

# Evaluation of Indigenous health promotion programs in New Zealand and Australia: Is there merit in identifying “joint” Trans-Tasman principles to guide the evaluation practice of Indigenous and non-Indigenous evaluators working with Indigenous communities?

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## Abstract:

In 2003, the AES Board approved an Indigenous evaluation strategic objective and since then has taken considerable steps to foster Indigenous evaluation activities, such as increased Indigenous presence in the conference program and development of an Indigenous Special Interest Group. In this paper Indigenous and non-Indigenous evaluation practitioners from Australia and Aotearoa/New Zealand argue that “joint” high-level principles must now be articulated to guide the evaluation activities of Indigenous and non-Indigenous evaluators working with local Indigenous communities. We posit that evaluators would benefit from reference to context-specific Indigenous evaluation principles to inform how they engage with Indigenous communities, respect local cultural protocols and integrate Indigenous world views into evaluation design. Without these, our sector is highly vulnerable to delivering evaluations that do not meet minimum cultural integrity standards which can result in unintentional harms to Indigenous communities. We present three disparate sets of principles used to inform Indigenous evaluation activity to demonstrate there are a number of approaches and principles from which Indigenous evaluation principles could be developed. We also discuss some challenges which arise when attempting to implement principles such as these in a “real-world” setting.

## Background

For Indigenous and non-Indigenous evaluators, there are a number of research principles or values that underpin health promotion program evaluation activity undertaken with, or in, Indigenous communities. These principles are not new, and indeed have been promulgated in various territory, state, federal (in the case of Australia) and national (in the case of New Zealand) documents over the last 15 years (e.g. South Australia's Iga Warta Principles (May 1999), New Zealand's Guidelines for Conducting Research with Māori, (Health Research Council of New Zealand 1998; 2010). The AES's own Guidelines for the Ethical Conduct of Evaluations, albeit silent on the specific issue of evaluation with Indigenous peoples, does provide Australian and New Zealand evaluators with a general framework to guide ethical evaluation practice in our two countries. In 2003, the AES Board approved an Indigenous evaluation strategic objective to add momentum to the growing interest and commitment within its membership to Indigenous evaluation.

Since that time, the Board has taken steps to increase awareness of issues related to the conduct of evaluation with, and in, Indigenous communities and members more widely encouraged to consider what Indigenous evaluation means or might mean for the Society and what an evaluation partnership between Indigenous and non-Indigenous evaluators might look like (Wehipeihana, 2008). Examples of the Board's efforts to increase Indigenous involvement in the Society include a stronger Indigenous presence in the AES conference program; AES journal publications featuring Indigenous evaluation (Scougall, 2006; Neele and Tavila, 2007; Wehipeihana, 2008; Spooner, Flaxman & Murray, 2008; Boulton and Kingi 2011); publication of a special issue of the AES journal devoted to Indigenous evaluation (Vol 12 No1); the support of an AES Indigenous Special Interest Group (ISIG); and ongoing commitment to the work of an executive subcommittee, the Indigenous Strategy Committee. These last two groups respectively, comprise both Indigenous and non-Indigenous evaluators however the roles of each are different. Whereas the ISIG provides evaluators with an online forum to discuss issues in the conduct of Indigenous evaluation and resource links to best practice guidelines for social research and evaluation involving Māori (<http://www.spear.govt.nz/good-practice/overview/research-areas/maori.html>) and Tagata Pasifika (<http://www.spear.govt.nz/good-practice/overview/research-areas/pacific-people.html>), the delegated role of the ISC is a strategic one, established to ensure the organisation's commitment to Indigenous peoples remains meaningful and relevant both in Australia and Aotearoa/New Zealand and across the wider Pacific.

Wehipeihana's seminal paper of 2008, rather than simply providing an historical account of the factors that gave rise to the emergence of Indigenous evaluation as a strategic objective of the AES, clearly outlined some of the unique challenges we face as Indigenous evaluators when conducting evaluation outside our own communities. Questions such as who mandates this work?; what is required for one tribal member to conduct evaluation in another tribal area safely?; and what levels of cultural support are required to do this work? remain relevant to this day. Non-Indigenous colleagues face a different, yet equally daunting set of challenges: how can and do they work safely with Indigenous communities; with the mandate of who and to what end?

