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# Whakaoranga Whānau: A Whānau Resilience Framework.

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

Doctor of Philosophy  
in  
Public Health

at Massey University, Wellington  
New Zealand

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2014

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## ABSTRACT

This research explored the capacity of whānau (family, extended family) to overcome adversity, flourish and enjoy better health and well-being. While external factors, internal dynamics, and financial pressures often constrain capacity, whānau have nevertheless demonstrated an innate ability to respond to these challenges – to make use of limited resources, and to react in positive and innovative ways. Three key objectives were identified to help seek and understand Māori notions of whānau resilience and how they are utilised by whānau for positive growth and development.

The three objectives were:

1. To identify resilience mechanisms which exist within whānau;
2. To consider the cultural underpinnings of resilience; and
3. To construct an evidenced based framework for resilient whānau.

A thematic analysis detailed the components of a *Whānau Resilience Framework*. The framework consists of four resilience platforms: (1) *Whanaungatanga* (networks and relationships); (2) *Pūkenga* (skills and abilities); (3) *Tikanga* (values and beliefs); and (4) *Tuakiri-ā-Māori* (cultural identity). This thesis highlights both the synergies and dissonance between Māori and non-Māori perspectives of resilience and how cultural factors might best guide Māori and whānau development. Insofar as this framework exhibits similar resilience strategies to other populations, it is at the micro-level where there are differences between Māori and other cultures or populations.

## MIHI

I te taha o tōku pāpā,  
Ko Te Arawa te waka,  
Ko Ngāti Pikiao te iwi,  
Ko Te Takinga te marae,  
Ko Motutawa te maunga,  
Ko Ohau te awa,  
Ko Pikiao te tangata.

I te taha o tōku māmā,  
Ko Te Rarawa te iwi,  
Ko Tinana te waka,  
Ko Ngāti Moetonga te hapū,  
Ko Roma te marae,  
Ko Whangatauatia te maunga,  
Ko Karirikura te awa,  
Ko Tumoana te tangata.  
Ko Jordan Te Aramoana Waiti tōku ingoa.

The above *mihi* (greeting) acknowledges where I come from in terms of the kinship structure of *whenua* (land), *iwi* (tribe), *hapū* (sub-tribe) and *whānau*. For this thesis, I position myself as a Māori male using aspects of *kaupapa Māori* (Māori specific paradigm and research methodologies) to conduct research within whānau development and public health. As such, I endeavoured to include Māori terms when applicable, and the glossary at the beginning of the document provides suitable translations for those terms.

Heoi anō, i runga i taua whakāro, i te tuatahi, me mihi ki tōku nei whānau whānui. Nā to koutou āwhina me te manaakitanga, i tūtuki pai ahau i tēnei rangahau. I aua wa e rangirua, e pōkeka hoki ana ahau, nā koutou au i tiaki.

Tuarua, he mihi hoki tēnei ki ōku nei kaihautū, ko Associate Professor Te Kani Kingi, ko Professor Sir Mason Durie, rātou ko Professor Chris Cunningham. Tēnā koutou mo tā koutou arahina, manaakitanga hoki. Ahakoa i tōroa te wā kia whakamutu au i ēnei mahi, ko te tumanako kua tūtuki inaianei. Heoi anō, ngā mihi mahana kia koutou.

I te tuatoru, he mihi hoki tēnei ki ōku nei hoa, rātou i āwhina ki te pānui me te whakapai i ōku tuinga. Ko tēnei te mihi hoki ki a MAI ki Pōneke, MAI ki Waikato, rātou ko MAI ki Tāmaki. Ngā mihi nui mo ō koutou manāki me te awhina i ahau nā ngā taumahatanga o ēnei tūmomo mahi. Ngā mihi mahana ki a koutou katoa.

No reira, hei whakakapi i ēnei mihi, me maumahara tātou ki taua whakatauki rongonui a Tā (Sir) Apirana Ngata:

*‘E tipu e rea, mō ngā ra o tou ao, ko tō ringa ki ngā rākau a te Pākehā hei ara mō tō tinana: ko tō ngakau ki ngā taonga a o tipuna Māori hei tikitiki mo to mahuna: ko to wairua ki te Atua nana nei ngā mea katoa.’*

‘Grow up, little one, in the way of your day and age, your hands grasping the tools of the Pākehā for your physical well-being, remembering in your heart the works of your ancestors which are worthy of being worn as a diadem upon your brow; your soul ever turned toward God, who is the creator of all things.’

Nō reira tēnā koutou, tēnā ra tātou katoa.

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## GLOSSARY OF MĀORI TERMS

Many of the Māori words below have been given technical meanings in the text either by myself or by other writers. Some of the English translations are also taken from the 'A Dictionary of the Māori Language' by H. W. Williams (1957). The Williams dictionary in various editions is considered one of the most authoritative of the current Māori to English dictionaries available. Many of the words have a range of meanings. Those supplied include most of those related to the context within which the word is used within the text. The glossary also represent the everyday meanings of the words.

Aotearoa	= New Zealand, the land of the long white cloud
Ariki	= Paramount Chief
Aroha	= Love, Concern
Awa	= River
Awhina	= Help and assistance
Hau kāinga	= Tribal or sub-Tribal hosts
Hāhi	= Religion
Haka	= Traditional Māori war dance
Hapū	= A collection of whānau, normally united through a common ancestor, sub-tribe
Hui	= Meeting or Gathering of people
Hura kōhatu	= Unveiling
Kai	= Food
Kaimoana	= Seafood
Kaitiakitanga	= Stewardship
Kāinga	= Home, Household
Kaumātua	= Elder
Kaupapa	= Issue, Theme, Aspect or Foundation
Kaupapa Māori	= Māori specific paradigm and research methodologies
Kānohi-ki-te-kānohi	= Face-to-face
Kapahaka	= Traditional Māori Performing Arts
Karanga	= Māori welcoming call, female callers
Kawa	= Protocol derived from Mātauranga Māori
Kete	= Kit, resource kit, storage kit for food and equipment
Koha	= Gift, gift giving
Kohanga Reo	= Te Reo Māori Early Childhood Immersion Centre

Koro	= Male elder or elders
Kotahitanga	= Unity, a term also used to represent various Māori ‘unity’ movements
Kuia	= Female elder or elders
Kumara	= Sweet Potato
Kura Kaupapa Māori	= Te Reo Māori Immersion School
Io	= The Supreme Being
Iwi	= A collection of hapū, normally united through a common ancestor
Māoritanga	= Māori culture, a Māori way of life
Mauri	= Spark of life, life-sustaining principle
Maunga	= Mountain(s)
Mahi-ā-ngākau	= Work done from the heart (i.e. aroha, manaaki, awhina and tautoko)
Manaaki	= Kindness, care
Manaakitanga	= Respect, kindness, hospitality and care, collective well-being
Mana	= Prestige, authority, or power
Mana Māori motuhake	= Māori political control
Mana tīpuna	= Prestige, authority, or power that is vested through ancestors
Mana whenua	= Prestige, authority, or power that is that attained through customary land
Manuhiri	= Visitor(s)
Marae	= Meeting place for hapū and iwi. Carved meeting-house, dining-hall and cooking area, as well as the marae atea or sacred space in front of the meeting-house
Mātauranga	= Body of knowledge
Mātauranga-ā-iwi	= Tribal Knowledge
Mātauranga Māori	= Māori body of knowledge
Mihi	= Greeting
Mokopuna	= Grandchild
Noa	= Free from restrictions
Pā	= Village, settlement
Papatuanuku	= Earth Mother
Poukai	= Regular meetings held to honour the Kingitanga movement
Poroporoāki	= Farewell
Pō whakangahau	= Entertainment night to farewell the deceased
Rāhui	= Restriction
Rangatira	= Chief
Ranginui	= Sky Father
Ritenga	= Rites
Ringawera	= Kitchen staff
Rohe	= Geographical region

Runanga	= Tribal organisations
Tautoko	= Support
Tamariki	= Children
Tamariki whāngai	= Adopted child/children
Tangaroa	= Māori god of the sea and all its inhabitants
Tangata whenua	= People of the land, people of a given place
Tangihanga	= Māori grieving and burial rituals
Tapu	= Forbidden, restricted, sacred
Te Ao Māori	= The Māori World
Te Ao Pākehā	= The Pākehā World, Western World
Te Matorohanga Wānanga	= A specific traditional school of learning
Te Reo Māori	= Māori language
Te Reo Rangatira	= Māori language
Te Taha Māori	= A Māori world-view, Māori identity
Te Tiriti o Waitangi	= The Treaty of Waitangi
Te Waipounamu	= The South Island of New Zealand
Tika	= Right
Tikanga	= Customs, values, beliefs
Tino Rangatiratanga	= Self-determination
Tipuna	= Ancestor
Tohatoha	= Sharing
Tuakana/Tēina	= Mentor/Mentee relationships
Tupāpaku	= The body of the deceased
Tūrangawaewae	= A place to stand, tribal homeground, metaphor related to one's right to belong to a specific marae or pā
Urupā	= Cemetery
Waiata	= Song
Wairua kaitiaki	= Spiritual guardian(s)
Waka	= A collection of iwi whose tīpuna travelled to Aotearoa on the same voyaging canoe, a mode of transport ( e.g., canoe, car, horse).
Wāhi Tapu	= Place or area of spiritual and cultural significance
Ngā kete mātauranga	= The baskets of knowledge
Whaikōrero	= Māori formal oratory
Whakapapa	= Genealogy, genealogical connections, lineage
Whakapapa wānanga	= Genealogy workshops
Whānau	= Family, made up of usually 3 or 4 generations of extended family, also means to give birth
Whanaungatanga	= Relationship building, kinship, extended family, group dynamics
Whānau Matara	= Whānau who are detached, distant, or scattered
Whānau Pani	= The bereaved family

Whānau pōhara	= Restricted families
Whānau tūkino	= Unsafe families
Whānau wewete	= Laissez-faire families
Wharekura	= Te Reo Māori Immersion Secondary School
Whare paku	= Little houses for sanitary purposes
Whare Wānanga	= Māori tertiary education provider
Whenua	= Earth, land, afterbirth.

## CHAPTER I: HE KUPU WHAKATAKI - INTRODUCTION

### Introduction:

Māori are the Indigenous people of Aotearoa (New Zealand)<sup>1</sup>. In a series of planned voyages, the *tīpuna* (ancestors) of these people sailed from their ancient homeland of Hawaiki to Aotearoa sometime between 800 and 1100 AD (Durie, 2003b; Grey, 1953; Simmons, 1976; R. Walker, 2004).

One of the earliest written accounts of Māori came from a journal excerpt of the British explorer Captain James Cook during his first voyage to Aotearoa in 1769. Cook referred to Māori as ‘strong, raw boned, well-made, active people’ (Beaglehole, 1955, p. 278). The botanist Joseph Banks, on board the same vessel, described Māori in a similar tone by referring to them as ‘the size of the larger Europeans, Stout, Clean Mind, and active, fleshy but never fat...vigorous, nimble and at the same time clever in all their exersizes [sic]’ (in Beaglehole, 1962, p. 11). William Bayly, an astronomer who joined Cook’s second voyage to Aotearoa aboard the *Adventure*, expressed similar views in stating that Māori were ‘strong made healthy looking people’ (McNab, 1914, p. 204). These early impressions of Māori (largely derived from the accounts of European scholars and settlers) were in the main consistent and helped create a picture of a strong, robust, and ultimately resilient population (Durie, 1998a, 1998b, 2001).

In spite of these early observations, Māori, like many Indigenous groups, experienced a rapid and significant population decline - often as a direct consequence of

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<sup>1</sup> It is important at this point to mention the stylistic convention employed for this thesis. Firstly, the majority of Māori terms are italicised to avoid confusion (unless it is a name or place name), however, those words which are considered common throughout Aotearoa, such as *whānau* remain un-italicised. Secondly, ‘Aotearoa’ is the term utilised to represent the country most commonly referred to as New Zealand. In some cases however, New Zealand maybe used throughout the thesis.



contact with Europeans - and as introduced diseases, land alienation, cultural decay, and warfare made an inevitable imprint on the local landscape (Kingi, 2005; R. Walker, 2004). While European contact and settlement increased rapidly during the 1800s, this also saw the Māori population decline by more than two-thirds during the 19<sup>th</sup> century and within three generations (Durie, 1998b). Māori had been decimated and there seemed little hope of recovery. In 1907, Archdeacon Walsh stated that ‘the Māori has lost heart and abandoned hope. It [the race] is sick unto death, and is already potentially dead’ (Sutherland, 1935, p. 40).

