



Cultural Responsiveness to Family Violence in Aotearoa New Zealand

Claire Gear, Auckland University of Technology, New Zealand

Violence Intervention Programme



- Family Violence Intervention Guidelines
(Fanslow, 2002 & Glasgow & Fanslow, 2006)
- District Health Boards are required to develop a sustainable '**Family Violence Intervention Programme**'.



Family Violence Intervention Programme Evaluations



- Evaluations of District Health Board Family Violence Intervention Programmes to monitor development.
(Koziol-McLain et al, 2004, 2006, 2007, 2009).
- In 2008, 13 (48%) of hospitals have reached the target score of 70%.
(Koziol-McLain et al, 2004, 2006, 2007, 2009).



Family Violence is culturally specific...

- Over-representation of Māori (indigenous people of New Zealand) as perpetrators & victims of family violence.
- Factors which reshaped Māori society
 - Breakdown of traditional Māori way of life , including social structures & systems of discipline & justice
 - Loss of Te Reo Māori (Māori language), traditional beliefs, values, philosophy and identity
 - Shift of concern of family violence from iwi & hapu (extended family) to whānau (nuclear family) mirroring European attitudes.
 - Urbanisation and social dislocation creating a loss of whānau (family) support
 - Hardship experienced by many Māori associated with low income, and restricted educational and employment opportunities.

(Fanslow, 2002)

- Māori remain determined to reclaim cultural traditions for their whānau (family).



Study Aim

To what extent have **cultural indicators** been developed within New Zealand District Health Board Family Violence Intervention Programmes?

Methods

- Original *Delphi Instrument for Hospital Based Domestic Violence Programs* modified for the New Zealand Context (Agency for Healthcare Research and Quality, 2002)
- New Zealand Partner Abuse & Child Abuse & Neglect Delphi Tools
 - 9 categories in each tool with differential weightings
 - Scored 0-100 with higher scores indicating more development
 - Minimal achievement criteria - 70%
- Evaluation of 21 District Health Board Family Violence Intervention Programmes nation-wide
 - 27 secondary & tertiary acute care hospitals
 - Baseline (2004), 12 month (2006), 30 month(2007), and 48 month (2008) follow up evaluations.
- 30 cultural indicators spread across domains in each tool
 - Cronbrach's Alpha Coefficient ≥ 0.82

