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**COMMUNITY PARTICIPATION IN THE
ESTABLISHMENT OF A PRIMARY HEALTH
ORGANISATION IN THE HOROWHENUA: A
LONGITUDINAL CASE STUDY**

**A thesis presented in partial fulfilment of the requirements for the
degree of**

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ABSTRACT

In February 2001 the Minister of Health, in announcing the Primary Health Care Strategy (King, 2001), identified Primary Health Organisations as the vehicles for planning, funding and coordinating primary health care services throughout New Zealand. The requirement that communities be involved in their planning and development was integral to this strategy implementation.

Investigation of the Horowhenua Primary Health Organisation establishment process from the inception of planning to the formation of a Primary Health Organisation provided an excellent opportunity to analyse the determinants of genuine community participation. This case study extended over a nine-month period. Data collected from multiple sources provided the basis for investigating the complex notion of community participation and the attributes which are essential for sustainable community engagement.

The Horowhenua Primary Health Organisation Steering Committee comprised community representatives, iwi and local health professionals. This group along with the two external stakeholder groups - namely the District Health Board Funding Division and the District Health Board Primary Health Care Reference Group – were central to the analysis.

The events recorded and observations made throughout the planning period formed the basis of identifying essential determinants of community participation. These included knowledge of the community and its unique “ways of doing”, the dynamic interdependencies both within the Horowhenua community and with stakeholders external to the Horowhenua, changing power relationships, managing material resourcing and accessibility to essential information. These all influenced how this rural community engaged in Primary Health Organisation planning.

One common theme which emerges in the literature is the synergy between community participation and community development. A community development approach is a commonly agreed way of engaging communities in health service

planning which is genuine, inclusive, self-reliant, and self-determining. This research demonstrated that the New Zealand context, where implementation of the primary health care strategy must be nationally consistent and comply with prescriptive, central government-determined criteria - as well as involving communities in a meaningful way - requires an alternative approach. The thesis presents a way of addressing power discrepancies, promoting interdependencies between stakeholders and achieving inclusiveness in all decision-making where “expert” stakeholders and community bring to the partnership a set of attributes and knowledge which collectively informs the entire planning process.

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GLOSSARY AND ABBREVIATIONS

Care Plus	Service which targets high use consumers with significant chronic illnesses
HealthPac	Section of Ministry of Health whose responsibility includes processing contract payments
Iwi	Tribe
Kaumātua	Elder
Kuia	Old woman, grandmother
Māori	Indigenous people of New Zealand
Marae	Traditional Māori gathering place
Whānau	Māori customary extended family

AHB	Area Health Board
CBF	Capitation Based Funding
CHE	Crown Health Enterprise
CIC	Capitation Information Cleansing
CPHAC	Community & Public Health Advisory Committee
CSC	Community Services Card
DHB	District Health Board
GP	General Practitioner
HFA	Health Funding Authority
HUHC	High User Health Card
IPA	Independent Practitioners Association
LMG	Local Management Group
MIPA	Manawatu Independent Practitioners Association
NHI	National Health Index
PHC	Primary Health Care
PHO	Primary Health Organisation
RHA	Regional Health Authority
SACHSO	Special Advisory Committee on Health Services Organisation
SDG	Service Development Group
SIA	Services to Improve Access