As a consequence, Māori entry into the 20<sup>th</sup> century was both unexpected and unspectacular. It was assumed that very little could be done and that, in the decades which followed, only a remnant would be left. Notwithstanding these predictions, the 1900s proved to be far more sympathetic to the plight of Māori. A range of health reforms were introduced, largely at the initiation of Māori themselves, and which saw the population grow, slowly at first, but to the extent that Māori are now more populous, and living longer, than at any other point in history (Durie, 1998a, 1998b, 2001). This shift in the Māori health and demographic profile can be traced to a number of key initiatives (discussed later in this chapter), but which demonstrates the potential of Māori to encounter and overcome adversity, to endure and ultimately flourish.

This thesis seeks to investigate the resilience factors of contemporary Māori whānau. While it is shaped within a contemporary context, it builds in no small way on the developments of the past, the trials of former generations, and their determination to grow and evolve. Examining the concept of whānau resilience is made difficult by the fact that an absolute or definitive definition of ‘whānau’ is problematic (Collins & Wilson, 2008; Metge, 1990), however, and for now, whānau is defined as ‘family’ or ‘extended family’ but which is considered more fully in Chapter III.

The term ‘resilience’ raises similar issues but is centred on the ability to withstand and rebound from crisis and adversity (Ungar, 2005a; Walsh, 2002). Research has shown that a variety of resilience strategies and resources are utilised to help rebound and withstand a variety of crises. These may include problem solving skills, communication skills, a sense of competence and self-efficacy, a sense of humour, spirituality, social support, and planning skills (Korhonen, 2007; Rutter, 1985; Ungar, 2005a, 2005b; Walsh, 2006). ‘Family resilience’ on the other hand has more of a focus on the family-unit and its ability to withstand and rebound from crises (H. McCubbin & McCubbin, 1988; Walsh, 1996, 2006). These family-unit abilities are specific characteristics, dimensions, and properties which help families overcome crises and adversity (H. McCubbin & McCubbin, 1988). Resilience factors relevant to families can include intra-family support, support from the extended family, social support, family systems, open communication amongst family members, and religion or spirituality (Greeff & Van Der Merwe, 2004; H. McCubbin, McCubbin, Thompson, & Thompson, 1995; Walsh, 2006).

In addition to investigating the family resilience factors of whānau, this research also investigated the ‘cultural’ underpinnings of resilience. That is, an examination of whānau resilience with a particular emphasis on cultural practices, behaviours and processes. Culture is often misunderstood and sometimes misused, in that it can be reduced to a set of fixed properties, characteristics and commonly held behaviours of beliefs (Ingvarsdotter, 2011). According to the Williams Dictionary (1971), the word ‘culture’ is one of the two or three most complicated words in the English language. Culture can be defined as the ‘customary beliefs, integrated patterns of human behaviour (such as thought, speech, and action), social forms, and traits of a racial group’ (H. I. McCubbin, Thompson, Thompson, Elver, & McCubbin, 1998, p. 42).

Within the context of this thesis, the late Māori scholar Māori Marsden defines culture as ‘that complex whole of beliefs/attitudes/values/mores/customs/knowledge acquired, evolved and transmitted by his society as guiding principles’ (Marsden, 2003, p. 34). Culture is an influential medium which organises communal/kinship activity and standards of behaviour (Marsden, 2003). The way in which culture influences the resilience strategies utilised by Māori whānau is an integral component of this thesis.

As a result of this research, a *Whānau Resilience Framework* has been developed which better elucidates the cultural perspectives of family resilience and provides added insight into the specific factors which create positive outcomes for Māori whānau. At a broader level, this thesis further highlights both the resonance and dissonance between Māori and non-Māori perspectives of resilience and how cultural factors might best guide Māori perspectives and Māori endeavour.

The following section builds on the previous but places greater emphasis on the unique history of Māori, and various factors which have shaped the contemporary health profile of Māori. The relationship to Māori notions of resilience is further explored as the various connections between Māori health and Māori resilience are examined.

### **The Māori of Aotearoa:**

Central to understanding Māori notions of whānau resilience is the link to the unique historical experiences of Māori. It is a history that has been shaped by voyages over great distances, settlement in a new environment, contact with Europeans, modernisation, and the near extinction and then resurgence of the population. Throughout this history, Māori have risen to the challenges and continue to develop socially, politically, and economically as a people (Durie, 2003b). This section seeks to

outline these challenges, from the first arrival of Māori to Aotearoa, through colonisation and towards contemporary times. It also discusses some of the successful initiatives that Māori have established to overcome the numerous and varied challenges and threats.

### **The Path to Aotearoa:**

The enduring capacity of Māori to persevere and overcome adversity is perhaps no better illustrated than through our *waka* (canoe) traditions. A race of people in search of adventure, a new home, a new beginning, and with a firm belief in their capacity to navigate the vastness of the Pacific Ocean. The decision to depart their traditional homeland of Hawaiki would not have been made lightly. Life there was well established, with food sources and material resources readily available (Buck, 1950b, 1954; R. Walker, 2004). While there is a debate as to the dates and reasons ‘why’ various explorers from Polynesia decided to depart Hawaiki, each voyaging *waka* left for a reason, and with a purpose in mind (Simmons, 1976).

There was a general agreement amongst many writers, such as Best (1952), Dansey (1947), Kelly (1949), and Tā Peter Buck (1950b), that the discovery and settlement of Aotearoa occurred over three periods; the 950AD arrival of Kupe, the 1150AD arrival of Toi, and the 1350AD arrival of the fleet of voyaging *waka*. Walker (2004) and Simmons (1976) however, dispute a number of these arrivals and date approximations based on the sources of evidence utilised by these writers and discrepancies between tribal traditions (please refer to Simmons, 1976).

Anthropologists and ethnologists such as Peter Buck (1950b, 1954) and S. Percy Smith (1910b) attributed the discovery of Aotearoa to Kupe. Both believed that Kupe arrived in Aotearoa sometime during the middle of the 10<sup>th</sup> century, after pursuing an

octopus called *Te Wheke o Muturangi* from Hawaiki. While there is a general consensus amongst historians in regards to the events that led Kupe to the shores of Aotearoa (i.e., in pursuit of *Te Wheke o Muturangi*), there are discrepancies regarding his approximate date of arrival.

In his book 'The Great New Zealand Myth', Simmons (1976), disputes the 10<sup>th</sup> century arrival date of Kupe as outlined by Buck (1950b, 1954) and Smith (1910b). Simmons (1976) examined the *whaikōrero* (Māori formal oratory) and genealogies of various *iwi* from the Hokianga, Waikato, East Coast and South Island areas who identified Kupe as an ancestor. He concluded that the number of generations tracing back to Kupe did not correspond with a 10<sup>th</sup> century date, nor did the orthodox version of the Kupe tradition represent authentic Māori tradition. Based on these oral histories, Kupe's arrival date in Aotearoa was more likely situated within the mid-14<sup>th</sup> century (Simmons, 1976; R. Walker, 2004). Therefore, a similar arrival period to the sea voyaging canoes who came from Hawaiki, and which were later to form the basis of the various *iwi* who still reside nowadays.

Drawing on the writings of Sir George Grey (1953), Walker (2004) concludes that the arrival of the first migrants from Eastern Polynesia was most probably between 800 and 900 AD. These are the people who Walker (2004) considers as the first settlers in Aotearoa. These Eastern Polynesian migrants arrived during the warmer summer months (Grey, 1953), which provided them with ample time to settle into their new environment before winter (R. Walker, 2004). They relied on crops, hunting and fishing for their food sources. Moa and other bird life were bountiful. However, as the moa became sparse throughout the North Island and the population grew, the settlers soon spread to the colder climate of Te Waipounamu (the South Island of New Zealand) in search of new hunting grounds (R. Walker, 2004). This resulted in the scattering of the

population throughout Aotearoa. In addition, the day to day lifestyle of these people was often harsh and difficult, which resulted in low birth rates and a low life expectancy in comparison to nowadays (R. Walker, 2004). Accordingly, the population remained stagnant for at least the first 200 years of settlement (R. Walker, 2004).

It is at this point in Māori history that some early European authors developed the Moriori theory. Best (1952) and Smith (1904) claimed that an earlier population of Melanesian stock existed in Aotearoa prior to the arrival of the Māori ancestors, of which they named the Moriori people. In their view, the Māori exterminated the Moriori upon their arrival in order to appropriate the land and resources (Best, 1952; S. P. Smith, 1904). In other words, the Moriori were surpassed by a superior race. This theory was then propagated throughout Aotearoa and in ways which often endorsed colonisation and European dominance (R. Walker, 2004). Authors such as Duff (1977), Buck (1950b) and Sutton (1980) debunked the theory based on genealogical evidence and the teachings of the *Te Matorohanga Wānanga* (traditional school of learning). Subsequently, their research concluded that the Moriori were among the early settlers in Aotearoa, and that they relocated from Te Waipounamu to the Chatham Islands in approximately the 12<sup>th</sup> century.

The second phase of settlement in Aotearoa occurred in 1100 AD. By now the moa population had been decimated, and the development of horticulture became necessary for survival (R. Walker, 2004). The rise in need of horticultural products prompted the relocation of settlements to more fertile locations. The development of ground food storage pits that allowed temperature to be better controlled enabled the production and storage of Polynesian food plants such as kumara (sweet potato), taro, yam and gourd (Buck, 1954; Simmons, 1976). This phase also heralded a change in housing design to complement the colder climate, most noticeably, thick thatched walls

and the orientation of the front porch and doorway towards the sun (Buck, 1954; R. Walker, 2004). This emphasis on horticulture, and the change in housing design in the 12<sup>th</sup> century, marked a watershed between two significant periods of Māori culture (R. Walker, 2004). Preceding it was the moa-hunter (Duff, 1977), or Archaic (Golson, 1960) period of Māori culture. Succeeding it was what Duff (1977) termed the ‘Classic Māori’ period of Māori culture.

The final period of significant precolonial settlement in Aotearoa, the ‘Classic Māori’ period, is also attributed to the arrival of the various *waka* and the rise of tribalism. During the 14<sup>th</sup> and 15<sup>th</sup> centuries, a number of *waka* began to arrive in Aotearoa from Hawaiki (Simmons, 1976; R. Walker, 2004). Smith’s (1904, 1910a) assertion that a great fleet of canoes arrived in Aotearoa all at the same time is readily dismissed by Simmons (1976), for only the Arawa and Tainui canoes are cited as leaving at about the same time (Simmons, 1976; Stafford, 1967; R. Walker, 2004). Indeed other *waka* did arrive in Aotearoa during this period. They include Takitimu, Aotea, Tokomaru, Kurahaupo, Mataatua, and a number of other lesser known *waka* (Evans, 1997; Simmons, 1976; R. Walker, 2004).

The reasons for the departures of these *waka* and their passengers from Hawaiki varies amongst the different *iwi*. For Te Arawa *waka*, their departure was due to Tamatekapua (the captain of Te Arawa) offending the high chief of Hawaiki, Uenuku (Stafford, 1967; R. Walker, 2004). Turi, the captain of the Aotea *waka*, also offended Uenuku resulting in the hasty departure of Aotea *waka* (S. P. Smith, 1910a). Possible reasons for the departures of the other canoes include over-crowding and the resultant pressure on resources (i.e., land, food, natural materials) (Simmons, 1976).

For those who traversed the South Pacific Ocean to Aotearoa during this period, they faced the same challenges as those Eastern Polynesians of the first period of

settlement. Initial settlement involved adapting to the new environment: the identification of new resources and materials for food, warmth, and shelter (Durie, 2003b). This shift from a tropical climate to a cooler environment, required an adaptation in diet and seasonal food harvests. Traditional *pā* (village) living required daily tasks associated with tending crops and collecting other food sources. Seasonal harvesting of food in abundance was also paramount to ensure food was readily available through the different seasons (depending on the food source). The ability of Māori to adequately source food and shelter in their new environment enabled the people to thrive in their new homeland.

For the next 400-500 years of isolation, Māori would continue to successfully adapt to life in Aotearoa as population stability and social balance was achieved (Durie, 2003b). In time, the population increased to the point where *whānau* coalitions emerged, resulting in the development of new distinct political entities, namely *hapū*, alliances which would further ensure the survival of *whānau* (Durie, 2003b). Ultimately, Māori would develop social, political and economic systems which would serve them sufficiently until the arrival of the first Europeans and subsequent colonisation.

