



Investigating Barriers and Enablers
to Preventive HIV Access for Māori

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Mihi

E rere nei te au o mihi ki ngā whānau,
ki ngā hapori nō te rangahau nei.

Kua maringi noa iho ngā kupu i a koutou

Me he puna o te kī

Hei whakaaroaro mō te hinengaro,

hei āwhina mō ngā whānau

Nā reira, e kore e maroke te puna

o mihi ki a koutou

Thank you to all the families and communities who participated in this research project. We sincerely appreciate those who shared their stories and experiences, which have provided valuable insights. These stories help us reflect on how to support our families better. We will always be grateful for your contributions

Introduction

This booklet is about Māori, sexual health, and making sure our communities have the services needed to stay healthy and keep our whānau strong and well. It draws on what we already know about Māori and HIV prevention, but most importantly, it shares the voices of participants in a small study called *Investigating Barriers and Enablers to Preventive HIV Access for Māori (PrEP Pilot Project)*, run by Whakauae Research.

Through their experiences, this booklet highlights the challenges Māori face in accessing Human Immunodeficiency Virus (HIV) prevention, the gaps in current services, and the need for more research and investment.

It's also a call to action - a chance to reflect, imagine future pathways, and work toward creating better and more culturally acceptable sexual health care for Māori.

By addressing these challenges, we can help ensure equity in HIV prevention, protect the health of our people, and support a healthier future for all.

What do we already know about Māori, sexual health and HIV prevention?

Māori are missing from much of the research shaping HIV prevention in Aotearoa, and it's having real consequences. While HIV diagnoses are dropping for non-Māori populations, they are rising for Māori, leaving our communities more vulnerable and increasing health inequities¹.

Māori are often diagnosed late, when the disease is more advanced, making treatment harder. Barriers like stigma, discrimination, and limited access to services - especially in rural areas - make it tough to get the care that is needed².

On top of that, many Māori don't know enough about prevention tools like PrEP (Pre-exposure prophylaxis), a medication that's been proven to stop HIV transmission when used properly³.

Recent research shows the challenges are even greater for Māori men who don't identify as gay, as they're often left out of prevention efforts entirely. Stigma and a lack of culturally relevant support only add to the problem, creating a system that doesn't work for many Māori⁴.

To change this, we need services that are inclusive, accessible, and built around Māori experiences. That means breaking down stigma, improving access to tools like PrEP, and creating strategies that actually work for our communities. By making these changes, we can close the gaps, prevent more Māori from being affected by HIV, and build a future where everyone in Aotearoa has the care and support they deserve.

How did we go about the research?

This study used a Kaupapa Māori approach, which means it was created by Māori, for Māori, and with Māori, focusing on Māori values and experiences. A team of Māori experts and Pākehā allies guided the project to make sure it was culturally relevant and met the needs of the people whose voices we wanted to uplift. Participants from different parts of Aotearoa shared their experiences through interviews in a safe and comfortable space. The researchers looked through the stories and experiences that were gathered for common themes to understand both personal experiences and broader community challenges. This approach made sure the study was ethical, respectful, and focused on improving HIV prevention for Māori.

What We Heard

History and stigma

Many participants shared their feelings that the history of HIV/AIDS has contributed to feelings of vulnerability, fear, and a sense of being judged or stigmatised.

"We grew up with the horror stories of the HIV pandemic in the eighties, so that's often fresh in my mind although we've got better drugs and ways to look after ourselves."

"When I moved to Sydney in the 90s, they still had the Press [newspaper] then and every week there were obituaries – people were dying from AIDS. That was my reality in the 90s moving from New Zealand to that country."

Health information

People talked about gaps in health knowledge, like not knowing where to find trustworthy information or who to ask for information. For some there was also uncertainty about HIV prevention tools like PrEP and PEP, which can help prevent HIV before and after exposure.

"I've heard of PrEP, but I'm still not sure how it works... I don't feel confident in my understanding of it yet."

"There's too much misinformation out there, people get confused and then they don't know what to believe."

Access to services

Participants talked about struggles to access safe and mana-enhancing sexual health care. Some talked about services that don't feel welcoming or safe, and past bad experiences put people off. Experiences of racism, bigotry, cost, and service location can make it even harder.

"In terms of sexual health and sexual health services, I think it's very poor that these things don't exist – that a kaupapa Māori specific sexual health service doesn't already exist in this day and age."

"It's just cold, it's medical, it's clinical, it's compliance based."

"It's not easy to get services, and when you do, they're often very difficult to navigate."

