



Western Bay of Plenty  
Primary Health Organisation

TŪNGIA TE URURUA KIA TUPU  
WHAKARITORITO TE TUPU  
O TE HARAKEKE

# Let's Talk Screening

## 23rd July 2025

# Karakia Tīmatanga

Whakataka te hau ki te uru  
Whakataka te hau ki te tonga  
Kia mākinakina ki uta  
Kia mātaratara ki tai  
E hī ake ana te atākura  
He tio, he huka, he hau hū

Tihei Mauri Ora

*Cease the winds from the west  
Cease the winds from the south  
Let the breeze blow over the land  
Let the breeze blow over the ocean  
Let the red-tipped dawn come with a sharpened air  
A touch of frost  
A promise of a glorious day*

# Agenda for the Day

1. Opening Karakia
2. Housekeeping
3. Welcome, Introduction & Objectives of the Training
4. Module 1: Engaging with Tangata Whenua  
(Sénae Mitchell- *WBOP PHO*)
5. Module 2: Engaging with Tagata Pasifika  
(*Sela Tu'uholoaki, Sameli Tongalea - AvaNiu Pasifika*)
6. Lunch Break
7. Module 3: Technical Knowledge  
(*Breast, Bowel & Cervical Screening*)
8. Q&A/Group Discussion
9. Conclusion & Wrap-Up
10. Closing Karakia



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# Introduction & Objectives of the Training

**Tiana Bennett**



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# Aim & Purpose

**Funding:** Te Aka Whai Ora

**Collaboration:** WBOP PHO, Community Organisations, and National Screening Services

- Build skills and confidence for frontline kaimahi/staff
- Support opportunistic, meaningful conversations about cancer screening
- Promote culturally responsive, effective engagement



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# Engaging with Tangata Whenua

## Let's Talk Screening

Sénae Mitchell

# Tiro whānui - overview

- **History**  
Ka mua, Ka muri – Walking backwards into the future.  
He Whakaputanga, Te Tiriti o Waitangi, Impact of Colonisation, Wai 2575
- **Mana Enhancing Kōrero**  
Understand term 'Mana'  
What does Mana enhancing mean and how to engage
- **Indigenous health model**  
Te Whare Tapa Whā - Purpose and Benefits  
Te Whare Tapa Whā Activity
- **Lived experience kōrero**  
Tatai Allen
- **Reflection**  
Purpose and Benefits  
What can I take away from today's kōrero?

# History

- **He Whakaputanga o te Rangatiratanga o Nu Tireni**
  - Declaration of Independence
  - Declared Aotearoa a sovereign nation – sovereignty was never ceded
  - Foundational document and predecessor to Te Tiriti o Waitangi
- **Te Tiriti o Waitangi**
  - Pre-Treaty Context: Britain & Aotearoa
  - Rangatiratanga vs Sovereignty
  - Contra proferentem - two texts, two meanings
  - Failure to Honor Te Tiriti

# Impact of Colonisation

- Systemic colonisation through legislation
- Disconnection from Whenua and Cultural Identity
- Intergenerational Trauma

## Prevalence

**1 in 5** Māori adults have an **anxiety disorder**

**40%** more likely to experience an **anxiety disorder**<sup>2</sup>

Māori adults are

**2.5x** more likely to have **bipolar disorder**<sup>2</sup>

**3.5x** amongst Māori tāne



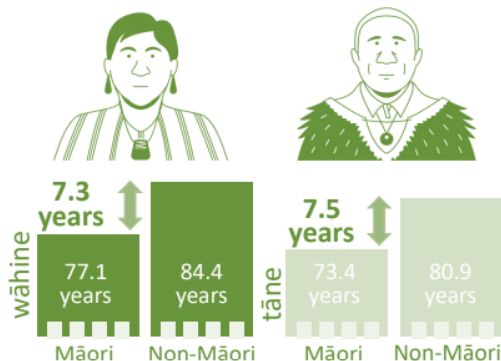
Māori are **20%** more likely to experience **depression**<sup>2</sup>

Māori are

**4.6x** more likely to be **secluded**<sup>3</sup>

## Life Expectancy

**Māori live 7.4 years less on average**



**1 in 3000**

15–24 years old Māori **die by suicide**

This is **double** the rate of non-Māori



## Health Loss & Mortality



Māori are **2x more likely to die from avoidable causes**<sup>3</sup>

**53%** of Māori deaths are potentially **avoidable**

**Māori are more likely to die<sup>2</sup> from these five leading conditions...**

|                           | More likely |  |
|---------------------------|-------------|--|
| Ischaemic heart diseases  | 1.9 x       |  |
| Throat and lung cancer    | 3.1 x       |  |
| Chronic lower respiratory | 3.1 x       |  |
| Diabetes mellitus         | 3.5 x       |  |
| Cerebrovascular diseases  | 1.4 x       |  |

# Waitangi Tribunal (Wai 2575) – Article Principles



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## Partnership

- Working with Māori in the governance, design, delivery and monitoring of health and disability services – *Māori must be co-designers, with the Crown*, of the primary health system for Māori.

## Tino Rangatiratanga

- Providing for *Māori self-determination and mana motuhake* in the design, delivery and monitoring of health and disability services.

## Equity

- Being committed to achieving *equitable* health outcomes for Māori.

## Active Protection

- Acting to the fullest extent practicable to achieve equitable health outcomes for Māori. This includes ensuring that the Crown, its agents, and its Treaty partner under Te Tiriti are *well informed* on the extent, and nature, of both Māori health outcomes and efforts to achieve Māori health equity.

## Options

- Providing for and properly resourcing Kaupapa Māori health and disability services. The Crown is obliged to ensure that all health and disability services are provided in a *culturally appropriate way* that recognises and supports the expression of Hauora Māori models of care.

# Mana-enhancing kōrero

- **Mana:** Ma – clear/pure, Na – belonging to, Inherent influence - Mana whenua, Mana tangata
- **Mana; (noun)** prestige, authority, power, influence, status, *mana* is a supernatural force in a person, place or object. *Mana* gives a person the authority to lead, organise, make decisions that effect others.
- **Mana:** is both inherited through whakapapa and earned through one's actions, achievements, and service to others. It reflects a balance of rights and responsibilities, where personal authority is always connected to the wellbeing of the collective

## The Power in Knowing Who You Are

Everyone has some form of mana. Your mana comes from knowing who you are, where you come from and the connection to your land.

Mana grounds you.

Mana makes you solid.

Mana bridges you to your past, present and future

*Tame Iti*

# Mana-enhancing kōrero

- **Mana-enhancing vs Mana-Diminishing**
- **Your space & My space**
  - Our own lens influences our interactions
  - Our engagement impacts the whole person across all their taha
  - Our role and responsibility to close the gap

## A. My space (experiences/understandings and space in the world)

What I view as:

- Important
- Appropriate
- Acceptable
- Normal
- My role and others' roles
- How things are done

Shaped and affected by:

- Experiences
- Cultural norms
- Information available
- Expectations
- Understandings
- Interactions with others and systems in the world

## Workplace (Our shared space)

5. Implementation | Whakaora – Restoring wholeness

4. Decision making | Whakatau

3. Exploring the issue | Whaikōrero

2. Call/Invitation to come together | Karanga

1. Prepare | Whakatakātū

1. Prepare | Whakatakātū

## B. Your space (experiences/understandings and space in the world)

These affect my whole person:

### Relationships (Whānau)

- Communication styles
- Relationship values
- Expectations of reciprocity/mutuality
- Participation

### Sense of self (Wairua)

- Cultural identity
- Sense of peace or contentment
- Definition of dignity and respect
- Connection to a bigger meaning or purpose

### Physical (Tinana)

- Sense of capabilities
- Ability to improve health
- Access to resources

### Thinking & feeling (Hinengaro)

- Motivations
- Behaviours
- How emotions are expressed
- Thinking and understanding processes

# Mana-enhancing kōrero

## Our Shared Space

- Building Connection and Trust

## Karanga - Invitation to Connect

- Be transparent, every interaction matters

## Whaikōrero – Exploring the Relationship

- Whanaungatanga; connection comes first
- Take time

## Whakatau – Decision Making

- Maintain a mana enhancing approach

## Final reflections

- Connection comes before content
- Acknowledge and affirm differences
- Mindful engagement