### **Contact with the Western World:**

The early Māori settlers continued about their life though several centuries of seclusion and isolation. The first European ship arrived in 1642 under the captaincy of Able Tasman. Following a hostile reception and the death of four crew member, Tasman left hastily. Over a century later, Cook arrived in Aotearoa in 1769. Regular contact occurred between Māori and Europeans following Captain Cook's first visit. Despite small skirmishes between Māori and the visitors, these encounters were initially based around opportunities to trade goods such as timber, flax, seal, whale, wheat and



other produce (Pearson, 1958; R. Walker, 2004). This booming economy provided employment for local Māori within the whaling, timber and wheat industries (Pearson, 1958), and provided the opportunity for Māori to access new technology, tools, utensils, and building materials (R. Walker, 2004).

In 1840, *Te Tiriti o Waitangi* (The Treaty of Waitangi) was signed by representatives of the Queen of England and Māori as a partnership document. For Māori, they believed the Treaty placed Māori under the protection of the Queen, whilst allowing Māori to continue to govern themselves and their land through their own spiritual, economic and political practices. In essence, and while multiple issues informed the development of the Treaty, Māori were largely interested in three key opportunities: 1) To establish a partnership between *iwi* or *hapū* and the Crown, 2) for Māori to participate within society and particular sectors (such as welfare and education), and 3) to protect Māori, whereby Māori are guaranteed the same rights and privileges as other New Zealanders (Durie, 1998a; Kawharu, 1989; Ward, 1997). However, the subsequent government policies that were developed following the signing of the Treaty seemed to contradict the overall intent of The Treaty of Waitangi (Durie, 1998a; Orange, 2011; R. Walker, 2004).

The year 1840 was also significant in that it was the beginning of large scale settlement and land purchase by Europeans (Lange, 1999). By 1860, the resident European population was equal to that of Māori, and as the 19<sup>th</sup> century drew to a close, the European population was fifteen times that of Māori (Lange, 1999). This latter over-representation of Europeans was due to (a) a large increase in European migrants, and (b) a major decline in the Māori population.

Although Māori population figures had been trending downward as a result of European contact, depopulation accelerated following the signing of The Treaty of

Waitangi (Durie, 1998b; Lange, 1999). It has been estimated that there were approximately 150,000 Māori in the year 1800 (Durie, 1998b), by 1896 however (and when an actual census was taken) only 42,000 were present (Pool, 1977). Durie (1998b), identifies four factors which strongly contributed to the progressive depopulation:

1. Introduced disease
2. Warfare and the introduction of muskets
3. Māori land confiscations
4. Detrimental government policies.

The ‘musket wars’ of the early 19<sup>th</sup> century were sometimes an extension of earlier tribal warfare but also involved conflict with new settlers. As tribes battled against each other and Pākehā over land and resources, or to exact *utu* (revenge), the musket proved to be a swift and deadly weapon on the battlefield. In addition, *harakeke* (flax) became a major article to trade for muskets, resulting in many Māori relocating to swamp land to harvest *harakeke*. In the north, gum digging proved to be lucrative, but likewise necessitated relocating to damp, swampy, areas and predictably causing further illness complications (R. Walker, 2004). Moreover, the resultant displacement of *whānau*, *hapū*, and *iwi*, caused by invading war parties, also affected Māori health, well-being and population numbers (Kingi, 2005; Lange, 1999). Although the musket contributed to Māori loss of life, a greater impact on Māori depopulation was the impact of introduced disease (Lange, 1999).

The arrival of Pākehā to Aotearoa also heralded the transition of new and particularly devastating diseases. Relative isolation had protected Māori from many diseases that had ravaged many other parts of the world. However, this presented a double-edged sword. On one hand, serious bacterial and viral diseases had not impacted

the Māori population (Durie, 1998b; Lange, 1999). On the other, when viral diseases such as measles, mumps and influenza reached these shores, Māori lacked the immunity to combat them (Durie, 1998b; Lange, 1999). High morbidity and mortality rates ensued. Coupled with low fertility rates, a result of these new communicable diseases and sexually transmitted diseases was that the Māori population continued to decline throughout the 1800s (Lange, 1999).

Exacerbating this susceptibility to disease was a dramatic change in lifestyle (Lange, 1999). Various social and economic changes were occurring, none more so than land confiscations and dubious land sales. Māori-owned land decreased from 30 million hectares in 1840, to 15 million in 1852 (Durie, 1998a). By 1896, the figure stood at only 1.5 million hectares (Durie, 1998b). Consequently, land ownership and acquisition became a valuable commodity. This mass land-grab seemed to be at odds to the principles of the Treaty of Waitangi; in particular, Article Three that guaranteed Māori the same 'rights and privileges' as other New Zealanders. Instead, it seemed, the benefits of the Treaty favoured the excess population of Britain who sought to relocate and settle within New Zealand (Bishop, 2003).

The indisputable relationship between Māori and the environment lost prominence during the years of land loss, and consequently, Māori health and well-being was compromised through disassociation with the land (i.e., the loss of land, and control over land, fisheries, and waterways) (Kingi, 2005). Durie (1998b) explains this by stating that 'health cannot be readily separated from the wider social, cultural, and economic environments, and, for Māori, the radical changes in the 19<sup>th</sup> century were accompanied by major upheavals that affected every aspect of life' (p. 33). Therefore from a Māori perspective, health cannot be readily separated from the wider societal issues that whānau, *hapū* and *iwi* were experiencing during the 19<sup>th</sup> century.

To extinguish Māori rights and proclaim Māori owned land, the government introduced a number of legislative measures. For example in 1862, the government enacted the Native Lands Act which was designed to remove ‘tribal ownership’ of Māori land. Three years later in 1865, the Native Land Court was established. A particular action of this court which further degraded Māori autonomy, was that even if Māori did own land, they could not do so in accordance with their own *tikanga* (customs, values, and beliefs). Subsequently, both Māori land sales and the transferring of ownership from tribal collectives to individuals was accelerated (Durie, 1998a).

At the same time, the invasion of the Waikato region by government forces in 1863 proved to be more challenging than initially anticipated. This was due to both the difficult terrain and strong tribal resistance. The Waikato tribes, considered by some government ministers at the time as the most powerful in all of New Zealand, used ‘fluid guerrilla tactics’ (R. Walker, 2004, p. 122) against the military forces. Due to the difficulty in appropriating these lands through military force, and to supplement the Native Lands Act of 1862, Parliament enacted the New Zealand Settlements Act 1863 and the Suppression of Rebellion Act 1863 (Durie, 1998a; R. Walker, 2004). These two Acts gave the government wide ranging powers such as the power to confiscate land should Māori resist land surveyors or sales, also should they believe that rebellious ‘natives’ were residing on potential land (Durie, 1998a; R. Walker, 2004).

The result of these various government acts decimated Māori land ownership, which led to further social and economic dislocation (Kingi, 2005). The loss of land had both social and economic implications for Māori (Durie, 1998b). Land provided an economic base and customary ownership also meant that there were long-held ancestral and kinship links to whānau and *hapū* land. However, as land titles became individualised through various government legislation, ‘the need to remain together and

to provide mutual support lessened’ (Durie, 1998b, p. 36). Consequently, the ‘whānau’ foundation of Māori health was eroded. Separation from land meant separation from whānau, *kāinga* (home), ancestral *whenua* (ancestral land), *wāhi tapu* (place or area of spiritual significance), *urupā* (cemetery) and all *tāonga* (treasures) either left behind or confiscated.

The combination of the musket wars, introduced diseases, land confiscations, social change, cultural alienation, economic hardship and associated government legislation all contributed to the rapid depopulation of Māori. Depopulation, permeated with racial ideologies, prompted a number of unsympathetic responses from Pākehā. As far back as 1856 the politician Dr Issac Featherston was quoted as saying, ‘The Māoris are dying out, and nothing can save them. Our plain duty, as good, compassionate colonists, is to smooth down their dying pillow. Then history will have nothing to reproach us with’ (Buller, 1884, p. 55). Later on in the century, in 1882 the scientist Dr Newman stated that ‘taking all things into consideration, the disappearance of the race is scarcely subject for much regret. They are dying out in a quick, easy way, and are being supplanted by a superior race’ (p. 477). This negative outlook on Māori health and well-being was perpetuated by the desire of Pākehā to substantiate their imperialistic and colonising behaviour. Pākehā such as Featherston and Buller purported that the extinction of Māori could be explained by Charles Darwin’s ‘Theory of Evolution’ (Lange, 1999). In their view, only the fittest – Pākehā – would survive.

Despite these Pākehā premonitions regarding Māori health and well-being, and the eventual demise of the population, numerous initiatives were developed by Māori to help alleviate the situation. Although Māori displayed amazing resilience and adaptability, ‘the old ways of life that had evolved through the centuries could no longer be followed in their entirety’ (Lange, 1999, p. 20). Māori sought to take control and

ownership of Māori issues (autonomy) and regenerate the health and well-being of Māori. In essence, it was the re-emergence of Māori autonomy and self-determination as Māori chiefs and community/tribal leaders began to familiarise themselves with Western political doctrine and process.

In 1858 for example, Potatau Te Wherowhero was crowned as the first Māori King. The *Kingitanga* movement (initiated by his investiture) was an effort to create a united Māori nation (Mahuta, 1996). In response to the lack of respect towards chiefly authority, the unified Māori nation would create a sense of equality, the capacity for self-management, and counteract government threats to land (Durie, 2007; Mahuta, 1996). It was agreed that the Māori King would exercise power over people and lands, chiefs and councils of all the tribes, whilst protecting these people and lands from the invading government (Mahuta, 1996). This way, Pākehā land acquisition would be more difficult, and there would be less chance of rogue Māori selling off land without appropriate authority or prior consultation with *iwi* members. The British government and Pākehā settlers saw the *Kingitanga* movement as a threat to British rule, and a convenient means through which conflict could be rationalised. In fact, concerns were more likely related to an inability to access Māori land, than any perceived risk to the authority of the Crown (Durie, 1998a).

In response to the continual legislative oppression of Māori, the second Māori King, King Tāwhiao approached the government declaring the need for a Legislative Council of Chiefs for self-governance. Due to a lack of interest from the government, King Tāwhiao established *Te Kauhanganui*, a Māori Council that provided a forum in where Māori issues would be heard by Māori, as well as to provide another political voice for Māori. In addition to the *Te Kauhanganui* forum, *Poukai hui* were also established by the *Kingitanga* movement. Initially set up to protect the orphaned, the

widowed and the destitute, *Poukai* served to re-ignite the concepts of *kotahitanga* (unity) and *manaakitanga* (respect, kindness). *Poukai* have now become the paramount forum to discuss the matters affecting those within the geographical area encompassed by the *Kingitanga* movement (Meijl, 2009).

Another Māori response to the misappropriation of Māori land was the Repudiation movement. Developed in 1871 by the local Ngāti Kahungunu *iwi* of Hawkes Bay, this movement was focused on rejecting those land sales that were considered fraudulent and unjust (O'Malley, 1998). Led by the chief Henare Matua, the Repudiation movement advocated for the abolishment of the Native Land Court, whose operations continually deprived Māori of their land, and ultimately vest land matter powers with Māori (O'Malley, 1998). Again, this movement highlighted Māori desires for autonomy and unity. Indeed, Māori believed rightly so, that matters concerning Māori land should be controlled by Māori rather than Pākehā politicians and institutions. Moreover, the movement also had the support of two local Pākehā politicians in Henry Robert Russell and John Sheehan. As influence spread, other areas such as Taupo, Gisborne, the Bay of Plenty, and the Ngai Tahu of South Island began to advocate for the abolishment of the Native Land Court, or more precisely, the jurisdiction of Pākehā judges over Māori land (O'Malley, 1998).

In 1892, a collective of Māori chiefs drew on earlier unity movements such as the *Kingitanga* movement and the Confederation of the United Tribes of New Zealand, to establish a unified political voice for the tribes of Aotearoa under the guise of *Te Kotahitanga* (Unity). The *Te Kotahitanga* movement, with support from other organisations such as The Repudiation movement, succeeded in establishing a Māori Parliament at Waipatu Marae, which ran until 1902 (J. A. Williams, 1969). Like the Repudiation movement, a fundamental tenet of the Māori parliament was to abolish the

Native Land Court and replace it with Māori committees (in each district) or *runanga* (tribal organisations) (Cox, 1993). Both the *Kotahitanga* and *Kingitanga* (including *Te Kauhanganui*) movements advocated for Māori political rights under the Treaty of Waitangi, as well as the recognition of an autonomous Māori legislative assembly (Lange, 1999).