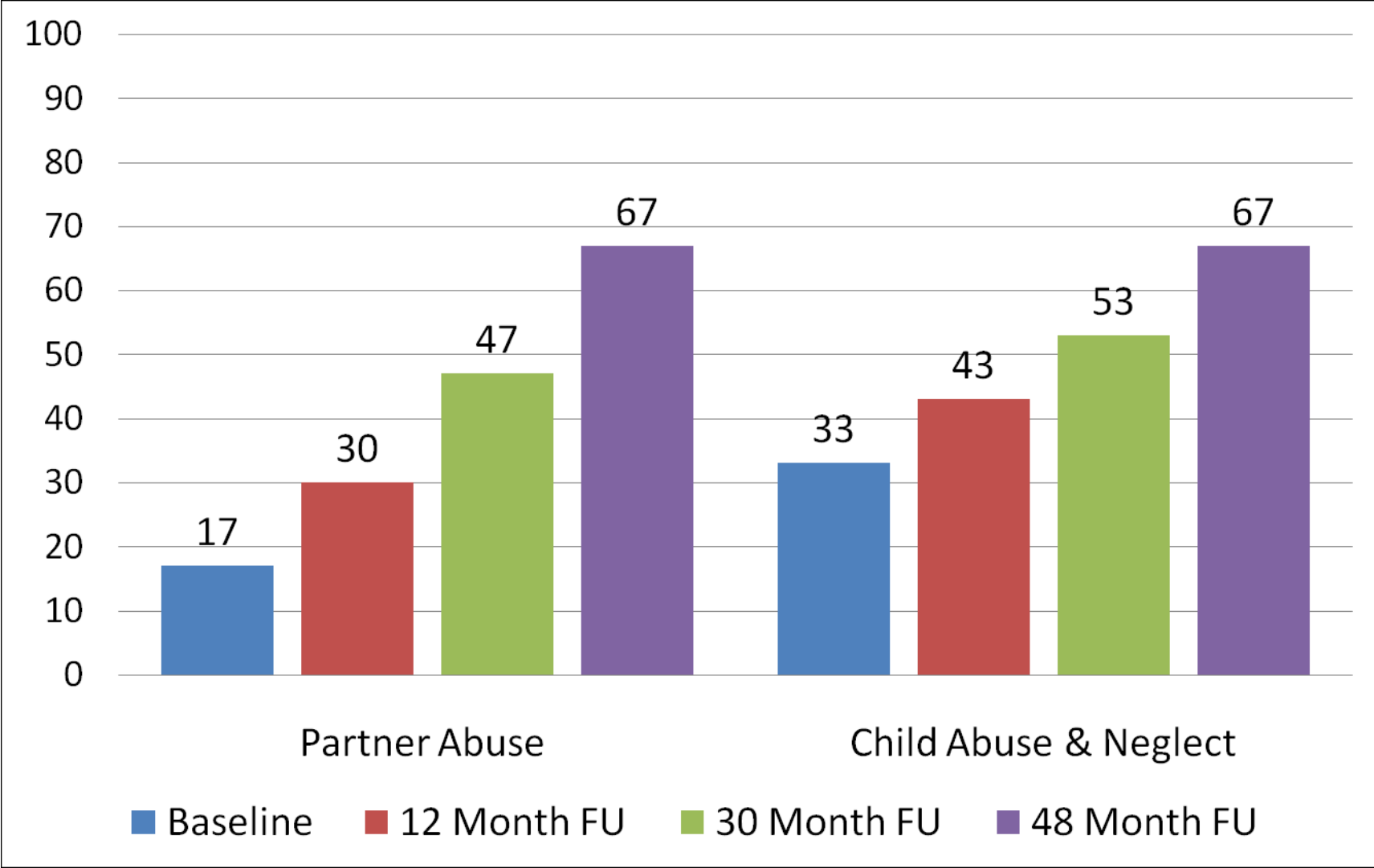


Methods

Domain	Type	Indicator
Policies & Procedures	Māori	Is funding set aside specifically for Māori programmes & initiatives?
Institutional Culture	Māori	Are staff assessed on their knowledge and attitude about Māori & Family Violence?
Evaluation Activities	Māori	Is a quality framework used to evaluate whether services are effective for Māori?
Training of Providers	Non-Māori non-Pākehā	Does the training team include non-Māori non-Pākehā representative(s)?
Institutional Culture	Cultural	Does policy specifically recommend universal screening regardless of the patient's cultural background?