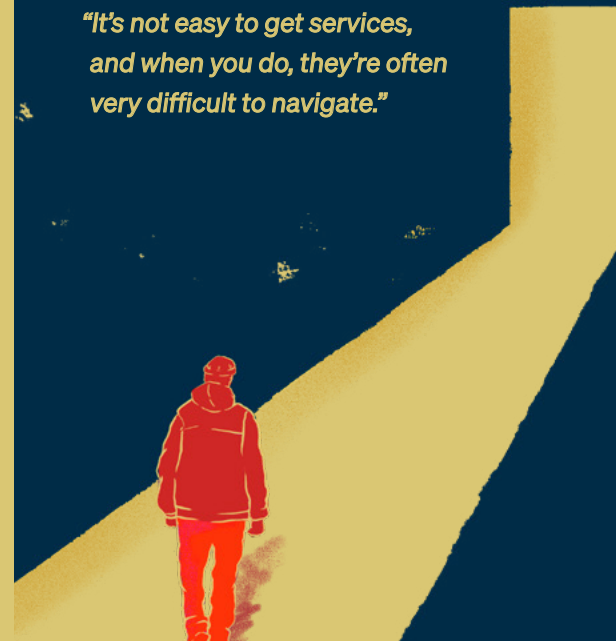
Sexual Identity

Participants shared how their generational, sexual, cultural, and ethnic identities all play a big role in how they experience health care. These identities can influence the challenges they face and the ways they seek support.

"I advocate hugely for small town people. That like me would go to the big city, get abused and then sent home and try and survive. Trying to find any kind of information in a small town was dead. I didn't hear the word gay till I was 20."

"What if I turn up [at a clinic] and then I see someone that I know from school, or I see someone that I know from Uni, or I see someone that I know from work, and then my cover is blown."

"I want to be authentically myself. I think a part of the gay experience is sexual liberation."



What works

Participants shared several things that worked well for them and what they'd like to see more of in the future. These points can be grouped into a few key areas:

Non-Judgmental Care

A big highlight was the feeling of being treated without judgment. Participants appreciated experiences where clinical and hauora staff created an environment where people didn't feel shame or stigma about their situation. This sense of safety made it easier for people to seek care, ask questions, and open up about their health needs. Some had experienced sexual health clinics where the staff truly supported them, which built a sense of trust in that service. Participants suggested that future services should continue to prioritise creating spaces where individuals feel comfortable, especially for those who might feel embarrassed about seeking help.



Ease of Accessing Treatment

Another key point for those that had good experiences caring for their sexual health was how easy it was to access treatment and services. Participants noted that being able to quickly get the care they needed made a huge difference. This is especially important in health services where delays or barriers can discourage people from seeking help. Participants emphasised the need for simplicity and comfort in the process. People want to feel welcomed and reassured from the moment they step in the door.

Building Trust through Outreach and Education

Trust in health information was another key theme. Participants mentioned that more outreach and education in communities would help break down barriers to access. When people feel like they can trust the information they're receiving, they're more likely to seek out care. Offering education about HIV prevention and sexual health in familiar and culturally appropriate spaces had made some people feel more at ease with learning and taking action.

Caring and Relational Staff

Participants particularly valued interactions where they felt staff showed genuine care and empathy. This relational, caring approach is something participants wanted to see more of in the future, as it made them feel understood and respected. This sense of personal connection is an important part of why they felt comfortable accessing services.

After-Hours Support

The availability of after-hours support was highlighted as another positive by some of the participants, who noted that being able to access services outside of traditional working hours was incredibly helpful, especially for those who might not be able to attend during regular hours due to work or other commitments. Having this flexibility made it easier for people to get the care they needed without the added stress of missing work or other obligations.

One-Stop-Shop Convenience

Overall, participants appreciated where they had encountered the convenience of having a one-stop-shop where they could get everything they needed in one place. Whether it was treatment, information, or support, having it all available in a single location made the experience smoother and less stressful.

This approach helped streamline the process and made it easier for people to access all the services they required without feeling overwhelmed or having to visit multiple places.

In summary, the key themes that emerged were the importance of creating non-judgmental, accessible spaces, building trust through education and outreach, fostering relationships with caring staff, offering after-hours services, and making it easier for people to access everything they need in one place. These elements were seen as crucial in improving the experience of accessing sexual health and HIV prevention services.

Looking towards the future

By building on the things that people told us worked well, and keeping in mind the ones that don't, there are a range of areas in which we might be able to start making real change for Māori in relation to sexual health care and HIV prevention.

Building relationships and shifting mindsets

Looking ahead, we need to focus on building strong, supportive relationships with people seeking help. This means changing the mindsets that lead to stigma and discrimination and addressing the structural barriers that prevent Māori from accessing care. **Sexual health should be something to celebrate, not something that causes shame.**

Accessible and culturally relevant information

We need to make sure that information about sexual health and HIV prevention is easy to find and speaks directly to Māori. **The information should be consistent, easily accessible, and tailored to Māori culture and needs.** It's about making sure that people understand the resources available to them in a way that feels familiar and relevant.