All in all, these unity movements were established by Māori to counteract government legislation, and in most cases, the mass land-acquisitions that had been occurring. Such movements galvanised Māori, raised Māori political awareness, and emphasised the rights of Māori under the Treaty of Waitangi (Durie, 1998b). In essence, they demonstrated a resilience strategy developed by Māori to overcome the colonising agenda of the government and Pākehā settlers.

It was clear that Māori health and well-being had begun to deteriorate soon after European contact and did not abate (and in fact accelerated) subsequent to the signing of The Treaty of Waitangi (Durie, 1998b). By the late 20<sup>th</sup> century, the fate of Māori hung in the balance. A once industrious, prosperous and successful race was now facing extinction (Pearson, 1958). Much has been discussed about the catalyst for this decline, however as history shows, Māori resilience, autonomy and self-determination in the early 20<sup>th</sup> century would abate the forewarned crisis.

### **1900–1930 Māori Health Development:**

By the dawn of the 20<sup>th</sup> century the threat of total extinction had eased (Durie, 1998b). Although social, political and economic conditions continued to denigrate Māori, a number of Māori leaders (with the support of various communities), took an active role in facilitating the improvement of Māori health and well-being. In terms of Māori participation in health, Durie (1998b) noted a number of key features that were



evident between 1900 and 1930. This included Māori professional guidance, Māori recovery, and like the previous century, Māori leadership (Durie, 1998b). Additionally, it signalled an era of Māori health development that sought to extend on the work that was conducted in the previous century by initiatives such as the *Kingitanga* and *Kotahitanga* movements.

An example of this was the Young Māori Party (YMP). Although established in 1897, the fruits of the work conducted by the YMP came to bear in the early 20<sup>th</sup> century. Led by young Western-educated Māori, such as Tā Apirana Ngata, Tā Peter Buck, and Tutere Wirepa, the YMP members believed that the survival of Māori would require adapting to the economic and political framework of European society (Durie, 2011). They also believed strongly in the conviction that education would help alleviate the many problems facing Māori (Durie, 1998b). As such, health reforms and education became their priority as opposed to political grievances (J. A. Williams, 1969).

The social and health reforms advocated by members of the YMP were also helped along by two important pieces of legislation; the Public Health Act (1900) and the Māori Councils Act (1900) (Pool, 1991). The Public Health Act also brought about the Department of Public Health, which had Maui Pomare acting as the first Māori medical officer. The Māori Councils Act (1900) gave rise to health promotion and sanitary inspections (relating to houses, meeting houses, and water supplies) being carried out by local Māori District Councils (Durie, 1998b; Pool, 1991). In many ways, this Act was a response to the increasing desire for Māori autonomy in regards to decision making at a local level (Durie, 1998b). For example, Tā Apirana Ngata assisted in drafting by-laws for village councils, which included the requirement of wooden floors in meeting houses, the prohibition of lighting fires inside meeting houses unless a chimney was installed, and proper disposal of refuse and waste (R. Walker, 2004). At

the same time, the Native Sanitary Inspectors sought to promote Public Health measures such as health inspections, inspecting dwellings, and the building of *whare paku* (little houses for sanitary purposes) amongst the villages throughout the North Island of New Zealand (Lange, 1999).

The desire of Māori leaders for health programmes to be owned by Māori themselves as opposed to the government or Pākehā health workers, were the cornerstones of the YMP health and social reforms (Lange, 1999; Pool, 1991). Ian (David) Pool, a leading New Zealand demographer, believed that these health reforms of the early 20<sup>th</sup> century were rather unique. In fact, these health reforms were precursors to what the World Health Organization would later call ‘Primary Health Care’ (Pool, 1991):

The Māori health campaigns of this period combined three elements: the most advanced biomedical knowledge and techniques available at that time; Māori cultural values; and most importantly, the active participation of local Māori councils. While the Public Health Act 1900 provided the vehicle for this, the drive, the skills and the determination were Māori. (p. 239)

The YMP epitomised the new era of Māori leadership. This new generation of Māori leaders aimed to ensure the survival of Māori culture through ‘modernisation’. While they believed in the value of a European-based education system, the retention of *te reo rangatira* (the Māori language) and *tīkanga* was of equal importance. In some ways, it was a preference for assimilation, as opposed to the separatist strategies advocated for in the 19<sup>th</sup> century (Lange, 1999).

In a similar fashion to the previous century, a number of *kotahitanga* movements were again established by Māori during the period between 1900 and the 1930s. Again, these were in response to the oppressive policies and legislation developed by the

successive governments and the desire to achieve Māori autonomy, Māori development, and improved Māori health and well-being.

Through the early 1900s, the prophet Tahupotiki Wīremu Rātana attracted a large following due to his efforts with the sick, the poor, and the destitute. Termed as the ‘Rātana movement’, it also acted as both a political and social movement. It advocated for recognition of The Treaty of Waitangi, and like many of the leaders of the previous century, Rātana protested Pākehā dominance and advised his followers to value *kotahitanga* and *mana Māori motuhake* (Māori political control) (Rauretī, 1992). As a result, ‘he created hope and a strong sense of Māori control over Māori destiny at a time when Māori morale was low’ (Durie, 1998b, p. 45). Rātana established a *pā* on whānau land whereby his followers could inhabit and live as a small community. For those who had lost their land, or those who were in financial strife, Rātana Pā provided a communal sanctuary. Added to this, was his skills as a healer and the application of methods which drew upon faith in a ‘Christian god, belief in a national Māori identity, and a sound practical knowledge of contemporary medicine’ (Durie, 1998b, p. 45). His success was measured by the large numbers of followers, their testimonies, and the requests for help from across Aotearoa (Durie, 1998b).

Another leader of this period who actively sought to improve Māori social and health conditions was Te Puea Herangi, an important figure of the *Kingitanga* movement. In one case, during the influenza epidemic of 1918 Te Puea took one hundred orphaned children from the lower Waikato and placed them in the care of parents who had lost their children through the epidemic. As a result of the influenza epidemic and her dissatisfaction with the swampy conditions of the *Kingitanga pā* in Mangatāwhiri, 10 acres of land was then purchased in Ngāruawāhia (the original *pā* [village, settlement] site before confiscation) for the establishment of a community,

hospital and *marae* (carved meeting-house, a meeting place for *hapū* and *iwi*) at Tūrangawaewae (Mahuta, 1996).

Te Puea then focused her attention on providing an economic base for her people. Like Ngata (and to some extent, the ‘modernisation’ beliefs of the YMP), she believed in land development and dairy farming as the basis for strong communities (Mahuta, 1996). Following Tā Apirana Ngata’s legislation to provide loans for Māori farmers, Te Puea personally supervised the development of these schemes in her region (Mahuta, 1996). With the subdivision of farms and newly built houses and milking sheds, Tūrangawaewae had become a well-established self-sustaining community by the 1930s. As a result of her work and leadership, communities were ‘welded together’ (Mahuta, 1996, p. 116), not only in Tūrangawaewae, but right throughout the Waikato region.

Like the previous century, Māori health development in the period of 1900 – 1930 was characterised by strong leaders who were determined to achieve change through political mechanisms and social reform. Leaders such as Tā (Sir) Apirana Ngata, Te Puea Herangi, Tā Peter Buck, Tā Maui Pomare, Tā James Carroll, and Wiremu Rātana worked closely or within parliament and various Māori communities. As a result, Māori became more active in social and health delivery as well as developing health policies pertinent to Māori (Durie, 1998b).

To summarise, this period highlighted the willingness of Māori to continue the struggle against government oppression. Māori leaders of the time employed innovative practices, coupled with political and legislative backing (somewhat), to improve social morale, living conditions, and overall health and well-being of Māori. In essence, these leaders built on the advances that were developed in the previous century. As the

pending World War II and industrial revolution approached, new challenges would arise, once again inciting Māori to adapt and develop new resilience strategies.

### **Contemporary Māori Health and Well-being:**

Since 1930, a number of social and political changes have both positively and negatively affected Māori health and well-being. The ‘urban drift’ (the relocation of many rural Māori to the cities for work) that resulted post-World War II provided a new challenge for Māori and which drove assimilation in Western society and ways of thinking (R. Walker, 2004). Reduced family support, alcohol and drug misuse, smoking, poor diet and nutrition, long term unemployment and substandard housing were all to become new major risks to Māori health in contemporary society (Durie, 2001).

The alienation of Māori land was a significant factor that impacted on Māori economies and well-being, but the imposition of world-views, philosophies, and intellectual methodologies that were in conflict with those of Māori, created wider challenges. The 1961 ‘Report on the Department of Māori Affairs’ which received the popular title of ‘The Hunn Report’, sought to integrate Māori into Pākehā society (Hunn, 1961). Although it was believed that the Hunn report provided suggestions for the ‘integration’ of Māori, evidence (such as the negative health, education, and crime statistics) suggests that Māori participation and success was compromised by protocols and constructs that were blind to Māori psychologies, beliefs, attitudes and values (Durie, 1998b).

Moreover, during the previous century, the state of Māori health was strongly impacted by government policies that sought to integrate Māori, as opposed to acknowledging the Indigenous viewpoints of Māori. As a result, statistics show that the incidence and mortality rates of the most common chronic and terminal diseases (e.g.,

heart disease, cancer, and diabetes) in New Zealand are still extremely high amongst Māori (Ministry of Health, 2010; Pōmare, Keefe-Ormsby, Ormsby, pearce, Reid, Robson & Wātene-Haydon, 1995; Robson & Harris, 2007).

Many elders believe that these health disparities stem from colonial processes that contributed to the depopulation and land loss and which heavily impacted on the welfare of Māori. The following quote by an elder of the Ngāti Kahungunu tribe in Best (1929), further supports this belief: ‘Another source of weakness is the fact that the *mana* [prestige, authority, or power] of the Māori has been abandoned...Māori folk have become Europeanised’ (p. 15). Indeed, the Treaty of Waitangi has become a focus for contemporary Māori development (Durie, 1998a); in fact Indigenous peoples around the world (e.g., the Kanaka Maoli of Hawaii and the Native Americans of the United States) have faced similar difficulties in establishing themselves as distinctive populations within modern states. Reclamation of traditional cultures and values have been one of the ways in which Indigenous populations have attempted to address health disparities.

### **Conceptions of Māori Health and Well-being:**

The ability to be resilient in the face of crisis or adversity ensures that the health and well-being of whānau remains intact. Since Māori first arrived in Aotearoa, the maintenance of health and well-being was a pre-requisite to survival in this new and foreign land (Durie, 1998b; R. Walker, 2004). Moreover, the health and well-being of Māori has been an area of ongoing interest since the arrival of the first Europeans in the late 18<sup>th</sup> century. This is demonstrated by the journal entries of various European explorers such as James Cook (Beaglehole, 1955), Joseph Banks (Beaglehole, 1962), and William Bayly (McNab, 1914).

In contemporary times, this interest still attracts the attention of Māori leaders, researchers, politicians, clinicians, and practitioners as they seek to raise the health and well-being of Māori to similar levels experienced by non-Māori (Durie, 1998b, 2001). Some suggest that part of the reason for the poor state of Māori health (at least in contemporary times) is due to colonisation and the subsequent loss of land, economy, and identity (Durie, 1998b; R. Walker, 2004). In fact, most Indigenous peoples have suffered through the negative consequences of colonisation (e.g., Native Hawaiians, the First Nations people of Canada, the Sami of Norway, and the Australian Aborigines (Durie, 2003a; McGuire, 2010). Although it is certain that these Indigenous peoples have encountered adversity, there are also indications of overcoming adversity, prospering, and demonstrating significant resilience (Baker, 2010; McGuire, 2010; Werner & Smith, 1982, 2001).

Many indicators of health, well-being and socio-economic status are relevant across populations (Durie, 2006). These may include life expectancy, mortality rates, income levels, housing standards, and educational attainment. Although these types of markers are useful, there may be differences in their understanding and relative importance (Durie, 2006). For example, a Māori perspective on adequate housing might consider the 'level of provision for extended families and for *manuhiri* [visitors], while a measure of educational attainment might include measures that relate to the use and knowledge of Māori language' (Durie, 2006, p. 3). As such, although there are various understandings, definitions and indicators of health and well-being, a Māori perspective is more likely to resonate with Māori whānau.