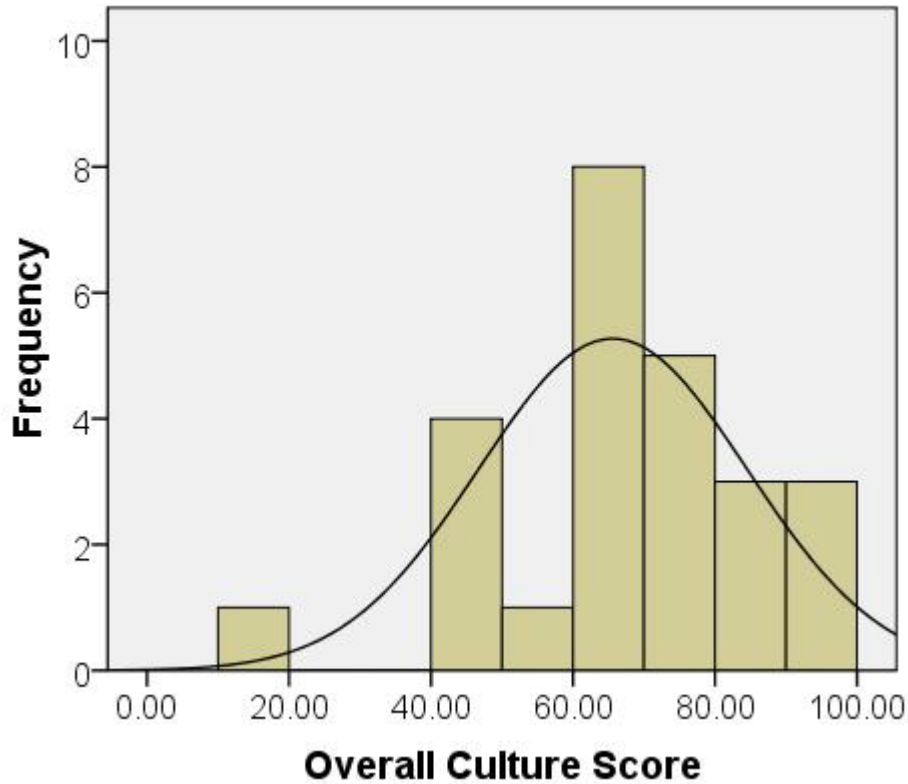
Results

Median Family Violence Intervention Programme Cultural Scores



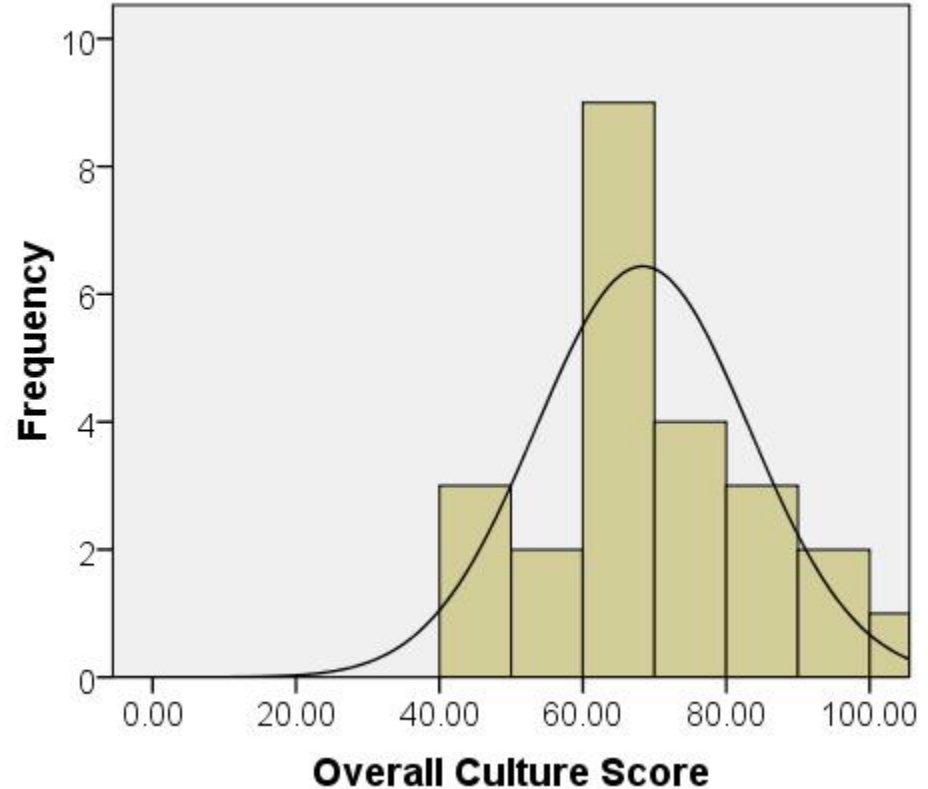
48 Month Overall Culture Scores

Partner Abuse



Median = 67, Mean = 65.6, Std Dev 18.9
N=25

Child Abuse & Neglect

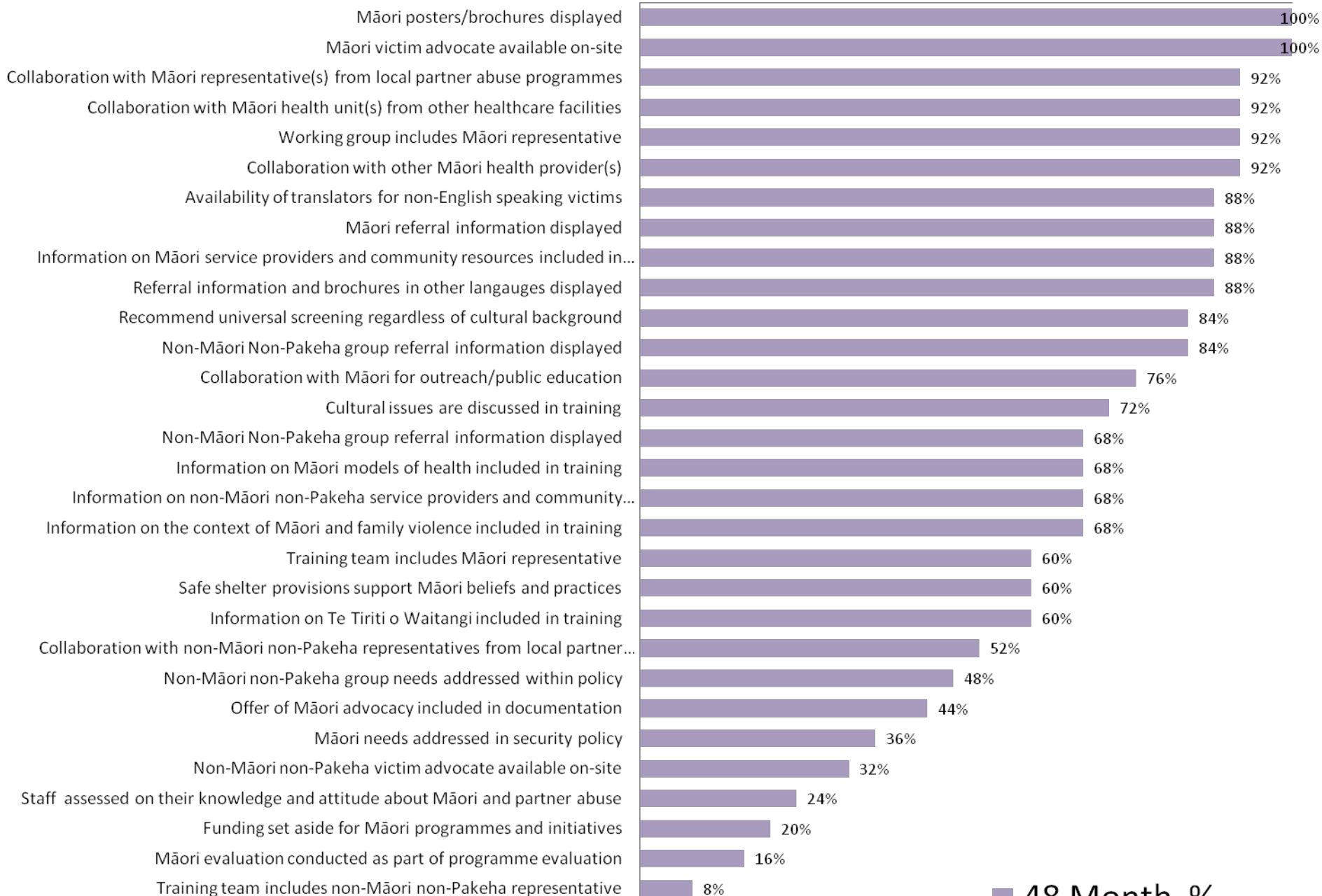


Median = 67, Mean = 68.3, Std Dev 14.8
N=24

Partner Abuse N=25

Number of Hospitals

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%



■ 48 Month %

Child Abuse and Neglect N=24

Number of Hospitals

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%



■ 48 Month %

Results

Consistently under-developed indicators...

Indicator	Partner Abuse (48 Month FU)	Child Abuse & Neglect (48 Month FU)
Does the training team include non-Māori non-Pākehā representative(s)?	8%	17%
Is a quality framework used to evaluate whether services are effective for Māori?	16%	13%
Is funding set aside specifically for Māori programmes & initiatives?	20%	25%
Are staff assessed on their knowledge and attitude about Māori & Family Violence?	24%	21%
	N=25	N=24

Results

Correlation analysis indicated no relationship between the Hospital Culture Score and the proportion of non-Pākehā in a District Health Board population



Conclusions

- District Health Boards are progressing to achieve culturally responsive Family Violence Intervention Programmes.
- Despite this, particular indicators remain undeveloped.
- Requires a focus on developing and maintaining these specific indicators.

Where to from here?

- Continue to support District Health Boards through evaluations of Family Violence Intervention Programmes.
- Develop national tools to support DHBs in implementation.
- Increase application of the Whānau Ora Tool. (Placing Māori at the centre of programme planning, implementation & evaluation. Ministry of Health, 2008)

Waiho i te toipoto, kaua i te toiroa
Let us keep close together, not wide apart.

Claire Gear, BSocSci (Hons)
Research Officer, Interdisciplinary Trauma Research Unit
Auckland University of Technology
New Zealand

claire.gear@aut.ac.nz