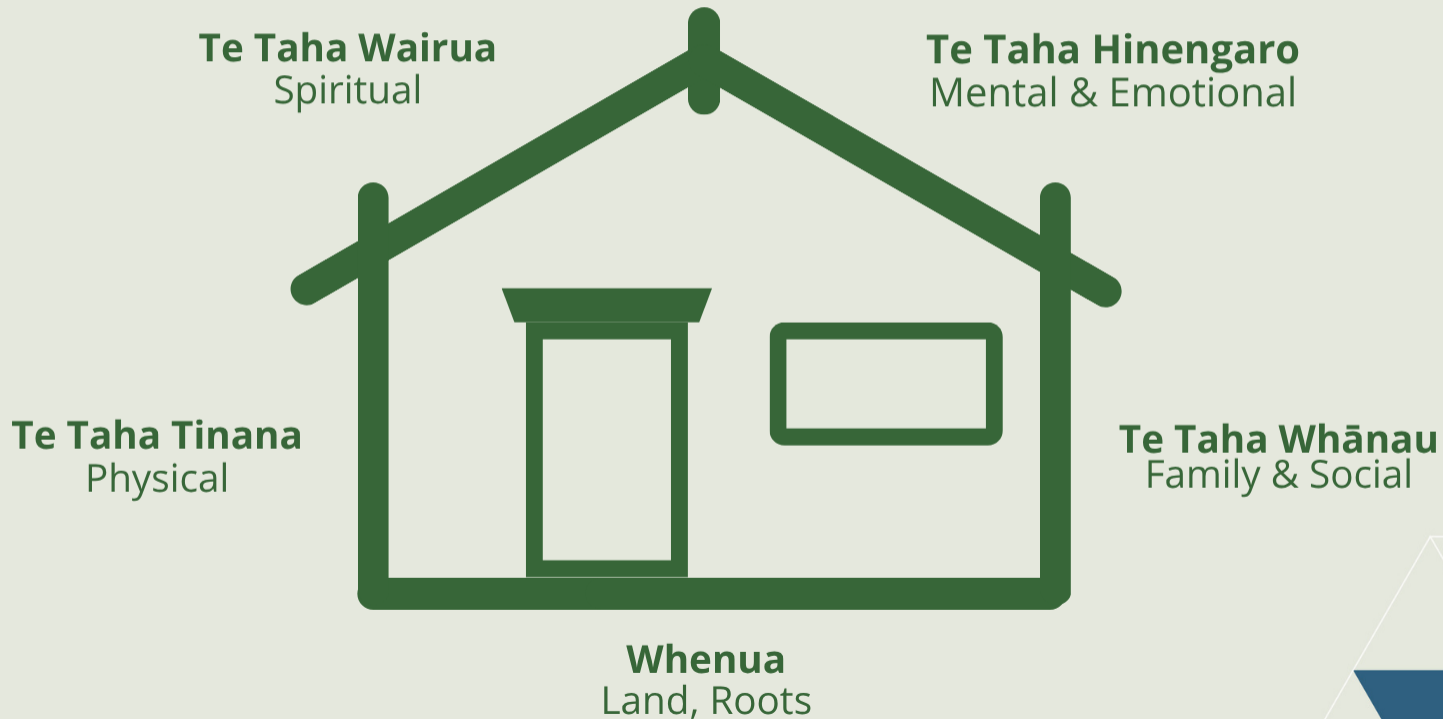


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# Te Whare Tapa Whā

*Developed by Sir Mason Durie*



## Te Taha Wairua - Spiritual

What is important to you and how do you prioritise this?  
What strengthens and/or uplifts your wairua?  
What are your values, and how do you honour them?

## Te Taha Hinengaro - Mental & Emotional

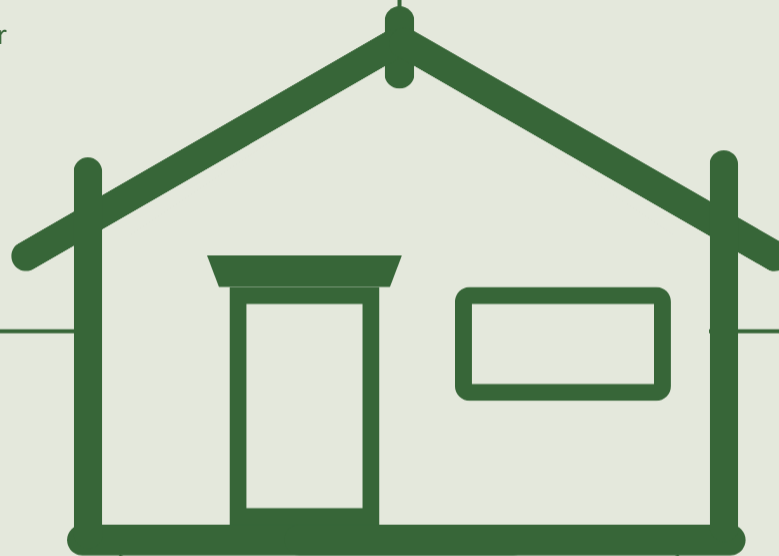
How do you recognise and respond to your thoughts and emotions?  
What daily habits or practices help you care for your hinengaro?  
What tools or supports do you rely on to get you through stressful or challenging times?  
What are some other ways you look after your hinengaro?

## Te Taha Tinana - Physical

How do you care for your physical health and energy?  
Are there cultural practices or rituals you use to support your body?  
What support would help you strengthen your taha tinana?

## Te Taha Whānau - Family & Social

Who supports you, and how do they show up in your life?  
How do you support and show up for others?  
What roles or responsibilities do you carry, and how do they shape your identity and purpose?



Where do you feel most connected or a sense of belonging?  
What does your connection to whānau, whakapapa and/or whenua mean to you?  
What are some ways you might explore or begin to understand your identity, belonging, or purpose?

## Whenua - Land, Roots

A close-up photograph of several long, green, blade-like leaves of a plant, possibly a type of grass or reed. The leaves are arranged diagonally across the frame, with some in sharp focus and others blurred in the background. The lighting is bright, creating highlights and shadows on the surfaces of the leaves. Overlaid on the center of the image is a semi-transparent white rectangular box containing the text "Tatai Allen" in a white, sans-serif font.

Tatai Allen

# Reflection

- The power of reflection in our mahi
- Pause to understand how we engage
- Foster self-awareness and cultural intelligence
- Care that is respectful, equitable and culturally safe
- Reflect on Your Kete – What to add or let go



What's one key insight your taking away today?

What could you do differently or more consciously in your mahi?

What might your kete need more of – or less of – right now?

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# Module 2: Engaging with Tagata Pasifika

**Sameli Tongalea  
Sela Tu'uholoaki**



**AvaNiu Pasifika**



AvaNiu Pasifika

# TUTALA AGA

Let's Talk Screening



AvaNiu Pasifika

## FOR TODAY....

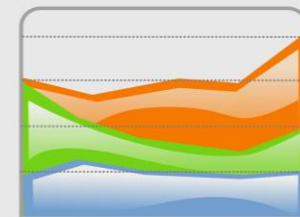
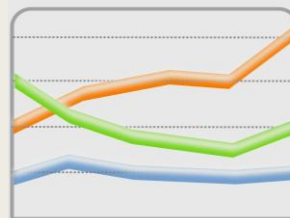
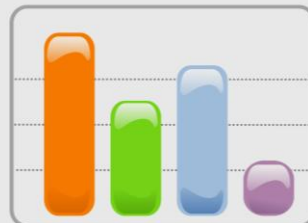
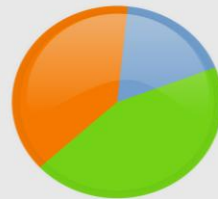
- Know and understand more about Pasifika People & our contribution towards Aotearoa NZ, before the health stats
- Have an increased awareness of cultural context, when engaging with Pasifika women
- Pasifika Cultural Model of Wellbeing
- Receiving & Understanding Health information from a Pasifika lens
- Have at least three things as “take-aways”



AvaNiu Pasifika

## PACIFIC PEOPLES

The data that we all know about....





**AvaNiu Pasifika**

## CONTRIBUTION TO AOTEAROA NZ

WW 1: Over 400 men from Niue, Cook Islands, Tonga, Samoa, Fiji, other smaller islands





