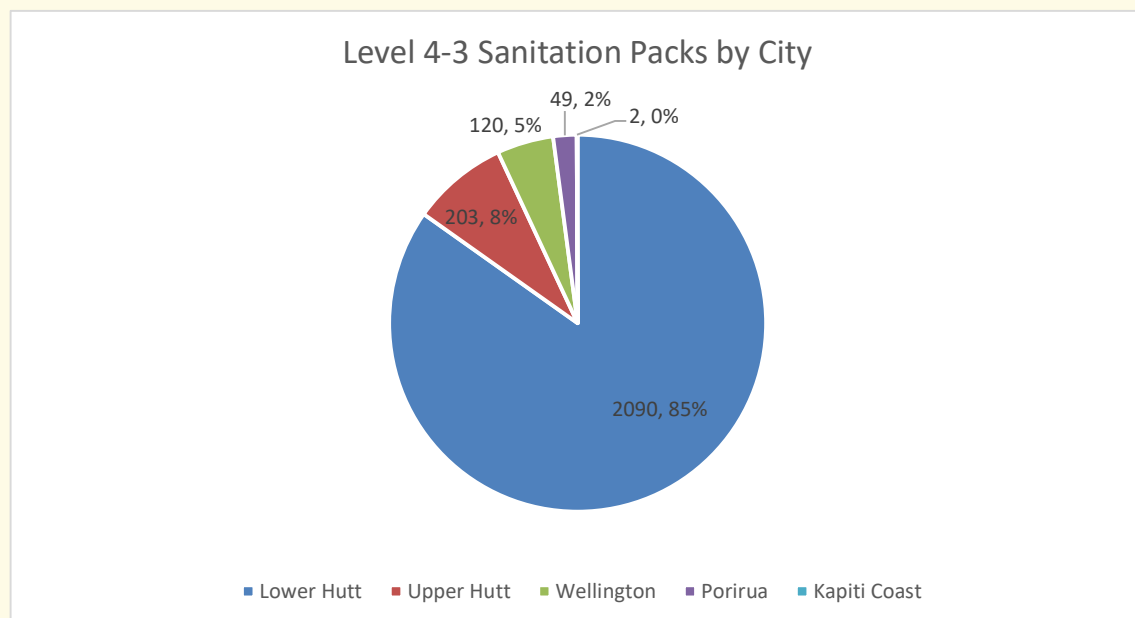
4479 Households
had Packs Delivered
to 12670 Whānau

Sanitation packs were prepared and distributed during April (2, 8, 17, 24, and 30), May (15, 18, and 26), 22 June, July (6 and 13), and August (2 and 17). These were sent by WOCA for the Wellington region. At least 4,479 households had sanitation packs delivered to whānau during alert levels 4 and 3 lockdown and beyond. This represented a very practical form of support for many people who found it challenging to get to a supermarket, and for those who were confronted with supermarkets that had run out of cleaning products because of overwhelming demand.

There is a comparison in this section between data from lockdown alert level 4-3 for that period and for all the deliveries across all alert levels. The difference in the data has been identified in the heading by Alert level 4-3 or All Sanitation.

As shown in Table 2, the majority of sanitation packs delivered during the lockdown period were to whānau in Lower Hutt with 3845 deliveries. Around 203 of whānau who received a sanitation pack lived in a suburb in Upper Hutt. More than 116 whānau from suburbs in the Wellington area (e.g. Newtown, Strathmore) received a sanitation pack or packs, and 49 whānau from Porirua received a sanitation pack(s). A small number of whānau in the Wairarapa, Kapiti Coast and Foxton also received packs. These whānau were often reported as friends of whānau who lived locally.

Table 2 Alert level 4 - 3 The majority of sanitation packs were delivered in Lower Hutt

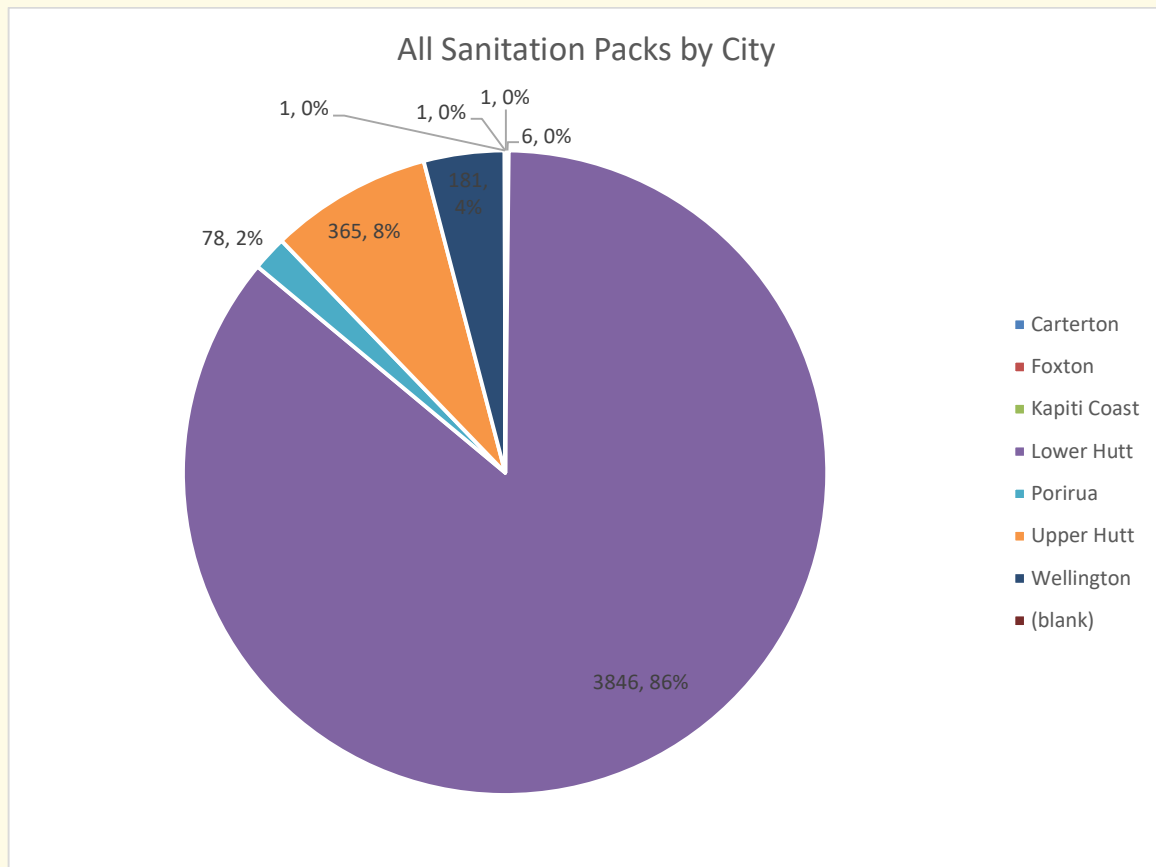


Over the whole period, packs were delivered predominantly to the Hutt Valley. The sanitation packs were delivered to all Whānau Ora collective members of Whānau Whanake

<https://www.whānauwhanake.org/> so other areas were covered by their collective. Te Atiawa and Tākiri Mai - Kokiri Hauora were delivering to the Hutt Valley.

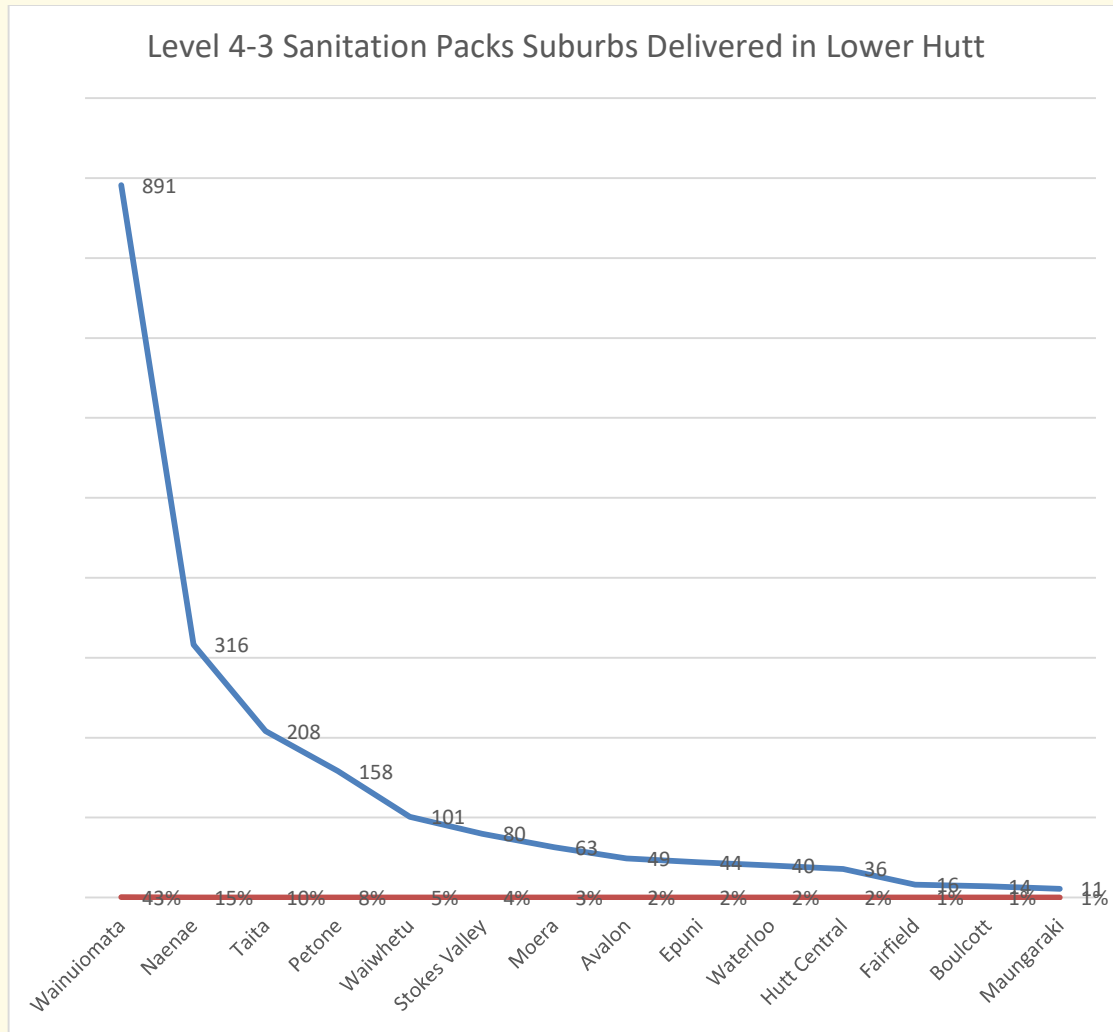
Deliveries totalled 4479, of this figure, some were repeats and limited time for this analysis has prevented the capturing of that data. There was a general policy not to do repeats when a pack had been delivered within the past 30 days. Lower Hutt had 3846 with 86% of the deliveries, Upper Hutt 365 – 8%, Wellington 181 - 4% and Porirua 2%. Kapiti coast on 6 with Carterton, Foxton and blank all on one.

Table 3 All Sanitation Packs deliveries by city



Data was provided for suburbs for all deliveries across all Cities/Towns. This data focuses on analysis of the wider Hutt Valley, especially Lower Hutt. The most delivered suburbs were Wainuiomata at 1539, Naenae, 597, Taita recorded 425 and Petone, Stokes Valley and Waiwhetu followed. These are all known to have significant Māori populations. Upper Hutt deliveries were next in number with Trentham being the highest suburb. The blanks have been left to show the gaps in the data and there is one person recorded as being homeless with no address and not in a Motel or emergency accommodation. There are also a few who requested the details of their living arrangements to remain confidential.

Table 4 Alert level 3-4 Large proportions of whānau receiving sanitation packs lived in Wainuiomata, Naenae, or Taita

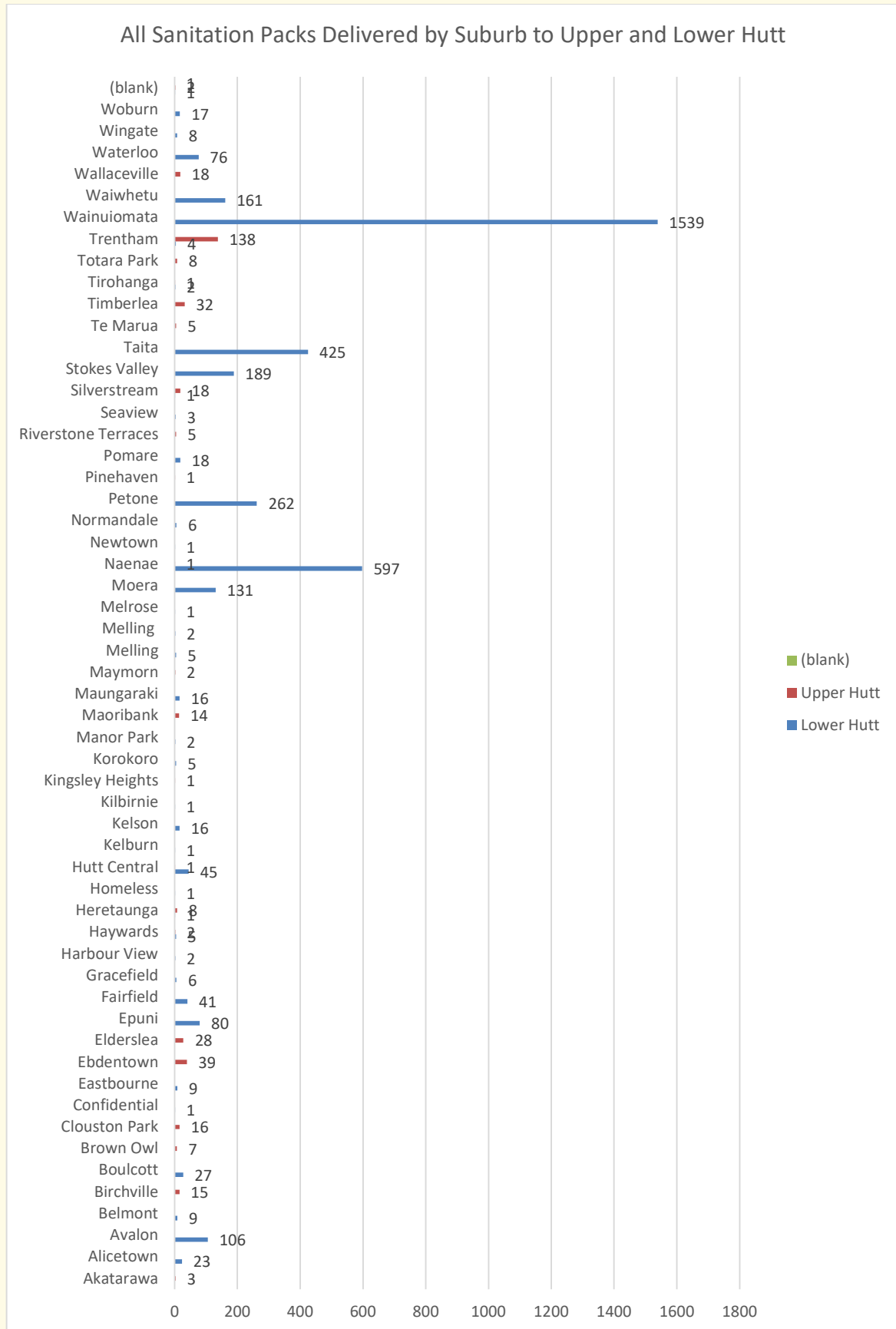


Note that this table does not list every suburb in Lower Hutt which received packs

Whānau from other suburbs were also supported with packs, and these included the suburbs of Alicetown, Kelson, Lower Hutt Central, Eastbourne, Gracefield, Pomare, Woburn, Haywards, Korokoro, Melling, Normandale, Belmont, Wingate, Manor Park, Point Howard, and Tirohanga. Fewer whānau came from these suburbs.

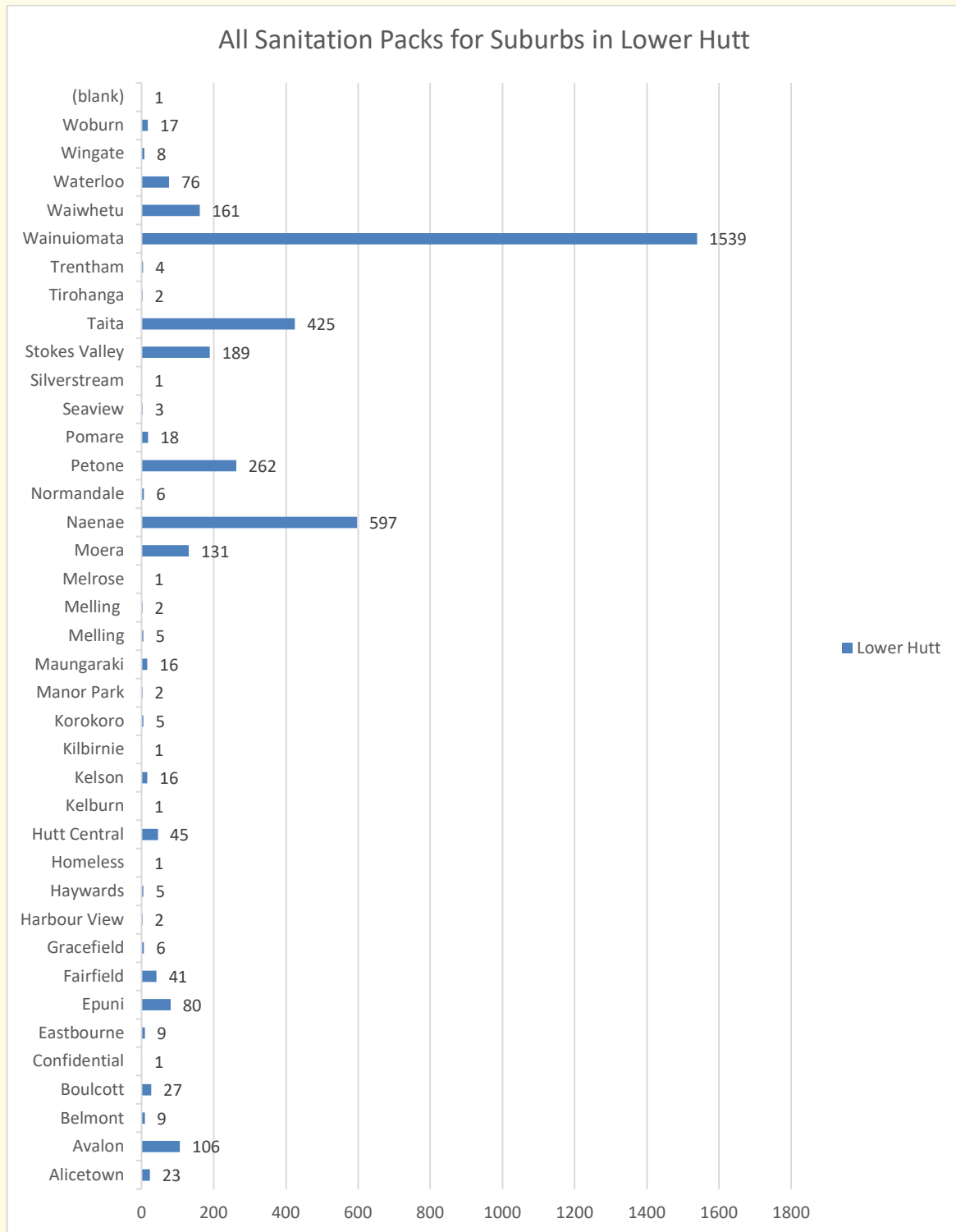
Across the whole period of deliveries there were multiple suburbs delivered to but Wainuiomata, Naenae and Taita were the top three communities for Lower Hutt and Trentham, Ebdentown and Timberlea for Upper Hutt.

Table 5 All Sanitation Packs Delivered by Suburb to Upper and Lower Hutt



This graph just shows the Lower Hutt Suburbs which identifies the deliveries a little clearer.

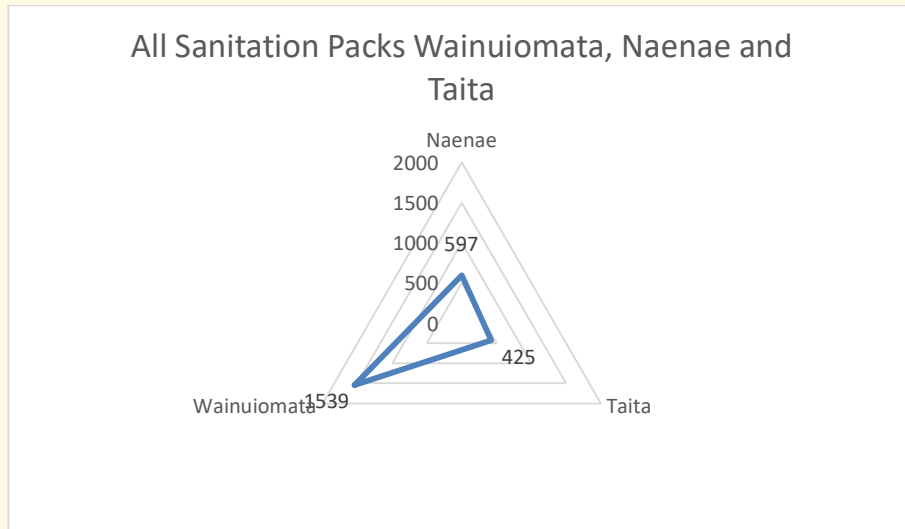
Table 6 All Sanitation Packs delivered to in Lower Hutt by Suburb



Within Lower Hutt, a large proportion of sanitation packs were delivered to whānau in Wainuiomata (see Table 4 and 5). Tākiri Mai - Kokiri Hauora has very strong relationships with Wainuiomata residents. Significant proportions of whānau lived in Naenae, Taita, or Petone. It is notable that Naenae and Taita do not have easy access to a medium or large supermarket.