Clearly, undertaking high quality, meaningful evaluation in an Antipodean context requires Indigenous and non-Indigenous evaluators to have a full and expansive “toolbox” of evaluation skills and expertise. We argue that one or more sets of guidelines, principles and/or processes to support the conduct of evaluation by both Indigenous and non-Indigenous evaluators with, and in, Indigenous communities is also required. Despite the important advances that have been made both by the sector and by the AES itself, this omission, or gap in our toolbox, leaves us as a sector highly vulnerable to delivering evaluations that do not meet minimum cultural integrity standards.

Given this gap, it is perhaps timely to critically reflect upon our respective principles and practices and their on-going relevancy to our work as evaluation practitioners in a contemporary setting characterised by long-standing and complex health and social needs, greater calls for Indigenous control over decisions affecting Indigenous populations, and shrinking resources. Such reflection, however, must consider differences between Aotearoa/New Zealand and Australia in conducting health promotion evaluation. In Aotearoa/New Zealand, the prevailing norm for conducting evaluation of Māori-led programs, at least in some spheres, is that this will be done “by Māori, for Māori”; evaluations are Māori-driven and have the advantage of integrating cultural knowledge throughout the evaluation, including the process of engagement with local communities and health services. In Australia, by comparison, many health promotion evaluations undertaken in Aboriginal and Torres Strait Islander communities are led by non-Indigenous evaluators. The lack of Indigenous-driven evaluations may reflect an Indigenous evaluation capacity issue, which highlights a need to upscale training. Whether, and the extent to which, local cultural knowledge and protocols are respected in the evaluation process depends on the stance of the evaluator, and the principles to which they subscribe. This potentially opens the door to a range of approaches to collaborating with Indigenous communities - some of which may show a stronger affinity to Aboriginal values and cultural protocols than others.

Notwithstanding these contextual differences, the evaluation of community-based programs is becoming more commonplace in both countries and in the health sector in particular; it is often a contractual requirement of health promotion programs that an evaluation is undertaken. In Aotearoa/New Zealand, new health promotion programs regularly require that formative, process and/or outcome evaluation is included as an integral part of program development and implementation. Many of these programs are specifically directed to addressing the needs of priority populations and, in particular, Māori. Arguably however, Indigenous evaluation capacity is not keeping pace with the need for culturally appropriate evaluation of such programs, requiring the use of non-Indigenous allies to support Indigenous efforts. In Australia, some government contracts recommend that agencies allocate 10 percent of funding to program evaluation. The growing demand for evaluations in the face of an already constrained Indigenous evaluation workforce places a greater reliance on non-Indigenous evaluators. In a context wherein the value of evaluation is being increasingly recognised, but demand is outstripping capacity of Indigenous communities to participate in a substantive manner, how well are the principles of meaningful evaluation of Indigenous programs being adhered to, and what are the challenges evaluators face in ensuring these principles inform their work?

The purpose of this paper is to pose a critical question: Is there merit in identifying one or more sets of Trans-Tasman principles, as appropriate, to guide the evaluation practice of Indigenous and non-Indigenous evaluators with, and in, Indigenous communities. In this

paper Indigenous and non-Indigenous evaluation practitioners from Australia and Aotearoa/New Zealand address the issue of whether “joint” high-level principles can be articulated to guide evaluation work with local Indigenous communities in our respective countries, and discuss some of the challenges which arise when attempting to implement principles such as these in a “real-world” setting.