A Māori conception of health and well-being offers a cultural and holistic outlook on life, and the interactions (both tangible and intangible) which exist in day to day living. During the 1970s–80s, some Māori were becoming increasingly concerned

that the New Zealand national health system was biased towards Western philosophies of care (Durie, 1994b). Māori felt that relationships with the health system were failing. Many felt alienated, partly because of poor access and inadequate care, but also because there was a lack of a decision-making role for Māori (Durie, 1998b). Māori were concerned about the exclusive emphasis placed on the physical and biological constructs of health care (Durie, 1998b). There were also concerns raised about the use of more holistic definitions of health and that they did not capture the entirety of the Māori perspective. The World Health Organisation's definition of health was often used to relay Māori concerns, in which it emphasised physical, mental and social dimensions, yet it insufficiently captured a Māori perspective of health (Durie, 1985).

Despite almost two centuries of colonisation, Māori still believed that good health could not be gauged by physiological measures alone, and that spiritual and emotional considerations were equally important (Durie, 1998b). As part of a campaign for change, more direct involvement of Māori in health care and the introduction of Māori health perspectives were seen as important steps. Māori health workers and Māori more broadly, began to advocate understandings of health that made more sense to Māori, were derived from Māori concepts, and provided Māori with a sense of ownership over their own health (Pōmare et al., 1995). Consequently, at a national health conference in 1984 (Hui Whakaoranga), a holistic approach to health and health care was emphasised to counter the perceived narrow focus promoted by Western physicians (Durie, 1998b). As a result, Māori health perspectives offered a way of conceptualising health and well-being from a Māori world-view, and were 'welcomed because they provided the necessary framework within which a semblance of ownership over health could be entertained' (Durie, 1998b, p. 73).



Three models of Māori health were to emerge out of this process - *Te Whare Tapa Whā* (Durie, 1985), *Te Wheke* (R. Pere, 1984), and *Ngā Pou Mana* (Henare, 1988). Each model gained wide acceptance from Māori and were developed during a period of increased emphasis on health and health inequalities. They were also developed by different sectors of society (in particular *Ngā Pou Mana* which was developed by the Ministry of Social Development), but all served a similar purpose of providing health perspectives that were culturally founded.

***Te Wheke (Pere, 1984):***

In 1984, Rose Pere proposed a model of Māori health called *Te Wheke*. *Te Wheke* (The Octopus) was a metaphor used to help describe the major aspects of health from a Māori perspective. The octopus body and head represent the individual, and each of the eight tentacles (the main components of the model) represent an aspect of health that gives sustenance to the individual (R. Pere, 1984). The suckers on each tentacle represent the many aspects that exist within each component, while the intertwining of the tentacles represents the merging of each component with the others. In this sense, it is important to consider these components in relation to each other, and within the context of the whole.

*Wairuatanga* is represented in the first tentacle and is concerned with spirituality. Spirituality is promoted as fundamental to health and well-being. The importance of *Io* (the Supreme-being) is used to illustrate this aspect, as generations passed down numerous incantations and traditions to give sustenance and meaning to this spiritual existence (R. Pere, 1984). The recognition of spirituality is not always connected to religious worship, but rather the acceptance of possibilities within the spiritual realm or that which exists on another philosophical plane (i.e., between the person, the situation, and the environment).

The *Mana Ake* (uniqueness) tentacle is centred on the inherited uniqueness of an individual and the family. The *mana tīpuna* and *mana whenua* that is attained by an individual and whānau, is determined by their *whakapapa* (genealogy), such that *mana tīpuna* is the prestige, authority, or power that is vested through ancestors, and *mana whenua* is that attained through customary land (Mead, 2003). Pere (1984) applies this element to a whānau setting by stating that ‘if a family receives sustenance that gives them a positive identity with their ‘*mana*’ intact – then that family will have the strength to pursue those goals and those assets that can uplift them ’ (p. 1). Therefore, ‘*mana ake*’ acknowledges the importance of the different traits in ones’ life such as identity. Furthermore, this aspect reinforces the importance of whānau and social support or social settings on health and well-being.

The *Mauri* (life principle, ethos) tentacle emphasises the notion of a ‘life-source’. Mead (2003) defines *mauri* as ‘the spark of life, the active component that indicates the person is alive’ (p. 53). Durie (1998b) also describes it as ‘the life-sustaining principle resident in people and objects, including language’ (p. 74). Pere (1984) extends on these definitions by stating that if great importance and support is given to the *mauri* of each individual, in time the individual and family will appreciate the *mauri* in other people, the *mauri* in *marae* (carved meeting-house), and the *mauri* within the rivers, lakes, seas, and mountains. *Mauri* reinforces the importance of recognising the connections between people and the environment, and how these relationships can affect the health of a person.

The ‘*Hā a Kui Ma a Koro Ma*’ (the ‘breath of life’ from forebears) tentacle, centres on how an individual must have an in-depth knowledge of their heritage and *whakapapa* in order to prosper. Pere (1984) goes on to state that there is a basic belief that the future is shaped by the past, and if there is an understanding of one’s heritage

then personal and cultural identity will remain intact. People ‘who have had their heritage transmitted to them have a strong central core, and are able to become universal people’ (R. Pere, 1984, p. 2). This element therefore acknowledges the importance of knowing your culture and heritage in order to maintain *mana*, self-esteem and self-assurance.

The next tentacle, *Taha tīnana*, is concerned with physical health. Pere (1984) states that this includes everything pertaining to physical survival (e.g., food, clothing, shelter, and recreation). Furthermore, there is even greater importance placed on the body, especially the head, as this body part is extremely ‘*tapu*’ with its own associated restrictions. *Tapu* can be defined as ‘forbidden’ or ‘restricted’ (Shirres, 1994, p. 5), and basically places a ‘restriction’ on anyone or anything. For example, if someone was to drown, a *rāhui* (restriction) would most often be placed on the area until the *tapu* has been lifted. Thus the recognition of these restrictions and the suitable aspects and behaviours are required for physical survival.

The sixth tentacle, *Whanaungatanga* (the extended family, group dynamics), centres on ‘both sexes and all generations supporting and working together’ (R. Pere, 1984, p. 2). It is ideal that all whānau within the community interact in a positive manner to their collective advantage. The whānau and individuals achieve sustenance for this dimension when they feel that they have contributed to the well-being of the extended whānau and the community (R. Pere, 1984). Essential to this aim is a sense of connection and empathy towards a kinship group so as to engender pride, unity and a sense of belonging (R. Pere, 1997).

The seventh tentacle, *Whatumana* (the emotional aspect) has a focus on the emotional development of both the individual and the whānau (R. Pere, 1984). For example, it is ideal that children express their emotions so that the older members of the

kinship group know how to ‘support, encourage and guide the children’ (R. Pere, 1984, p. 3). Pere (1997) also proposes that there is both a positive and negative aspect to every emotion. To this end, crying for sadness and joy is considered normal and healthy, rather than a weakness.

The eighth and last tentacle, *Hinengaro* (the mind) emphasises ‘approaches of learning that arouse, stimulate and uplift the mind’ (R. Pere, 1984, p. 3). This principle of health requires the constant use of all the mind’s senses to help develop higher learning and correct mind innervation (R. Pere, 1984). Furthermore, the conscious mind processes of *mātauranga Māori* (Māori body of knowledge) which includes intuitive intelligence, has also been regarded as a direct link to *Io* (R. Pere, 1997).

If each tentacle/fundamental is adequately fulfilled and intertwined with the others then the individual and whānau will achieve a state of *Waiora* (total well-being) (R. Pere, 1984). This model of an ideal state of health proposed by Pere (1984, 1997) provides guidelines for understanding Māori views on health and creates a framework to help attain high standards of health and well-being.

#### ***Ngā Pou Mana (Henare, 1988):***

In 1988, the Royal Commission on Social Policy described another model of Māori health and well-being which uses the metaphor of four supports. Although developed primarily to inform social policies and social well-being, it also has implications for Māori health (Durie, 1998b). Entitled *Ngā Pou Mana* (the supporting poles), each of the four poles enhance the *mana*, the self-esteem, and the self-integrity of individuals (Durie, 1994a). This model further acknowledges the importance of an economic base for health, and recognises environmental management as a basis for health development (Durie, 1994a). There are four key sets of supports that constitute *Ngā Pou Mana*: *Ngā tāonga tuku iho* (cultural heritage), *Whanaungatanga* (extended

family), *Te ao tūroa* (the wider physical surroundings), and *Tūrangawaewae* (an intimate link with land). Within each of these supports are other key concepts (e.g., the Māori language and customs) that contribute to their basis, and provide guidelines to ensure proper representation and the maintenance of tribal, family, and individual *mana*.

*Ngā tāonga tuku iho* describes the cultural traditions ‘upon which intellectual and philosophical traditions are based’ (Durie, 1994a, p. 198). Within this are the intrinsic concepts of *ngā kete mātauranga* (the baskets of knowledge), *tīkanga*, *ritenga* (rites), and *te reo Māori* (Māori language) (Henare, 1988). Like the ‘*Hā a Kui Ma, a Koro Ma*’ tentacle of the *Te Wheke* model (R. Pere, 1984), this support is important to Māori health and well-being because it draws upon the many traditions and customs that were handed down by ancestors. Disregarding these traditions and customs impinges on one’s *mana* and, consequently, personal health and well-being can be affected.

*Whanaungatanga* highlights the importance of the extended family. Contained within this are the intrinsic concepts of *iwi*, *hapū*, *whānau*, *waka*, *tohatoha* (sharing), *whakapapa*, and *manaaki* (caring) (Henare, 1988). This support is important to health and assists with maintaining links with one’s whānau to ensure that the *mana* of the whānau remains intact. For example, despite the physical distances that may exist between members of a whānau, spiritual, emotional, and communicative links must endure in order to remain ‘calm’ and ‘at ease with one’s self’. This support also relates to the *whanaungatanga* tentacle of the *Te Wheke* model, as both dimensions are concerned with a strong relationship with the immediate and extended family as a function of good health.

*Te ao tūroa* centres on the links Māori have with the environment. An example of this is the personification of *maunga* (mountains) by Māori. Descendants of the Tūhoe tribe (for example) consider themselves offspring of Maungapōhatu (a Tūhoe

tribal mountain) and Hine Pūkohurangi (the Mist Maiden), and thus they refer to themselves as the ‘children of the mist’. Therefore, linking one’s self to *Papatuanuku* (Earth Mother) is important in upholding *mana* and integrity. Other concepts that relate to *te ao tūroa* include *whenua* (land), *ngāhere* (forest), *awa* (river), *moana* (sea), *ahi kaa* (keeping the home fires burning), and *raupatu* (land confiscation) (Henare, 1988). This ‘supporting pole’ is important to health because it emphasises the importance of land to Māori. The negative effects that land loss had on the health and well-being of Māori has been discussed earlier in this chapter, and this model further perpetuates the significance of being able to link physically, spiritually and emotionally to the land and environment.

The *tūrangawaewae* support reflects a sense of belonging and being ‘grounded’. It reflects on why *marae* are so important to Māori (Durie, 1994a). Access to one’s *marae* bestows *tangata whenua* (people of the land, people of a given place) status upon an individual and whānau, and a lack of access to such an institution and prestige can be considered a risk to identity formation (Durie, 1994a). In addition, within this support are the customs of *papakāinga* (homeground), *manuhiri*, and *koha* (gift giving) (Henare, 1988). The importance of this support pole is similar to that mentioned for ‘*te ao tūroa*’, in how links are maintained with the environment. There is also an added aspect of practicing and conducting societal tasks within one’s *tūrangawaewae* (tribal homeground) and *marae*. Doing so positively influences cultural identity – a central fundament of *mana*.

It is evident that this model places a strong emphasis on upholding the dignity of individuals and whānau. It does so by providing guidelines to help maintain a strong cultural identity through promoting a number of Māori concepts that serve to uphold the integrity of individuals and their whānau within a Māori cultural framework.

Accordingly, this model strongly emphasises the concept of *mana* as a dominant force required for good health and well-being.