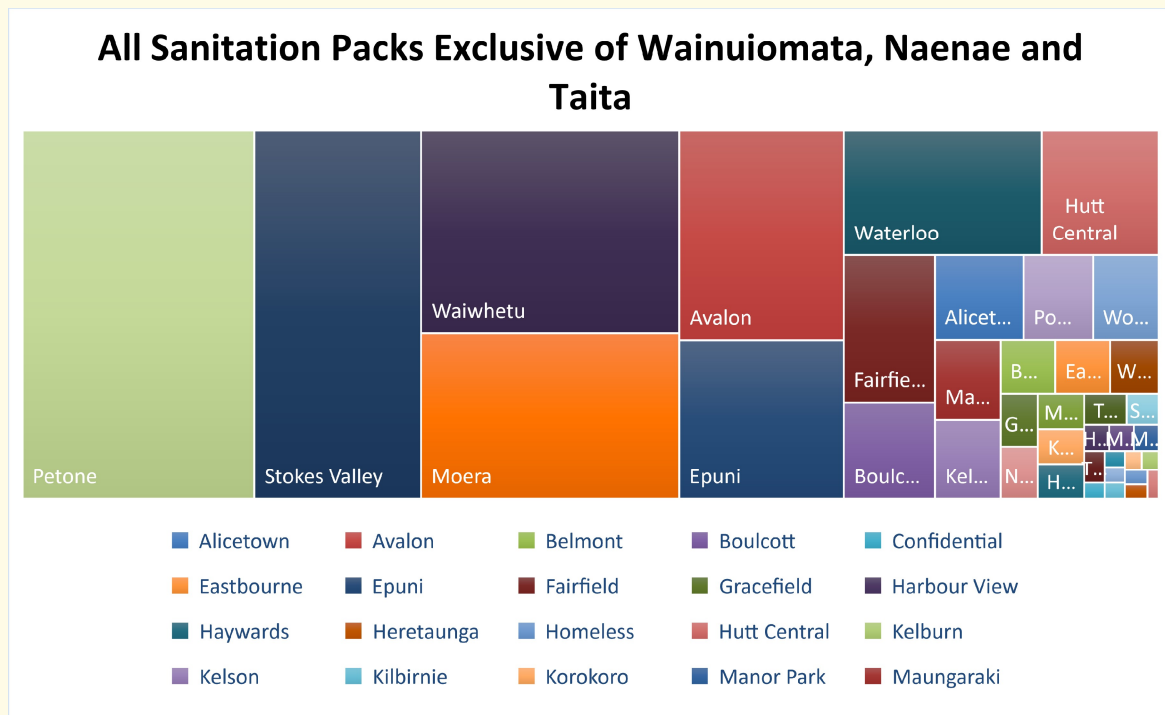
The Socioeconomic deprivation profile showing Naenae and Taita scoring the most deprived at 10 and Wainuiomata an overall 8 (Environmental Health Indicators New Zealand, 2020).

Table 7 All Sanitation Packs Wainuiomata, Naenae and Taita



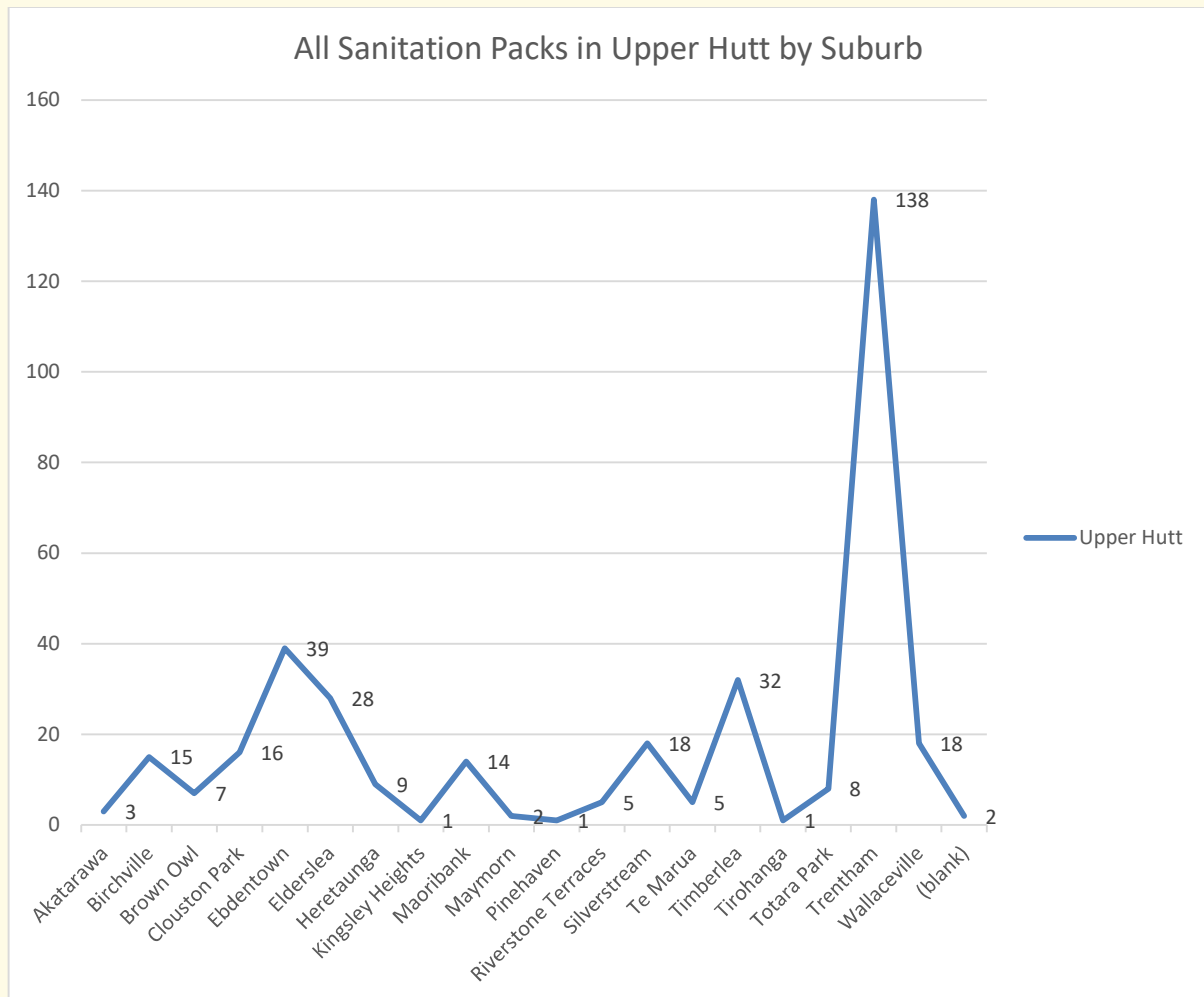
Due to the large numbers in Naenae, Taita and Wainuiomata Table 6 shows the deliveries in all but those suburbs. The need for food was certainly widespread and even whānau from more perceived affluent suburbs were requesting food. Of the 23 suburbs in Lower Hutt 17 were delivered to.

Table 8 Suburbs Packs delivered to exclusive of Naenae, Taita or Wainuiomata



Upper Hutt had significant need as well, 138 deliveries were in Trentham and the two central suburbs where Motels are located were in Ebdentown and Elderslea delivered 67 Packs.

Table 9 All Sanitation Packs Numbers of deliveries to Upper Hutt suburbs



The address data for 4611 delivered sanitation pack were run through the New Zealand Index of Deprivation (NZDep2018) where an area-based measure is used to estimate relative socioeconomic deprivation for addresses. Decile 10 represents areas with the most deprived scores calculated from nine Census variables.

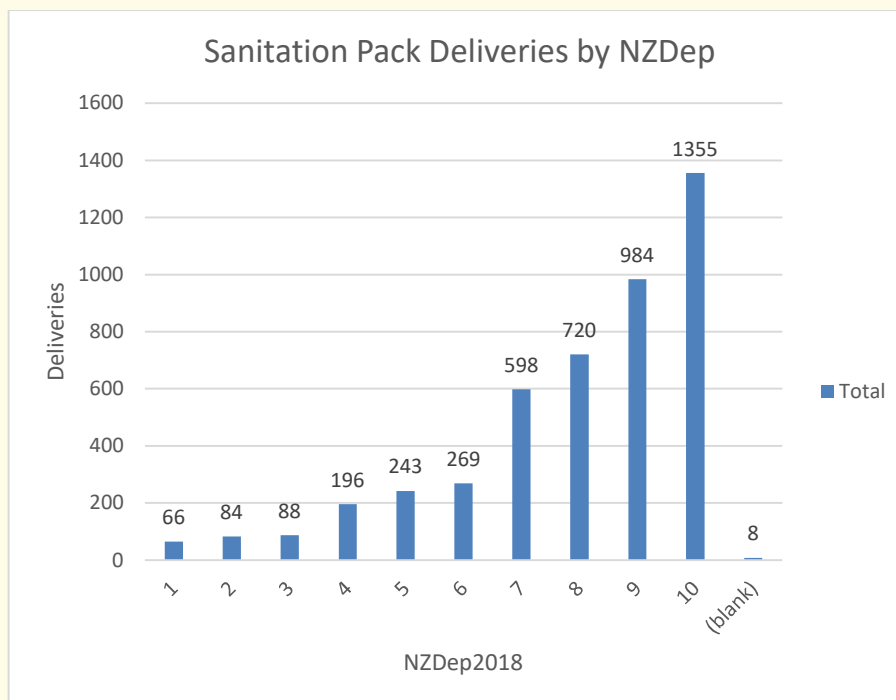
There is a variance of 132 households between the All Sanitation Packs data in this chapter which equals 4479 households and this NZDep data that identifies 4611 households. This NZDep data included deliveries past the end of June so included a further 132 households.

Of the 4611, when they were run through the index 880 were rejected as address unknown. These addresses then undertook a manual process of checking each one and errors of spelling, wrong identification of street or road or crescent, etc., and wrong suburb used. It was again run through the index and this identified 91 still unmatched and 19 homes that there was multiple matching for. These were again manually matched with the rest of street decile rating, or neighbours rating or the closest address was used. With some of the NZDep calculations there are some streets that have different levels in the same street. Where a house came back with a variance the higher number was

picked as we were delivering to poorer whanau usually. The biggest variance was 4 deciles with one neighbour being a 5 and the other being a 9. Most of these 19 multiple ratings had only a 1-2 score difference. Some were unable to match and they resulted in a blank reading for 8 addresses. These packs were delivered but an error in recording the address obviously occurred for these households.

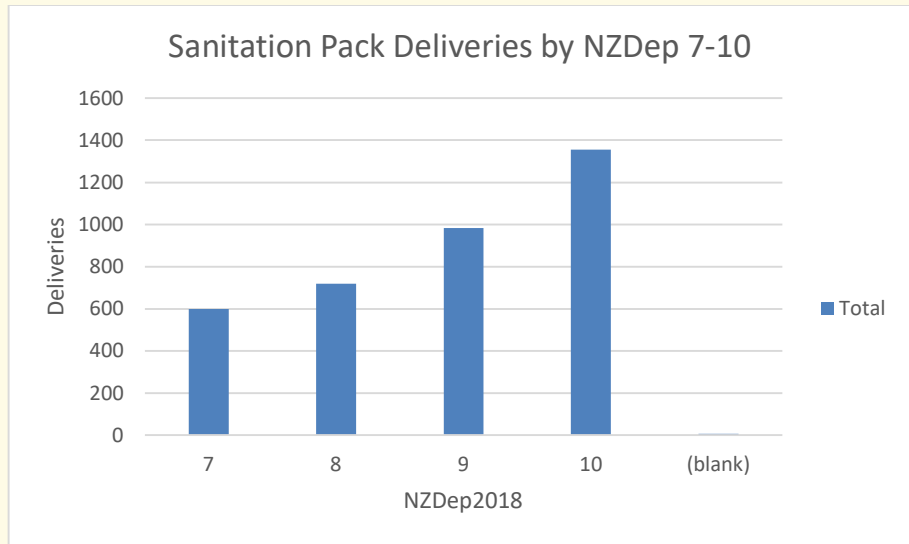
Of the 4611 addresses rated, 1355 households were NZDep 10, 984 scored 9, and 720 scored 8. As you can see from the graph below some lower NZDep deliveries did occur, but the vast majority did go to higher decile rated households and the families within. This was the aim of Takiri Mai te Ata but no request for a pack was refused.

Table 10 All Sanitation Pack Deliveries by NZDep2018



Most deliveries went to the higher decile rated homes as the table below shows. Of the 4611 homes delivered to 3665 were in NZDep2018 decile 7 or above equalling to 79% of the deliveries.

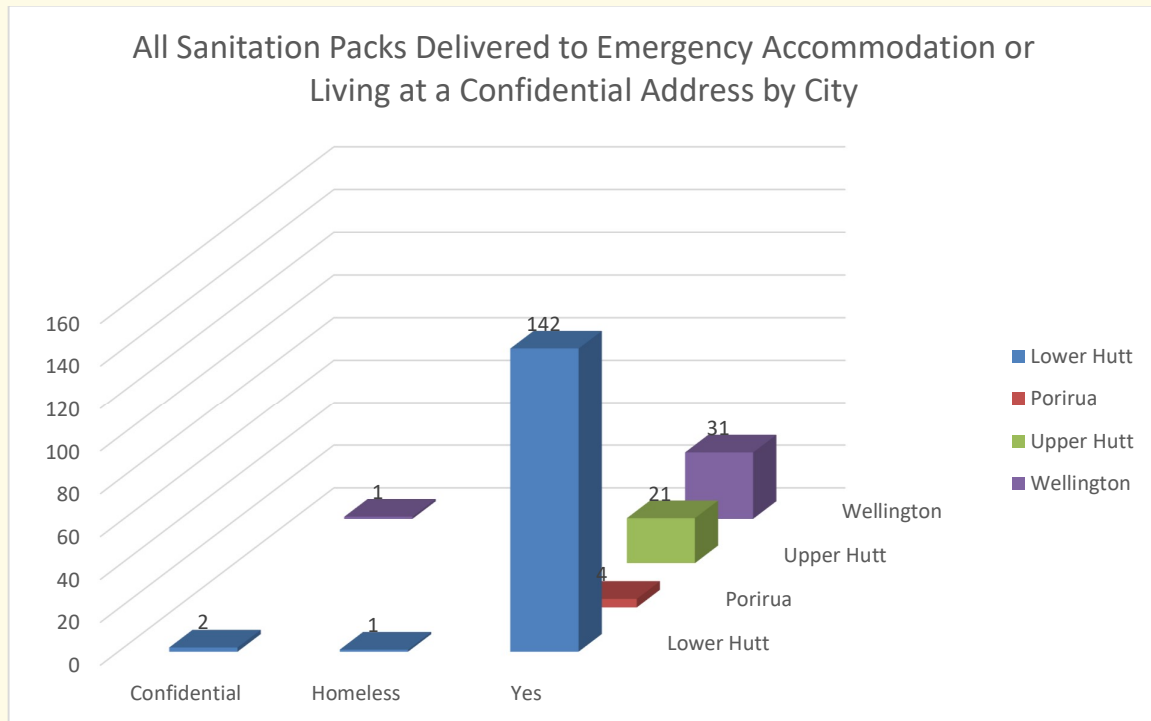
Table 11 Sanitation Pack Deliveries by NZDep2018 7 to 10



In our data sets there were some easily identifiable information that showed whānau staying in Motels for emergency accommodation. Some inner city suburbs presented higher in this data because the homeless whānau were housed in Motels. The other data displayed here is those who had no fixed abode and then those that needed to keep their accommodation confidential for safety reasons.

This data is likely to be understated as there are more emergency accommodation options in the community that is less obvious.

Table 12 All Sanitation Packs to emergency, homeless or confidential addresses



Only 476 whānau identified they had health issues. The issues reported here reflect the health need of the family.

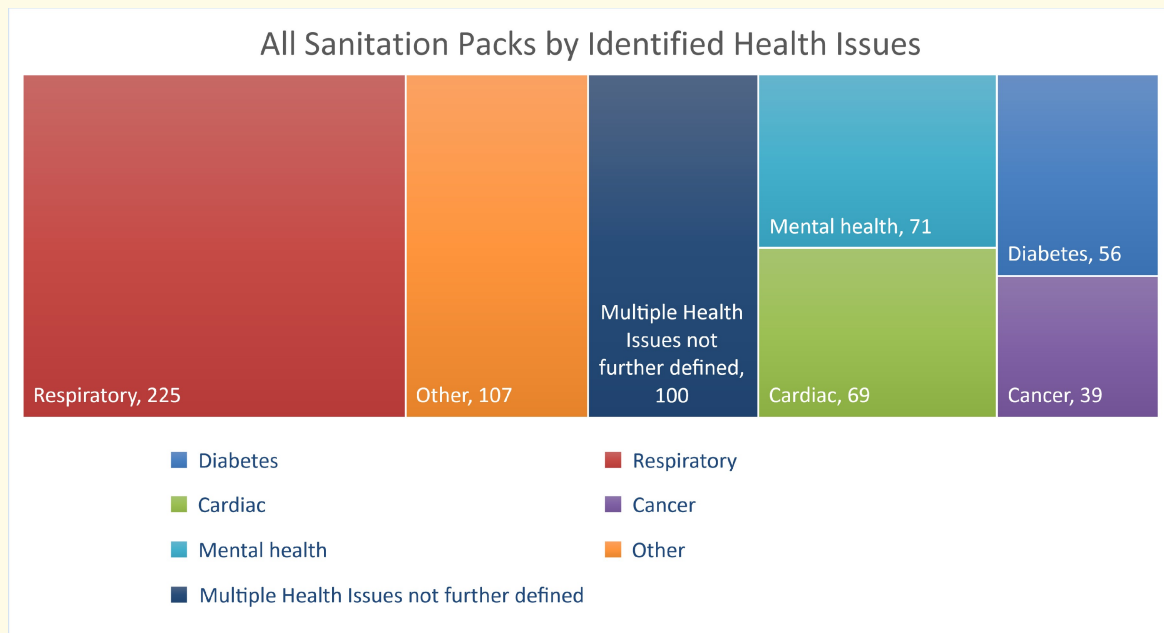
For some homes they reported all have asthma and then others reported one had asthma and a child had autism for example. This level of detail was inconsistent and only reported by a few.

The terms used here were the terms whānau used to describe either their own or someone in their household’s health issue.

Categories for identifying the health issues were determined partly by the services Tākiri Mai - Kokiri Hauora provides. The issues supported in particular by the service are those with respiratory conditions and diabetes. Cardiac presentations often are associated with chronic conditions also supported or associated with respiratory conditions.

Respiratory issues with 225 were the most reported and these were sometimes identified as “asthma” “COPD” or “emphysema”. Other health issues were 107 is explored in a table below and multiple issues not further defined were reported by 100 respondents. The next three health issues identified were all close in numbers, namely, mental health on 71, cardiac at 69 and diabetes on 56. Cardiac was another general term used to describe a collection of health issues from “high blood pressure” to “ischemic heart disease”. Of course, in the Multiple Issues there will be a combination of some of these categories however they were not further defined. Cancer at 39 was the last identified category with breast, bowel and ovarian cancer mentioned by a few. Tākiri Mai - Kokiri Hauora has Mana Wahine who support access for Māori to screening and support services for those with cancer in our Te Mauri program. It is unclear if this data reflects this relationship or not.

