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# **‘Lady, is this civilisation?’**

## **A case study of community participation in a health development programme in Aotearoa New Zealand**

A thesis presented in fulfilment of the requirements for the degree of  
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in  
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## **Abstract**

Community participation is a key feature of major global health declarations and a fundamental principle of health strategies in Aotearoa New Zealand. However, the frequency with which it is espoused belies the complexities associated with its practical application. Engaging communities in primary health care programmes designed to improve their health has been identified as a major challenge.

This study's objective was to explore community members' perspectives of participation within a health development programme. The programme chosen aimed to increase the fruit and vegetable intake of targeted population groups, including Māori, Pacific peoples, and low income earners. A qualitative instrumental case study approach was adopted to examine the programme and investigate what influenced, constrained, and sustained community participation. Data collection included fieldwork over an eighteen-month period. Two programme projects were selected as the study foci: a community-led project involving distributions of thousands of free heritage variety plants; and, instigated by health services, a project establishing community gardens. These projects provided markedly different pictures of participation occurring within the same programme. The plant distributions had widespread appeal, while the community garden faltered.

Community participation fitted within a description of 'focused social action'. Participation was motivated by needs, values, and interests. While some were personal and family based, the programme also became an imagined vehicle for addressing wider health, social justice, and environmental sustainability goals. Ongoing challenges related to defining targeted communities and groups, varying degrees and types of participation, and different perspectives of participation, especially as health sector staff worked from an equity mandate and community members spoke of equality.

Programme groups established as mechanisms to foster community participation had contradictory effects, engaging some as advisors, while failing to reach communities targeted for the programme. The complexities of health sector bureaucracy both enabled and constrained the programme and community participation.

This thesis provides an in-depth examination of the complexities of community participation in action, the contradictory effects of contexts enveloping programmes, and the resolve of community members. It increases our understandings of how community members perceive health programmes and community participation, which are critical factors in improving population health.

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## **List of Abbreviations**

CEO	Chief Executive Officer
DHB	District Health Board
GABTR	The Grab A Bite That's Right programme
HEHA	Healthy Eating Healthy Action (strategy / programmes)
MDGs	Millennium Development Goals
MOH	Ministry of Health
NZDep	New Zealand Index of Deprivation
NZTCA	New Zealand Tree Crops Association (Central Districts Branch)
NGO	Non-governmental organisation
PHO	Primary Health Organisation
WDHB	Whanganui District Health Board
WRPHO	Whanganui Regional Primary Health Organisation
WDR	World Development Report
WHO	World Health Organisation