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# The engagement phase of Wrap-around Systems of Care

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## **Abstract**

This is a brief introduction to the Engagement Phase of the Wraparound Systems of Care kaupapa and its connection to Te Tiriti o Waitangi principles which underpin the work of the Intensive Clinical Support Service in the Child & Adolescent Team at Waitemata District Health Board.

## **Mihi**

*Ko Kohukohunui te Maunga*

*Ko Wairoa te Awa*

*Ko Maraetai te Moana*

*Ko Tainui te Waka*

*Ko Ngāi Tai te Iwi*

*Ko Umupuia te Marae*

*Ko Ngeungue te whare tupuna*

*Ko Tara Te Irirangi te ariki ki runga*

*Ko Raukohekohe te whare kai*

*Ko St Marys te whare karakia*

*Ko Mac the knife taku matua*

*Ko Anne taku mama.*

*Ko Yvonne taku wahine*

*Ko Michael rātou ko Katrina, ko Holly āku tamariki*

*Ko Michael James rātou ko Olivia, ko Phoenix Rose, ko Lily-Belle Belle āku mokopuna.*

*Ko Tamaki Makaurau te papakainga*

## **Introduction**

My name is Tauke Kirkwood and I am from Tamaki Makaurau. I practise clinical social work – family therapy – counselling skills and implement facilitation skills to manage the ‘Wraparound Systems Of Care’ kaupapa that we off whānau, me rangatahi, i me mokopuna in the Intensive Clinical Support Service (ICSS) a Specialist Child & Adolescent Team based at the North Shore Hospital, Waitematā District Health Board.

ICSS is a specialist Child and Adolescent Mental Health team, made up of Psychiatry, Psychology, Psychotherapy, Nursing and Social Work. We provide a 24/7 support service. We work with children, young people and their family/whānau who are involved with

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Mental Health Services and Child Youth and Family Services (CYFS). A joint referral is made to our service to provide intensive clinical support, which includes access to cultural support and other services.

This article is a brief explanation and description of how I use the Wraparound Systems of Care approach when I work with Māori whānau and the values and processes that underpin the model. I will also look at how this relates to the principles of the Treaty of Waitangi and how we apply these principles to our service before using a case study to highlight the process.

## **The context**

Māori have long regarded the Treaty of Waitangi as important to our position in Aotearoa, but until recent times had not always stressed its relevance outside claims to physical resources such as whenua. The Treaty also speaks to issues such as power, economic prosperity, fair representation, control and autonomy, and has a major significance for health even apart from the guarantee of equity under article three (Durie, 2001).

Tino Rangatiratanga or Māori control of the delivery of services has become part of the new Māori health movement, where Māori health initiatives are claimed by Māori as their own (Durie, 2001.) However, ongoing issues arise in the struggle of these Māori initiatives. It has been my observation that many Māori initiatives are hampered by inadequate funding, health systems restructuring and short-term government policies that have led to the marginalisation of many Māori health initiatives.

This has resulted in narrow roles prescribed by District Health Boards, who normally hold views that are at odds with Māori aspirations and priorities. Sometimes the ownership of an initiative had never been clearly established and conflict followed. There are instances where Māori thought they had control of a service before it was discovered that the institution retained control, not Māori. Despite the problems faced by Māori in the delivery and management of services to Māori, what has not been lost is the awareness that Māori can and should play a decisive role in addressing Māori health needs (Durie, 2001).

## **The Principles**

The Treaty of Waitangi and its principles of partnership, participation and protection provided the basis of reciprocal relationships between Māori and Non-Māori and are used to justify and inform our practice (Durie, 2001). The ICSS uses a service model called Wrap-around Systems of Care which is a four-phased, strengths-based model that recognises and responds to the uniqueness of family / whānau through the use of 10 guiding principles:

1. Family voice and choice
2. Team based
3. Natural supports
4. Collaboration
5. Community based
6. Culturally competent
7. Individualised

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8. Strengths based
  9. Persistence
  10. Outcome based

Many of the Wraparound principles can work in tandem through the principles of the Treaty of Waitangi, with the following as examples:

### **1. The Treaty Principle of Partnership**

#### *Voice and choice*

Planning is grounded intentionally in the whānau values, beliefs and perspectives where the team strive at all times to keep to the plan that reflects whānau values and preferences to empower partnership between team members. Whānau voice and choice are actioned via kōrero at all times during the process. If whānau do not want it, it does not happen unless there are statutory agencies that have a legal role to fulfil, e.g. CYF.

#### *Natural supports*

The team actively seek out and are guided by whānau as to the natural supports in their communities and the people they want to participate in their plan and works. Working to strengthen and assist Whānau, Hapū and Iwi networks. The Wraparound team and the whānau then develop a plan which reflects the roles, responsibilities and activities to get the best outcomes for whānau. An important part of the plan is that sustainability is encouraged within the whānau's community resources; otherwise the plan would be set up to fail.