Table 13 All Sanitation Packs by health issues



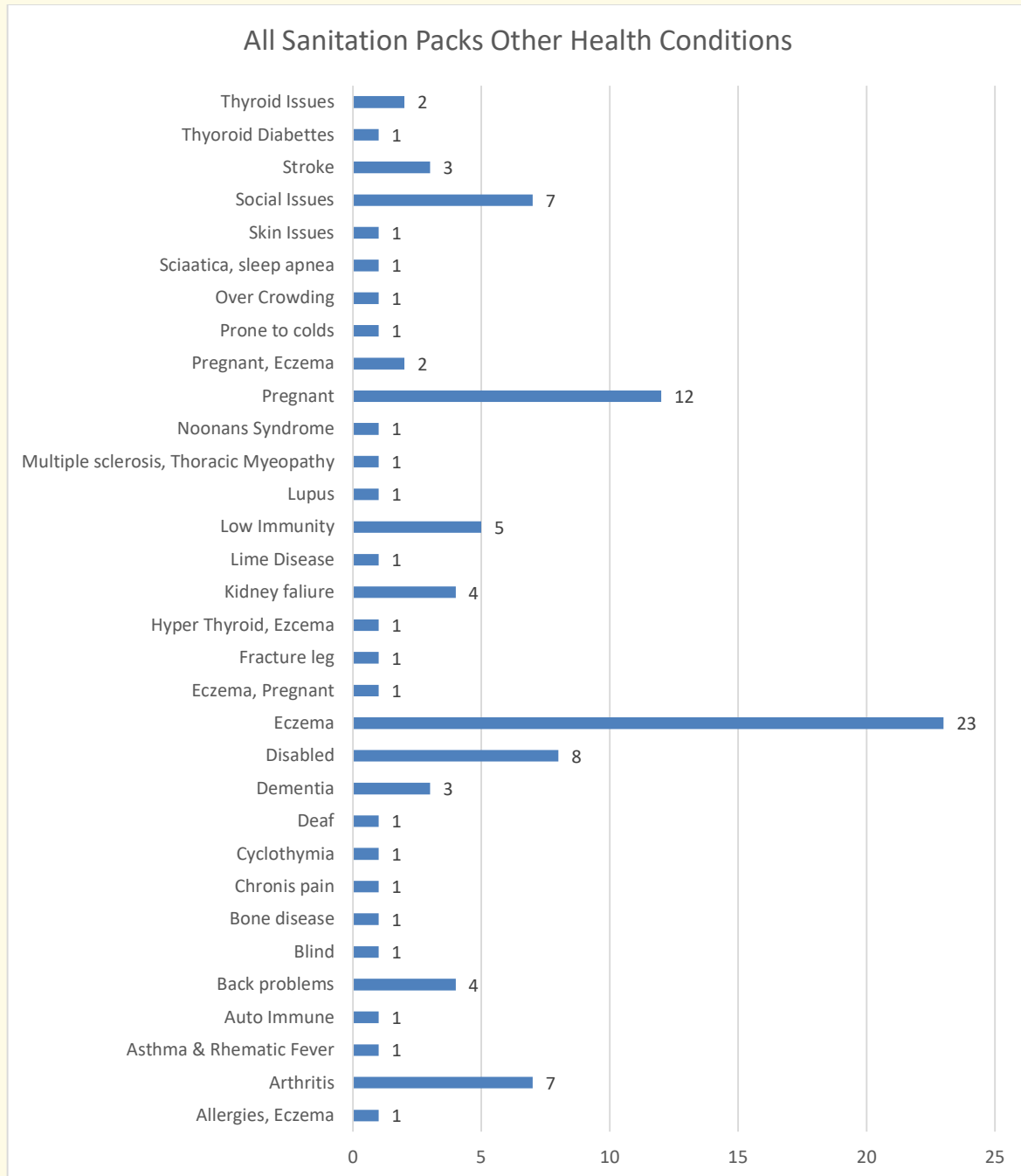
107 whānau identified that they had other conditions. The descriptions used are the terms whānau have used to describe their own health condition. Some information was not clear, and some used a very broad description of their issues. There are four health issues identified in this data that do not fit as a health condition, however they have still been included as they did influence the packs being given.

Included under this category are those who were:

1. Pregnant
2. Disabled
3. Socially isolated and
4. Overcrowded

It was considered not to position the overcrowded and social isolation, but there are direct links to poor health with both situations (World Health Organisation, 2020) (Stats NZ, 2020).

Table 14 All Sanitation Packs Other health conditions



From the packs delivered the number in the household was identified. For the alert level 4 and-3 period, thousands of people in the greater Wellington area benefited from the Sanitation Packs (see Table 3). In the longer-term response, a few people from as far away as Foxton, Carterton, and the Kapiti Coast areas also benefited and received sanitation packs. More than 4,500 residents in Lower Hutt benefited from the Sanitation Packs, followed by nearly 490 people in Upper Hutt, and 192 people from the Wellington, and 95 people from Porirua areas (as based on household size).

Table 15 Alert level 4-3 More than 4,500 people from Lower Hutt benefited from receiving a Sanitation Pack

Area	Count
Lower Hutt	4597
Upper Hutt	490
Wellington	192
Porirua	95
Johnsonville	9
Kapiti Coast	5
Unclear	5

A note about Table 13:

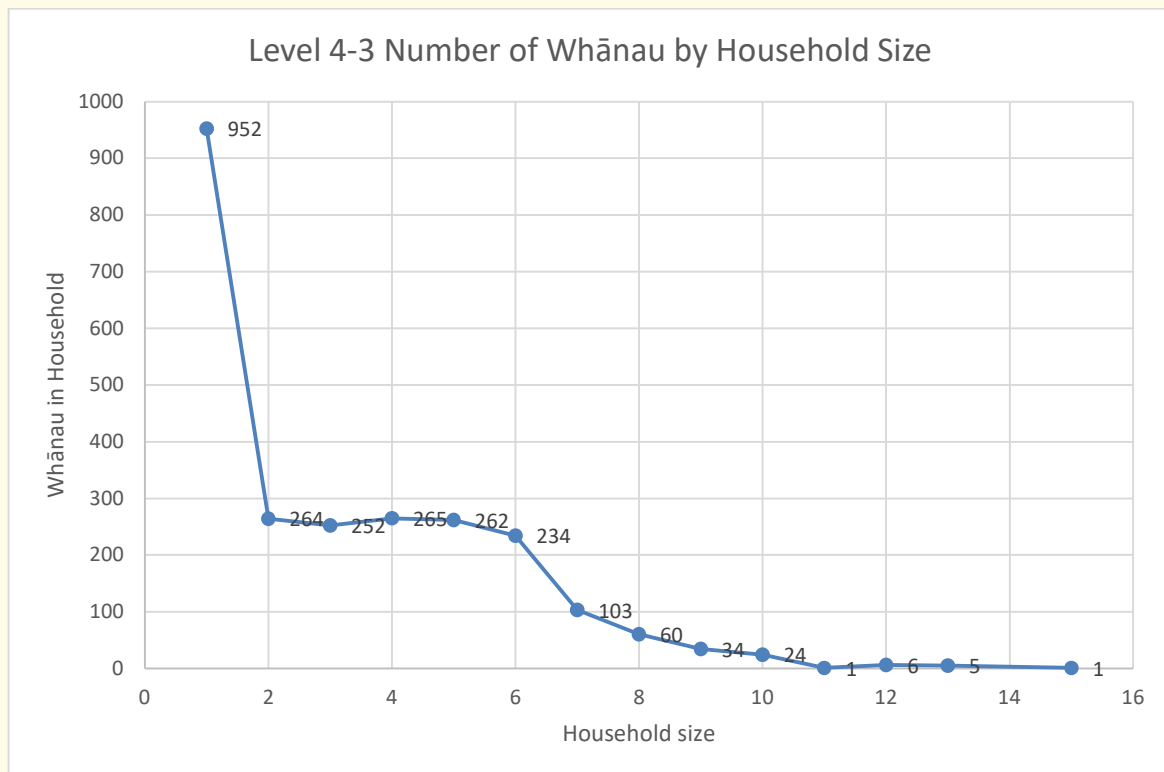
These are underestimates of the number of people who benefited from these packs. In some cases, exact data about household size were missing from the database.

e.g. If HH had 0 and the person did not obviously have a partner or children, a 1 was recorded.

A range of household sizes were supported with Sanitation Packs (see Table 14). Thirty-eight whānau had a household size of 10 or more people. The largest household recorded included 17 whānau members.

Note that a large number of single-person households appeared to be supported in this time. This could be an over-estimate because of changes to data recording. Where there was no number recorded on the household, one was entered in Total in Household and Pakeke (adult) because we do know a parcel was delivered there.

Table 16 Alert level 4-3 Many households had 5 or fewer whānau members in them



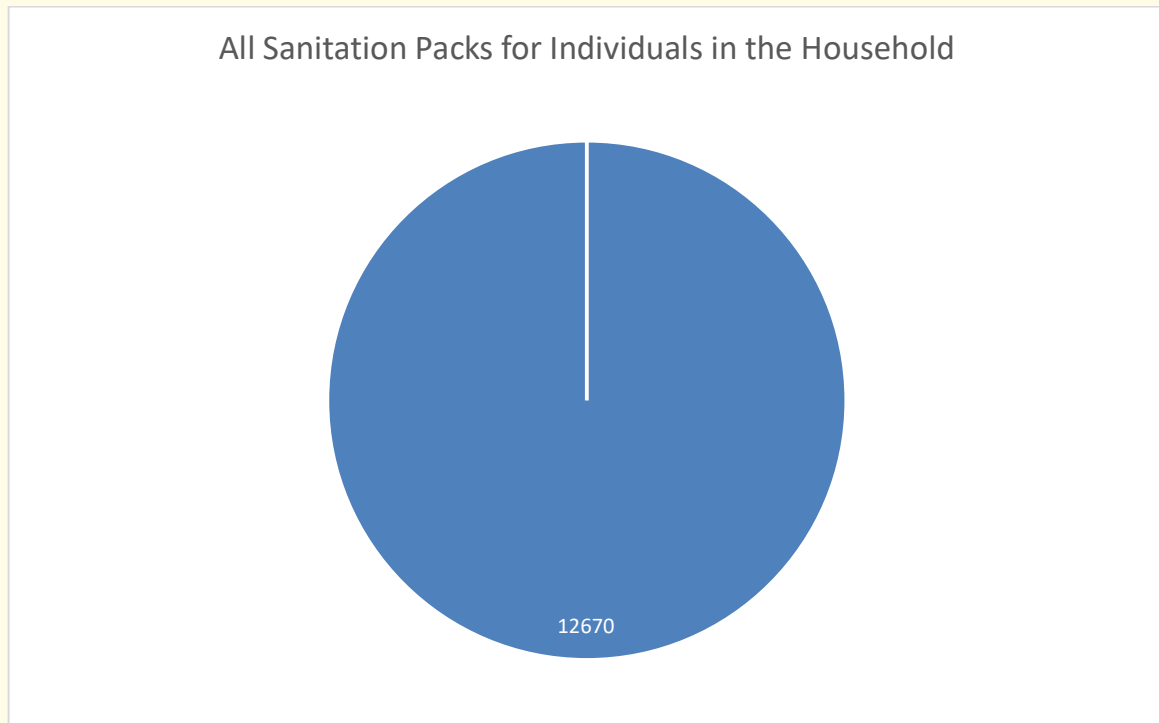
In alert level 4-3 across all whānau that were supported during this time, 868 kaumātua benefited from this support. Of those who identified tamariki in the household there were 3942. Given the need tamariki have for food this is a concerning statistic.

This is probably an under-estimate of the actual number of kaumātua who benefited due to changes to data recording systems. From around 30 April, more detailed information about household make-up was being consistently recorded.

All data revealed whānau Sanitation Packs were delivered to 12,670 individuals. Given this data is based on deliveries as opposed to households there will be repeat counts of deliveries and individuals. Where there was no number recorded on the household one was entered in Total in Household columns it was assumed there was one person who requested the parcel.

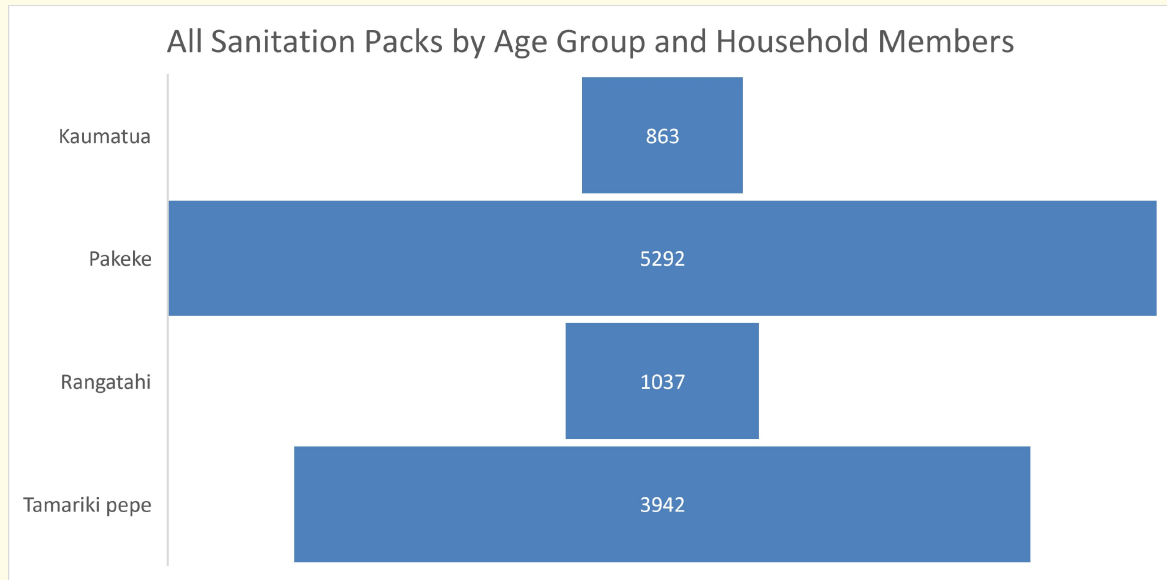
Of note the population of the Lower Hutt is estimated to be 107,606 (<https://demographic-indicators.idnz.co.nz/>). This equates to 11.77% of the population though some of the deliveries were repeats. We were unable to identify how many repeats there were in the time frame for this report.

Table 17 Total of individuals delivered to



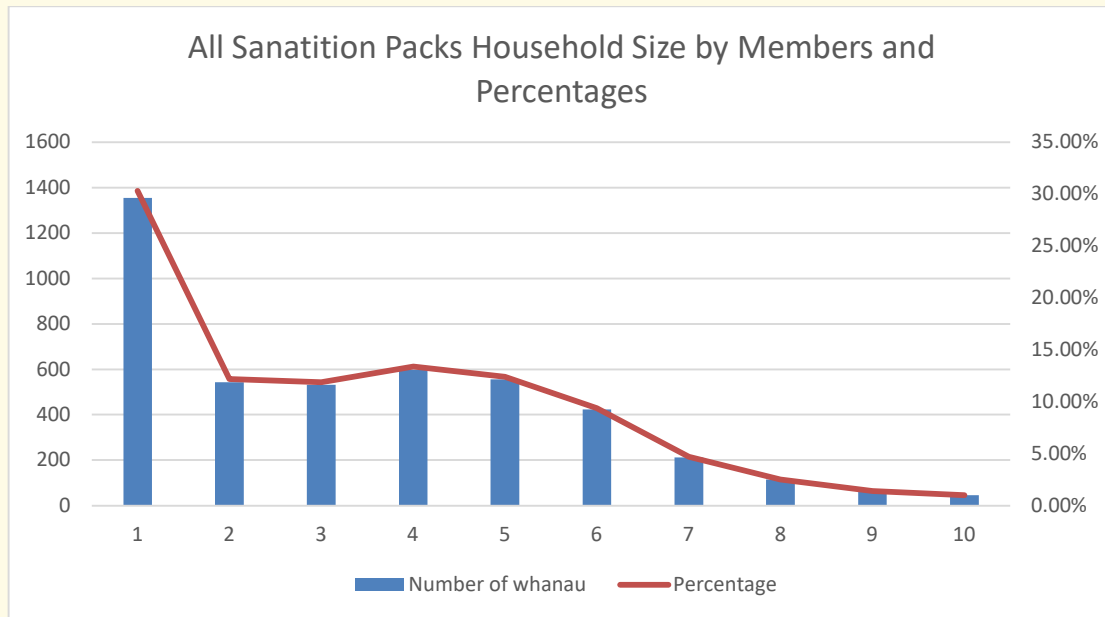
Some data was missing for All Sanitation Packs where the household number would be identified but the age group was not recorded. Of the 12637 whānau members identified 1536 were missing the age group data. The age group of individuals as recorded identified adults as the most reported followed by tamariki (children).

Table 18 All Sanitation Packs by Age group of Household Members



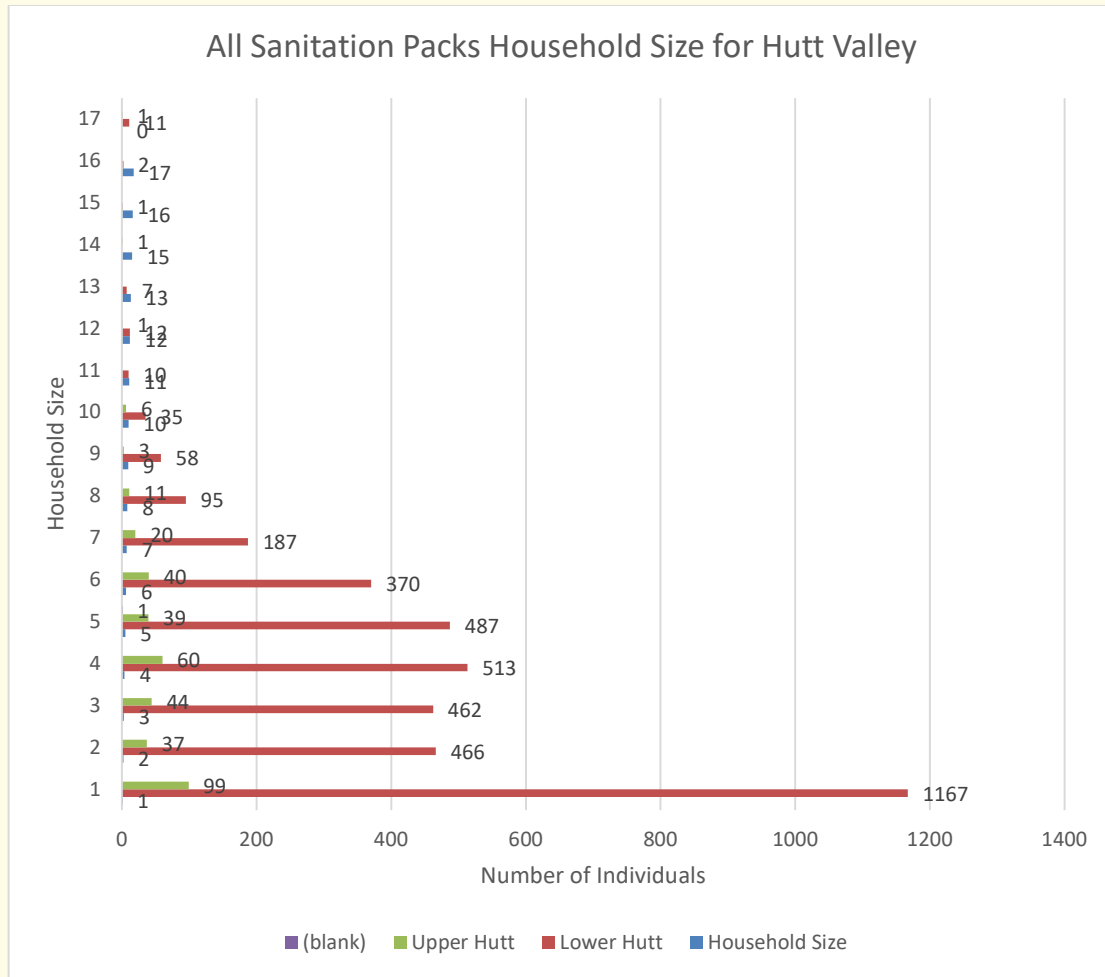
The households were made up of members from 1 – 17 people 30% of deliveries were to whanau on their own with 2,3,4,and five being the next most common at 12%, 11%, 13% and 12% respectively.

Table 19 All sanitation Packs Household size by Members and percentages



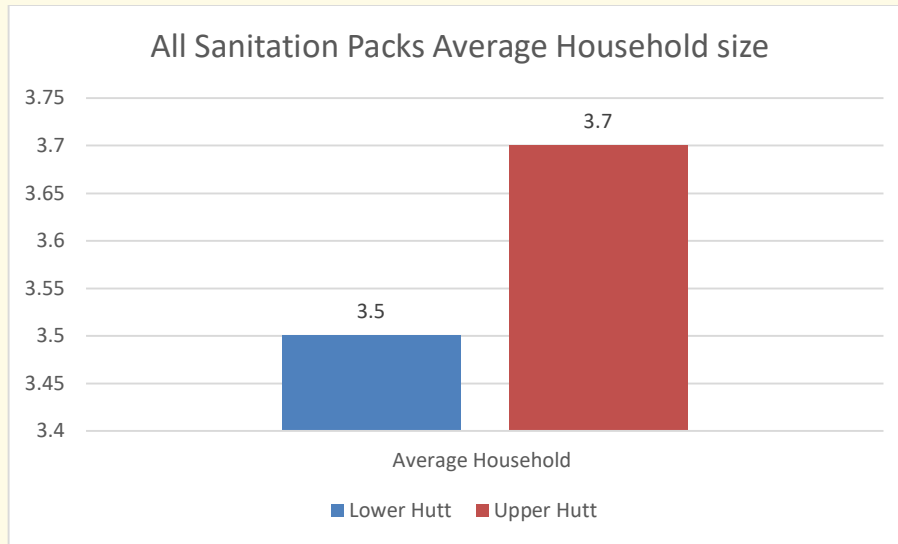
Multiple whānau households reported moving in with other whānau so they could pool their resources and support each other. This would account for the high numbers seen for some households in this data.