We begin by presenting three disparate sets of principles to inform Indigenous evaluation activity, each of which, in turn, has emerged from a specific theoretical tradition or knowledge base. They include 1) iwi or tribal research principles from Aotearoa/New Zealand, which have their roots in mātauranga Māori<sup>1</sup> and iwi tikanga<sup>2</sup>; 2) principles guiding Aboriginal health programs in South Australia; and 3) participatory research principles. The authors, in their day-to-day evaluation work, are guided by at least one or other of these sets of principles. Our purpose in identifying these here is to demonstrate that there are already a number of frameworks, approaches and principles from which we could develop joint principles to guide evaluation work with local Indigenous communities in our respective countries. As practising evaluators we are working with the tools we have at our disposal; however we argue in this paper that the tools we currently use fall short of addressing the significant challenges in undertaking evaluation work with and for Indigenous communities. The paper concludes with a call for ground-up Indigenous-specific evaluation principles developed through extensive consultation.

### **The Research and Evaluation Principles Articulated**

#### *1) Aotearoa/New Zealand: Whakauae Research for Māori Health and Development (WRMHD)*

Whakauae Research for Māori Health and Development was established in 2005 under the umbrella of Te Maru o Ruahine Trust (TMORT); the contracting and service arm of Ngāti Hauiti. Ngāti Hauiti is a small tribe comprising 1200 registered members most of whom reside away from the tribe’s ancestral lands in the Rangitikei; a rural area in the lower North Island (Gifford & Boulton, 2007). The aim of establishing WRMHD was twofold: to develop the research capacity of Ngāti Hauiti tribal members and to offer a broad range of Māori-centred research services nationally and internationally.

WRMHD’s program of research includes Māori health and social services program evaluation, Māori community needs assessment, tobacco control research and a range of Māori public health, health services and health policy research. Kaupapa Māori (Smith 1995; Glover 1997; Cram et al. 2000) and Māori-centred (Durie 1996; Cunningham 2000) qualitative research methodologies are routinely utilised by WRMHD in this work. WRMHD’s research and evaluation is primarily conducted with, for, or on behalf of Māori participants, and Māori communities. Undertaking commissioned evaluation, usually for District Health Boards, comprises a significant part of this workload. In undertaking research in the local community and further afield, WRMHD subscribes to a range of ethical standards (Health Research Council of New Zealand 1998, 2010; Pūtaiora Writing Group 2010) and to a set of principles based on Hāuititanga, a term which is best described as “a manner of doing things that is appropriate for, and upholds the collective values and beliefs of the people of Ngāti Hauiti”. These principles were given to WRMHD by the tribal elders and are used as

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<sup>1</sup> Māori knowledge, epistemology and ontology

<sup>2</sup> Tribal protocols and values

guidelines rather than “hard and fast rules” accommodating the constraints of conducting research and evaluation in a modern society.

**Table 1: WRMHD’s Research Principles**

Principle	Description
Kanohi:	Kanohi ki te kanohi or “face to face” contact is the preferred approach when talking to people, particularly when discussing and resolving important matters.
Mana:	Ngāti Hauiti will be represented at different times by people who have certain skills, experience and qualifications. In all cases, such representatives will be given the correct mandated authority by tribal leaders.
Rumaki:	All hui (gathering together or meeting) will be undertaken where possible within cultural settings. This ensures that participants are immersed in the appropriate environment, either in the form of a venue such as marae (traditional meeting place for the tribe) or the observance of Ngāti Hauiti tikanga (custom) during hui.
Whanaungatanga:	Ngāti Hauiti maintains a strong link with neighbouring hapū (sub tribe(s)) and iwi (tribe(s)). The whanaungatanga principle acknowledges these relationships and any associated shared history.
Mahi:	The practice of utilising Māori thought processes and frameworks that enrich culturally based activities.
Hui:	Every effort should be made to incorporate hui into any activity. Such hui encourage debate and discussion to take place while specific gatherings such as hui wānanga (meetings to learn or teach) promote education. Hui whakawhanaungatanga (meetings to establish or cement genealogical relationships) are another opportunity to gather and strengthen relations.