AvaNiu Pasifika

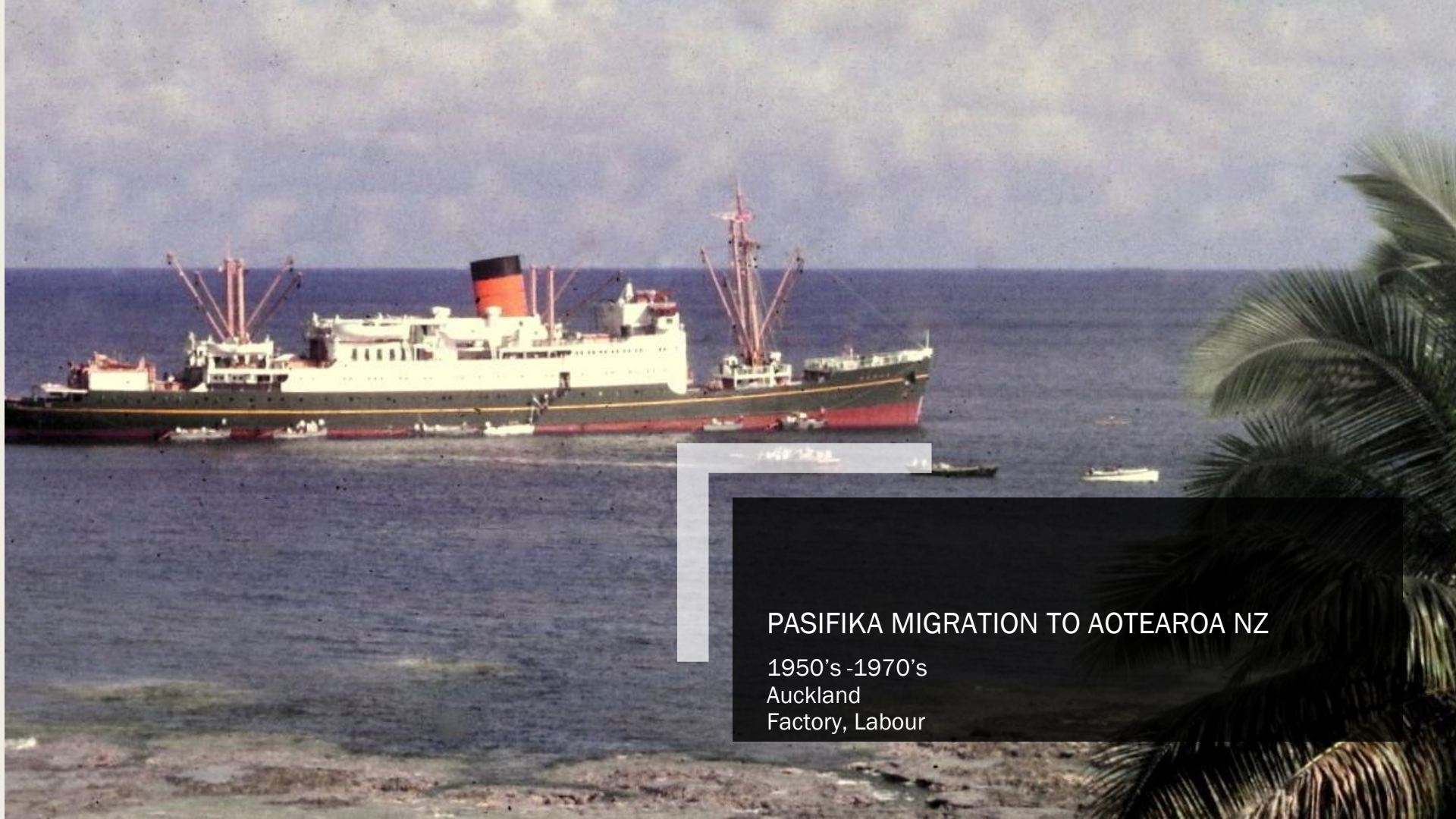


# POST-WW 1&2 - NOW

Some returned home – re-adjusting to island life, living with illnesses like TB,

Some remained in NZ – adjusting to NZ life

Horticulture, Hospitality, Construction



## PASIFIKA MIGRATION TO AOTEAROA NZ

1950's -1970's  
Auckland  
Factory, Labour



# PACIFIC MIGRATION TO AOTEAROA NZ

Whole families left their  
Island homes for better  
opportunities

(Photos: Geoff Head)

# EVENTS THAT IMPACTED THAT MIGRATION

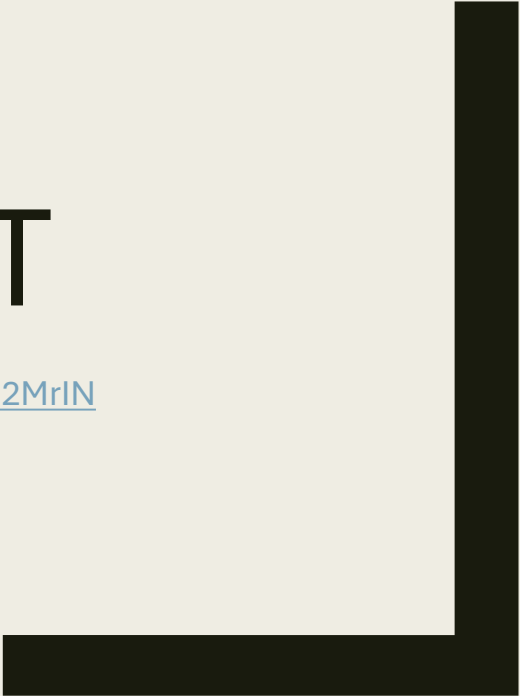
- The Dawn Raids: 1970's ( impact of global oil crisis, Pasifika Labour force no longer needed)
- The Citizenship (Western Samoa) Act 1982

**Both these events split families**



# THAT EVENT

<https://youtu.be/fueGYb822xQ?si=eidVu0iHs9h2MrIN>

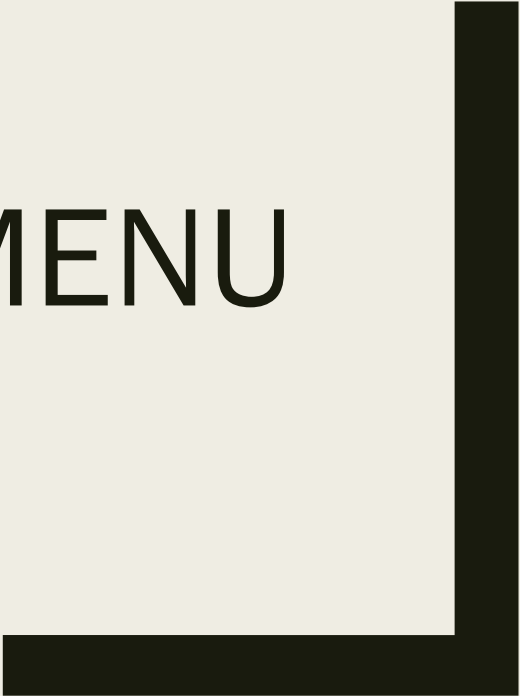


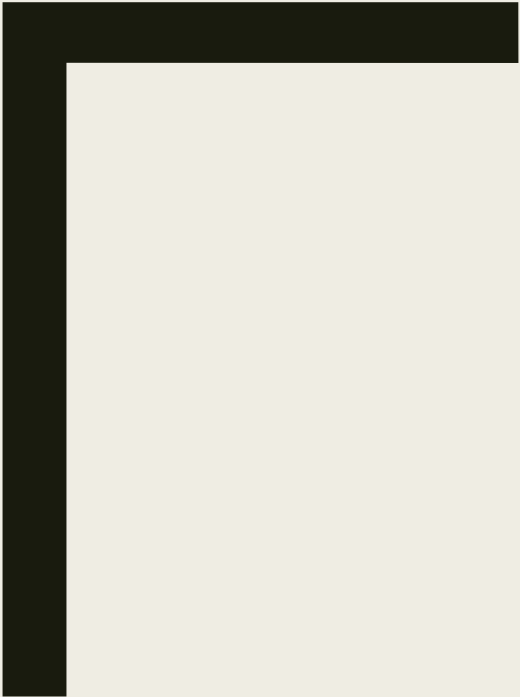


# NEXT ON THE MENU

You will need to stand up!

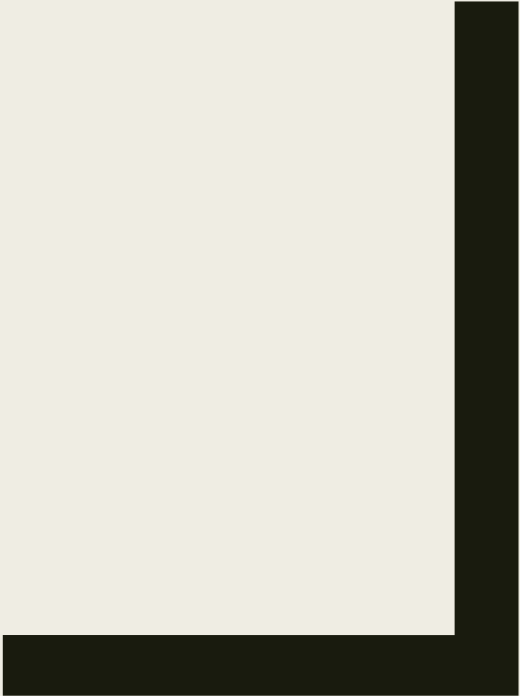
Tu ki luga! Masike

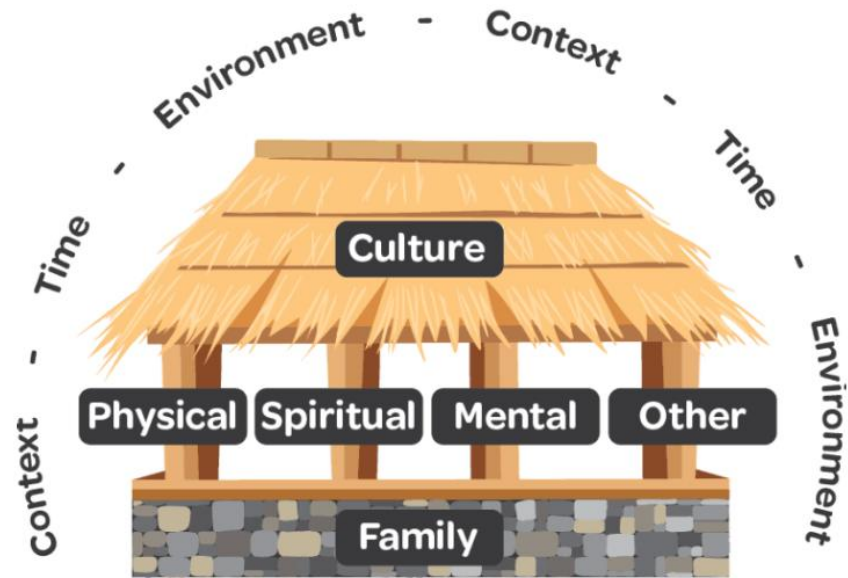




# FONOFALE

Health Model of Care







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## Module 3: Technical Knowledge