Table 20 All Sanitation Packs by Household Size Hutt Valley



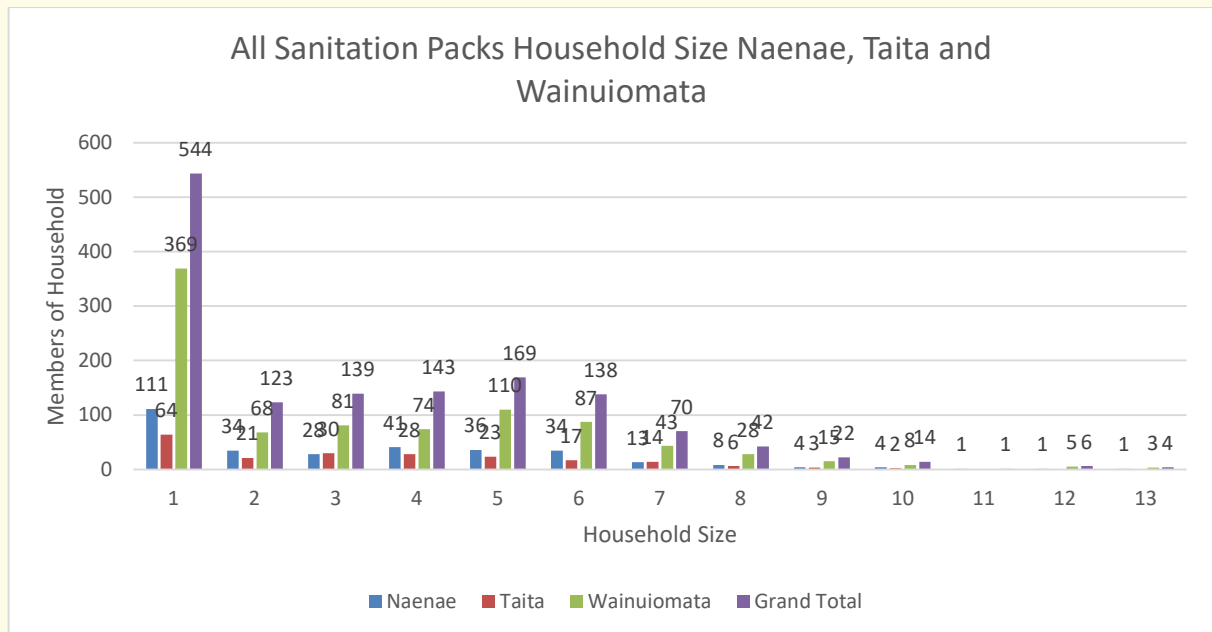
For All Sanitation Packs for the Hutt Valley the average household was 3.5 for Lower Hutt and 3.7 for Upper Hutt. The average household size for the Wellington region is 2.6 people (Stats NZ, 2020).

Table 21 All Sanitation Packs by Average household size for Hutt Valley



Looking at all the Sanitation Pack data results showed that Wainuiomata were well represented in all areas followed by Naenae and Taita reflecting the general destitution. Apart from the households where whānau moved in together that is probably over reported due to data gaps five people households at 169 were the most common followed by four at 143 then three at 139.

Table 22 All Sanitation Packs Household Size Naenae, Taita and Wainuiomata



Ethnicity analysis on a subset of whānau data

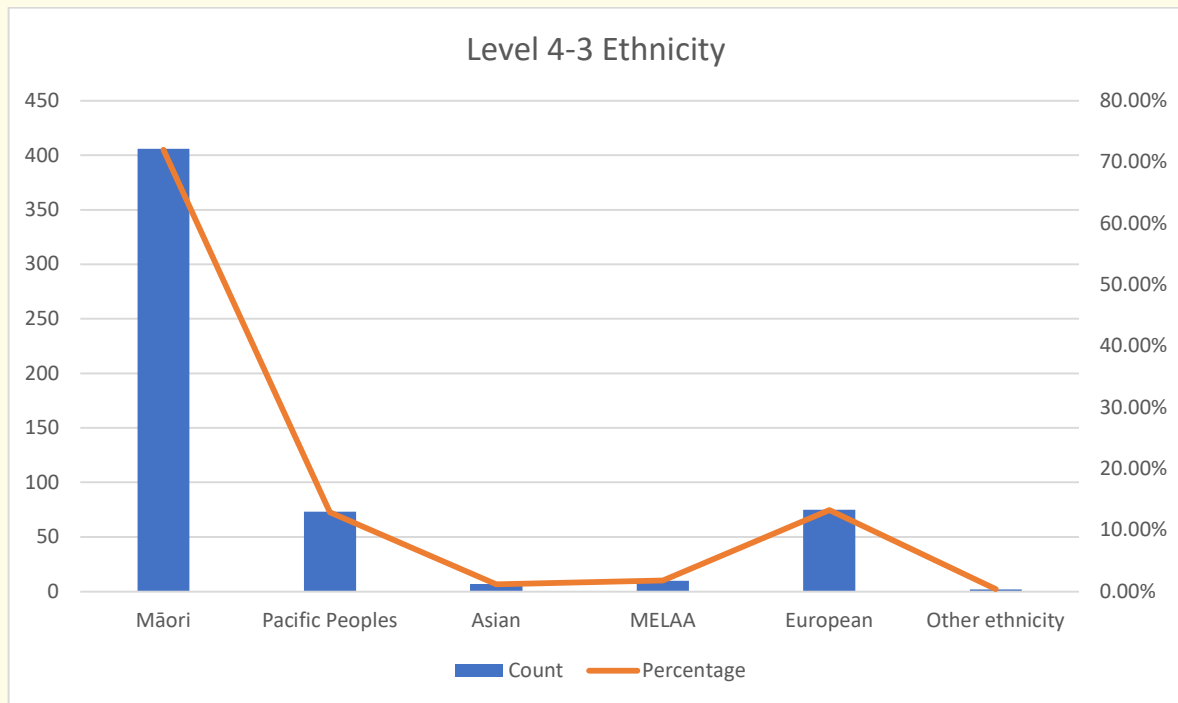
In the early period of the response, it was challenging for kaimahi to keep up with the work and also develop and record information on the data recording systems. Some ethnicity data was recorded against whānau details for the delivery of sanitation packs but this was not consistently done.

Ethnicity data was available on 564 people (or 564 support events) or around 23% of whānau supported during the lockdown period.

Table 5 illustrates the aroha of Tākiri Mai - Kokiri Hauora. Many whānau who were supported with sanitation packs during this time did not identify as Māori. Out of 564 people with ethnicity information recorded, 406 identified as Māori, and more than 140 people identified as European or from a Pacific background (or both). Note that whānau could identify two or more ethnicities if they wished.

The person that contacted to request a pack (primary contact) was the person that ethnicity and iwi data was collected from.

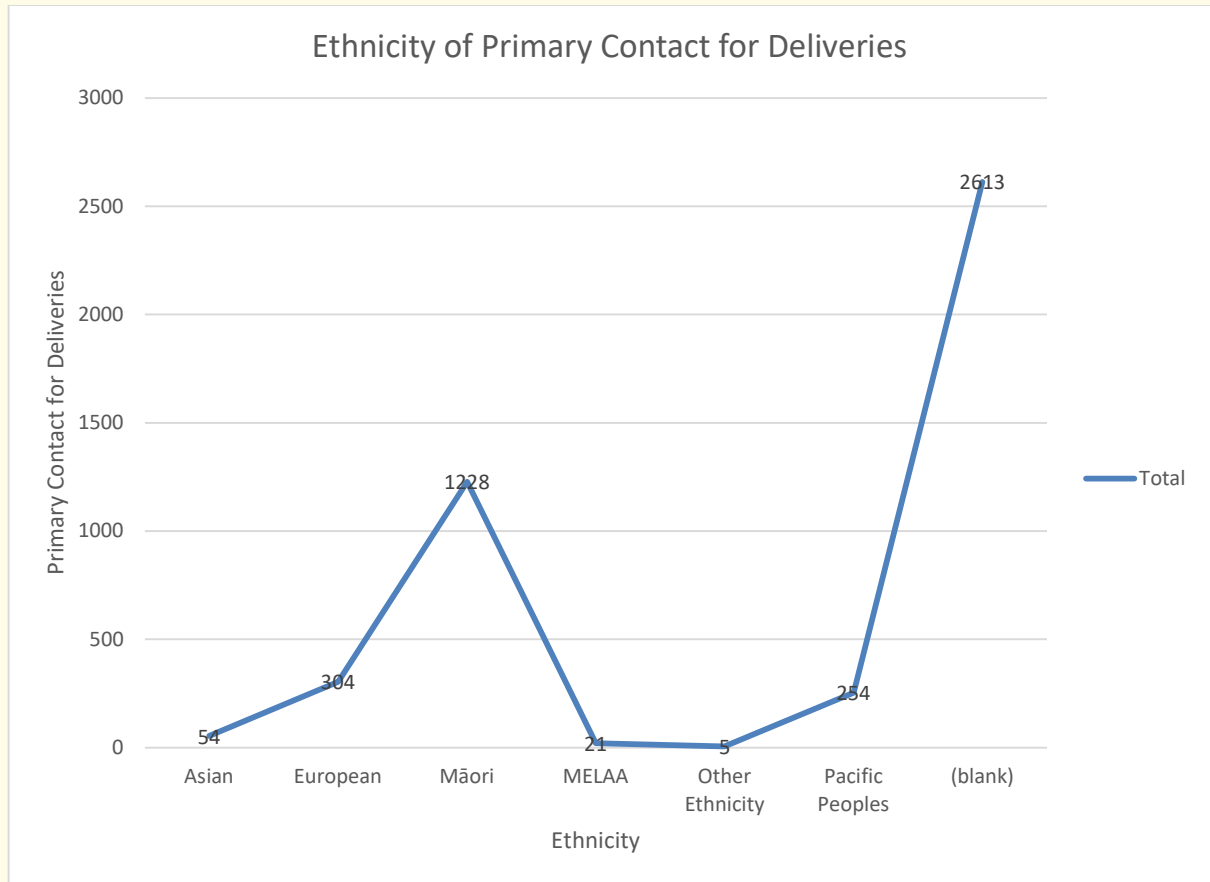
Table 23 Alert level 4-3 Many people who did not identify as Māori were supported during Alert levels 4 and 3 lockdown



In the weeks of 26 May, 30 May, 22 June, 6 July, 13 July, 3 August, and 17 August, a large proportion of people had ethnicity information (or iwi affiliation where this was relevant) recorded. Only 7.3% of people did not have ethnicity information noted over that whole period. That analysis provides a more comprehensive view of the mix of ethnic groups who accessed support from Tākiri Mai - Kokiri Hauora.

Table 17 shows that people came from a range of ethnic backgrounds. While Tākiri Mai - Kokiri Hauora is a kaupapa Māori provider, it was open to supporting any person in the community. Clearly, people from a range of backgrounds appreciated support from Tākiri Mai - Kokiri Hauora with quite high percentages of Pacific Peoples (14.7%) and European/Pākehā (17.8%). Note that people could indicate more than one ethnicity.

Table 24 All Sanitation Packs The primary contact Ethnicity

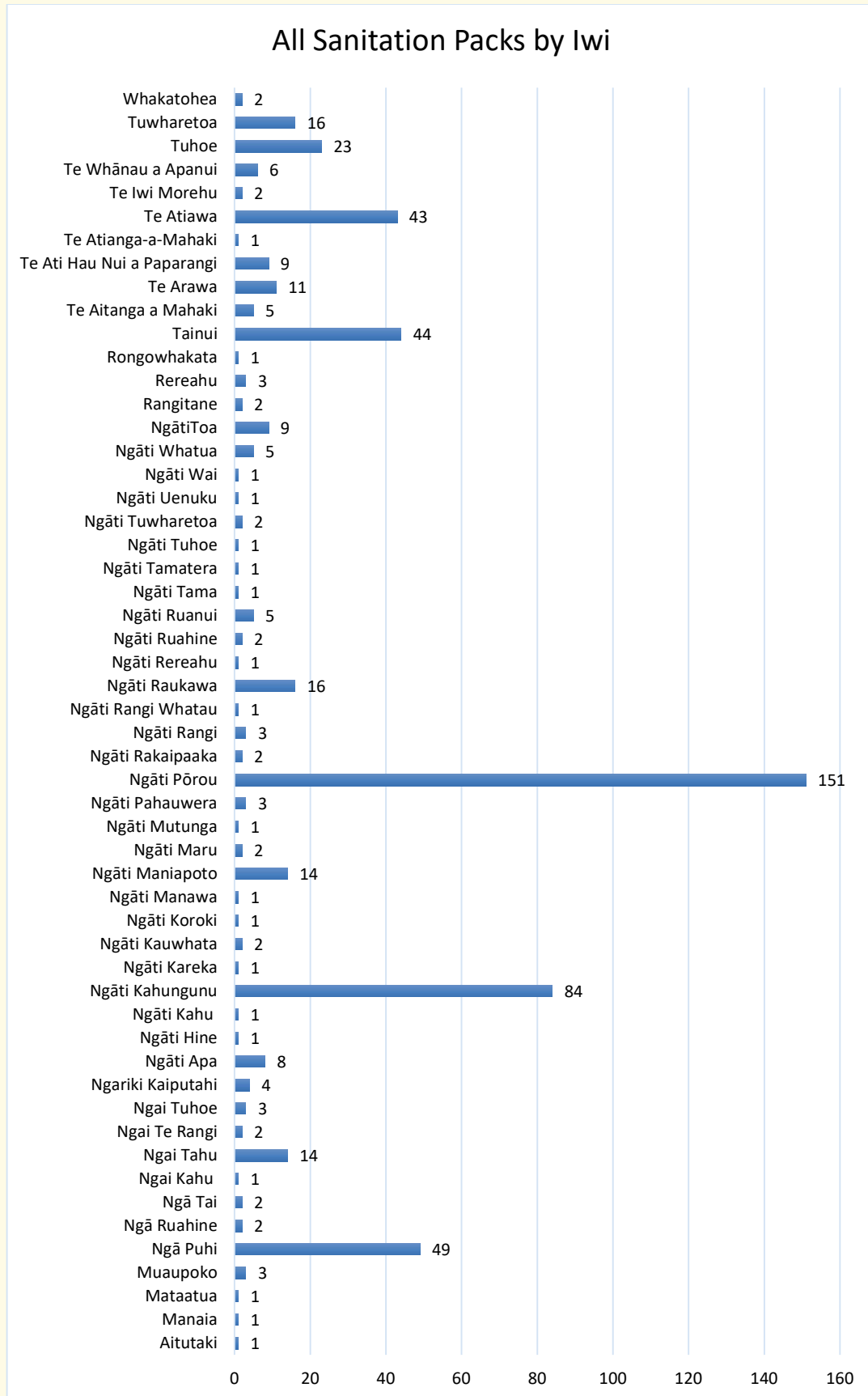


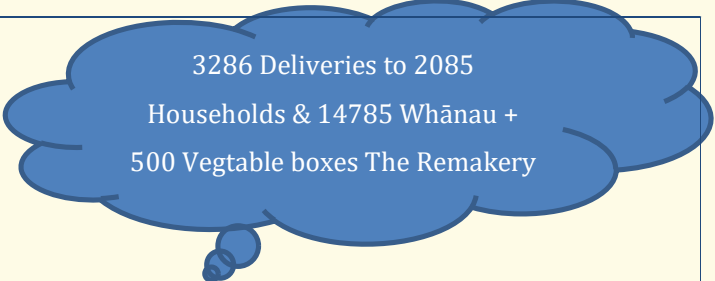
Iwi analysis on a subset of whānau data

As stated above ethnicity or iwi data was not recorded until later in the delivery time frame. Of the 1228 that identified as Māori only 568 identified iwi.

Māori whānau could also provide information about their iwi affiliations (see Table 19). Many Māori did not have iwi affiliation(s) listed in this particular worksheet; therefore, this only provides an approximate indication of the whakapapa of Māori.

Table 125 Those who reported Iwi reported these Iwi





3286 Deliveries to 2085
Households & 14785 Whānau +
500 Vegetable boxes The Remakery

Pataka Kai Deliveries

From day one of COVID-19 alert level 4 lockdown Tākiri Mai - Kokiri Hauora were contacted for help especially around kai. Initially efforts were focused on the redistribution of the Kaibosh that came regularly to our Tihei Rangatahi team in the Wainuiomata Community Hub. However, it became apparent far more kai was required. The overall response is reported below.

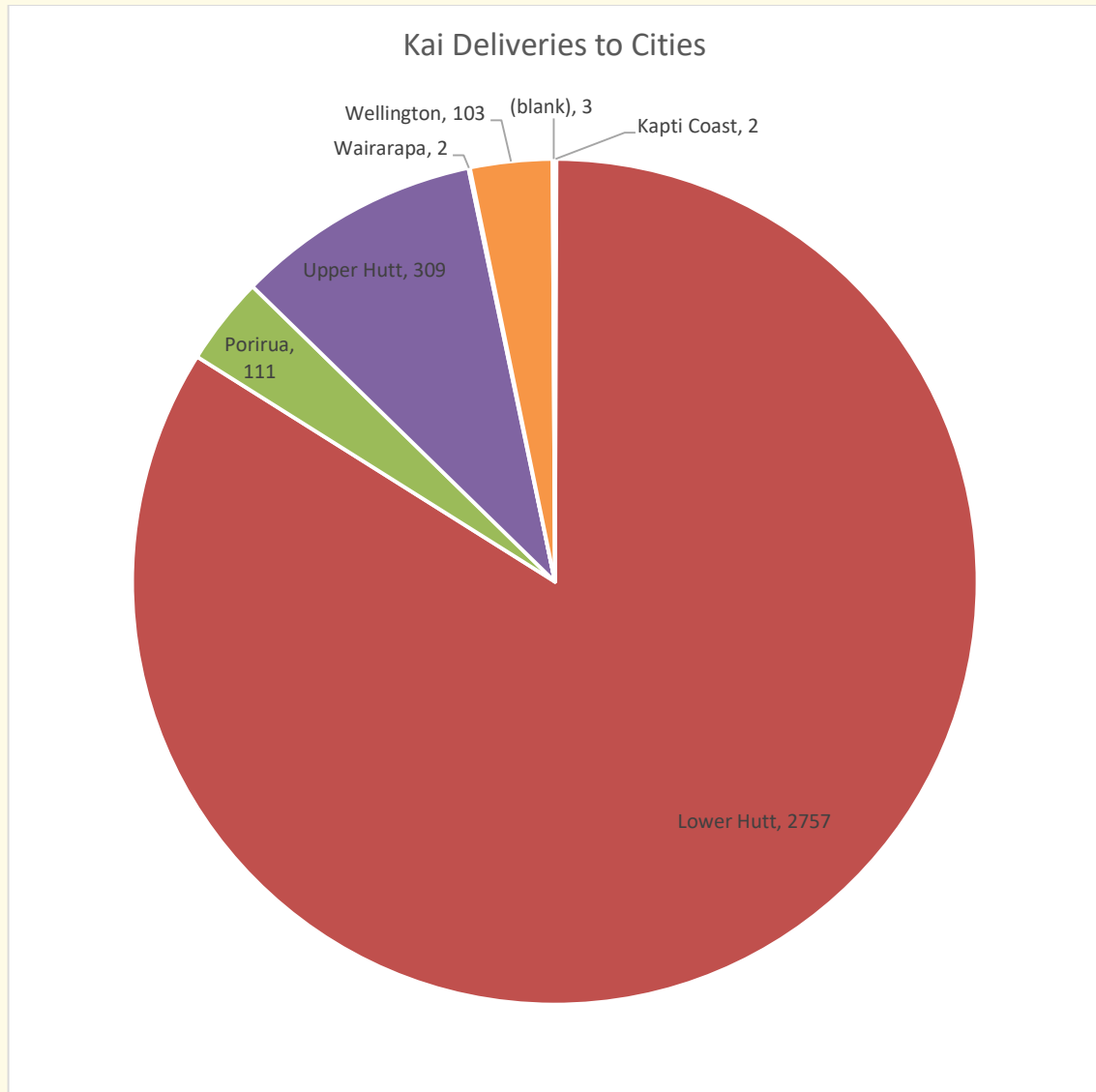
The data collected for the kai was developed from requests for kai. The food packs delivered ranged from 1 to 3 boxes depending on their family size and the age group in the household. The packs are described here as deliveries, but a few were actually collected by whānau. There were 3287 deliveries to 2085 whānau. 1202 Kai Packs were repeat deliveries, and the data was repeated in the rows to reflect the number of deliveries provided and some received up to 5 packs over the whole period.

The food packs may have been more than one box depending on size and fruit and vegetable boxes were often given along with the kai box. A large number of fruit and vegetables boxes were funded by Regional Public Health and the Remakery provided 500 boxes of their home grown vegetables.

This data is based on the deliveries rather than the households. No analysis has been possible on the Alert level 4 and 3 Lockdown period compared to the whole period of deliveries to June 2020.

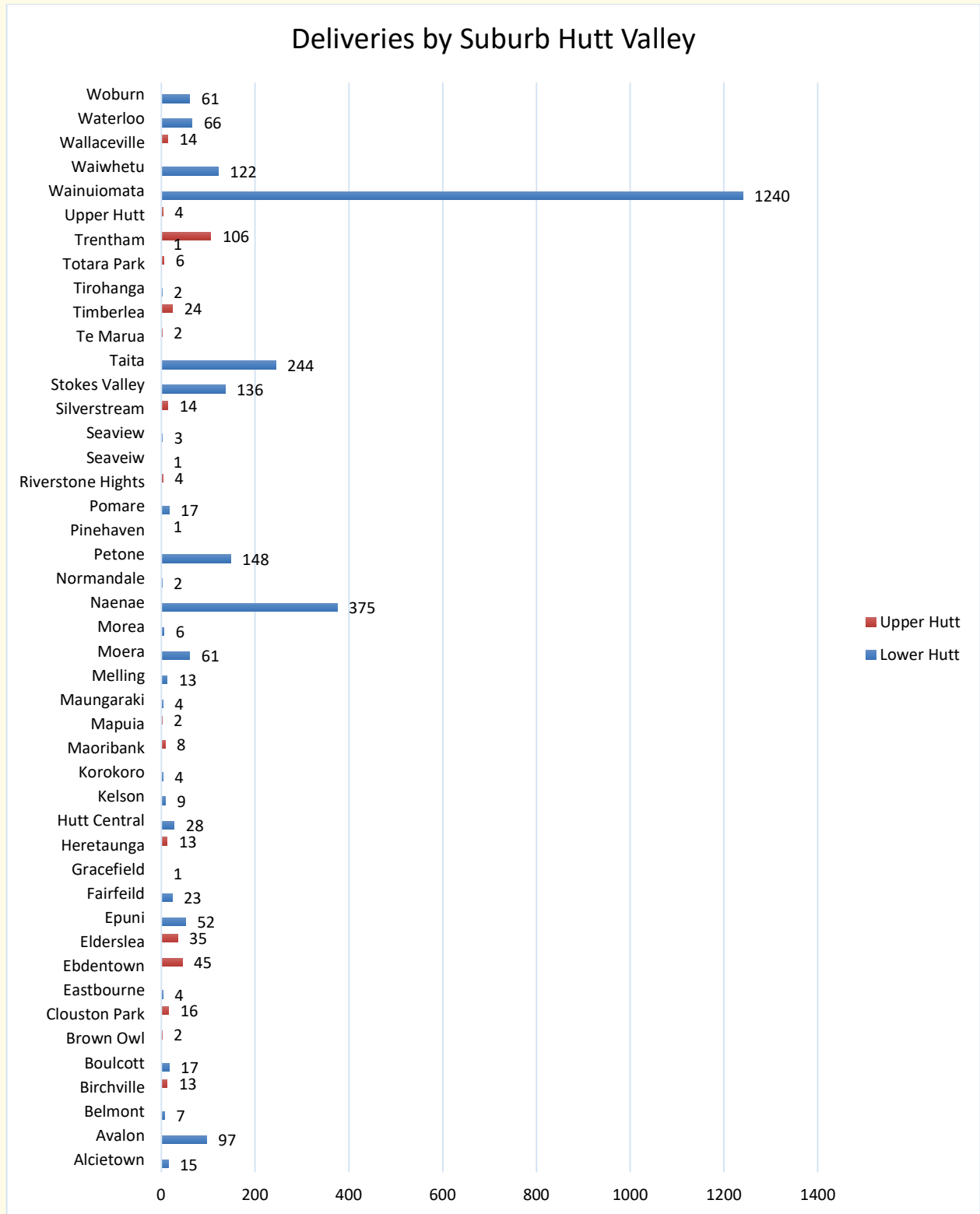
Kai was delivered as far away as Waikanae, up the Kapiti Coast and Featherston in the Wairarapa. Lower Hutt was the largest city receiving deliveries with 2757 followed by Upper Hutt at 309, Porirua 111 and Wellington 103. The Wairarapa received 2 deliveries, Kapiti Coast 2 and three were blank.