Balancing privacy with relational care

While relationship-building is important, we also need to respect the need for people's privacy. With advances in technology, there should be ways to access things like PrEP and other prevention tools more easily. **People should be able to make choices about their care while still feeling respected and safe.**

Tailored services for cultural needs

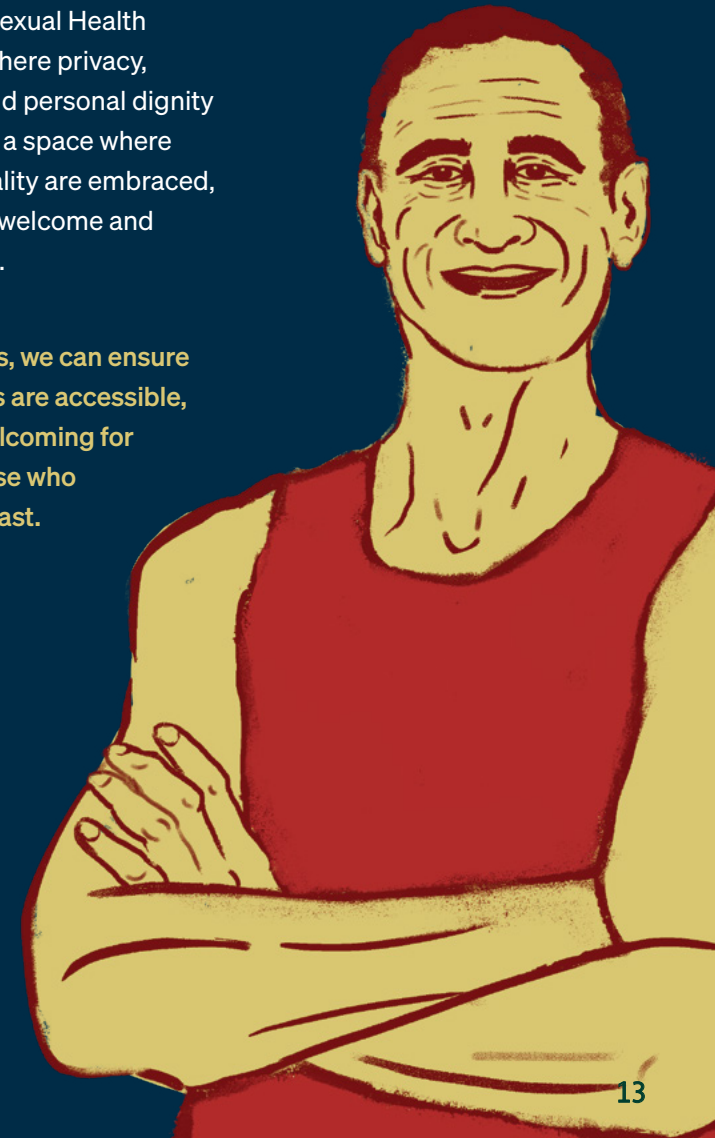
Services need to be tailored to the individual, **providing people with options that speak to their cultural background, whether that's Māori or another culture.** These services should be in comfortable, non-judgmental spaces where people feel safe and accepted.

Creating Kaupapa Māori Spaces

It's essential to have Kaupapa Māori spaces in sexual health services. These spaces would offer holistic, Māori-informed care that centres cultural values and practices, making them safe and welcoming places for Māori to seek help.

Fully independent Māori Sexual Health Clinics would be a place where privacy, cultural understanding, and personal dignity are prioritised. It would be a space where people's culture and sexuality are embraced, and where everyone feels welcome and supported in seeking care.

By focusing on these areas, we can ensure that sexual health services are accessible, culturally relevant, and welcoming for everyone, particularly those who have felt excluded in the past.



Explore the links below for trusted information
on sexual health, HIV, and wellbeing:

Just the Facts

justthefacts.co.nz

Sexual Wellbeing Aotearoa

sexualwellbeing.org.nz

The New Zealand Sexual Health Society

nzshs.org/nz-sexual-health-clinics

Auckland Sexual Health Service (ASHS)

ashs.org.nz

Toitū te Ao

toituteao.org

Body Positive

bodypositive.org.nz

Positive Women Inc.

positivewomen.org.nz

Tiwhanawhana Trust

tiwhanawhana.com

Burnett Foundation Aotearoa

burnettfoundation.org.nz

OutLine Aotearoa

outline.org.nz

RainbowYOUTH

ry.org.nz

Te Kaha o te Rangatahi

tekaha.co.nz

Village Collective

<https://villagecollective.org.nz>

New Zealand Prostitutes' Collective (NZPC)

nzpc.org.nz

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1. AIDS Epidemiology Group. (2024). *Dashboard*. <https://aidsepidashboard.otago.ac.nz/>
2. Bateman, J. P., Saxton, P. J., de Gouw, A., Kolodziej, J., Priest, P. C., & McAllister, S. M. (2023). Late presentation of HIV infection among adults in New Zealand from 2011 to 2020. *International Journal of STD & AIDS*, 34(5), 332-337.
3. World Health Organization (WHO). (2015). *Policy brief: WHO expands recommendation on oral pre-exposure prophylaxis of HIV infection (PrEP)*. https://apps.who.int/iris/bitstream/handle/10665/197906/WHO_HIV_2015.48_eng.pdf;jsessionid=0FF1F0C2002F493E392EB772FD8FE6DF?sequence=1
4. Punchihewa, T. M., Wiles, J., & Saxton, P. J. (2024). More than prevention: Early adoption of HIV pre-exposure prophylaxis (PrEP) by gay and bisexual men in New Zealand. *Culture, Health & Sexuality*, 26(2), 222-235.



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