**Ehara taku toa I te toa  
takitahi, engari kē he toa  
takitini**

Acknowledging it's a team  
effort, that one's success is  
due to the support and  
contribution of many



# Introducing Cancer Screening

 **Audience:** Skilled Kaimahi/Community Health workforce.

 **Purpose:** Empowering cancer screening conversations in our Māori & Pacific communities.

 **Presenters:**

**Mary Ann Nixon - Breast**

Recruitment & Retention Coordinator  
BreastScreen Midland

**Chrissy Paul - Bowel**

Kaihautu – Te Moana a Toi, Community Engagement  
Hauora a Toi/ Bay of Plenty

**Gemma Pearson - Cervical**

Support to Screening Nurse  
Western Bay Of Plenty Primary Health Organisation

# Why We're – He Tangata, He Tangata!

“What is the most important thing in the world? He tangata, he tangata, he tangata.”

We're here for all our people – our kuia & koro, māmā & pāpā aunties & uncles, sisters & brothers, for the whole whānau.

Early detection of cancer saves lives – but not everyone has the same access.

You, our kaimahi, are the connectors between the health system and our people.



# Why We Have National Screening Programme's

🎯 It's about early detection, equity, and access.

💛 To ensure every person in Aotearoa has a fair chance to be screened.

📊 Collects and protects data.

🔄 Supports safe follow-up and continuity.

📈 Reduces health inequities.



# Why Equity Matters – Aotearoa's Reality

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Māori cancer deaths are 1.7x that of non-Māori.

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Māori wāhine experience a higher incidence of breast & cervical cancers compared to non-Māori.

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Māori are more likely to be diagnosed with breast & bowel cancer at a younger age than non-Māori.

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Lower screening rates due to colonisation, trauma, racism in health services, lack of culturally safe care.

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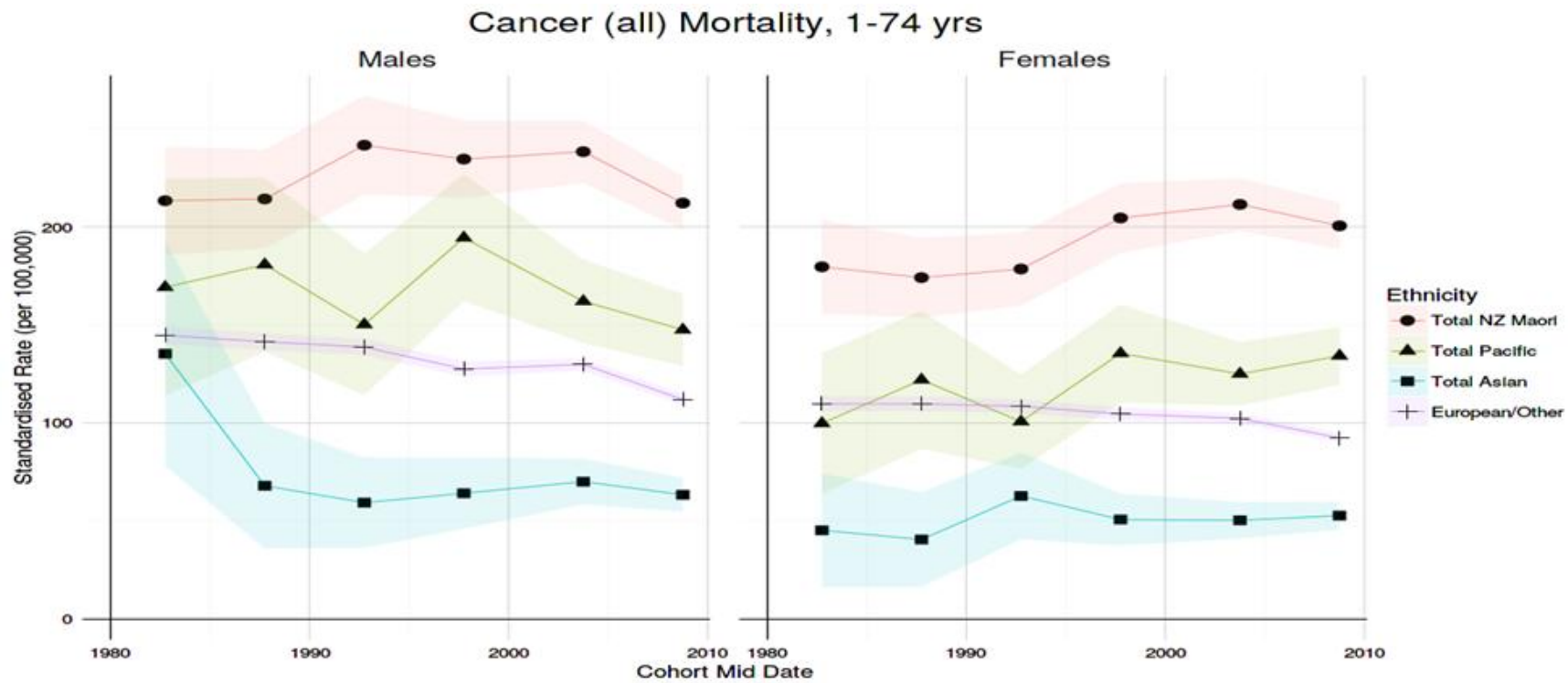
Pacific and Asian communities also face these barriers.

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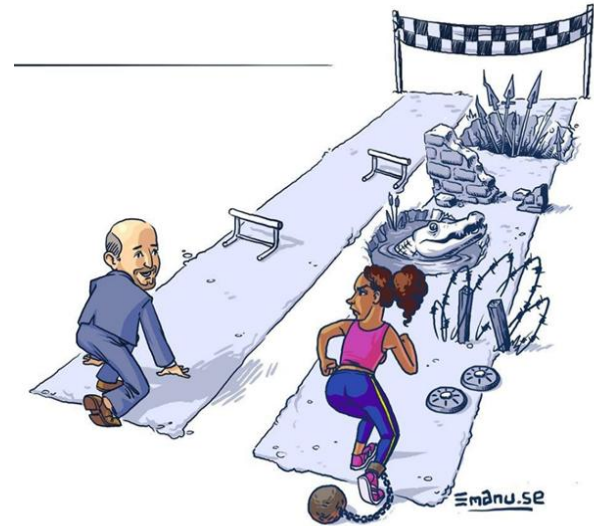
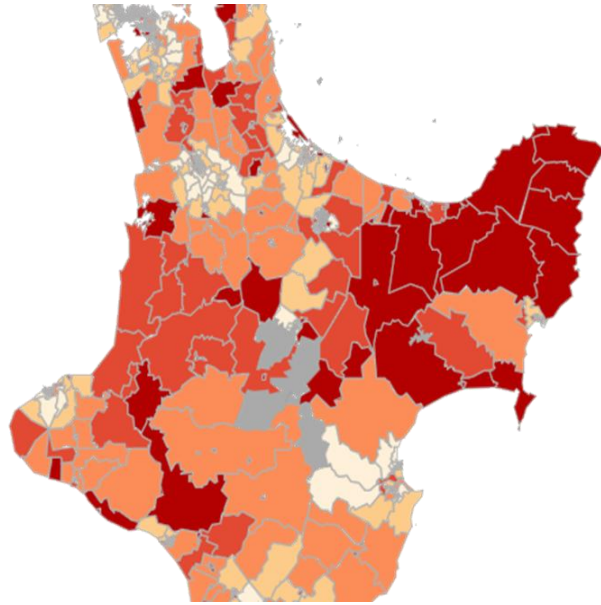


We focus on priority groups because inequity isn't accidental – and neither is fixing it.