Table 26 All Kai Deliveries to cities



Most of the kai packs were delivered to the Lower Hutt area and secondly to Upper Hutt. The suburbs where kai was needed most were Wainuiomata 1240, Naenae 375, Taita 244 in Lower Hutt with Trentham 106 Ebdentown 45 and Elderslea 35 in Upper Hutt. The motels are situated in Ebdentown and Elderslea so this is possibly reflected in this data.

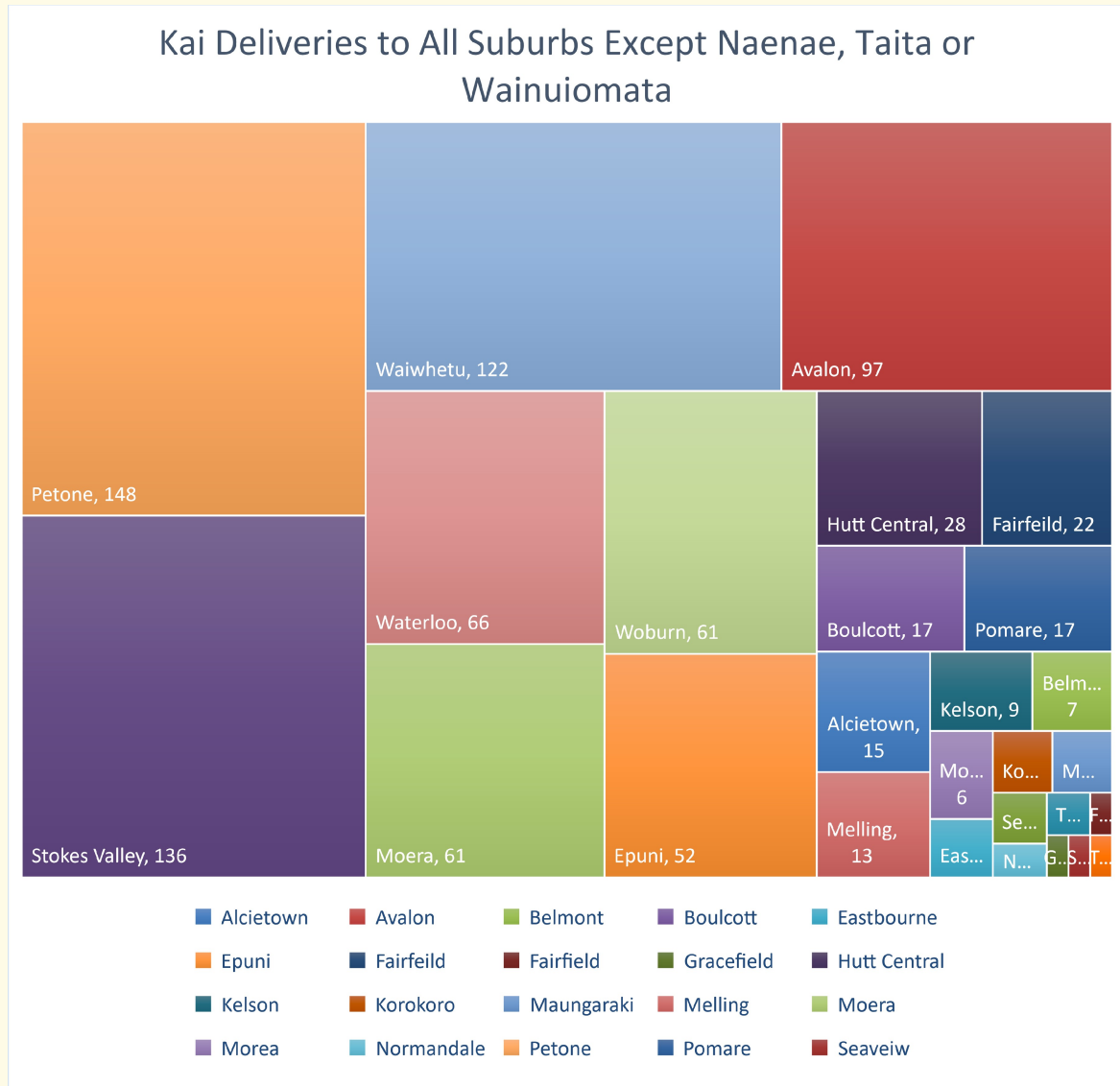
Table 27 Kia deliveries to the Hutt Valley by suburb



Due to the numbers of deliveries to Naenae, Taita and Wainuomata, they were excluded from table 12 to allow the other suburbs to be seen. Petone 148, Stokes Valley 136 and Waiwhetu 122. The

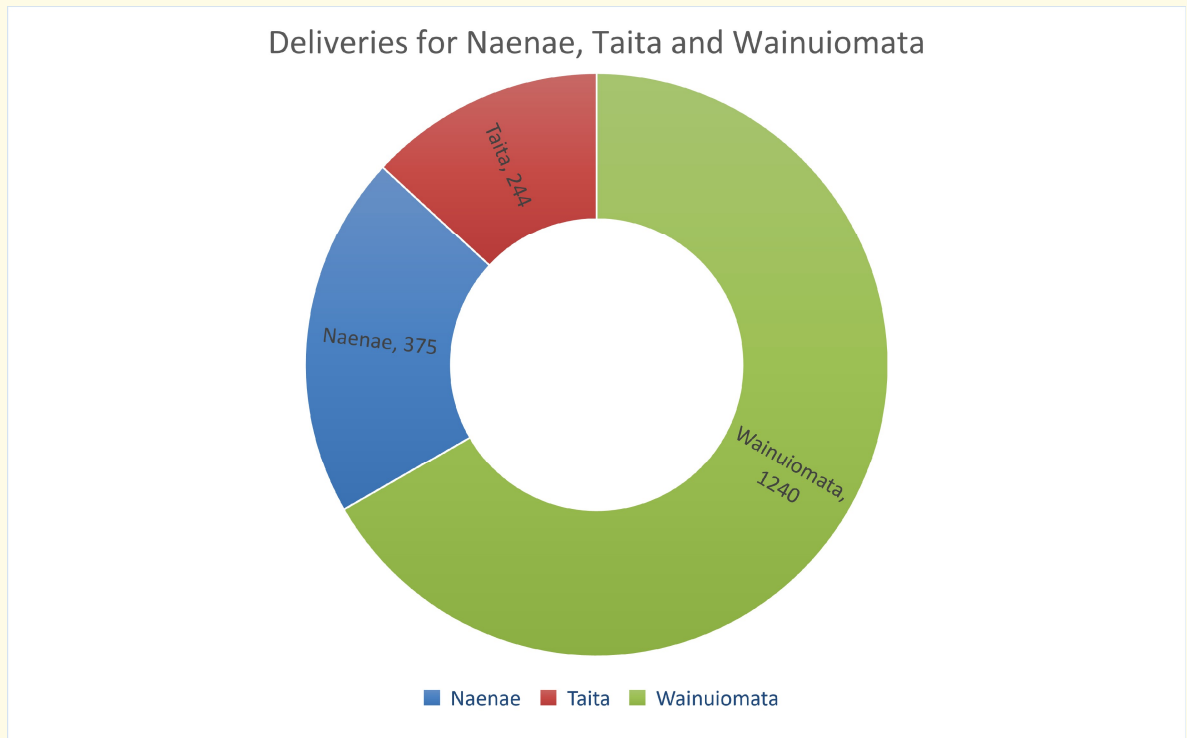
smaller suburbs with deliveries under 9 include Belmont, Moera, Eastbourne, Gracefield, Korokoro, Maungaraki, Normandale, Seaview, and Tirohanga.

Table 28 Kai Packs to all Lower Hutt suburbs except Naenae, Taita or Wainuiomata



The three highest suburbs where deliveries were made were Naenae, Taita and Wainuiomata. Naenae and Taita are high on the socioeconomic deprivation index at 10. Wainuiomata is high scoring an 8 on the index but the relationship Wainuiomata has with Tākiri Mai - Kokiri Hauora services will have influenced the request for support being so high.

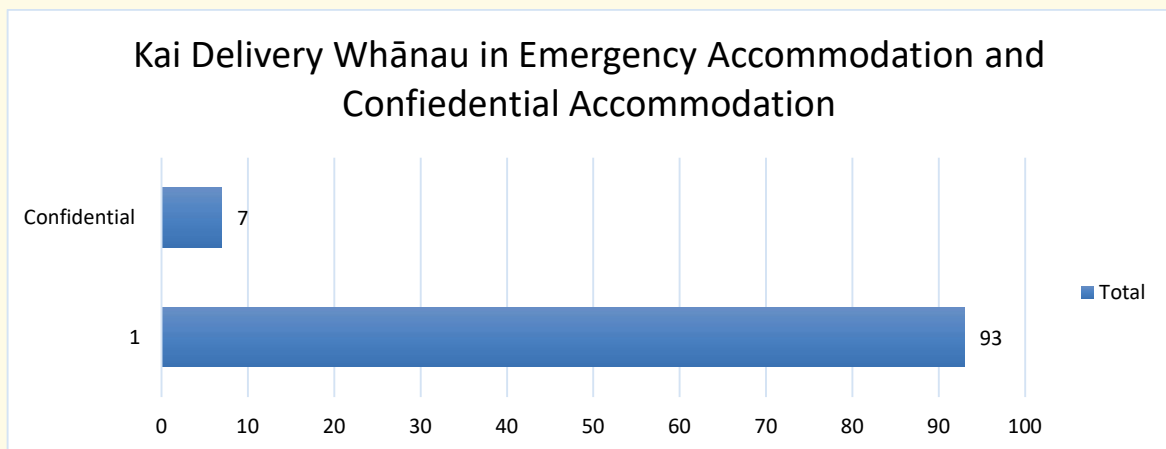
Table 29 Kai pack deliveries to Naenae, Taita and Wainuiomata



As the deliveries to whānau progressed the need of whānau for kai if they were in Emergency Accommodation was evident. Some data was easily identifiable as a Motel or Night Shelter but this is an under report probably as it required the contact person to identify they were living in emergency homes and those recording the data to capture that.

There were also a few whānau who reported their address as confidential. They were part of Woman’s Refuge programs.

Table 30 Kai Delivery to Whānau in Emergency of Confidential Accommodation



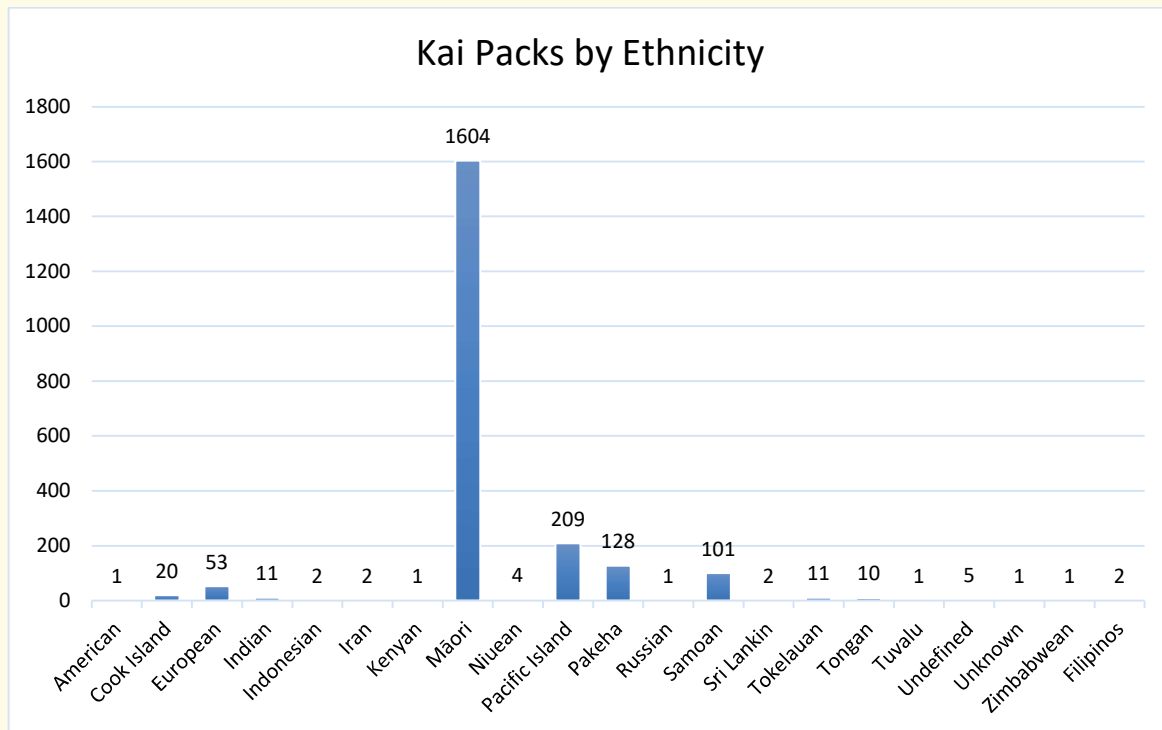
As with the Sanitation Pack data, the Kai data did not collect Ethnicity initially.

The person contacting for kai was the person whose ethnicity was recorded but more specific data was not collected. There were 1116 Kai Deliveries that didn't identify Ethnicity.

However, the data collected identified that most receiving the kai were Māori 1604, followed by Pacific Island (not further defined - NFD) 209 European/Pākeha 128. Pacific Island is reported in this table as Pacific Island NFD 209 but other Pacific peoples are also self-identified with Samoan – 101, Cook Islander – 20, Tongan – 10, Niuean – 4 Tokelauan 11, and Tuvaluan – 1. Five were reported as undefined and one unknown.

Tākiri Mai - Kokiri Hauora did not turn people away if they were in need and Ethnicity was not a barrier.

Table 31 Kai Deliveries by Ethnicity

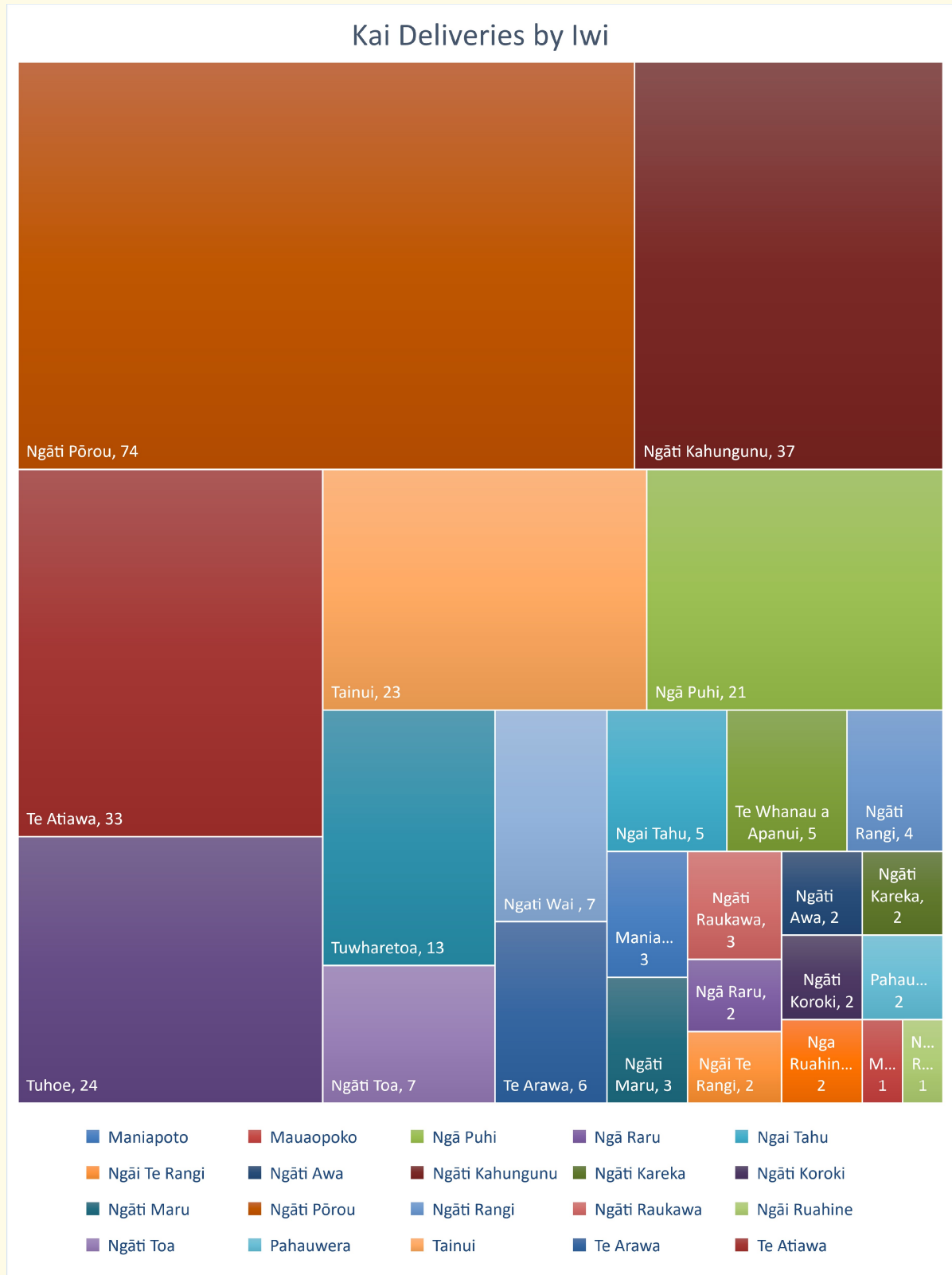


Details gained for kai deliveries to Māori included Iwi for some. Only 284 whānau identified their iwi. The most common iwi was Ngāti Pōrou at 74, Ngāti Kahungunu 21, Te Atiawa 16 and Nga Puhī 15. Ngāti Pōrou mostly settled in the Wainuiomata community and have strong links to Tākiri Mai - Kokiri Hauora also with their roots in Ngāti Porou. Ngāti Kahungunu is close to Wellington with its people coming from Wairarapa, Heretaunga and Wairoa. Te Atiawa are the mana whenua for Te Awakairangi rohe.

Other Iwi mentioned but difficult to read in this graph, with one delivery, are 1 Muaūpoko, Nga Rauru, Ngaruahine Rangi, Ngati Awa, Ngati Koroki Kahukura, Ngati Raukawa, Ngati Ruahine, Ngati

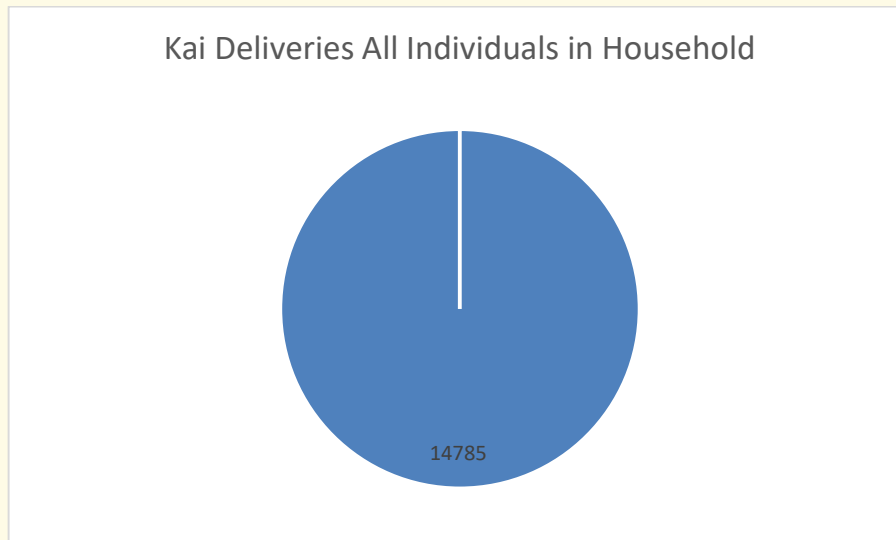
Wai, Pahauwera, and Waitara. Some of these could be considered hapu but if this is the iwi whānau choose to identify this is not uncommon.

