A cultural partnership approach to supporting the wellbeing of children in post-earthquake Christchurch

Dr Anna Thorpe1, Mr Aaron Hapuku1, Mrs Terisa Tagicakibau1, Ms Anna Mowat2, Ms Paula Partington3
1Community & Public Health, Canterbury District Health Board, 2All Right? campaign, 3School-Based Mental Health Team, Canterbury District Health Board

Between 2010 and 2012, a series of earthquakes devastated Christchurch causing 187 deaths and large scale destruction of the city and natural landscape. The wellbeing of residents has suffered in the prolonged aftermath of the Canterbury earthquakes, particularly that of children.

The Whānau Wellbeing Collaboration is a response to concerns about the wellbeing of children in the aftermath of the earthquakes. The collaboration consists of Māori, Pacific and generic health promoters, mental health nurses, clinical psychologists and psychotherapists from Community and Public Health and the School-Based Mental Health Team at the Canterbury District Health Board; All Right? (a social marketing wellbeing campaign); and Pegasus Health (a primary health organisation). Māori, Pacific and school subgroups work collaboratively, umbrella-ed by All Right? The three subgroups lead their own strengths-based approach to design, development, distribution and evaluation of wellbeing resources.

Three Maori resources were firstly created by and for Māori. These resources honour the importance of intergenerational relationships, cultural identity and place. They include a 12 month Matariki calendar from June to June to celebrate the Māori New Year; 20 wellbeing activity cards which are available digitally and in print; and a Māori breathing and mindfulness video called Hikitia te Hā.

Pacifically Speaking is a set of wellbeing cards developed by and for Pacific people. Forty activity cards include conversation starters, to stir up fun and meaningful discussions, and
easy activities for the whole family. Cards are organised into topics that reflect Pacific research priorities: family; culture; identity; spirituality; feeling good; and physical fun.

Sparklers is a digital wellbeing resource, designed primarily for use in the classroom. It consists of 36 activities lasting from 10 minutes to 1 hour, which are designed to be incorporated into lesson plans or be used to warm-up the class, strengthen social connections or manage challenging behaviours. Activities are clearly aligned with the New Zealand curriculum for year 1 to 8 students and were tested with up to 200 Canterbury schools.

In summary, resulting Māori, Pacific and school wellbeing resources are unique, flexible and accessible, digitally and in print, reflecting a cultural partnership model of health promotion. http://www.allright.org.nz/
Sun protection in New Zealand primary schools, 2017

Mrs Bronwen Mcnoe, Associate Professor Tony Reeder
Cancer Society Social and Behavioural Research Unit, University of Otago, Dunedin

Background: In New Zealand we enjoy unpolluted, clear skies and outdoor lifestyles. The downside of this is that we have the highest age standardised melanoma skin cancer rate in the world. Overall, skin cancer is one of the most expensive cancers for the New Zealand Health System to treat. Yet there is compelling evidence that most skin cancers are potentially preventable by reducing exposure to excessive levels of ultraviolet radiation (UVR). UVR exposure during childhood and adolescence makes an important contribution to lifetime exposure, but they are also important times for supporting the development of sun protective attitudes and habits. The school setting is an environment where policies, procedures, practices, environment and curriculum content may influence a student’s sun exposure and sun protection behaviours, thereby potentially helping to reduce harmful UVR exposure.

Aim: To quantify and describe sun protective policies, procedures, practices, environments and curriculum content in New Zealand primary school settings.

Methods: In April 2017 we invited all primary school principals, nationwide, to complete a questionnaire on the sun protection policies and practices of their schools. The data collection phase of this survey will be completed by June 2017.

Results: A summary of results cannot be provided until the completion of data collection in June 2017. Given the membership characteristics of the PHA, and the conference timing (when UVR is seasonally high), this would an excellent forum to disseminate and discuss key results from this project.
WAVE: 10 years of Wellbeing And Vitality in Education in South Canterbury, New Zealand

Rose Orr, Dr Daniel Williams
Community & Public Health, Timaru

Issue: Health services face significant pressures with an aging population, the growing impact of non-communicable diseases, and financial constraints. Population wide preventative approaches can improve health outcomes and reduce health service costs long term.

Description: Education settings are a key health promotion site because: they are credible, authoritative environments; they provide extensive wider community links; and almost all children and many young people participate in education and are at an age when many lifestyle patterns are forming.

WAVE (Wellbeing and Vitality in Education) is a unique South Canterbury programme based on a dramatic expansion of health promotion in education settings across the province since 2006. WAVE works with all 100 education settings, from early childhood to tertiary, using a partnership approach that includes health, education and the community. WAVE focuses on the settings’ environment, responding to health priorities as identified by students, families and staff. WAVE evaluation comprises a biennial mixed-method survey of participating settings.

Results: 2016 questionnaire results showed increasing engagement (87%) and satisfaction (98%) with WAVE, and increasing effectiveness of professional development in enhancing staff’s delivery of health education (84%). Almost all early childhood (98%) and primary schools (97%) had nutrition-related initiatives such as edible gardens. An increasing proportion of settings (72%) had a policy on increasing physical activity. All settings must have on-site smoke-free policies; the number with smoke-free policies for outside boundaries (75%) continues to increase.

Lessons: Success factors identified by settings included tailoring to local needs, making a difference to student’s wellbeing and learning, and a commitment to partnership and evaluation.

Main messages: A strong partnership approach can improve both health and education outcomes. Culture change means long-term commitment.