# Cancer Mortality



# Cancer Screening – Deprivation and Access

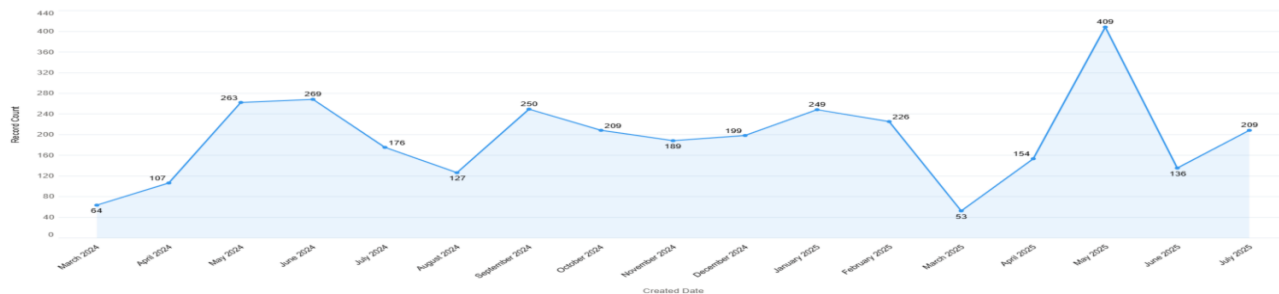


“What’s the matter?  
It’s the same distance!”

Homelessness, poverty, isolation, higher mortality, no support or resources, hunger, victim blaming, appropriate info. Take every opportunity to engage, start the discussion, empower our whanau, target those with less access.

# Recent BOP BOWEL Screening Rates

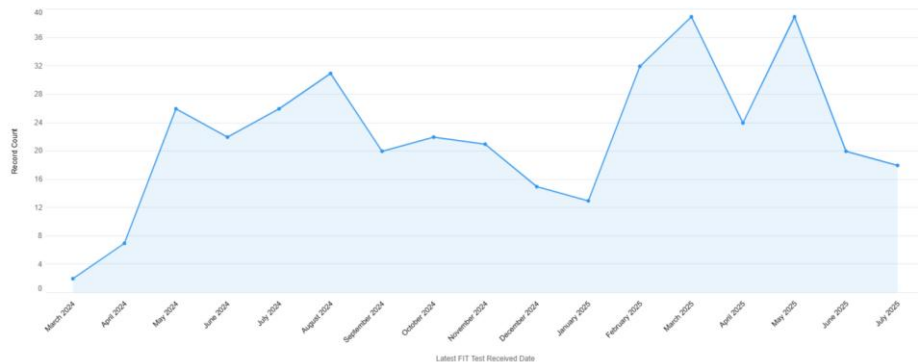
Outreach participants monthly



22/07/2025 3:36 pm - Viewing as Chrissy Paul BOPOR

As of 22/07/2025 3:36 pm

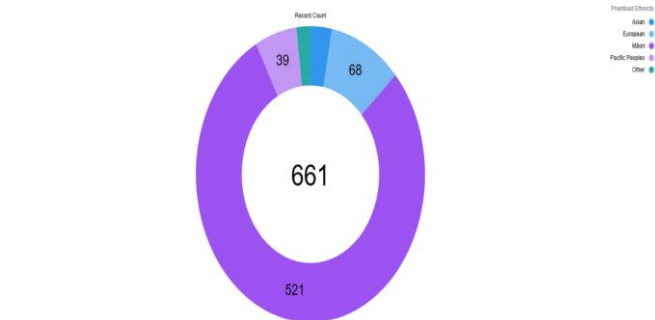
Outreach - returned kits monthly



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As of 22/07/2025 3:36 pm

Outreach Participants by Ethnicity

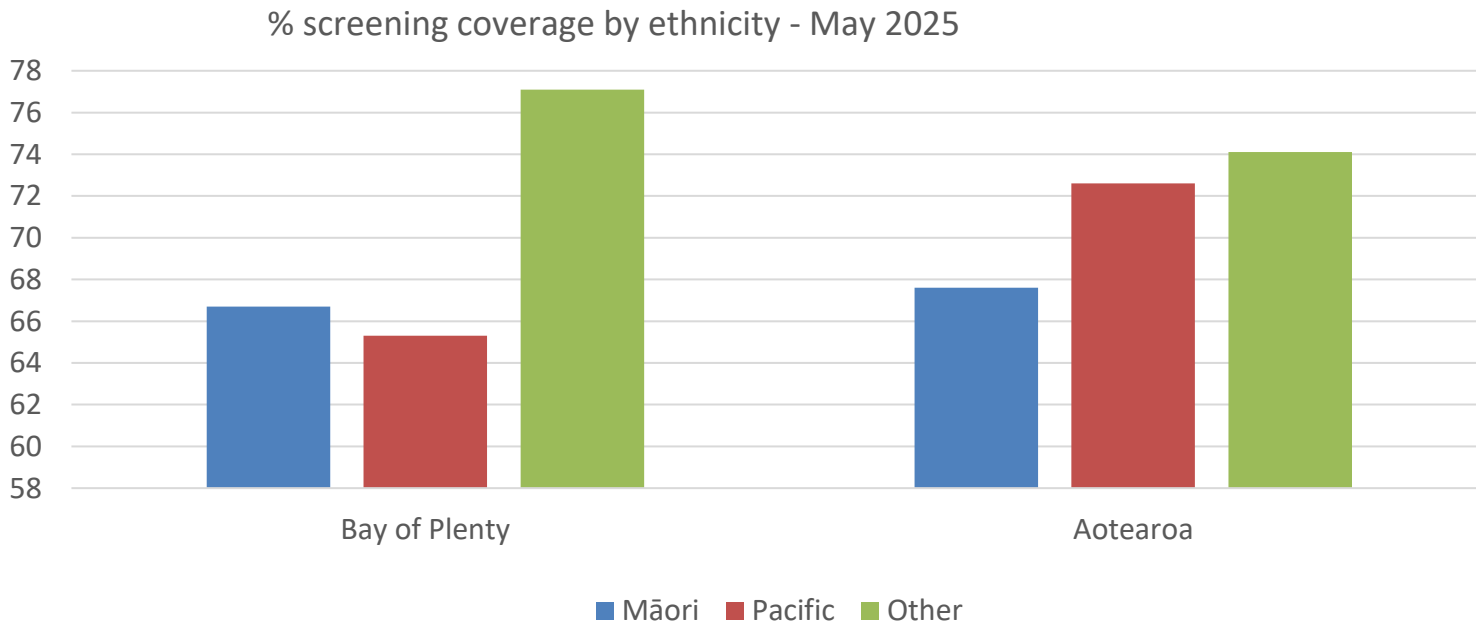


22/07/2025 3:36 pm - Viewing as Chrissy Paul BOPOR

As of 22/07/2025 3:36 pm

# Recent BOP CERVICAL Screening Rates

🎯 The NCSP target is to reach 80% screening coverage for all those eligible.



# Recent BOP BREAST Screening Rates

 National Target: 70%

Bay of Plenty:

|                  | Total  | Māori  | Pacific |
|------------------|--------|--------|---------|
| Eligible         | 41,026 | 8,368  | 563     |
| Screening status | 62.25% | 59.51% | 57.01%  |

BreastScreen Midland (Waikato, Bay of Plenty & Lakes)

|                  | Total   | Māori  | Pacific |
|------------------|---------|--------|---------|
| Eligible         | 124,567 | 26,404 | 2641    |
| Screening status | 63.48%  | 58.27% | 57.25%  |

# BreastScreen MIDLAND

## Breast Care & Screening

**The programme  
and how we can help ourselves**





**Mary Ann Nixon**  
**Recruitment & Retention Coordinator**  
**BreastScreen Midland**

**A special thank you & acknowledgement to**  
**Lisette Ingram, Clinical Nurse Specialist,**  
**Te Whatu Ora Waikato**

# What is the Breast Screening Programme?



Mammograms can find what you can't feel

A publicly funded national breast screening programme in Aotearoa New Zealand.

It provides free mammograms (x-rays of the breast) for eligible wahine every two years

The aim of the programme is to reduce the number of wahine who die from breast cancer by finding it early and treated before it grows or spreads.

# Eligibility

The programme is available for women who:

- Are aged 45 to 69 years. To be extended to 74 years in October 2025
- Have no symptoms of breast cancer
- Have not had a mammogram in the last 12 months
- Are not pregnant or breastfeeding
- Are eligible for public health services in Aotearoa/New Zealand
- Have been free of breast cancer for 5 years

# Joining the programme

- When you turn 45 and for subsequent two yearly mammograms, you will be sent an invitation to screen via email, text or letter, depending on the contact details we have.
- Invitations will include a personalised link for managing your own enrolment and booking online.
- You can enrol online via [TimetoBreastScreen.nz](https://TimetoBreastScreen.nz)
- Feel free to call 0800 270 200 if you prefer

# Why is this important?

- Breast Cancer is the most common cancer among women in Aotearoa New Zealand
- 1 in 9 women will be diagnosed during their lifetime – 70-75% of those are 50 years and older
- 3,500+ women diagnosed each year and 650+ will die each year
- Most will have no family history
- Men make up 1% of NZ breast cancer cancers (approximately 25 each year)

Don't put it off! It could save your life

# About Mammograms

Screening mammograms do not prevent breast cancer but can reduce the risk of dying from breast by approximately 33%

**Early detection is your best protection**

Screening does not provide an absolute guarantee but does detect 8-9 out of 10 breast cancers.

**So..be breast aware! Know your normal**

The radiation dose is very low – benefits outweigh possible risks

# Anxious about having a mammogram?

- Take a support person
- Book with a friend – awhi one another
- Talk to the Medical Imaging Technician (Mammographer)
- Worried about discomfort?
- Pre-menopausal?
- You have the right to ask the MIT to stop the mammogram at any time

# Risks we can't change

We don't know exactly what causes breast cancer, but we do know that certain risk factors can increase your chance of getting it



# Risks we can try to change



**Exercise regularly.  
Choose something you  
enjoy – you're more likely  
to maintain a routine.  
Include strength and  
balance.**



**Maintain a healthy diet and body weight**

**For breast cancer risk, maintaining a healthy body weight post menopause is very important**

**Other risk factors we can change:**

- **Alcohol - avoid or reduce consumption**
- **Smoking – don't!**



# Common misunderstandings cleared up



Deodorant/antiperspirants,  
silicone implants and underwire  
bras do not cause breast cancer

# Breast Awareness



**It's as easy as TLC –  
touch, look, check**

# **There's no right way!**

**The aim is to know  
what is normal for you,  
and become familiar  
with your own body**

**Before you  
start, have a  
look in the  
mirror**



**You are looking for changes  
that are new to you. Have  
your breasts changed  
shape?**



**PAUSE.**

**Time to leave  
if needed.**

# Nipple inversion

Have a look at your nipples – are they roughly the same? Are either of them pulling in or fully inverted?



# Are there any dimples or puckering of the skin?

Subtle dimpling or puckering can be a sign of changes under the skin

These can become a lot easier to see if you raise your arms up high to look at your breasts as they lift up and flatten out



# Peau d'orange

Orange peel  
texture of the  
skin



# Skin scaling or rashes

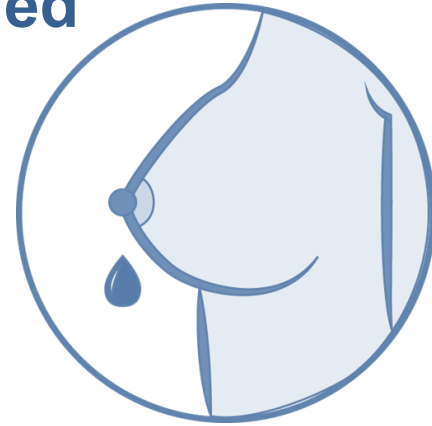
Redness or  
flaking skin  
on the breast  
or nipple



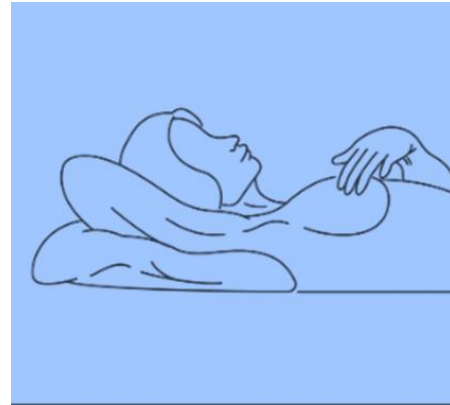
# Nipple discharge other than breast milk

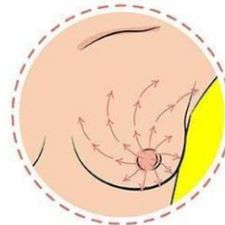
Any clear or blood stained fluid should be checked

Any discharge that happens without squeezing or is only coming from a single duct should be assessed



**You can choose  
to examine  
yourself  
standing up or  
lying down**

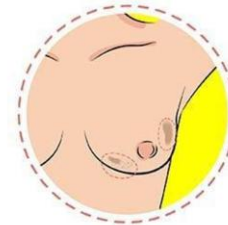




WEDGES



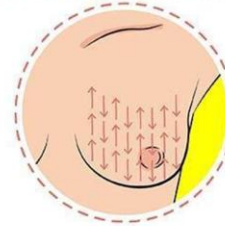
EXAMINE BREASTS IN THE MIRROR  
FOR LUMPS OR SKIN DIMPLING...



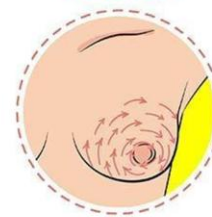
...CHANGE IN SKIN COLOR  
OR TEXTURE...



EXAMINE BREAST AND ARMPIT  
WITH RAISED ARM



UP AND DOWN



CIRCLES

# Noticed changes?

Book an appointment with your GP to be assessed by your doctor

If the GP is unable to rule out a concern about the changes, he/she will refer you to a breast care/diagnostic centre for an assessment appointment

You will be triaged and have a mammogram and/or ultrasound and see a doctor at the breast care/diagnostic centre for assessment

# Goals

- Enrol in the breast screening programme when I turn 45 and screen every two years
- Do I know how my breasts normally feel and look?
- Do I check them monthly and know the signs and symptoms?
- Do I know about my family history of cancer, and do my children/grandchildren know?
- I will get any unusual breast changes checked by my doctor
- I know the risk factors I can influence

# Questions / He Pātai



***“Ko au te Puna”  
“Ko te Puna ko au”  
“I am the Spring and the Spring is  
me”***

***Te Puna  
Ora***

***Te  
Puna  
Aroha***

***Te Puna  
Poipoi***



***Te  
Puna  
Awhina***

***Te Puna  
Rangimari  
e***

***Te Puna  
Roimata***

***He Wahine, He Taonga!!  
Mauriora!***



# TE TĀTARI WHEKAU BOWEL SCREENING



**Lumana'i.**  
They were before, we are  
now, theirs is the future.  
- AvaNiu Pasifika

When your home test kit arrives  
in the post, don't delay - it could  
save your life!

The National Bowel Screening  
Programme is providing  
free screening to people  
aged 60 to 74 years who  
are eligible for publicly  
funded health care.

**Time to  
screen** National  
Bowel  
Screening  
Programme

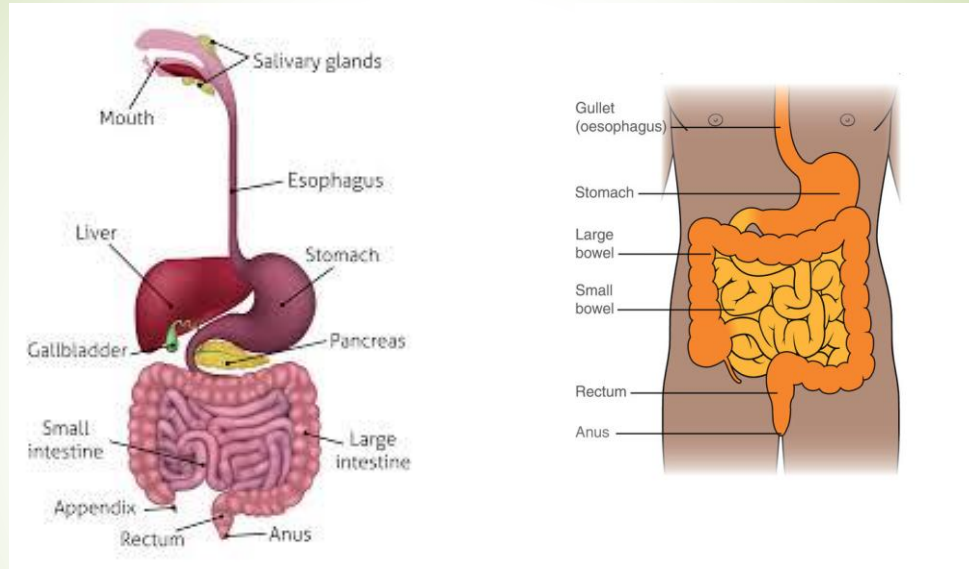
Chrissy Paul  
Kaihautu – Te Moana a Toi Community Engagement |  
Hauora a Toi Bay of Plenty



National  
Bowel  
Screening  
Programme



# What is your bowel?



The bowel is part of our food digestive system. It is divided into the small bowel and the large bowel. It connects the stomach to the anus (bum). It may also be known as your intestines, colon, guts, tero tero or whekau. **Images always help whanau to locate our internal organs.**

# Bowel screening why, who and how

- New Zealand has one of the highest rates of bowel cancer in the world. The second highest cause of cancer death in Aotearoa.
- More than 3300 people are diagnosed every year and more than 1,200 die.
- **For kaumatua  
60/58- to 74-year-olds**