Table 32 Kai Deliveries by Iwi



Of those requesting kai, household numbers and age grouping was requested. This ensured the appropriate size of the pack could be identified. Of the 2096 households delivered to there were 14785 individuals.

Table 33 Kai Deliveries by Size of Household

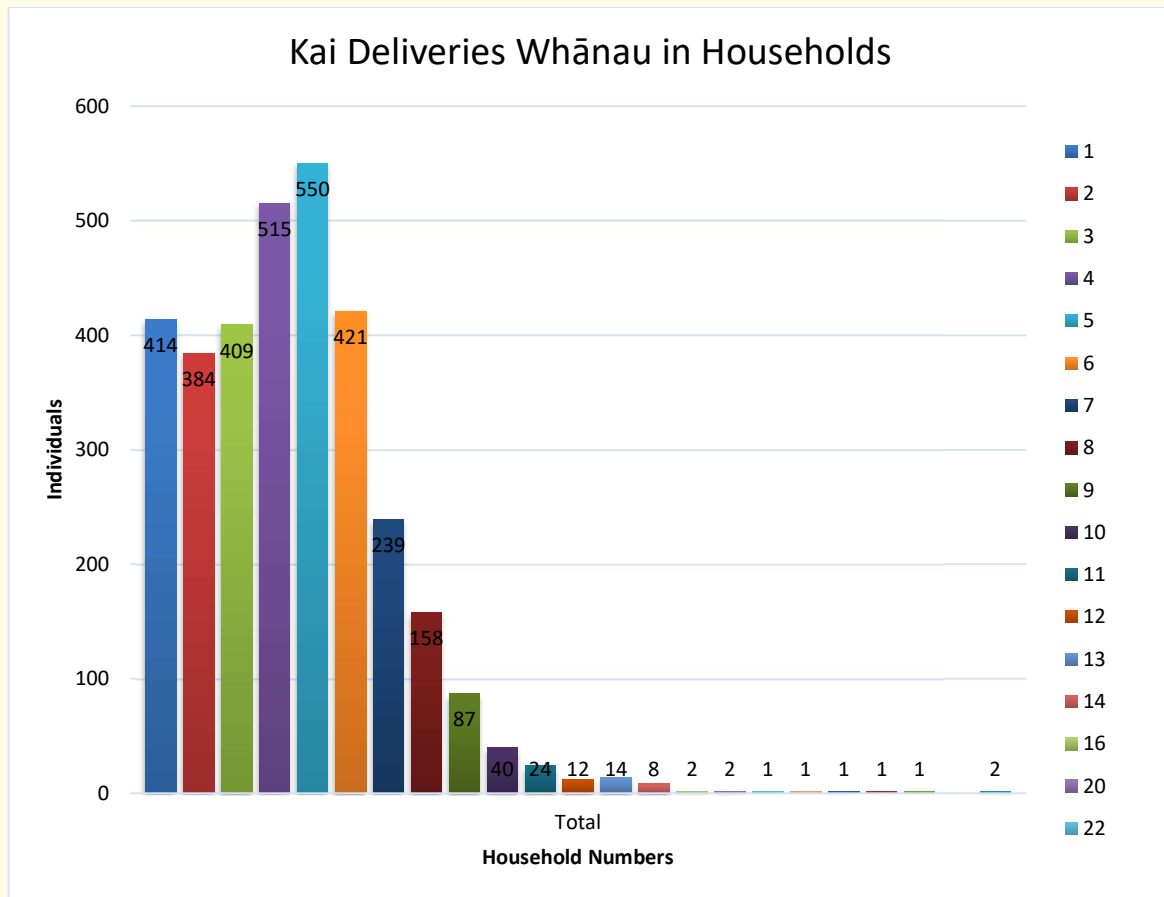


Of the 2805 households delivered to there were 14785 individuals.

Household numbers were identified resulting in 14785 Individuals being identified. There was an assumption made that there would be at least one person in the household so for the few that were missing data one was inserted.

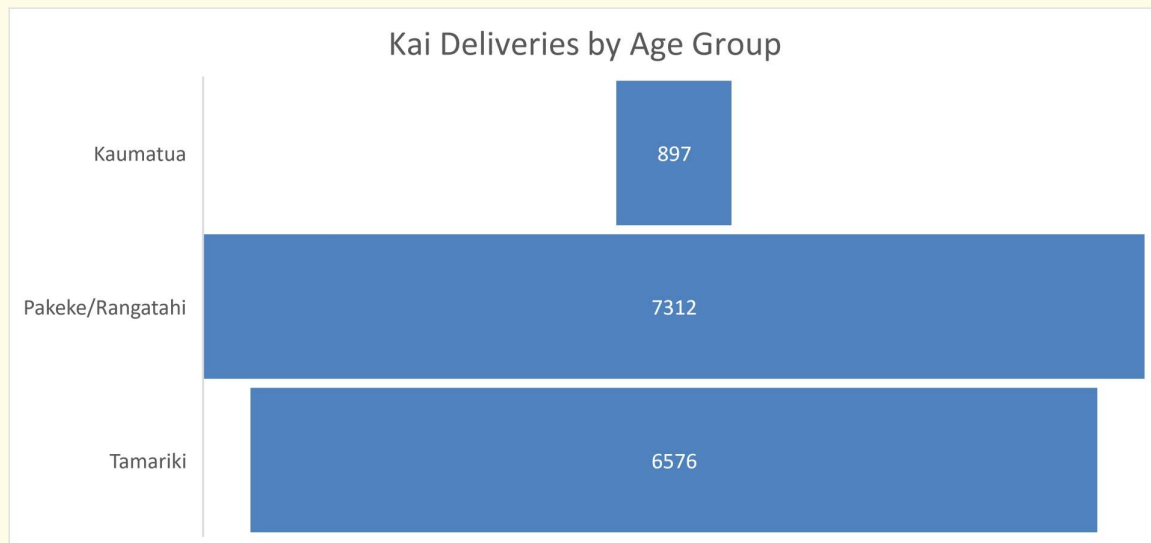
The vast majority of households were in the five or below Numbers. However, the reports went from 1 to 22 in the home.

Table 34 Whānau in households by number in home



For those who reported the age group of individuals in the whānau the majority were pakeke at 7312 and second at 6576 were tamariki and kaumātua were 897. Unfortunately for this data set rangatahi (teenagers) data was included with Pakeke.

Table 35 Kai Deliveries by Age Group



Delivery of MSD kai meals

The Ministry of Social Development had an employment scheme whereby chefs and cooks who would usually be busily employed in restaurants and cafes prepared nutritious and tasty meals which were packaged frozen and distributed to whānau. Tākiri Mai – Kokiri Hauora were delivered 62,000 meals at 25000 a week for two and a half weeks.

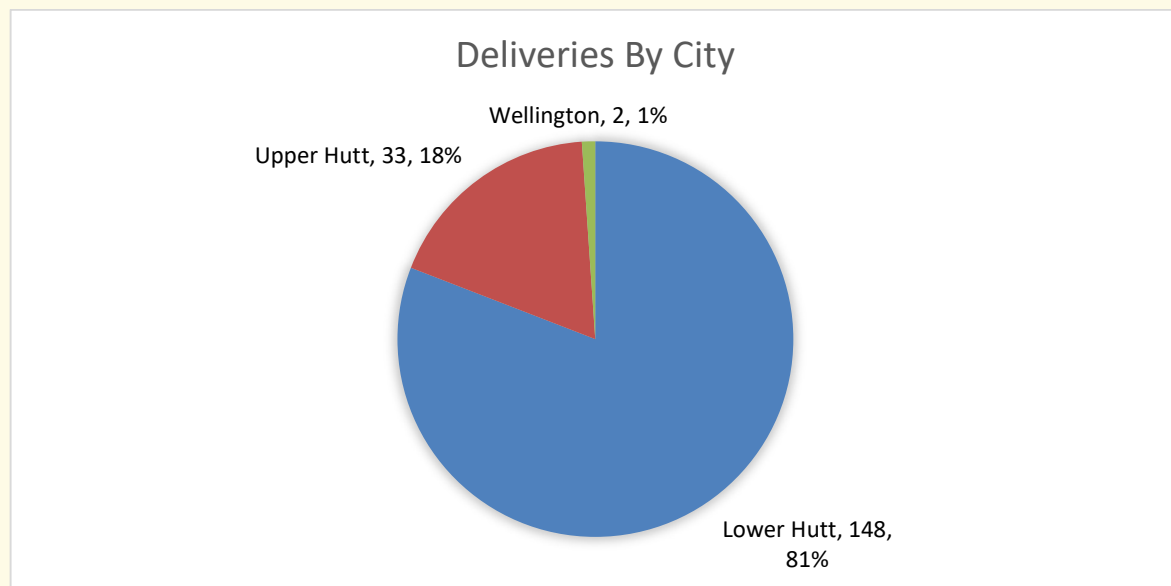
This response required Tākiri Mai - Kokiri Hauora to resource freezers in a hurry. These meals went out in a variety of ways, but the priority was to get them delivered and out to whānau before they spoiled. The sheer numbers of meals made this an incredibly difficult operation. Some went out in boxes so whānau had enough meals for several weeks, others went out to kohanga and kura to support their communities and then the final amounts went into our Pataka Kai and have been given out in packs to whānau.

Data for this is very limited because of the organisational capability of managing deliveries of 62000 meals in such a short time frame. Data that was missing in particular are the actual whānau every meal went to. Of the data we have, ethnicity, iwi, or age groups of household members was not collected. Of this data 53 did not record the number of whānau in the household. So an assumption was made that there would be at least one in each household.

The MSD kai was prioritised for whānau who had health issues. This data records only three batches that went out totalling 183 whānau.

The city most delivered to was Lower Hutt getting 81% of the meals, Upper Hutt whānau received 18% and 1% went to Wellington.

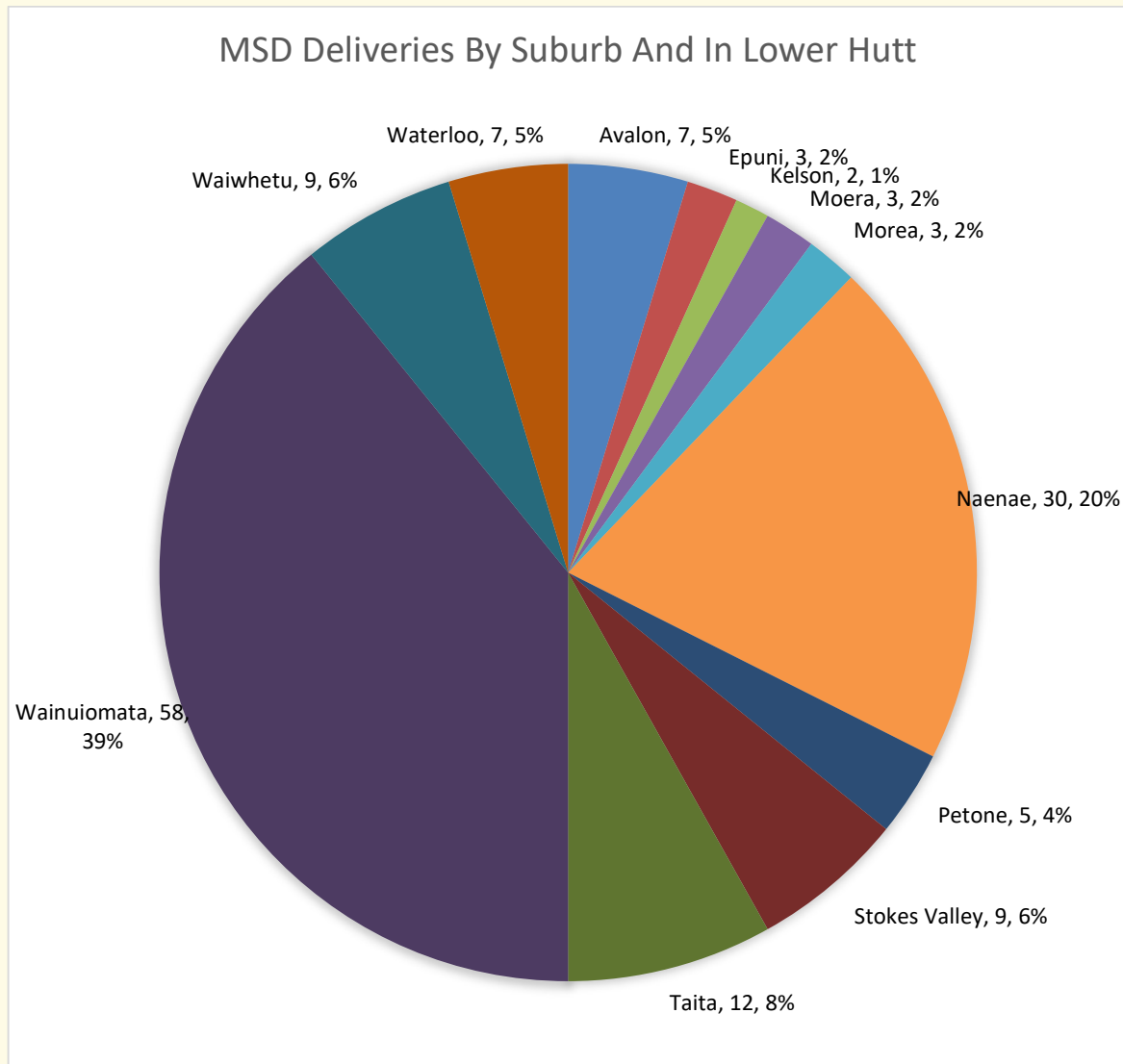
Table 36 MSD deliveries by City



23 suburbs were delivered to with Wainuiomata, Naenae, Taita and Trentham being the four most recurrent.

Deliveries to Lower Hutt alone was recorded 39% went to Wainuiomata, thus reflecting the strong connections Tākiri Mai - Kokiri Hauora has with the Wainuiomata community. Meals were also delivered to Naenae (30 whānau), Taita (12 whānau)(see Table 6).

Table 37 MSD deliveries by suburb in Lower Hutt



16904 meals for 995
households to 2842
individual whānau

Delivery of Kai from the Remakery

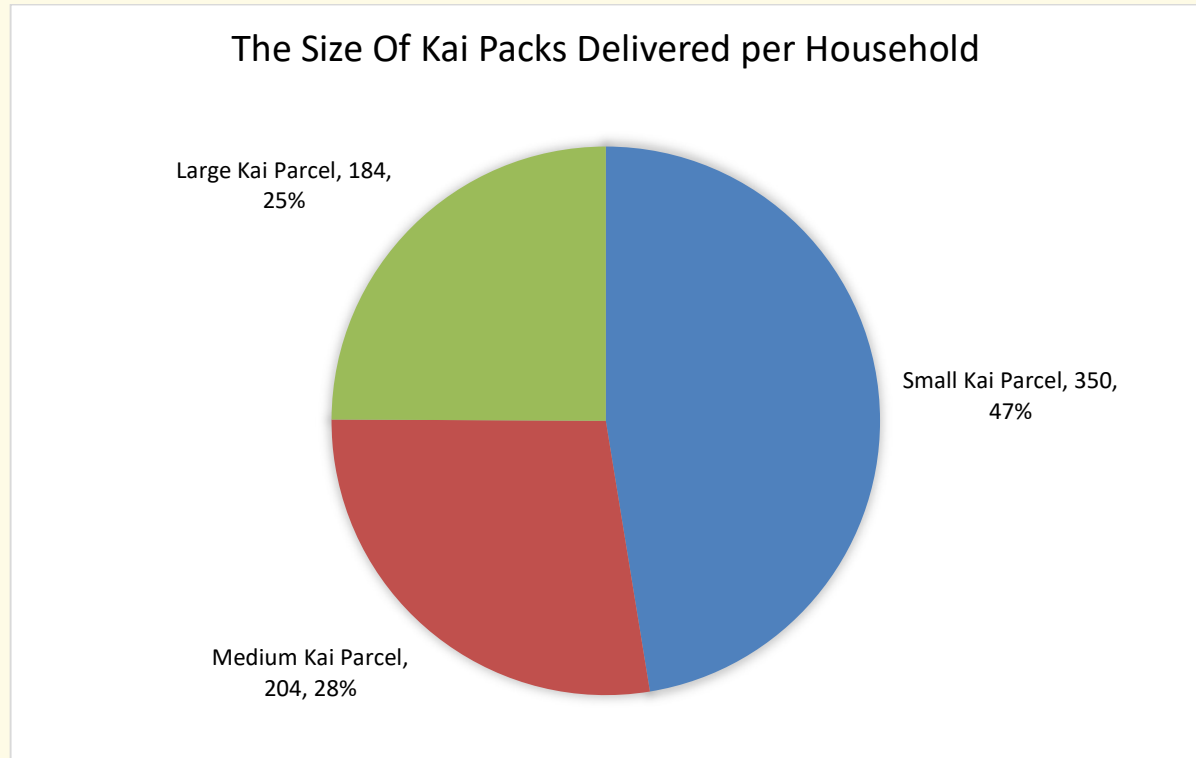
Over 16904 meals were provided to 995 addresses that fed 2842 whānau

The Remakery is a local community-based project focused on food sovereignty and sustainability and partnered with Tākiri Mai - Kokiri Hauora to deliver food during alert level 4-3 and into alert level 2 and one.

Remakery has a kaupapa of providing healthy kai to groups such as Women's Refuge, and during lockdown they worked with Tākiri Mai - Kokiri Hauora to provide nutritious kai to whānau. In the 20 days between 6 April and 19 June, Tākiri Mai - Kokiri Hauora packaged Remakery kai in with other kai and delivered parcels to a total of 992 households/whānau (benefitting 3,760 whānau).

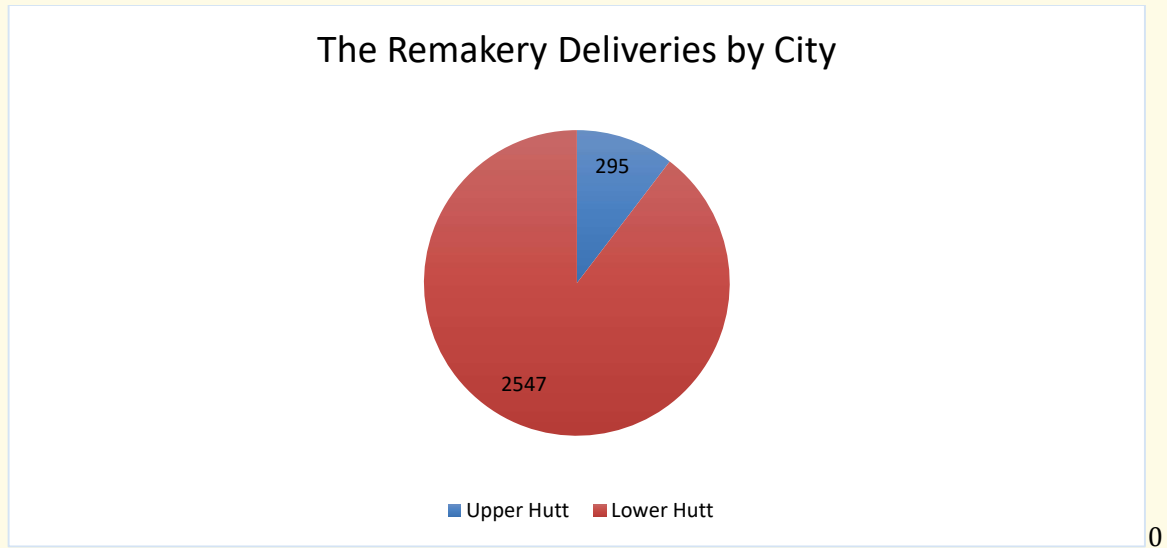
In the lockdown period, 10 delivery batches of Remakery kai were combined with other kai and delivered to a total of 492 whānau. This was made up of 241 small parcels, 126 medium parcels, and 125 large parcels which benefited 1,904 whānau members. Each pack had more than one meal included. These packs had frozen meat, and often other products added.

Table 38 Size of packs sent out



These meals were only delivered a few days a week and the vast majority 2547 went to Lower Hutt Households and 295 to Upper Hutt.

Table 39 Remakery Deliveries by City



Whānau members were made up of 2742 kaumātua and pakeke, 352 rangatahi, 602 tamariki, and 82 pepi.