#### *Community based*

The Wraparound team work together and support strategies that take place in the most inclusive, less restrictive, culturally appropriate and mana-enhancing settings that whānau access, that safely promote the wellbeing of child and whānau in their community. These include Kohanga Reo, Marae-based activities and support, Kapa Haka, sports teams and more.

### **2. The Treaty Principle of Protection**

#### *Cultural competency*

Cultural competence encourages and challenges the team to implement a holistic wellbeing plan with whānau for the best outcomes for the child and whānau. Cultural competency respects and builds on the values, preferences, spiritual beliefs and identity issues that enhance the child's connections to its whānau, hapu and Iwi community connections. Cultural competence should also enhance whānau self-efficacy and invites the team to look at and be guided by the voice and choice of whānau in terms of its cultural need, evident at any particular time during the plan and the implementation of that plan.

### **3. The Treaty Principle of Participation**

#### *Whānau voice and choice*

Family voice and choice builds on the strengths, capabilities and knowledge of whānau who are the experts in their lives and should reflect the family's values and beliefs, while prioritising what whānau want to happen.

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### *Collaboration*

Team members work together sharing responsibilities for delivering, implementing, monitoring and evaluating the plan alongside whānau. This is a joint venture, it is not others doing to whānau, or for whānau, but in genuine partnership and collaboration to enhance their mana and not disempowering them.

### *Persistence*

The team stick together and persist in working towards the common goal of addressing the unmet needs of the child and whānau. Whānau are there, for the long term, and if we too are there for whānau, then we too should persist.

### *Individualised*

The team work alongside whānau in developing a customised set of strategies, supports and services to meet the need evident at that time.

## **The Process**

The Wraparound framework has four distinct phases. The first is the focus of the second part of this paper, namely:

Phase 1: Engagement and team preparation (see below for details).

Phase 2: Development phase is about the development of the team. All members are heard and valued, determine the ground rules, distribute the agenda and document the strengths of all members and the community. We then develop an initial family vision to guide needs, discussion, and identify and prioritise youth and family needs. We brainstorm and select strategies to meet need; review and finalise the initial crisis/safety plan; assign roles and responsibilities; and then schedule the next meeting

Phase 3: Plan, implementation and refinement. The initial plan is implemented. There is continuous review of progress, and the plan is changed as needed. Progress is tracked by a facilitator, discussed and reviewed. Success is evaluated and celebrated and new strategies are determined when necessary. The team hopefully build cohesiveness, communication and trust, and the facilitator addresses team member buy-in and family satisfaction. Updates are documented, logistics are addressed.

Phase 4: Plan completion and transition. The family defines 'good enough', i.e. their satisfaction with the strategies, processes and outcomes, and there is a transition to informal and natural supports. Plans are made for transition out of the formal Wraparound process and the process and plan are modified to reflect 'unwrapping' (i.e. the transition out of the programme). The team celebrate successes and work is documented. The transition portfolio is completed, including important contacts, past records and a follow-up plan for family.

## **Phase 1 – Engagement and team preparation for working with whānau**

The focus of this kōrero is on the Engagement Phase. My approach to engagement is about joining with whānau and seeking common ground. It is about whakawhanaungatanga using self-disclosure, sharing where you come from, your whānau composition and as much as

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you feel comfortable in sharing; the idea is to join whānau. For example, with one whānau I was able to make a series of connections through self-disclosure and seek common ground during the Engagement Phase. At the time of their referral I knew their name but little else, and was able to glean a lot more during the Engagement Phase. I found out that they had lived in the same house before my whānau moved in. They related stories of our whānau and Iwi connections that I was not aware of and I learnt that they have very strong connections to the same Marae. I learnt what was important to that whānau. Engagement is about warming whānau up towards the Wraparound kaupapa in a gentle non-jargon manner. It's about keeping it simple. It's always worth remembering that by the time whānau arrive at our door they have been involved with many agencies and thus can be a little sceptical about this thing called Wraparound.

Engagement is about encouraging whānau to share their strengths and the challenges they have faced. It's about being uplifting and encouraging and enabling whānau to see that there is hope, and that we want to be led by them, and that we hold a commitment to them, that we will do the best we can at all times. The journey is a collective team approach inclusive of wider whānau supports where the strengths of their wider whānau will be encouraged as a support to them and the team. It's about joining whānau in their realities and their world. It's important that we take time to reflect on the struggles, strengths and context that whānau live in. It's about reflecting what life is like for them each and every day, as a way to get closer, and being with them in a fuller way.