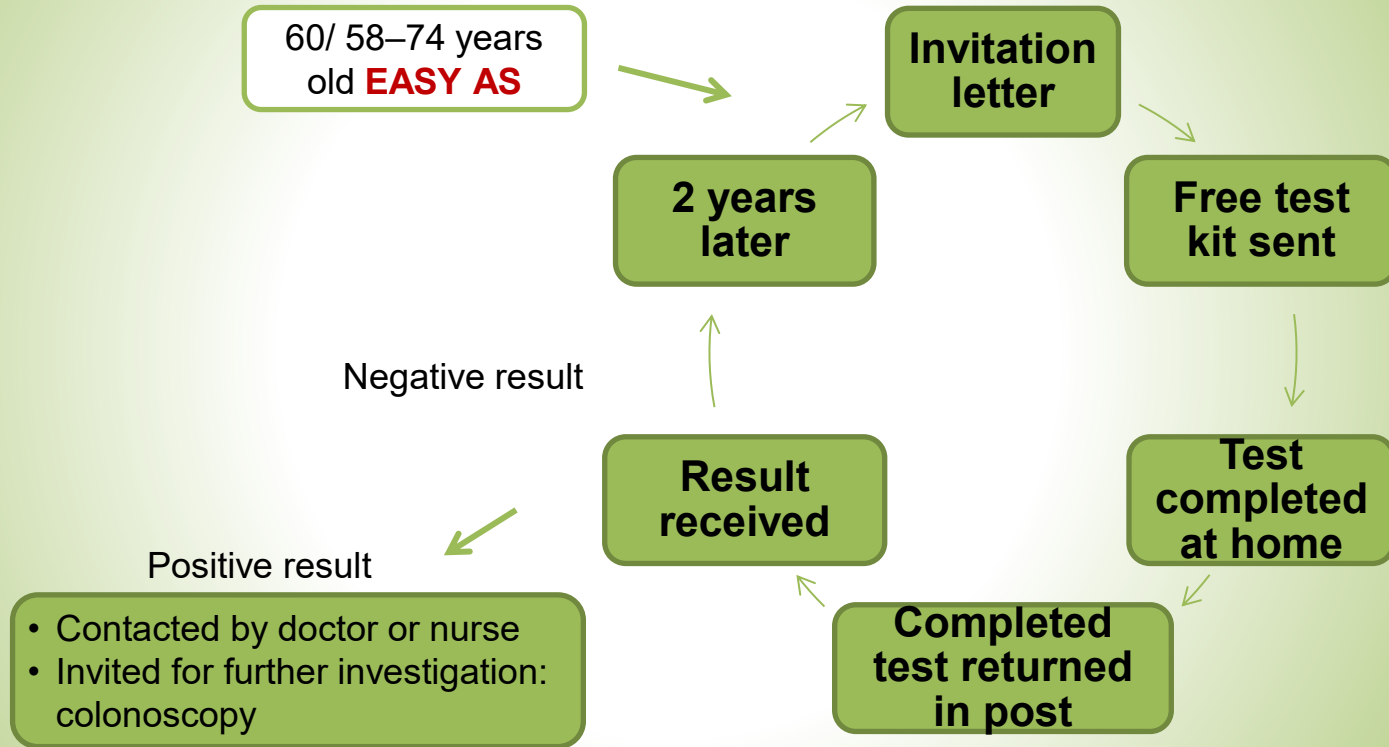


# Bowel screening why, who and how



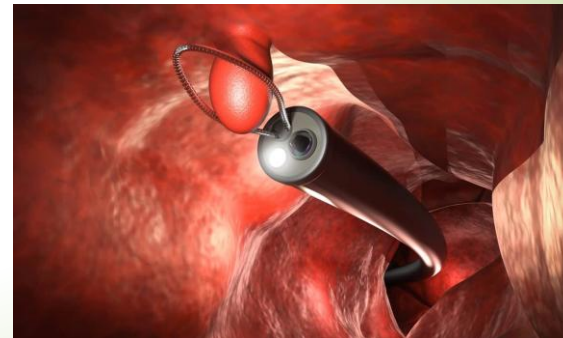
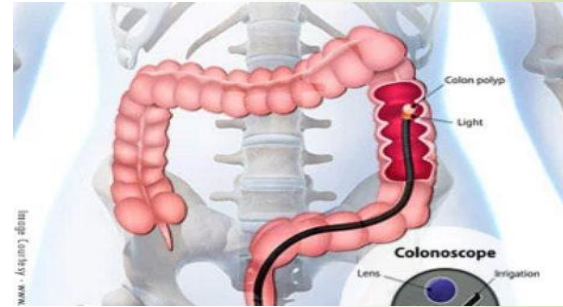
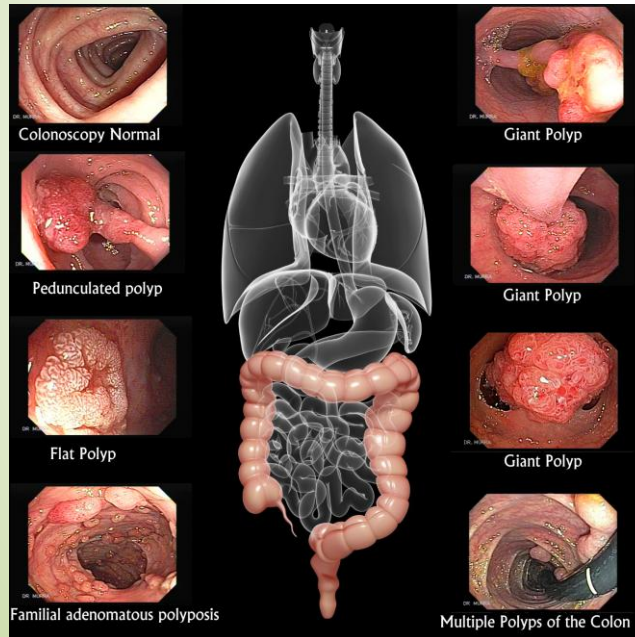
<https://youtu.be/GGkoybpAy20>

# Participant pathway



# What is a Colonoscopy?

Your bowel is cleaned out by drinking special drinks and food. Then a special camera passes along your bowel looking for pre cancer polyps or cancer. Polyps are removed at the same time. **Pictures really inform**



## Screening outcomes

- For every **1000 people** who complete a bowel screening test, **about 50 will be a positive test.** Of those, **about 35 will have polyps & on average 3 or 4 can have bowel cancer.**
- **Reassure whanau a POSITIVE test only means a further test is needed. Many kaumatua are afraid of what might be found.**
- **This can help kaumatua not to worry and provides a picture of screening outcomes.**

# Signs and symptoms



Change in  
Bowel Habits



Blood  
in Stool



Unexplained  
Weight Loss



Persistent Abdominal  
Discomfort

**It's important to get checked by your doctor, don't wait!**

Always encourage and support kaumatua to attend GP

**0800 924 432**

# Common concerns & korero

💩 **Its dirty** - **taking your sample is clean** and only needs a very small **bit of tiko/poop** on the stick.

💩 **Posting the tiko/poop** - the container is very strong in a plastic bag and posted in a cardboard prepaid envelope.

💩 I'm **worried, scared** and don't care.

💩 I don't trust the health system

💩 **I did the test because I love life!!**

**Information is power, demystify  
bowel screening , it works.**



**Mauri ora ki a tatou katoa,  
Let the life force be with us all.**



National  
Bowel  
Screening  
Programme



# Cervical Screening

'Me tiaki i te whare tangata'  
...the house of life must be protected.

**Gemma Pearson**

Ngāti Kahungunu ki Wairarapa

Support to Screening Nurse

Western Bay Of Plenty Primary Health  
Organisation



National  
Cervical  
Screening  
Programme

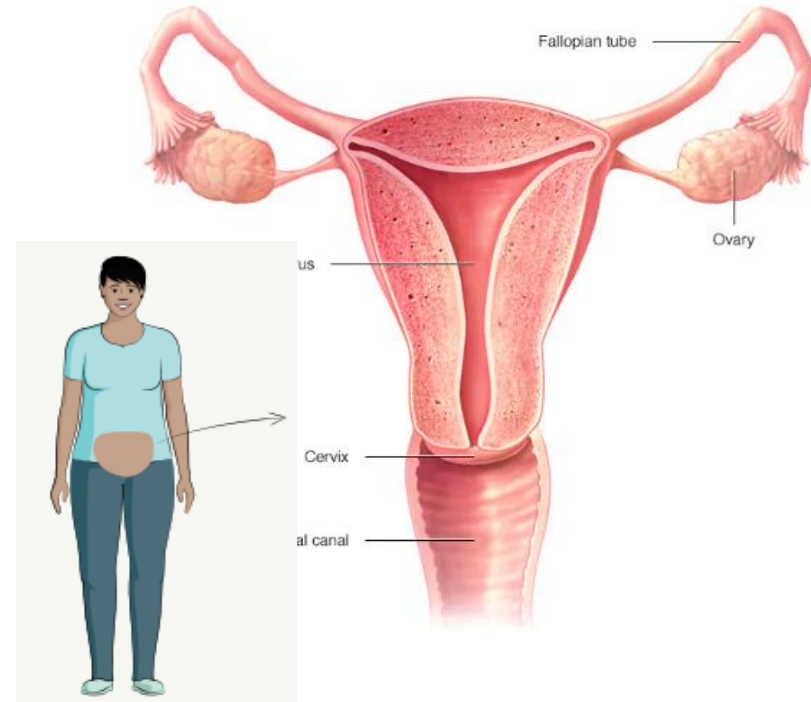
# What Is Cervical Cancer?

♀ Cancer of the cervix.

🦠 Usually caused by a virus called HPV.

🚫 Often there are no signs of early-stage cervical cancer.

👩 It is one of the most preventable cancers.



# Signs & Symptoms of Cervical Cancer



vaginal bleeding between periods or after menopause



vaginal discharge that's not normal for you



unexplained weight loss



vaginal bleeding/pain during/after intercourse



pain or swelling in your legs



lower back pain



feeling tired and weak (fatigue)

 Having these symptoms does not mean you have cervical cancer, but it is important to have any changes checked by your doctor.

 Often there are no signs of early-stage cervical cancer, which is why regular cervical screening tests are important.

# What Is Cervical Screening?

🎯 It's a simple test to check for HPV, the virus that can cause cervical cancer.

👩 Self-swab

👉 Clinician-assisted swab

💡 It's quicker, easier, and less invasive than the old smear test!

👋 Cervical screening is not about treating cancer—it's about **preventing it**. With HPV vaccination and routine screening checks, we can eliminate cervical cancer.



# Understanding HPV

## – The Virus Behind Cervical Cancer

---

 HPV (Human Papillomavirus) is a common virus passed through intimate skin-to-skin contact.

---

 Most people will have it at some point – usually harmless and goes away on its own.

---

 Some types can lead to cervical cancer if not detected and treated early.

---

 That's why regular screening is so important – to catch it early, before it causes problems.

## Cervical screening

# How to do the self-test



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Screening  
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ask your healthcare provider  
for help.

<https://youtu.be/fMSbSO2fjhg>

# How the Screening Pathway Works



Ages 25–69, every 5 years



Anyone with a cervix



Free for Priority Group Women



1. Get invited (via text/letter/phonecall)

2. Choose self-test or clinical

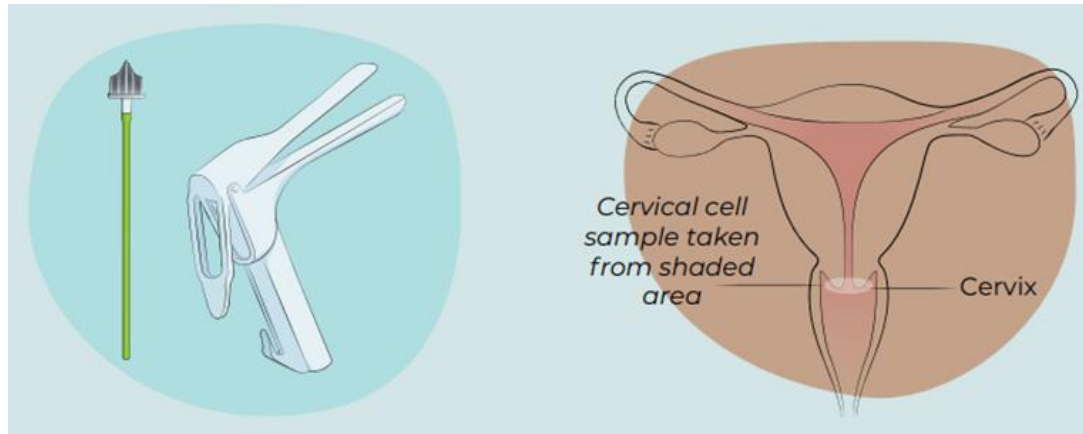
3. Get your results in 1–2 weeks

4. If HPV found: follow-up and treat

# Follow up screening

**FREE** Free for everyone

1. In clinic with the nurse or GP
2. Colposcopy

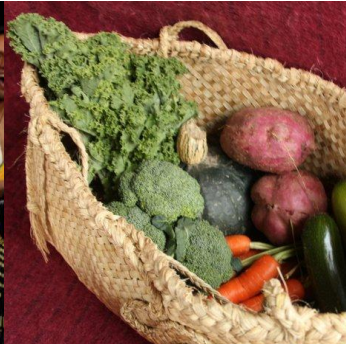


# He wāhine, He taonga



# Reduce the risk of developing cancer

- Eat healthy kai: fruit, veggies, fibre
- Regular exercise
- Be a healthy weight
- Reduce red meat & processed meats in diet
- Be smoke-free
- Reduce/ don't drink alcohol
- HPV vaccination
- **Stay up to date with your screening tests**



# Use Your Superpower – Kaimahi on the Frontline



Be that trusted face in your community.



Korero in a way that is accessible to people



Kōrero with whanau, at work, the marae, at kōhanga, at church or sports... will save a lives.



You are the connector. The encourager. The advocate.

## Opportunistic Screening – Every Moment Counts

---

 Grocery runs. GP visits. Kōhanga drop-offs. On the sideline.

---

 Any time is a good time to say: “Hey matua/whaea, when was your last cancer screening test?”

---

 Normalize screening. Make it part of everyday kōrero.

---

 The more comfortable you are, the more comfortable they will be.



# Why People Don't Screen – Hear Their Realities

---

✗ “It’s scary.”

---

✗ “I had a bad experience.”

---

✗ “It’s embarrassing/whakama.”

---

✗ “That area is tapu/sacred”

---

✗ “I’m busy / no transport / no one told me.”

---

✗ “I’m not at risk” – no family history.

---

🧠 Many people simply haven’t been given the info in a way that clicks with them.

# Lack of Access Is Real



● No clinics nearby or at suitable times

● Don't know it's free

● Childcare or transport issues

● Unsure how to book or test

● Differing levels of health literacy

● No trust in the healthcare system

● Health services don't always reach the people

💡 You help us to reach whanau.

## Real Kōrero – Real People

- Breast – misinformation & health literacy.
- Bowel – breaking barriers that people face.
- Cervical – consistency & commitment to building genuine relationships.



# Real Kōrero – What Works Best

---

✓ Names carry mana

---

✓ Kōrero kanohi ki te kanohi (face-to-face) phone & text can work too?

---

✓ Culturally safe, non-judgemental approach

---

✓ Flexibility – mobile clinics, after-hours, community spaces, home visits

---

✓ Visual aids and real-life examples

---

✓ Whakawhanaungatanga - walk beside them through the process if needed

# Useful resources



Resources

**Nau mai haere mai,  
welcome to HealthEd**

HealthEd provides you with free and up-to-date public health resources from New Zealand health organisations, Te Whaiti Ora's Health New Zealand and the Ministry of Health provide these resources to help all New Zealanders lead healthier lives.

[Find resources](#)



☎ Breast: 0800 270 200  
☎ Bowel: 0800 924 432  
☎ Cervical: 0800 729 729

**CALL ON US!**

## Final Messages – He Kupu Whakamutunga

✨ Cancer screening is mana-enhancing, not shameful.

✨ Our communities need your voice, your aroha & your understanding.

✨ Commitment to Te Tiriti o Waitangi

✨ Don't underestimate the power of a simple kōrero.

✨ Together, we change outcomes – not just stats

# He Patai...?





Western Bay of Plenty  
Primary Health Organisation

TŪNGIA TE URURUA KIA TUPU  
WHAKARITORITO TE TUPU  
O TE HARAKEKE

# Q&A

# Group Discussion



Western Bay of Plenty  
Primary Health Organisation

TŪNGIA TE URURUA KIA TUPU  
WHAKARITORITO TE TUPU  
O TE HARAKEKE

# Summary of Today's Session



Western Bay of Plenty  
Primary Health Organisation

TŪNGIA TE URURUA KIA TUPU  
WHAKARITORITO TE TUPU  
O TE HARAKEKE

# Follow-Up Session

**Date: Friday 15<sup>th</sup> August, 11am**



Western Bay of Plenty  
Primary Health Organisation

TŪNGIA TE URURUA KIA TUPU  
WHAKARITORITO TE TUPU  
O TE HARAKEKE

# We would love to hear your feedback!

**Please scan the QR code!**



# He Karakia Whakakapi

Kia whakairia te tapu  
Kia wātea ai te ara  
Kia turuki whakataha ai  
Kia turuki whakataha ai  
Haumi e. Hui e. Tāiki e!

*Restrictions are moved aside  
So the pathways is clear  
To return to everyday  
activities*