Table 40 Age groups of those meals were given to

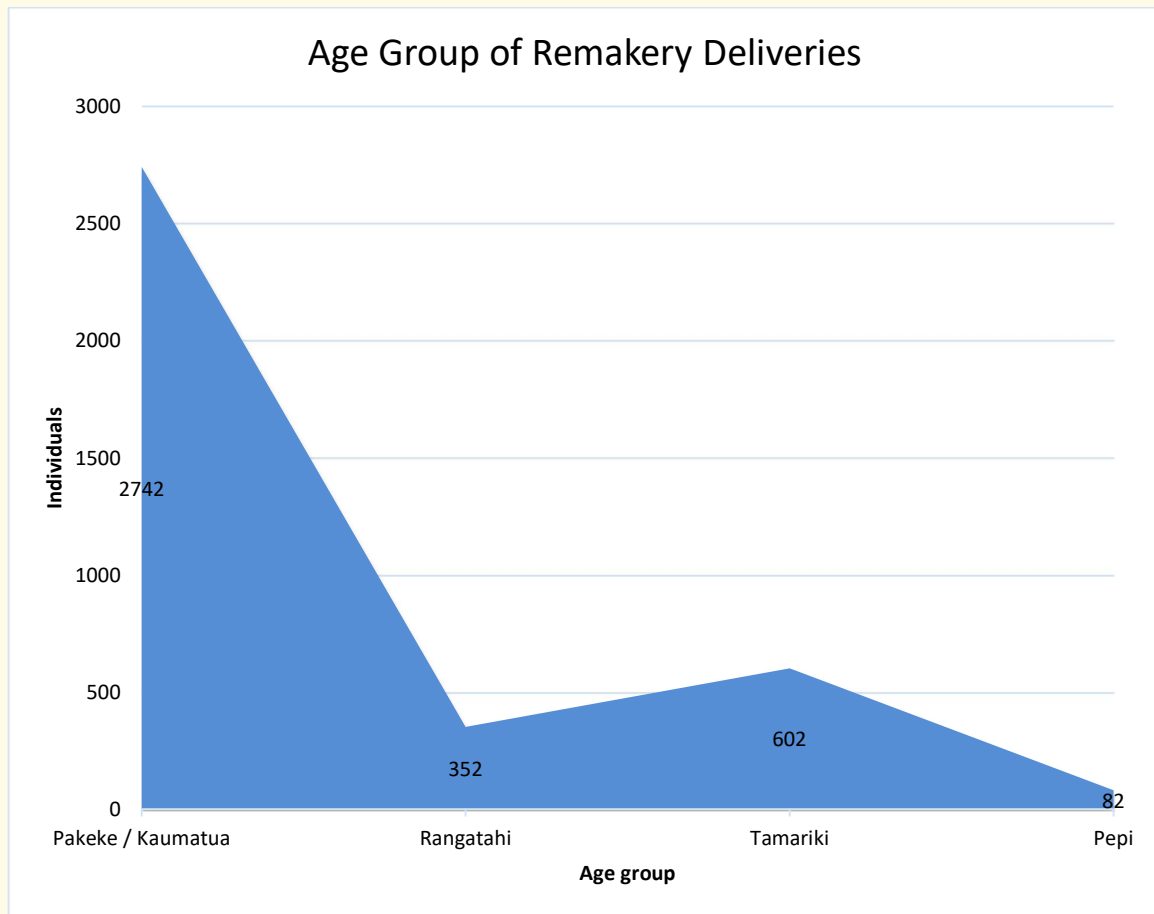
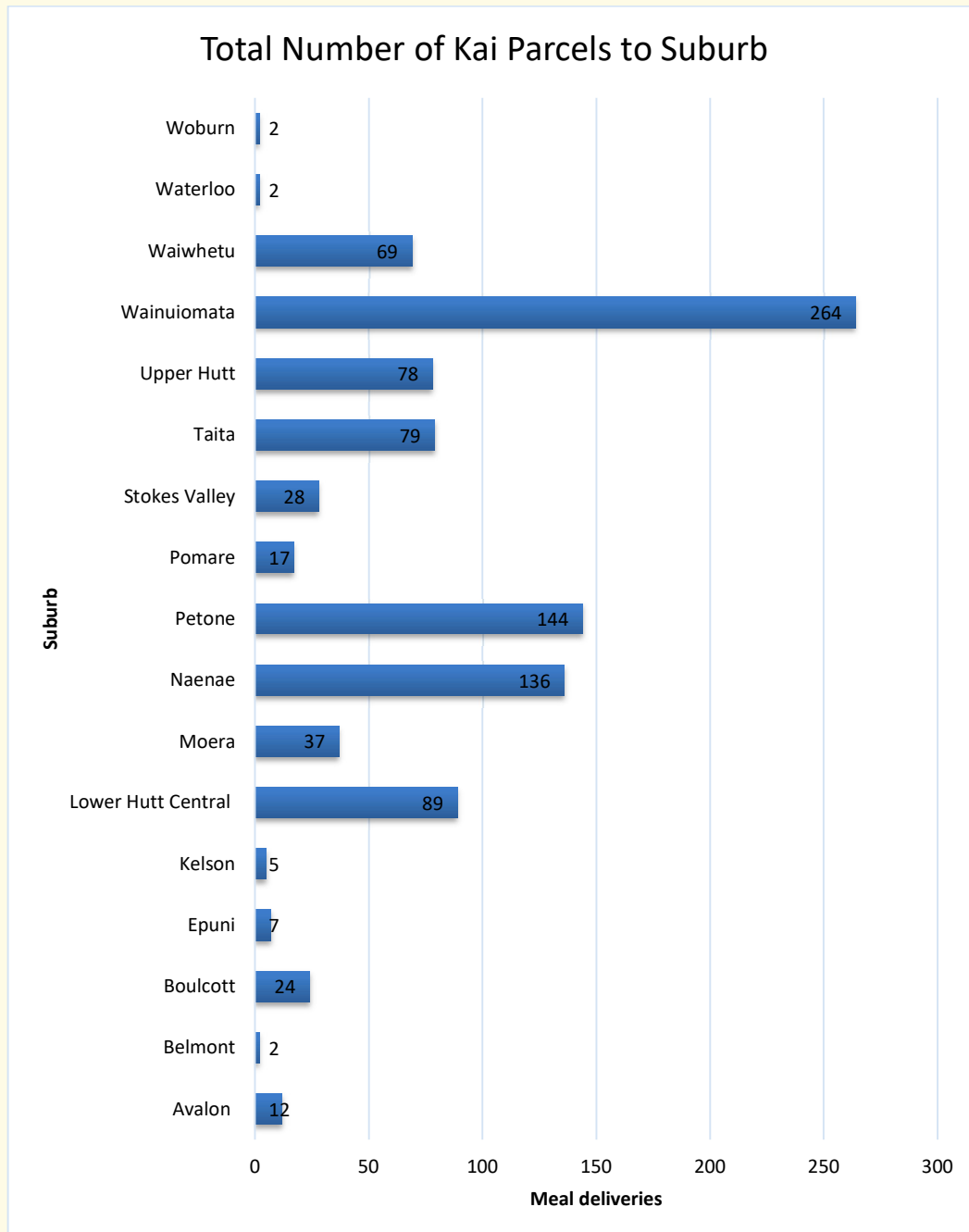
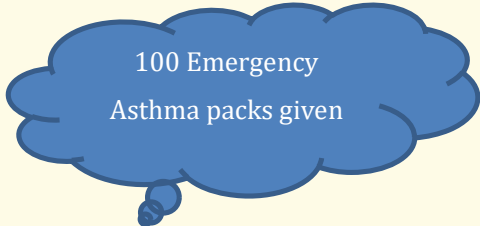


Table 21 shows that 23% of Remakery kai parcels went to Wainuiomata whānau, followed by high numbers in Naenae (14%), Petone (12%), Lower Hutt (12%), and Taita (11%). A significant number of kai parcels (37) also went to Upper Hutt whānau.

Table 41 Remakery Kai packs to households to suburb



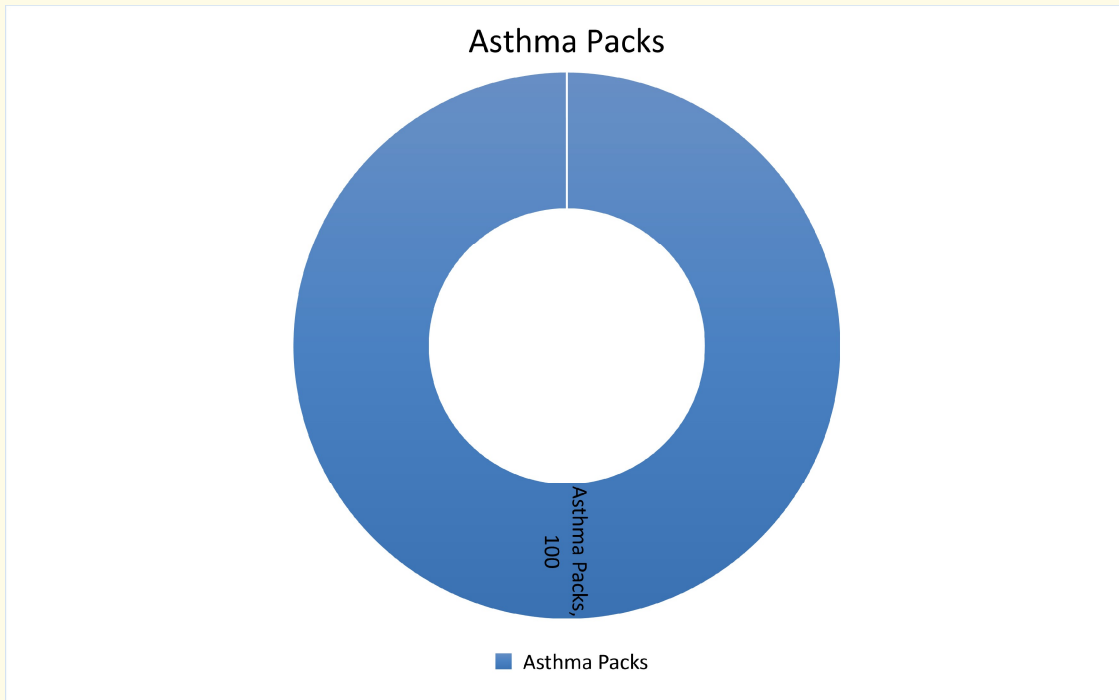


Tu Kotahi Māori Asthma and Research Trust

100 Emergency Asthma packs given

As COVID-19 response progressed many whānau experienced barriers to accessing their medication and were ill prepared for the lockdown period. Tu Kotahi responded by contacting all the whānau on their database and as a result delivered 100 Emergency Asthma packs that included asthma medication.

Table 42 Asthma Packs



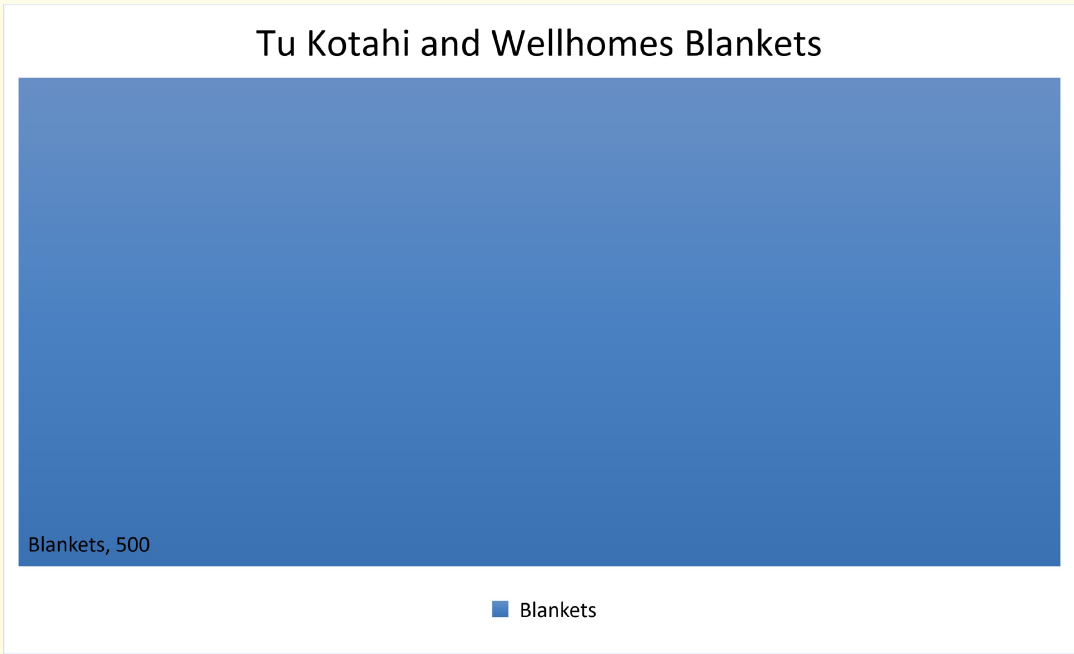


Tu Kotahi Māori Asthma and Research Trust and Well Homes

500 Blankets provided

As COVID-19 response progressed and moving into winter and cooler temperatures we started receiving requests for blankets. We were fortunate Well Homes supplied 200 blankets to start the blanket bank and this initial supply lasted for two weeks. We were able to replenish our supplies with 200 blankets donated by Rimutaka Prison and Tu Kotahi donated a further 100.

Table 43 Tu Kotahi and Well Homes blanket contribution



Whānau Ora Commissioning Agency Whānau Direct

719 whānau were supported with Countdown or PAK'nSAVE vouchers, blankets and bedding and kai packs

The Whānau Ora Commissioning Agency empowered its providers with money to support the COVID-19 response. Provision of the Sanitation Pack was the major response. Through the Whānau Direct fund Tākiri Mai – Kokiri Hauora was able to provide Food vouchers from PAK'nSAVE and Countdown, blankets and bedding and kai packs. 719 whānau were helped with these items resulting in 589 receiving PAK'nSAVE or Countdown vouchers, 74 a bedding and food pack and the rest were food packs.

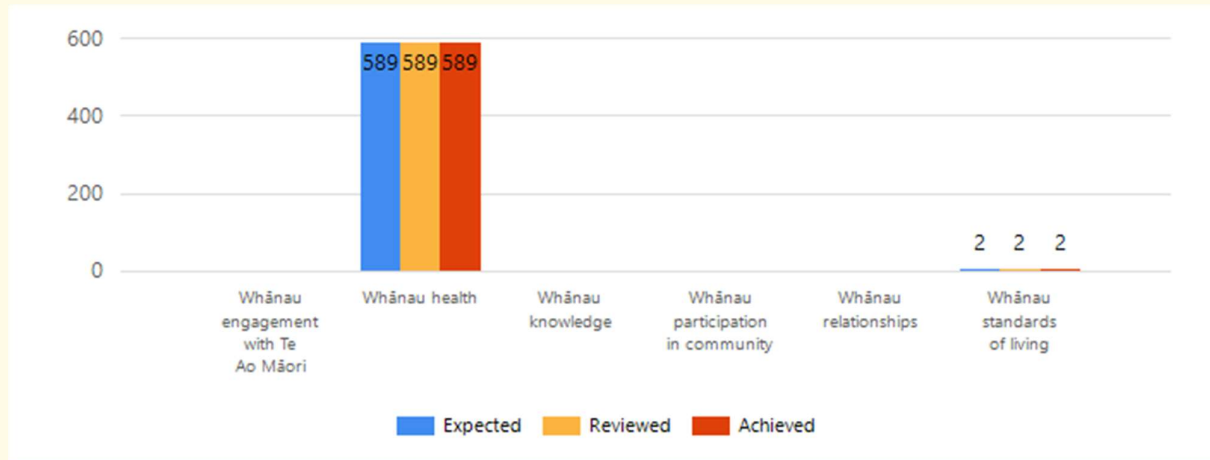
As you can see in this graph below, we had two reporting periods. The first graph shows the number of whānau supported resulted in an average delivery worth \$150.42 and this supported at least 598 whānau averaging the amount out to \$148.66 each. Unfortunately due to the sheer need we did not have the people resources to find out how many whānau there were in each family. From the deliveries we knew most of those getting packages did have children.

The graph underneath identified the Whānau Domain² that was being addressed was Whānau Health.

² A core domain of the Whānau Ora commissioning agency.

Table 44 Whānau Ora Commissioning Agency Whānau Direct summery from the first report of the period and the whānau domain that improved because of the kai given

Whānau Summary			
Whānau Engaged	Average \$ per Whānau	Individuals Engaged	Average \$ per Individual
591	\$150.42	598	\$148.66

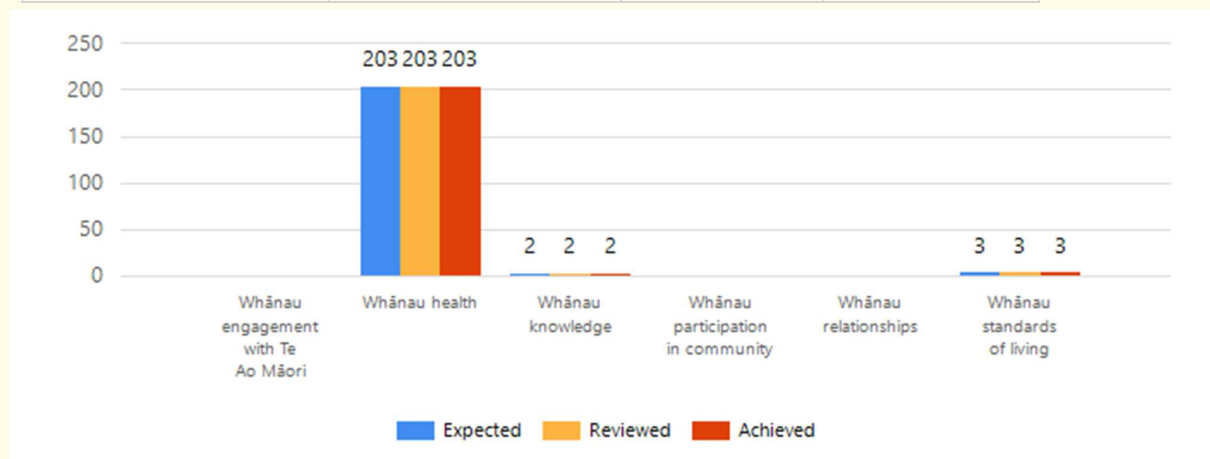


In these packs we see the price per whānau has risen to an average of \$592.30. The domain addressed by these resources are Whānau Health.

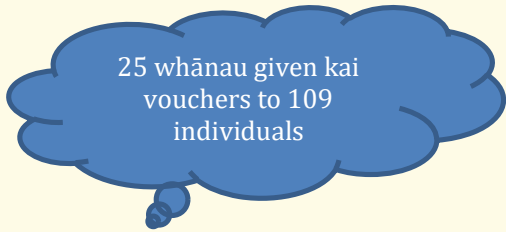
Table 45 Whānau Ora Commissioning Agency Whānau Direct summery from the second report

Whānau Summary

Whānau Engaged	Average \$ per Whānau	Individuals Engaged	Average \$ per Individual
128	\$592.30	143	\$530.17



Homelessness Prevention Kai vouchers



Hutt City Council allowed the Homelessness Prevention Service to purchase kai vouchers for whānau in their service. \$173.91 worth of vouchers were given to 25 households of which 109 individuals benefited. These vouchers were given out from 25/3/2020 to the last one on the 8/5/2020.

Table 46 Homelessness Prevention Delivery Date and Numbers of Kai Vouchers

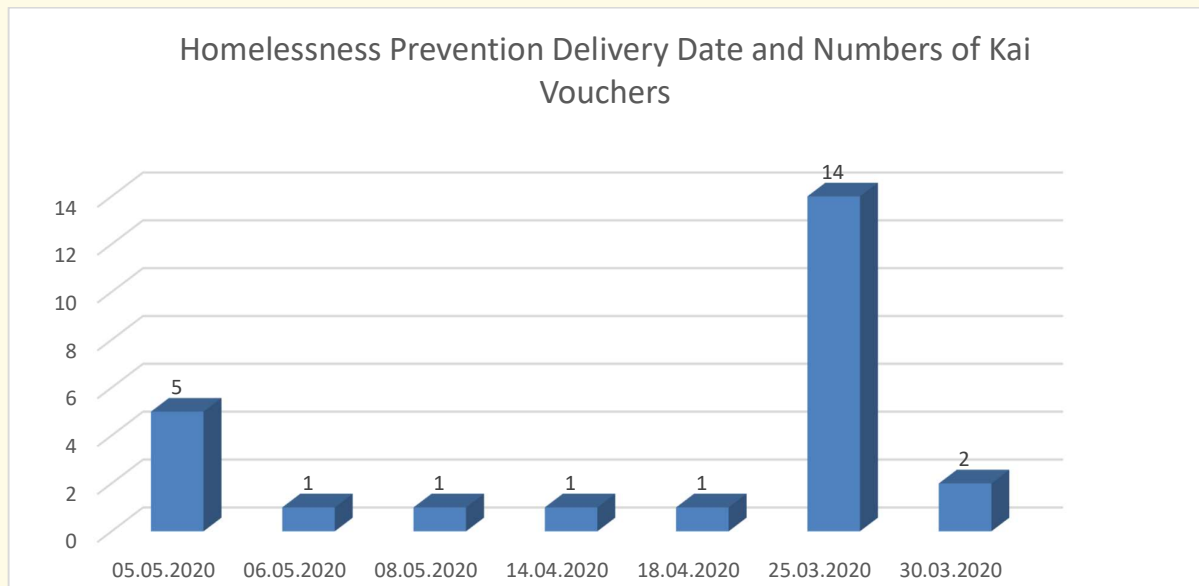
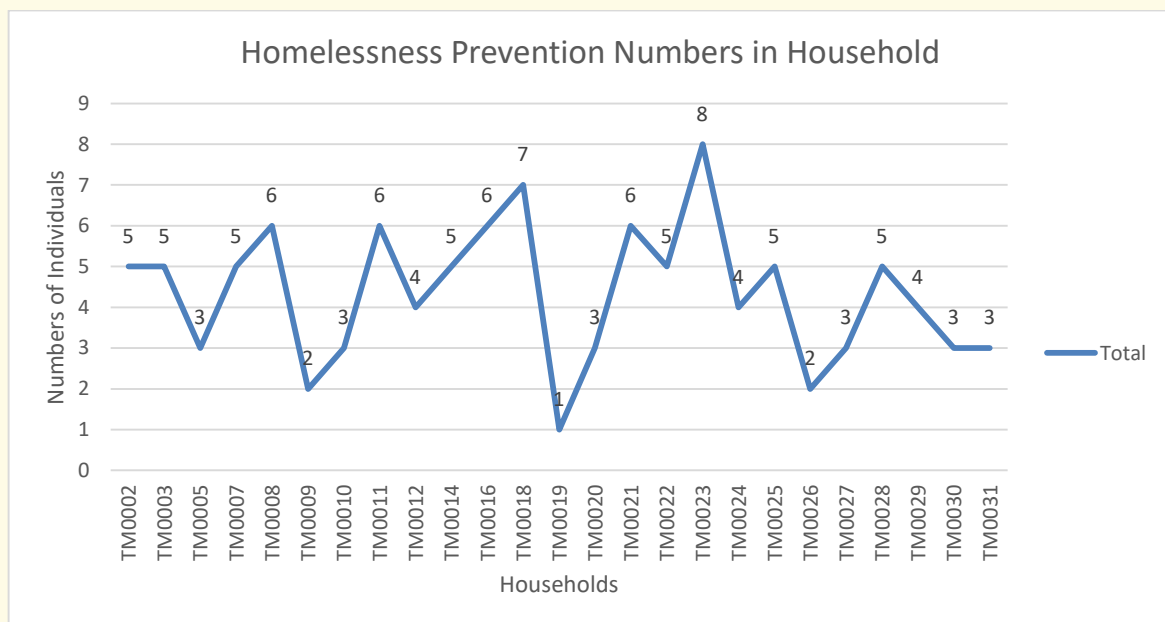
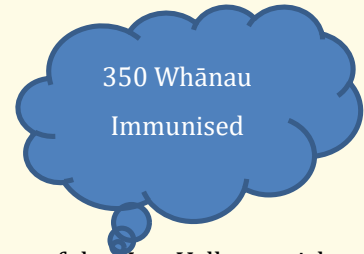


Table 47 Homeless Prevention Household Numbers



Flu Immunisations for Hard to Reach Population



350 Whānau Immunised

Kokiri has a yearly response for flu immunisations where we cover some of the Hutt Valley at risk and hard to reach population. When COVID-19 was announced Health Care providers identified that at risk whānau needed immunising to support protection. There were National messages supporting this approach but the practicalities of accessing any or enough of the actual serum and PPE was a huge challenge at the beginning. The DHB was thinking Health Care (GP) providers not of Māori Health providers in its efforts to combat spread of COVID-19.