During the Engagement Phase, with another whānau I was working with, they spoke about their struggles with their nine-year-old niece who had been raised in a gang. They described the horrific life she had led prior to coming to be with them. They spoke about how they had managed to hold it together whilst waiting for services to respond to the needs of their whānau member. It was clear to see their absolute commitment to this young kōtiro and how resilient they had become since she was in their care. The Engagement Phase was important in determining their cultural and spiritual belief systems. We also learnt from whānau who had been supportive towards them and their whānau members. The whānau spoke to us about how they had to make a stand and disconnect from certain whānau members who had raised her and the terrible things she had been exposed to, but at the same time keep them in sight so that kōtiro was not totally isolated from her extended whānau across the motu. Whānau shared that they had to put their own professional careers aside and what it had cost them, but that they were committed to changing the outcomes for this kōtiro. In essence the Engagement Phase in my practice is about encouraging whānau to share their stories. The kōtiro's language/cultural norms were Māori, her guiding kaupapa and that of her wider whānau's is 'Te Aho Matua', which is the foundation document and driving force for Kura Kaupapa Māori. It lays down the principles by which Kura Kaupapa Māori identify themselves as a unified group committed to a unique schooling system which they regard as being vital to the education of their children. Te Aho Matua provides policy guidelines for parents, teachers and Boards of Trustees in their respective roles and responsibilities (Education Review Office Rūnanga Nui, 2008) and is a blueprint for the expression of Māori values in education that has the potential to transform Māori communities. The authentic participation of whānau in the education of their children was evident. The many principles and practices expressed in Te Aho Matua, such as Manaakitanga and the speaking of Te Reo had been affirmed in their home. From our perspective there was great potential for kura to serve as a foundation for the future development of families, of hapū and of iwi.

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The principles of Te Aho Matua blended with the Principles of the Wraparound Systems of Care approach and helped us to understand the whānau's embedded cultural views.

### **Te Aho Matua**

1. Te Ira Tangata – relates to our humanity, the awareness that it is our duty to bring joy and respect and to love each other.
2. Te Reo – and the acquisition of your own cultural languages and the language of the world as significant in understanding and valuing your own and the cultural of another.
3. Ngā Iwi – people and relationships, people in relationships. The understanding that whānau is precious and the connections between all families Iwi tribes their social worth within their communities.
4. Te Ao – that as humans we share the planet with all creatures to understand that we all play a part in or survival of the planet, including the value of guardianship.
5. Ngā Ahuatanga Ako – The understanding of the principle of Ako. The learner and the teacher are one. We all will learn from many in our lifetime.
6. Te Tino Uaratanga – absolute values. Dreaming our dreams, facilitating visions, bringing wisdom and to make manifest our desires.

The Engagement Phase is about building the groundwork for trust and exploring the vision whānau have for themselves, helping them articulate 'where they want to get to' in the plan development and implementation phases.

In our example this kaupapa has provided the building blocks that have supported kōtiro and her whānau in the development and maintenance of her Māori identity and cultural safety. These are the gems that we can access via the Engagement Phase of Wraparound.

The whānau discussed with us who had been supportive, and who could be part of the initial team. They were able to involve Kura Kaupapa teachers, a Group Special Education and Kuia who had been supporting whānau at kura and at their whare. They were able to involve Kaumatua and Kuia from Mental Health Services and from Kura. They had native speakers for respite care as well as a native speaking Clinical Psychologist and a kaupapa Māori residential facility also used for respite. The benefits that came from the whānau decision that interventions be in Māori if available kept kōtiro aligned to her cultural and spiritual belief systems. Having a clear understanding during the Engagement and Team Development Phase kept us all working together to enhance efficacy with whānau by virtue of keeping and listening to their cultural voice and choice.

One of the gems that I saw come out of keeping to the whānau's voice and choice was during therapy with kōtiro, which was done in Te Reo and with the use of Māori metaphors. The primary whānau caregiver was also included as a co-therapist to encourage whānau enhancement and whānau efficacy. This was a creative way that encouraged 'second order change', so that what was discussed in the therapy room had a better chance of success at home going forward. In other words, by the whānau member also doing the therapy it had a better chance of them being successful and the goals of the therapy being sustainable and long standing.

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## In closing

What I have attempted to do here is give an insight of how I as a Māori practitioner use the Wraparound Systems of Care kaupapa. I have sought to include my culture's values and processes in my social work practice by giving a brief description of what I do and why I do it.

I think it is important that we acknowledge that it is not all plain sailing when we use the Wraparound kaupapa. However, if we keep coming back to why we are all there we will work through most issues pertaining to cultural fidelity, by using the Principles of Wraparound and taking cognisance of the Treaty of Waitangi principles of Partnership, Protection and Participation. It also enables the team to realign back to what needs to be done, which is to meet the unmet needs of whānau.

Noreira

Tēnā koutou, tēnā koutou, tēnā koutou katoa

## References

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