***Te Whare Tapa Whā (Durie, 1985):***

In 1982, the idea of health as an integration of *wairua* (spiritual), *hinengaro* (cognitive), *whānau* (family), and *tīnana* (physical) domains was discussed at the Māori Woman's Welfare League's Rapuora research *hui*. It was from this *hui* that Durie (1998b) drew these themes together and proposed a model of health founded on the 'four basic ingredients for good health' (p. 69). The following quote found in the *Rapuora* report by Murchie (1984) further explains the importance of these themes and the inclusion of a spiritual and family component:

To say that a person is a psychosomatic unity, a personality formed jointly by physical and mental processes, only partly embraces the Māori concept. A study of Māori health must follow more than two strands. *Tīnana* is the physical element of the individual and *hinengaro* the mental state, but these do not make up the whole. *Wairua*, the spirit and *whānau*, the wider family, complete the shimmering depths of the health *pounamu*, the precious touchstone of Māoridom. (p. 81)

This four-part health model was presented by Durie at two more *hui* in 1982 and 1983. Finally, it received national attention in 1984 at Te Hui Whakaoranga. This was the first major Māori health conference where Māori leaders, Māori health professionals and representatives from the Ministry of Health were all present to discuss issues relating to Māori health. It was driven by a desire for Māori to examine and describe health care on their own terms, and placed greater emphasis on health as a positive construct rather than an ill-ness domain (Durie, 1998b).

Durie (1985, 1998b) compares the *Whare Tapa Whā* model of Māori health to the four sides of a house. Each side of the house represents an aspect of health: *taha tīnana* (physical side), *taha wairua* (spiritual side), *taha whānau* (family side), and *taha hinengaro* (cognitive side). An underlying requirement of this model is that each cornerstone is equally represented within an individual, whānau, *hapū*, and *iwi*. Achieving a sense of balance and integration is integral to the well-being of both individuals and groups. By using the metaphor of a house, all four walls need to be present to ensure strength and symmetry (Durie, 1985, 1998b). Thus, if an individual is lacking in any one of the cornerstones, then health risks are more likely.

The *Taha wairua* cornerstone is considered by Durie (1985, 1998b) to be the most essential element of health and well-being. This element of health is strongly focused on spiritual awareness and the ability to understand the link between the person, the situation, and the environment. In this sense, it very much mirrors the ‘*Wairuatanga*’ and ‘*Mana Ake*’ components of the *Te Wheke* (R. Pere, 1984) model, as well as the ‘*Te Ao Tūroa*’ and ‘*Tūrangawaewae*’ components of *Ngā Pou Mana* (Henare, 1988) model.

*Taha hinengaro* is concerned with the expression of thoughts and feelings (Durie, 1998b), as well as the control of behaviour (Durie, 2001). Indeed, Māori tend to adopt a holistic and integrative style of thinking as opposed to an analytical one. That is, the understanding of phenomena and situations ‘occurs less by division into smaller and smaller parts, than by synthesis into a wider, contextual system’ (Durie, 1985, p. 484). This cornerstone also bears similarities to the ‘*Hinengaro*’ and ‘*Hā a Kui Ma me Koro Ma*’ tentacles of *Te Wheke* (R. Pere, 1984) and the ‘*Ngā tāonga tuku iho*’ support of *Ngā Pou Mana* (Henare, 1988).



*Taha tīnana* focuses on aspects of bodily health (such as motor control, physiology, biology, and anatomy). Like the *taha tīnana* tentacle of *Te Wheke* (R. Pere, 1984), there is also an added emphasis on the clear separation of *tapu* and *noa* (free from restrictions) (Durie, 1998b). Maintaining a balance between these two aspects is important for good health and well-being.

Finally, the *Taha whānau* involves extended kinship ties and which can be framed within two key concepts (Durie, 1998b). First, the family is the prime support system for Māori. By providing care and sustenance, the family is able to offer support both in physical and cultural terms but also emotionally. Second, unlike the western emphasis on self-realization and self-sufficiency, a Māori world-view places greater credence on interdependence between siblings, cousins, and all whānau members, in order to promote whānau identity and a sense of belonging. Again, this cornerstone is consistent with the ‘*Whanaungatanga*’ components of both the *Te Wheke* (R. Pere, 1984) and *Ngā Pou Mana* (Henare, 1988) models of Māori health.

In summary, this model emphasises the need for balance between all four domains in order for good health. By utilising the metaphor of a house and the holistic thinking of Māori, *Te Whare Tapa Whā* promotes the integration and representation of all four domains as being essential features of health and well-being (Durie, 1985).

While this thesis is not designed to position one model over another, the discussion does offer insight into Māori concepts of health and well-being. One model may better encompass a particular *iwi* or *hapū*, or it may better explain a specific situation in a certain context. For example when utilised in certain professions, or when utilised to help explain or conceptualise Māori health and well-being concepts to an audience, the simpler models may prove beneficial. Moreover, it must be noted that while it is convenient to consider each aspect of these models separately, Māori

understanding tends to come from a holistic synthesis rather than an emphasis on individual components (Durie, 1998b). This is also evident in the many similarities between the three models.

These Māori health models provide a framework for conceptualising health and well-being and in a way which is firmly rooted to a Māori world-view. In order to understand whānau resilience, it is important to understand the various components that Māori hold dear in regards to health and well-being. These three Māori models of health provide this perspective. Moreover, they also highlight the peculiar differences between Pākehā or Western notions of health, and Māori views; none more so than the emphasis on wider family interdependence, and spiritual connections to the land, both of which are imperative to Māori conceptions of health and well-being. For the remainder of this thesis, the terms health and well-being will be used in the broad Māori sense of the word, that is, the spiritual, physical, cognitive, and social dimensions of an individual, family, community and population. These concepts have further implications for understanding Māori notions of resilience and suggest that narrow definitions, based on Western constructs, are unlikely to resonate with Māori, or at the very least provide the type of scope capable of capturing a Māori world view.

### **Māori Health in the 21<sup>st</sup> Century:**

Over the past decade, successive governments have attempted to improve the health and well-being of Māori through policy. In 2002, the Labour government introduced an intervention framework for reducing health inequalities in Aotearoa (Ministry of Health, 2002b). It focused on four levels of implementation (structural, intermediary pathways, impact, and health and disability services), and provided a number of principles geared towards improving the practices within the health sector.

Moreover, the framework also highlighted the importance of those factors outside the direct control of the health sector. In particular, the social welfare, education, housing and labour market sectors, can all contribute significantly to the aim of reducing health inequalities (Ministry of Health, 2002b).

More recently, in 2009, the National government introduced the Whānau Ora initiative. This initiative seeks to positively enhance whānau health and well-being, whilst also taking into account whānau desires and aspirations. The ultimate goal of this initiative is to develop whānau resilience, whānau capacities and whānau capability (Te Puni Kōkiri, 2010). In particular, for whānau (both Māori and non-Māori) the goals are focused on:

- Self-managing – Taking control of affairs, less reliance on the state, aspirations for the future;
- Living healthy lifestyles – A move towards better health and away from negative behaviours;
- Participating fully in society – A capacity to better engage with broader society, in education, in the workforce, in social activities;
- Confidently participating in *Te Ao Māori* – A capacity to embrace *Te Ao Māori* and at a level which matches their own goals and aspirations;
- Economically secure and successfully involved in wealth creation – Financially secure and economically sound;
- Cohesive, resilient and nurturing – Whānau are secure, confident and ambitious. (Turia, 2011)

More importantly, Whānau Ora seeks to move away from policy constructs which have failed Māori in the past. Again it is a cross-sector policy intended on developing a cohesive direction amongst various government sectors, such as education,

health, justice, and employment. This particular policy is covered in more depth in Chapter IV.

As with the previous century, a number of *kotahitanga* movements have been established by Māori since the early 20<sup>th</sup> century. Likewise, they were established to counter the oppressive legislature of successive governments. Some of these include, but are not limited to:

- The Māori War Effort Organisation;
- Māori Women's Welfare League;
- The Māori Health League;
- The New Zealand Māori Council;
- National Māori Congress;
- Māori urban authorities (e.g., The Waipareira Trust).

All in all, they were designed to promote unity, a political voice, and Māori-centred services within their particular sectors. Although they are not specifically mentioned in the following report on cultural resilience amongst Māori (Baker, 2010), they nevertheless contributed to Māori cultural resilience and by providing a structure and frame through which the collective aspirations of Māori could be realised.

### **Contemporary Māori Cultural Resilience:**

In 2010, the Families Commission published a report on the effect of the economic recessions on Māori and the subsequent resilience strategies employed by Māori to mitigate its effects. The report draws on several examples of 'cultural' resilience as employed by Māori to overcome the changing social, cultural, economic and political climate which has come about since colonisation and the signing of The Treaty of Waitangi.

The first example surrounding resilience and *whakapapa* highlights the importance of *ahi kaa*. This term has been loosely defined as ‘keeping the home fires burning’ and maintaining links with traditional lands and networks. The ability to retain strong connections back to *tūrangawaewae* proved to be a strong cultural protective factor especially during the urban-drift era, and continues to do so today (Baker, 2010).

The next example is based on resilience and the development of Māori land-based assets. This example highlights the development of Māori trusts and incorporations that have been created since the 1980s. These trusts and incorporations were developed to manage land that was once under Māori Reserve Lands (e.g., Wakatu Incorporation and The Wellington Tenths Trust). They also sought to better manage the newly acquired (or re-acquired) assets that formed part of various Treaty settlements. By investing in the welfare of their descendants, these entities play an important role in the social, cultural, spiritual and financial development of their people (Baker, 2010).

Resilience and education is similarly highlighted with the development of *Kohanga Reo* (*te reo Māori* early childhood immersion centres), *Kura Kaupapa*, (*te reo Māori* immersion school) and *Wharekura* (*te reo Māori* immersion secondary school) as interventions in reviving, progressing and maintaining the Māori language, culture, and values (Baker, 2010). These institutions were developed during a period when Māori achievement in education was low, and the Māori language was at threat of dying away. While Māori educational achievement is still low in comparison to non-Māori (Te Puni Kokiri, 2012), these interventions have proven to be invaluable in lifting the educational achievements of Māori, as well as promoting and maintaining the Māori language (G. Smith, 2003).

Cultural resilience and economic opportunity highlights the many successful Māori businesses that have flourished pre- and post-Treaty settlements. Reference is

also made to the discussion document ‘The Māori Edge: Growth of Māori-owned business’ (Te Puni Kōkiri, 2007), which emphasises the economic advantage provided by including Māori traditional values, activities and protocols into business management and business models. These cultural mechanisms are summarised as:

- resilience/flexibility;
- inherent and acquired trading capacity;
- a culture well suited to transactions in growing markets, including the focus on relationship building and a long-term perspective;
- curiosity and increasing willingness to diversify;
- uniqueness/freshness, the ability to combine spiritual and physical elements;
- dual-world skills, the ability to be equally at home in more than one culture is a valuable commodity in the global marketplace;
- and a preference to under-promise and over-deliver (Te Puni Kōkiri, 2007, pp. 5-6).

This report therefore, outlines specific examples where Māori have exhibited resilience across multiple sectors of society. These strategies have contributed to Māori development, and will continue to advance the aspirations of Māori. Insofar as this research might inform the current study it is clear that certain cultural constructs (unique to Māori) will inform how resilience is perceived and shaped. However, its scope and broad approach to resilience is likely to reduce the extent to which more precise, and whānau focused conclusions can be drawn.

## **Purpose of the Study:**

The current health status of Māori leaves much to be desired. While health gains have been achieved over the past decades, health disparities still exist between Māori and non-Māori (Ministry of Health, 2010; Robson & Harris, 2007). In addition, the contemporary environment (both nationally and internationally) poses new challengers for whānau, *hapū*, and *iwi* well-being. The purpose of this research is to investigate the resilience strategies employed by Māori whānau, with a particular emphasis on cultural practices, behaviours and processes. The following five key questions provided guidance to the research process:

1. What protective factors do Māori whānau utilise, when faced with adversity?
2. What coping strategies do Māori whānau utilise when faced with adversity?
3. Do Māori utilise resilience strategies that are culturally specific?
4. What are the themes that would constitute a Whānau Resilience Framework?
5. How can this be applied to whānau and Māori health development?

In exploring these multiple issues a whānau focused, resilience-based investigation was conducted. It considered the key question of how whānau resilience might be initiated, promoted, and sustained. A particular emphasis was also placed on the capacity of whānau to remain resilient in the face of hardship and adversity.

This thesis is designed to build on the existing discourse and to also contribute to existing policy initiatives, such as Whānau Ora (Te Puni Kōkiri, 2010). It aims to better understand the notion of whānau resilience and to offer insight into the features and characteristics which resonate best with Māori whānau. It is expected that this

information will not only better elucidate the experiences of Māori, but also provide a catalyst through which policies and interventions (in particular) might better align with the expectations of Māori.

### **Scope of the Study:**

In determining the scope of the study, one needs to consider whether the implications and findings of this study can be applied to all Māori whānau. This notion assumes that the data collected from the fifteen (n=15) whānau and ten (n=10) key informants can be applied and reflect the experiences of all Māori whānau. Within the context of this research however, there is insufficient scope to ensure that the findings are able to be generalised across the Māori population. Indeed, while Māori share certain features and common characteristics, Māori are as diverse and complex as other sections of the population (Durie, 1995, 1998b). However, it is expected that the method of purposeful sampling and the commonality that exists within Māoridom will aid in the process of generalising the findings and securing the utility of the research.

As with many studies there were a number of delimitations associated with this particular investigation. Firstly, due to a lack of time (i.e., within four academic years), personnel (researcher only), and geographical distance from the participating whānau (whānau were situated throughout Aotearoa), the number of whānau were limited to fifteen (n = 15). Moreover, with the limited number of whānau, a number of crises or life shocks (e.g., family violence, lack of suitable housing) did not have representation in the study. Obviously, these findings cannot logically extend the limits of current knowledge or test the findings of others because there have been no previous studies conducted on this topic with specific reference to whānau-level resilience strategies.



## **Rationale:**

The rationale for this study stems from three issues. Firstly, and as noted, the current socio-economic, health and demographic profile of Māori leaves much to be desired. Notwithstanding the major advances achieved since the dispossession and depopulation of the 19<sup>th</sup> century, Māori continue to lead a number of negative socio-economic indicators such as unemployment, imprisonment, suicide, ill-health, and low educational achievements (Department of Corrections, 2012; Ministry of Education, 2012; Ministry of Health, 2010, 2012; Robson & Harris, 2007; Statistics New Zealand, 2013).

Māori development has dominated academic, community, *hapū* and *iwi* discourse for generations. It is also a theme which has formed the backdrop to this research and which will ultimately guide its application. While the definition of Māori development will inevitably vary, its fundamental principle is based on the idea that Māori are better placed to achieve their future aspirations and that the lives of Māori are enhanced as a consequence. Investigations into Māori development are often set against a conflicting backdrop of Māori underachievement. Māori rates of imprisonment (Department of Corrections, 2012), unemployment (Statistics New Zealand, 2013), and inequalities in health (Ministry of Health, 2010; Robson & Harris, 2007) are often discussed and are typically used to highlight existing disparities or opportunities for growth and development. Whānau resilience has the potential to progress Māori development aspirations as resilience strategies can be utilised to overcome factors or behaviours which can lead to negative health behaviour and/or further crises and hardship.

This need for Māori perspectives on resilience, leads into the second issue, namely, the lack of understanding regarding resilience for Māori and whānau in

particular. At present, there is limited New Zealand literature which examines resilience amongst Māori (Moewaka-Barnes, 2010), and within Māori whānau. Considerable international research has described the various components of resilience and the multiple factors which impede or promote resilient individuals (Bonanno, 2004; Garnezy, 1974; Ungar, 2008; Werner, 1990). Yet, an aligned issue is the extent to which these generic resilience concepts or factors are in fact applicable to Māori. While the concept of resilience has global, cultural, and contextual implications (Ungar, 2004, 2008, 2005b), the manner in which these are able to embrace the unique experiences of Māori are less well understood (Moewaka-Barnes, 2010). Furthermore, while cultural considerations have somewhat contributed to the debate on resilience, the existing discourse is not extensive nor have these issues been comprehensively discussed.

The consequences of this knowledge gap are likely to be felt at a number of levels. Certainly the academic and research fraternity has highlighted the lack of robust debate and the manner in which generic theories on resilience can inform our understanding of Māori development (Moewaka-Barnes, 2010). Others have likewise considered the implications for health and social service delivery (Boulton & Gifford, 2011).

Finally, this study on whānau resilience also sought to shift the focus beyond deficit thinking and understandings of Māori whānau. Pihama and Gardiner (2005) note that the deficit theory has had a strong presence within the social service sector, often highlighting that underachievement, unemployment, and crime as being based within the family unit. Such views offer a limited understanding of the complexities of whānau experiences (Pihama & Gardiner, 2005). While aware of the various and often pervasive factors which negatively (and often unfairly) impact on Māori lives, this research seeks

to examine the whānau resilience strategies which promote and foster growth and develop and which often take place in the face of considerable adversity.

To this end, rather than focusing on family failures or deficits, a family resilience approach focuses on strengths and achievements (Greeff & Human, 2004; Walsh, 2006). For example, the Whānau Ora initiative developed by the Coalition Government in 2010 highlighted the need for whānau based services as well as a reorientation towards empowering and strengthening Māori whānau. Implicit is the desire to promote whānau potential, whānau capacities, and whānau capability - rather than investigate whānau dysfunction or the management of whānau inadequacies (Te Puni Kōkiri, 2010). Integral to Whānau Ora is the identification and promotion of resilience strategies that Māori whānau are able to draw upon in times of adversity (Te Puni Kōkiri, 2010). Moreover, it is the capacity of whānau to overcome hardship or misfortune, to build toward the future with greater hope and enthusiasm, and to enjoy better health and well-being.

Indeed, Māori whānau resilience must inevitably take into account our unique history, culture, experiences and socio-demographic profiles. McCubbin, Thompson, Thompson and Futrell (1998) highlight the need 'to develop measures which include ethnic considerations, but which are directed at common features of youth and family coping common across groups' (p. 322). It is in this regard that this research might inform contemporary discourse, to reveal the unique perspectives of Māori and to make a broader contribution to Māori development.

## **Chapter Summaries:**

This thesis is an examination of the resilience strategies employed by Māori whānau who have experienced hardship, trauma and adversity. An added feature of this

research is the desire to consider specifically the cultural components of resilience and to examine how they might differ from more established theories and conventions.

While there are certainly resilience factors that are generic to all people, regardless of race, rank, or situation, this research is interested in the notion of whānau resilience – the unique strengths inherent within Māori and which are fundamental to Māori development. In considering this issue it draws from a range of sources, both historical and contemporary, and which has led to the development of a *Whānau Resilience Framework*.

Chapter I has outlined a number of historical and contemporary events and the subsequent effects on Māori health, Māori well-being and Māori development. It explored the various issues and initiatives which shaped the post-colonial experience of Māori. It further outlined the rationale and purpose of this thesis and the desire to explore Māori perceptions of whānau resilience.

Chapter II discusses the concept of resilience. It briefly outlines the genesis of the term ‘resilience’ and its initial emphasis on individual rather than collective factors. The discussion then focuses on the merits of family-level resilience and the literature pertaining to this subject area. It concludes by canvassing the Indigenous discourse, and the limited studies from New Zealand researchers and those specifically focused on Māori.

Chapter III has a particular focus on ‘whānau’. It canvasses the many and varied meanings of ‘whānau’, and how this was viewed in both historical and contemporary times. Government initiatives which seek to improve and develop the health of whānau are also discussed. Finally, definitions for ‘whānau’ and ‘resilient whānau’ are offered and used to further guide the research process.

Chapter IV outlines the research methodology. It begins by outlining the conceptual foundation of the research. In this case, a comprehensive overview of *kaupapa Māori* as a research approach is discussed as well as a rationale for its use. Specific qualitative methods, such as sample size and data analysis techniques, are also described.

Chapters V, VI, VII and VIII discuss the pertinent findings gleaned from the whānau cohort. Each of these four chapters represents a particular resilience theme which embodies the various whānau cohort responses as they relate to ‘whānau resilience’.

Chapter IX is a synthesis of the previous four chapters and provides an initial outline of the components of the *Whānau Resilience Framework - Whakaoranga Whānau*. It further discusses the specific components of the *Whakaoranga Whānau Framework*, and how these function and intersect.

Finally, Chapter X further examines the findings of research, to draw conclusions and implications, but to ultimately position the thesis within the context of Māori development and as a catalyst for robust and resilient whānau.

### **The Researcher:**

It is important at this point to outline my subjective approach to this thesis. As Marsden (1992) states, ‘the route to Māoritanga through abstract interpretation is a dead end. The way can only lie through a passionate, subjective approach’ (p. 117). I am of Ngāti Pikiao and Te Rarawa descent. My academic experience includes a Bachelor of Physical Education with First-Class Honours (BPhEd) and a Masters of Physical Education with Distinction (MPhEd). Coupled with vocational research at various

universities and Indigenous research centres, I have a strong understanding of the research processes required to achieve valid and reliable findings.

I am in a somewhat unique position as a member of the first generation of *Kohanga Reo* graduates to attend and graduate from university. Moreover, attendance at *Kura Kaupapa Māori* (Māori language-medium primary school) and a Māori secondary boarding school has further developed the cultural knowledge required for this type of research. Because of this unique background I was able to offer new and alternate perspectives and insight into the various issues investigated. Drawing on vocational and life experiences within various Māori communities and settings, I developed new knowledge by interpreting the parameters that were studied and applying them into a conceptual framework. Burns (2000) supports this process by stating that it is important in qualitative research to not attempt to remove the researcher from the data but accept and instil his or her influence into the results.

The underlying reason for undertaking this research stemmed from a keen interest in Māori health and well-being, as well as the various components of *tikanga* Māori and a Māori worldview. While attending Te Aute College, I learnt about the various achievements of the Te Aute Alumni. The accomplishments of Te Aute Alumni such as Tā Apirana Ngata, Tā Peter Buck, Tā Maui Pomare, and the advances achieved by the Young Māori Party were re-iterated constantly during my education at Te Aute College. The question was often posed by staff and senior students, ‘How will you contribute to the well-being of our people (Māori people)?’. Indeed this environment, coupled with my strong sense of Māori identity which was developed through my upbringing in the Māori world, instilled in me a desire to contribute positively to the health and well-being of Māori. As I progressed through university and noticed the lack of Māori perspectives within the papers I was studying, I chose to contribute to Māori

health and well-being through academia and research. This led me to complete Honours and Masters degrees which focussed on Māori aspects of Sports and Exercise Psychology. This PhD study, is therefore an extension of my previous research, and an attempt to contribute to overall Māori development.

To conclude, while I have positioned myself in this specific section as an insider (active voice), there are various sections and chapters within the thesis whereby I position myself from an outsiders perspective (passive voice). This particular section required an active voice as the purpose of this section was to provide background knowledge of my upbringing to highlight the reasons for undertaking this study. What lead me to do a PhD in Public Health, and to also reccount my experience as a researcher. Moreover, in other sections of this thesis, I position myself as an outsider by refeering to Māori as ‘them’ or ‘they’, or simply ‘Māori’. ‘They’ or ‘them’ is sometimes used to denote Māori from many years ago, or Māori from a different tribe of my own. In some instances I specifically chose to use the term ‘Māori’ as in ‘us’ or ‘we’, and more importantly, to refer to all Māori people from the past and into the future.

Although this repositioning throughout the thesis may appear inconsistent, the position that has been chosen for a specific section or chapter helps to provide authority to what is been written. Whether that be in an active or passive voice.

## **Conclusion:**

This chapter has outlined a number of historical and contemporary events and their subsequent effects on Māori health and well-being. While various Māori initiatives during the 19<sup>th</sup> and early 20<sup>th</sup> centuries did much to prevent the anticipated extinction, new problems emerged and which have continued to impact on Māori society and Māori health. Despite this, historical accounts for Māori in particular, have been used to

highlight cultural factors of resilience or to demonstrate ‘cultural resilience’ (Baker, 2010). This chapter also sought to outline the rationale and purpose of this thesis, as it developed an argument for the need to consider Māori perceptions of whānau resilience, and a desire to move beyond a deficit focus of Māori whānau.

In light of these issues, the next chapter focuses on the resilience and family resilience discourse. It canvasses the international literature and Aotearoa-based resilience literature, with a focus on identifying those resilience strategies which are useful for families, and more importantly, Indigenous and Māori whānau.



## **CHAPTER II: NGĀ TĀTARI TUHINGA - RESILIENCE THEORY AND DISCOURSE**

### **Introduction:**

The previous chapter introduced the study, including an outline of the unique history of Māori as they adapted to life in their new homeland of Aotearoa, and the challenges that arose as a result of European contact and subsequent colonisation. Despite threats to the survival of Māori - cultural decay and population decline - various developments would conspire to ensure that Māori endured, and which were to likewise highlight a unique Māori approach to development and resilience (Baker, 2010).