After the serum was sourced 350 whānau were immunised. Of these whānau 26 were kaumātua and one was a hapu mama.

Table 48 Flu vaccines for whānau from these Health Services

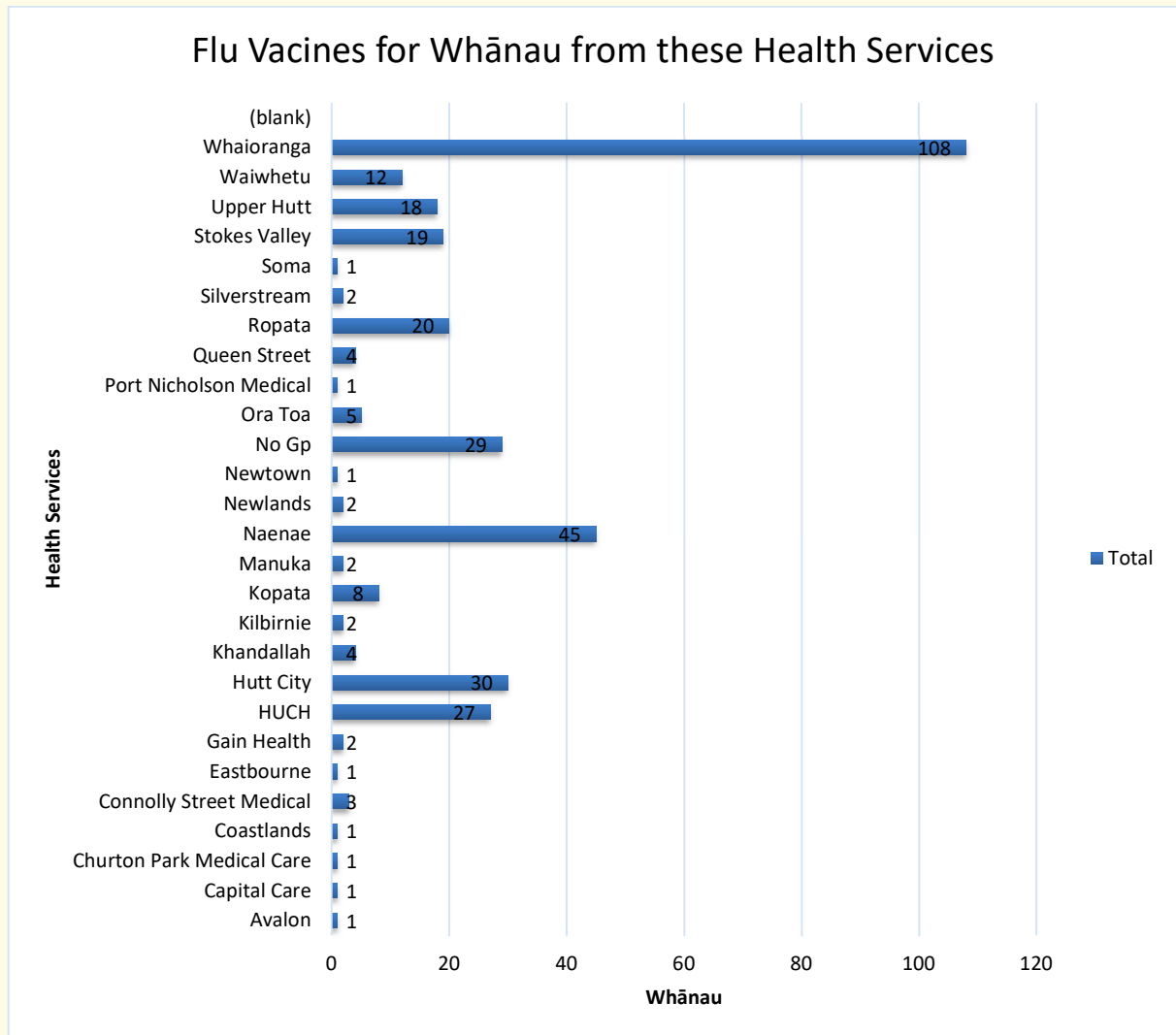
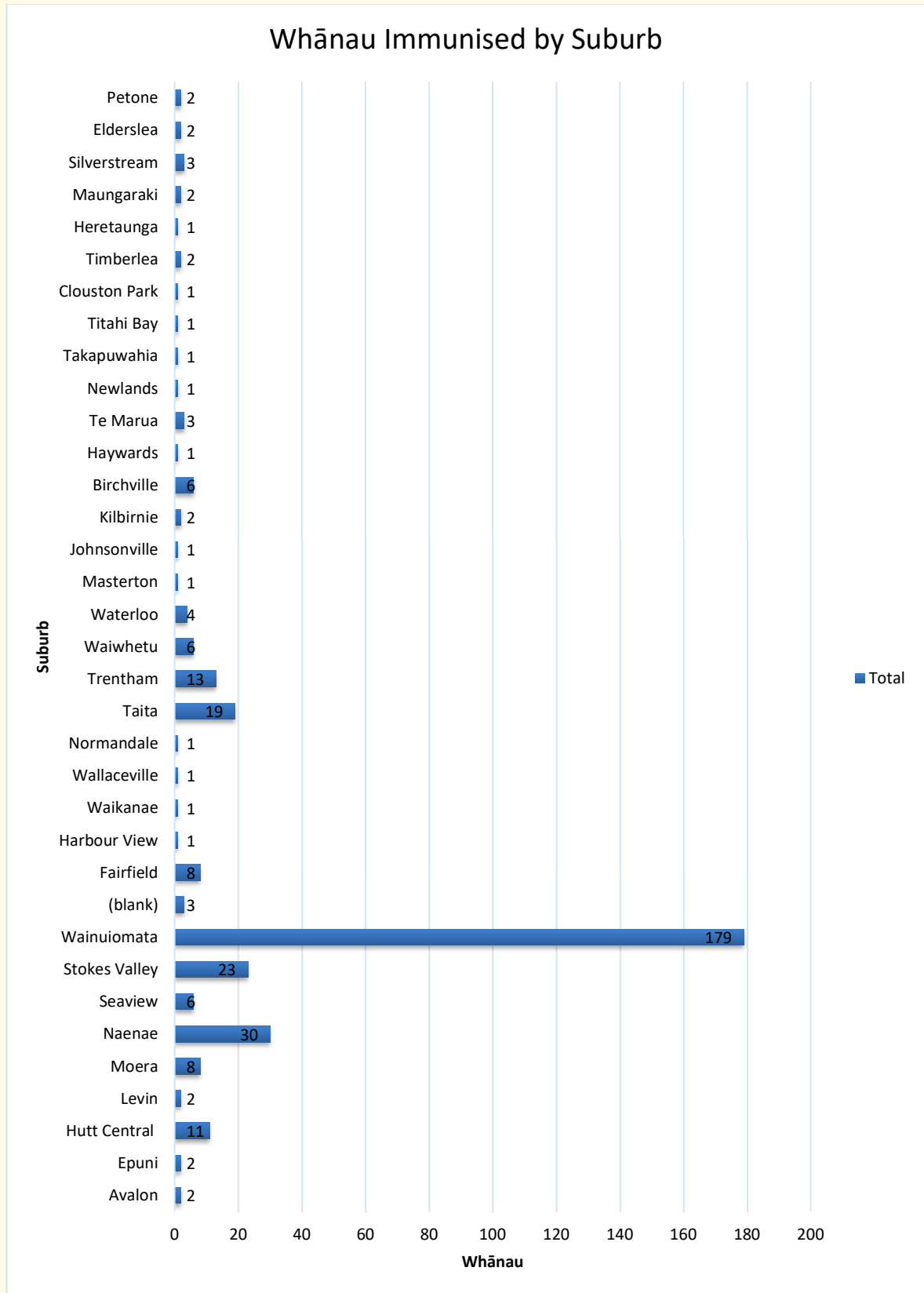


Table 49 Flu Immunisations by suburb



147 Tamariki received kai for their whānau

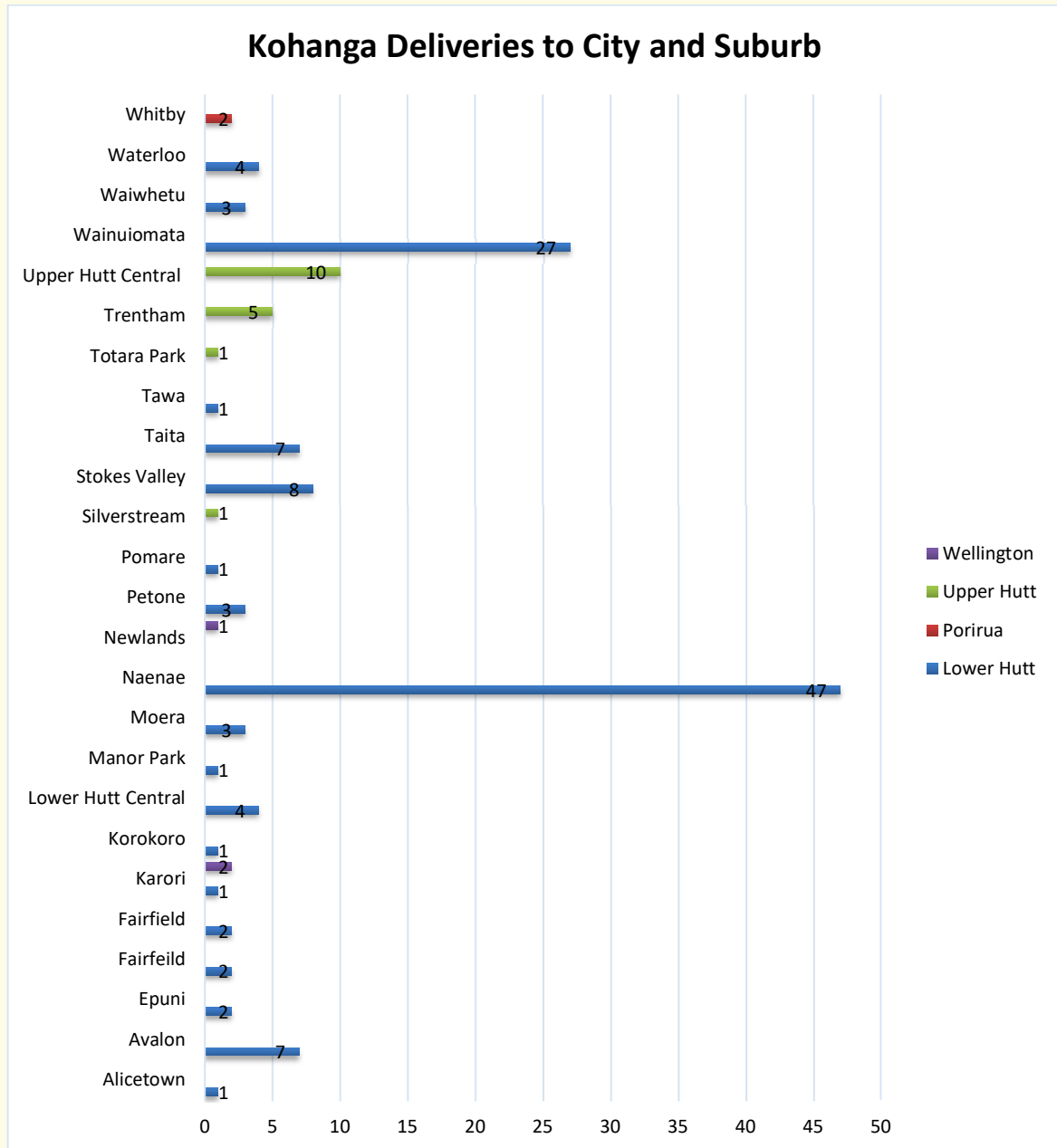
Kohanga Deliveries

147 Tamariki received kai for their household.

The data we received for these deliveries was very minimal. This data represents deliveries to three Kohanga - Kokiri Marae, Paparakau Tuarua and Te Hono ki Kokiri.

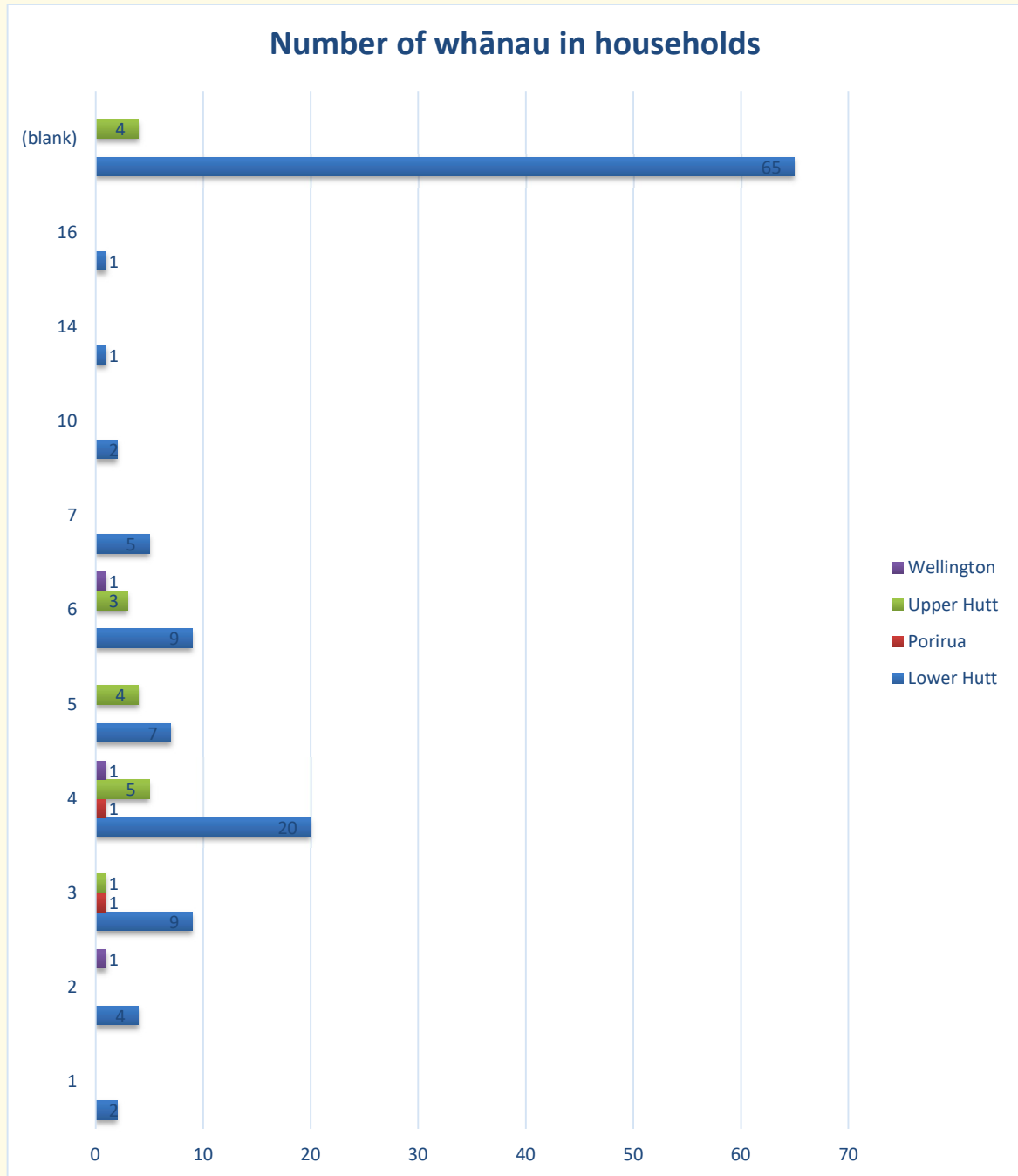
The first graph shows city and suburb tamariki lived in.

Table 50 Kohanga deliveries by suburb



As you can see one of the Kohanga didn't identified how many whānau they had in a household.

Table 51 Number of individuals per household



We also do not have data on Ethnicity or iwi but the majority will be Māori.

Summary

The response Tākiri Mai – Kokiri Hauora provided to their community over the COVID-19 alert levels was beyond what was imagined but welcomed. The philosophy of no one should go hungry was held by all. The use of Facebook recording daily karakia and connecting to whānau was a huge link to the community that then encouraged whānau to call and ask for help.

It is interesting to see that referrals to all services at Tākiri Mai - Kokiri Hauora for the whole period last year were **1910**. This year from 1st January to 6th November 2020 Kokiri has had **4815**.

There have been learnings from the response.

1. The most significant being the huge need for support with kai and basic needs for so many in the community, and how many tamariki this affected. This need has led to a Pataka Kai being set up permanently in Wainuiomata.
2. The importance of offering and maintaining a connection to the community through a tool such as Facebook and an 0800 phone number.
3. Building guidelines and templates for Māori Health Providers to support the data collection required for any future response and to improve the current systems and capability
4. Seek to source resources for a relational database that can hold relevant data during a pandemic or significant event in a central database.
5. Kokiri did not have a relational database available to support and monitor their work during the early stages of the pandemic which made it challenging to consistently collect and link ethnicity and other demographic information to whānau interacting with Kokiri. The lack of a relational database significantly limits Kokiri's monitoring and reporting and could make their day-to-day operations challenging.
6. It would be helpful for Kokiri to have some in-organisation support over a period of time until they have revised their strategy for data storage and reporting in the longer-term.

The work done by such a small group of kaimahi was extraordinary and resulted in communities being mobilised to help each other.

This was the day the workers were thanked by the Prime Minister for the huge mahi they did to support whānau over the COVID-19 response. These kaimahi were the primary workers for this incredible response. Not all kaimahi were present for this celebration but the majority were included.

Figure 20 The Prime Minister visit to congratulate kaimahi on their response



He aha te mea nui o te ao? He tangata! He tangata! He tangata!

What is the most important thing in the world? It is people! It is people! It is people!

This whakatauki talks to the importance of human connection and relationships. This is what sustains communities and enables people to flourish. It values the human being in all of us and reminds us of what is most important – not money, not success, not a job or a thing – it is people.

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Appendix A

Data Confidentiality Agreement: COVID-19 analysis project

Between: Stella Vickers and the Biostatistical Consulting Group (BCG) (University of Otago, UOW)

And Cheryl Davies (Manager), Tu Kotahi Māori Asthma and Research Trust and Kōkiri Marae

This agreement describes how data about whānau accessing Kōkiri support will be protected and treated during this analysis project.

Golden rules:

Data will only be removed from Kōkiri premises or Kōkiri storage devices with the clear permission of Cheryl.

Maximum measures will be taken to protect whānau identities in analysis and reporting.

Analyses will be discussed with Cheryl and colleagues before being finalised.

1. Analyses of data about whānau will usually be conducted by Stella in conjunction with Cheryl and colleagues.
2. BCG staff will undertake geocoding using real address information to generate meshblock deprivation scores for households (indexed with an ID number but not displaying whānau identities).
3. Stella will need to scan whānau names in the initial analysis stage in order to match data together and remove duplicates.
4. UOW will not divulge details of whānau that have used, or are using services provided by Kōkiri.
5. UOW will not disclose or discuss any other confidential or sensitive information about Kōkiri, its employees, or any of its partner agencies outside of the COVID-19 project group.
6. It is agreed that Stella and BCG colleagues can conduct analyses on data away from Kōkiri premises. Data will be stored securely on password-protected computers in secure work spaces.
7. At the conclusion of the project, Stella and BCG colleagues will provide email confirmation to Cheryl that data about whānau have been deleted from their computer systems.
8. Any changes to this agreement must be approved by Cheryl Davies.

University of Otago (Wellington)

Kōkiri Marae

Signed:

Signed:

Print name:

Print name:

Date:

Date: