Achieving equity for Maaori and Pacific people who smoke applying a whole of system view, innovation and the use of quality improvement methodology

Summer Hawke
Estimated 62,000 currently smoking
Approximately:

- One-third Māori: (19,000)
- One-third Pacific: (18,000)
- One-third European/Other: (20,500)
- One-tenth Asian: (6,000)
- Total number of 'estimated resident' smokers in New Zealand District Health Boards (census 2013).
Is it possible to be the best performer in the country?
For our non-Maori population we are already one of the best performers?
### Trendly Beta
Promoting High Performance in Health

#### Dashboard Summary

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<tr>
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- **10-20% away from target**: More than 20% away from target

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• Achieving Health targets equitably - Secondary
• Achieving Health targets equitably - Primary
• Achieving Health targets equitably - Maternity
5 points

1. Ethnicity
2. Language
3. Quality Improvement
4. Local Intelligence
5. SSDD ..... Innovate
Ethnicity
Language

1. Reduce Inequities vs Get rid of Inequities
2. What is the matter with you vs What matters to you
3. Work with the willing vs You will
4. Te Reo Maaori and Health Literacy
5. Maaori Smokers vs Maaori People who smoke
6. Mainstream vs Maaori and Pacific are our mainstream
Quality Improvement

- Continuous Quality Improvement
- Manaaki Hauora PDSA and change packages
- Provider development
- Process / System Improvement
## Local Intelligence

**Moses Person – ‘Moses the image conscious youth’**

<table>
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<tr>
<th>Name: Moses</th>
<th>From: Wiri</th>
<th>Age: 20</th>
<th>Works: Part-time at The Warehouse</th>
<th>Ethnicity: Samoan</th>
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### Values
- Appearance and social status amongst peers.
- Socialising with friends.
- Immediate and extended family.

### Behaviours & Attitudes
- From an extended family of heavy smokers.
- Quite transient – lived in lots of places growing up.
- Surrounded by smoking.
- Didn’t like smoking when he was growing up because he was asthmatic, got weasy around it, had to take himself out of the situation.
- Started smoking because thought it was cool.
- No father figure (very little male role modelling)
- Doesn’t consider quitting because part of his social norm.
- Limited health literacy – understands basics but doesn’t think it will hurt him – there is plenty of time to give up later.
- ‘Pack’ mentality, doesn’t want to be the only one who doesn’t fit in.

### How to reach Moses
- Social media (Instagram, Facebook & other social channels)
- At community street level – at events that have street cred, music festivals and sport events.

### Influencers
- Peers
- Musicians (local artists)
- Family
- Celebrities (sports heros)

### Other Considerations
- Mainstream media – T.V. is unlikely to reach him.

### Points of leverage
- Looks and image
- Smelling like smoke
- Make giving up the new cool
- Cost

### Quotes
- “I wouldn’t want to be seen in the quit bus.”
- “I’d think about quitting if my friends did, but we all smoke.”
Don't look like a JOKER an be SMOKER! 😤

Need to quit 🚬

Don't be a chimney! Stop before u start 😅