*2) South Australia: A partnership between the peak Aboriginal organisation and university-based evaluators*

The South Australian perspective draws on the experiences of a partnership between the Aboriginal Health Council of South Australia (AHCSA) and the University of South Australia’s Social Epidemiology and Evaluation Research Group which formed to develop and evaluate a tobacco control strategy to support Aboriginal Health Workers to quit smoking. As the peak body for Aboriginal community-controlled health services in the state, AHCSA reviews research ethics applications involving Aboriginal people in the state. This partnership was spearheaded by AHCSA’s Harold Stewart, a senior Koori man and elder who has 37 years of experience working in the health sector with the 56 language groups across South Australia. He has extensive knowledge of the cultural protocols that are predominant in South Australia and cautions all evaluators to be mindful of the magnitude of cultural diversity that exists among Aboriginal peoples within and between states. In addition to the cultural mentorship of two senior investigators on the project, the team was guided by the Iga Warta principles and participatory research principles in their approach to the evaluation.

The Iga Warta principles were developed in 1999 and named after the Adnyamathanha homelands in the Northern Flinders Ranges where they were developed. Six principles were identified at this gathering of Aboriginal community workers and health professionals. These principles were subsequently included in all South Australian Department of Health’s Service Agreements and the Strategic Health Research Program that supported the AHCSA-UniSA partnership.

The Iga Warta principles stipulate that health promotion programs developed for Aboriginal communities must:

- be sustainable;
- have a proactive, preventative approach;
- address the environmental determinants of health;
- have an Aboriginal community and family approach,
- respect Aboriginal time and space; and,
- address the need for coordination and continuity between regions and Adelaide

### 3) *Participatory research approaches*

In the South Australian context, where there is an absence of specific guidelines or principles for conducting evaluations with Aboriginal communities and a limited Aboriginal evaluator workforce, many non-Aboriginal evaluators are called upon to conduct evaluations and rely on participatory research principles to guide their work. In the Aotearoa/New Zealand context, participatory research approaches are relevant for evaluators committed to undertaking culturally responsive, meaningful and relevant evaluation. Those who work in a manner which promotes the “mana” or integrity of Indigenous communities are likely to engage in practices that are consistent with participatory research principles.

Participatory research is founded upon development of authentic partnerships between researchers and community members, practitioners, professionals and other stakeholders directly affected by the issue, program or other matter under scrutiny (Green et al., 1995). As such, the approach capitalises on “integration of researchers’ theoretical and methodological expertise with non-academic participants’ real-world knowledge and experiences into mutually reinforcing partnerships” (Cargo and Mercer, 2008:327). Such partnerships promote mutual respect and trust; capacity building, empowerment and ownership; and accountability and sustainability. It is these core elements that enable two-way learning between research partners (which includes developing the cultural capacity of researchers and building the research capacity of Indigenous stakeholders) and ensure culture is respected throughout the research process (Cargo and Mercer, 2008).

Undertaking evaluation using participatory research principles often requires a re-orientation of the relationships between evaluators and the range of stakeholders that comprise the Indigenous community. Given the chronology of repeated dispossession and disrespect that characterise Indigenous experiences since colonisation, the development of meaningful partnerships is fundamental to respectful research with Indigenous communities, particularly when non-Indigenous academics are involved. The research partnerships facilitate a collaborative approach to selecting culturally appropriate study designs and research methods, devising research timeframes (respectful of Indigenous notions of time and space, and in consideration of competing community events), collecting and analysing data, and interpreting study findings.

### **The Challenges of Implementing Principles in Health Promotion Program Evaluation**

In our experience, there are many benefits from the application of participatory approaches to the evaluation of health promotion programs, including developing mutually rewarding relationships; achieving community trust, ‘buy-in’ and participation; and creating findings relevant to the community. However, the adoption of participatory research principles and

methods in evaluation activity does not mean respectful and meaningful evaluation with Indigenous communities will be an automatic outcome. Nor should the evaluator become complacent with respect to the needs of Indigenous communities, simply because they have chosen to employ participatory research approaches. Constant vigilance is required on the part of the evaluator as a number of challenges around implementing respectful evaluation are not necessarily addressed by adherence to the principles of participatory research. These challenges are manifested slightly different in Aotearoa/New Zealand and Australia, and require the recognition and understanding of:

- the source of the evaluation. Evaluation activities should ideally be conducted in response to needs identified by Indigenous communities. However, in practice, evaluation activities are most often devised and funded by health departments and other organisations and are not therefore community-initiated;
- the compliance burden upon already vulnerable communities with respect to participating in evaluation activity. Community partners can become burdened by the responsibilities of the partnership. Striking an optimal balance between on-going collaboration without burden is difficult, yet crucial;
- the time commitment asked of communities who have their own priorities, goals and objectives, which may have little to do with the focus of commissioned evaluation. Working with Indigenous communities to develop respectful partnerships, undertake mutual capacity building, and accommodate inevitable delays due to competing community demands is time-consuming. The timelines of funding bodies are frequently not aligned with the timeframes required for best-practice participatory evaluation in Indigenous communities;
- funding sources for evaluation activity and who these benefit. Funding mechanisms currently are biased towards Western research principles and do not consistently support Indigenous-based models and principles;
- issues related to influence, mastery and control. The magnitude of information shared by Aboriginal stakeholders engaged in and affected by the research depends on how much influence they perceive themselves to have;
- the importance of developing joint understandings of data, and particularly ensuring that Indigenous stakeholders are actively engaged in the data analysis process; and
- the importance to Indigenous communities of translating research and evaluation findings into practice and change. For such communities, the goal of participating in research and evaluation activity is often transformation and improvement, rather than the production of knowledge for the sake of it.

### **Moving towards evaluation principles to guide evaluations with, and in, Indigenous communities.**

Indigenous and non-Indigenous evaluators frequently fall back upon conventional Western methods and techniques despite the existence of Indigenous research frameworks and theories, such as kaupapa Māori theory. In our view, evaluators would benefit from reference to context-specific Indigenous evaluation principles to inform how they engage

with Indigenous communities, respect local cultural protocols and integrate Indigenous world views into evaluation design. In the absence of specific guidelines for conducting evaluations with, and in, Indigenous communities, evaluators may utilise different mechanisms and resources to provide some assurance that their evaluations address local cultural knowledge and cultural protocols. Little is known, however, about the potential unintended individual and collective harms to communities that may arise from such approaches. Many well-intended practitioners may do harm because they are unaware of local cultural protocols that need to be considered, for example, in recruiting participants to a program or a focus group. Depending on the kinship groups engaged in the evaluation and the nature of the evaluation activity, such group-based activities may require consideration of avoidance relationships and gender issues. The use of traditional language within these principles is recommended to strengthen community ownership and investment in evaluation projects.

We suggest overarching and guiding principles can be developed with Indigenous communities which include traditional language and ways of knowing. While many differences exist within and between the Aotearoa/New Zealand and Australian contexts, we argue that guiding principles developed with flexibility for local adaptation will provide direction and reassurance for both evaluators and Indigenous communities. It is hoped that such guidance creates a foundation to support the development of new or broader-scale integration of existing Indigenous-specific evaluation methodologies and techniques. We are mindful however, that many issues would need to be considered in undertaking such a task, not the least of which is addressing the ontological and epistemological differences between an Indigenous worldview, and a Western, positivistic approach.

## **Conclusion**

This discussion paper represents our emerging thoughts regarding best practice evaluation with Indigenous communities. These perspectives reflect many years of combined experience working with Indigenous partners in evaluation activities in Aotearoa/New Zealand and Australia. Research principles currently applied in evaluation projects are outlined and, in particular, we examine the relevance of participatory research principles to Indigenous evaluation.

We call on all evaluators, and especially Indigenous evaluators, to answer the question raised in this paper; is there merit in identifying one or more sets of Trans-Tasman principles for Indigenous evaluation to guide the evaluation practice of Indigenous and non-Indigenous evaluator practitioners with, and in, Indigenous communities?. If the answer to this is yes, then a number of sub questions arise; what are the processes and mechanisms for developing this work further?; who needs to be involved? how is the work to be supported? and what are the mechanisms we need to use to gain agreement on a final set of principles? We look forward to sharing and discussing these ideas further.

## **Glossary**

Ngāti Hauiti	a Māori tribe whose traditional lands are located in the lower North Island
Hauititanga	a manner of doing things that is appropriate for, and upholds the collective values and beliefs of the people of Ngāti Hauiti



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