The purpose of this chapter is to further examine the concept of resilience, its theory and discourse, as well as its contemporary extension toward the idea of 'family resilience'. It also seeks to describe the application of these concepts to Indigenous cultures, and to review local and international literature around resilience and its implications for families.

This comprehensive review of literature was used to shape the research and to construct the broad frame within which it would eventually sit. A large amount of material was gathered from international sources and used to complement what has been produced locally. Searches were conducted via the Massey University library database (e.g., Medline, JSTOR, PubMed, PsychLit, PyschInfo, ScienceDirect) and through other web-based databases (e.g., Ministry of Māori Development, Ministry of Health, Ministry of Education, and Ministry of Social Development). The World Wide Web was also helpful, particularly in sourcing international and Indigenous research literature such as research reports not available on the databases mentioned above (e.g.,

*Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health* and the *Journal of Aboriginal Health*).

Search parameters were developed to avoid unrelated information being sourced. These search parameters were guided by the following keywords; resilience, resiliency, family resilience, cultural resilience, Aboriginal resilience, Indigenous resilience, Māori resilience, coping strategies, protective factors, adaptability and hardiness. Following the initial search a preliminary list of potential documents was generated. Using a set of guidelines that reflected on the aims of this thesis, the preliminary list was further reduced so that only the most relevant material was eventually requested and reviewed. The researcher was then able to synthesise this information - to assess its relevance to the study, to make key assumptions, identify areas of interest, major theories, and areas for consideration or focus.

### **Defining Resilience:**

Resilience has been the focus of researchers, clinicians and practitioners for over 50 years (Ungar, 2008). Interest in the resilience discourse emerged out of early investigations into ‘at risk’ children, and the attempt to hypothesise why some children were able to overcome adversity while others could not (Garmezy, 1974; Werner, 1993; Werner & Smith, 1982). Other sociological studies such as Antonovsky, Maoz, Dowty, and Wijsenbeek (1971), were able to examine the impact of certain situations and settings and to provide additional insight into how individuals and groups could deal with extreme adversity. For example, how Jewish prisoners were able to survive the concentration camps, and the impact of family separation during the World War II (Hill, 1958). The overall findings from these studies revealed that despite various stressors impacting on the health and well-being of individuals, inherent personality traits and

coping strategies emerged which enabled them to remain resolute and overcome adverse situations (Cohler, 1987; Garmezy, 1991).

Resilience is a term originally derived from the subject area of physics (Gunnestad, 2003). Physicists' define resilience as the ability of an inanimate object to regain its original shape after being stretched, bent or compressed (Boulton & Gifford, 2011; Gunnestad, 2003). From a social science perspective, resilience can be broadly described as the ability to withstand and rebound from crisis and adversity (Ungar, 2005a; Walsh, 1996, 2002; Wesley-Esquimaux, 2009). In addition, Werner (1995) identifies three general descriptions of resilience:

1. good developmental outcomes despite high risk status;
2. sustained competence under stress; and
3. recovery from trauma.

As a concept, 'resilience' has been used to describe multiple issues, settings and situations. While a universal definition of resilience has yet to emerge (McGuire, 2010) it has been used to encompass biological, psychological, and environmental processes (Rolf & Johnson, 1999). Alternative and related terms include 'invulnerability', 'hardiness' and 'protective factors' (Anthony & Koupernik, 1974; Hoge, Austin, & Pollack, 2007; Walsh, 2002). To a large extent, resilience is context dependent and tends to vary according to the situation and setting – what has occurred, its setting, for what purpose or objective.

The resilience research has found that a number of protective factors and coping strategies are utilised by individuals to overcome crisis and adversity (Benzies & Mychasiuk, 2009; Olsson, Bond, Burns, Vella-Broderick, & Sawyer, 2003). Protective factors can be defined as the mechanisms that moderate the effects of crises or risk (T. Newman, 2004), while coping strategies are typically 'specific efforts, both behavioural

and cognitive, that people use to master, tolerate, reduce or minimise stressful event’ (Donnellan, Hevey, Hickey, & O’Neill, 2006, p. 1208). Drawing on their extensive reviews of the resilience literature, Olsson and colleagues (2003) and Benzie and Mychasiuk (2009) provide useful summary tables of the protective factors that have been empirically verified in one or more studies. These two tables have been grouped together and adapted to show a socio-ecological perspective of resilience (see Table 1 below).

**Table 1 - A Socio-ecological Perspective of Resilience:**

<b>Individual-level resources</b>	<b>Protective mechanism</b>
Constitutional resilience	Emotional regulation Positive temperament Belief systems Health
Sociability	Responsiveness to others Pro-social attitudes Attachment to others
Intelligence	Academic achievement Planning and decision making
Communication skills	Developed language Advanced reading
Personal attributes	Effective coping skills Tolerance for negative affect Self-efficacy and Self-esteem Foundational sense of self Internal locus of control Sense of humour Hopefulness Strategies to deal with stress Enduring set of values Balanced perspective on experience Malleable and flexible Fortitude, conviction, tenacity and resolve

<b>Family-level resources</b>	<b>Protective mechanism</b>
Supportive families	Parental warmth, encouragement, assistance Cohesion and care within the family Close relationship with a caring adult Belief in the child Stimulating environment Non-blaming Marital support Social support Family structure
Socio-economic status	Material resources (i.e., adequate housing and income)
<b>Community-level resources</b>	<b>Protective mechanism</b>
School experiences	Supportive peers/ peer acceptance Positive teacher influences Success (academic or other)
Supportive communities	Involvement in the community Supportive mentors Non-punitive Safe neighbourhoods Access to quality schools and health care Provisions and resources to assist belief in the values of society

This socio-ecological view of resilience identifies the role of families, communities and the environment in the development of resilience. To this end, a more concerted research effort on ‘family resilience’ (i.e., family and community-level resilience factors) has been conducted over the past 30 years. While this table offers a reasonably comprehensive list of protective factors, reference to coping strategies is limited. Furthermore, there is no consideration of protective factors which may result from cultural beliefs, behaviour and identity.

### **Individual Resilience vs. Family Resilience:**

Research into resiliency initially focused on personality traits and coping styles that enabled *individuals* to overcome stress and adversity (Cohler, 1987; Garmezy,

1991). These traits and coping styles were viewed as being either biologically inherited (nature) or acquired through life-course or life-style factors (nurture). This view of resilience offers a simple perspective on how resilience might be promoted, at an individual level at least, but is less useful in terms of group settings or family environments.

More considered research into this area suggests that family resilience is the result of an interplay between the individual's (within the family unit) resilience characteristics, as well as the characteristics of the family unit as a whole (Masten & Coatsworth, 1998; H. McCubbin & McCubbin, 1988; Stout & Kipling, 2003). In more recent times, family and group-related factors have featured as part of the research literature and have done much to elucidate the various resilience factors which exist at the family level (H. McCubbin & McCubbin, 1988; Simon, Murphy, & Smith, 2005; Walsh, 1996, 2006). It is likely that a Māori approach to resilience would cast a broader lens – beyond the individual, and to embrace the *whānau*, *hapū* and *iwi* as a collective (Penehira & Green, 2010).

Both Richardson and Hawks (1995) and Tousignant and Sioui (2009) believe individual resilience is itself a precursor to family resilience. Indeed, many Indigenous cultures hold strong to the belief that children can learn resilience strategies from elders or adults therefore contributing to overall family resilience (e.g. Iris Heavyrunner & Morris, 1997; Korhonen, 2007; Tousignant & Sioui, 2009). In addition, individuals are rarely born 'resilient'; it is the family and community which have a profound effect on fostering resilience (Martin-Breen & Anderies, 2011). Therefore, a family-level perspective of resilience is of greater utility as adversity can often strike family members as a collective, thus 'eliciting responses that can be either constructive or

destructive depending on the interplay of various psychological, cultural and socio-economic factors' (Stout & Kipling, 2003, p. 21).

To summarise then, each family member contributes to family resiliency, in conjunction with the resilience characteristics of the family as a unit (Walsh, 2006). While this thesis moves beyond individual resilience characteristics and towards more family or group orientated features, it is nevertheless worth considering the dynamic interplay between individual resilience factors and how these inevitably impact on the resilience potential and capacity of the group or family. The role of individuals and their capacity to contribute to family resilience is undeniable (Masten & Coatsworth, 1998; H. McCubbin & McCubbin, 1988; Stout & Kipling, 2003; Walsh, 2006), however the extent to which this happens, the role of mitigating factors, and the interactions between group members is less certain and more difficult to predict. The following section sheds some light on these questions by describing family resilience and some of the pertinent models which can explain family resilience processes.

### **Family Resilience:**

A family resilience approach is based on the principle that all families have inherent strengths and the potential for growth and development (K. Black & Lobo, 2008). McCubbin and McCubbin (1988) define family resilience as:

characteristics, dimensions, and properties of families which help families to be resilient to disruption in the face of change and adaptive in the face of crisis situations. (p. 247)

Walsh (1996) further describes it as the ability of a family unit to respond positively to a stressor or unfavourable event:

family resilience seeks to identify and foster key processes that enable families to cope more effectively and emerge hardier from crises or persistent stresses, whether from within or from outside the family. (p. 263)

Both definitions contain two important considerations of resilience: 1) the family demonstrates a positive response to an adverse situation; and 2) the family emerges from the situation feeling strengthened, more resourceful, more confident, and developmentally advanced (Simon et al., 2005).

Others have also highlighted the fact that family resilience is intuitively a multidimensional construct which can be considered across three key components (Masten & Coatsworth, 1998). The first is concerned with the duration of the adversity and the length of time families are able to endure an adverse situation or event. This may be acute, referred to as a 'challenge' (e.g., insufficient funds to pay bills), or it may be long-term and considered a 'crisis' (e.g., solo parenting) (Buckley, Throngen, & Kleist, 1997; Golby & Bretherton, 1999; H. McCubbin & McCubbin, 1988; Walsh, 2006). Challenges are short-term situations that normally only require adaptation (i.e., relatively minor challenges to the family's normal functioning). On the other hand, crises are chronic situations that require more active adjustment (i.e., significant changes that affect the family's normal functioning) (H. McCubbin & McCubbin, 1988). Either way, developing resilience is an on-going process which may require several years of adaptation to overcome the adversity (Tousignant & Sioui, 2009).

The second component considers the life-stage of the family when they encounter adversity (H. McCubbin & McCubbin, 1988; Walsh, 2006). To this end, family resilience is an on-going interactive process that can require different responses during different life-stages of the family's development. A family may use their



strengths to overcome a challenge or crisis during one life stage; however, the same strengths or strategies may not suffice at other stages of life.

The third and final component is connected to the internal and external sources of support that a family may utilise during a challenge or crisis (H. McCubbin et al., 1998; Walsh, 2006). For example, some resilience research suggests that greater resilience is found in those families that seek support outside of their immediate family (i.e., external to their social environment and which might include extended family members, friends and community members) (H. McCubbin et al., 1995; Walsh, 1996, 2006). This notion of ‘branching out for support’ may well resonate amongst those cultures that place a greater emphasis on interdependence and connectedness (H. McCubbin et al., 1998). For example, Māori have a tendency towards inter-dependence amongst family members (including the extended family), as opposed to independence (Durie, 1998b). In this sense, Māori may well rely on external, as opposed to internal, sources of resilience.

The presence and interaction of these three components will influence both the daily functioning and long-term adjustment of the family. It also highlights that certain protective factors and coping strategies are employed by families depending on the crisis or challenge, and the life-stage of the family. In addition to these three components of family resilience, some researchers have also developed theoretical models which can further demonstrate the key processes in family resilience (Gunnestad, 2003, 2006; Gunnestad, Larsen, & Nguluka, 2010; H. McCubbin & McCubbin, 1988; H. McCubbin et al., 1995; Walsh, 2006).

## **Family Resilience Theoretical Models:**

There are several systems-oriented research, prevention, and intervention models of general resilience that provide a framework for identifying key processes when an individual needs to cope with a stressful situation (Simon et al., 2005). From these models, three focus particularly on family resilience. Two of these, the *Resiliency Model of Family Adjustment and Adaptation* (H. McCubbin & McCubbin, 1988; H. McCubbin et al., 1995), and the *Systems Theory of Family Resiliency* (Walsh, 2006) provide a useful link between family-systems and resilience practices. While both have emerged out of a Western epistemological discourse, Cross (1998) provides a relational view of family resilience based on an Aboriginal and Indigenous world view.

Two other models that are of interest to this thesis, although not specifically designed for family-level resilience, are based on the models developed by Gunnestad (2003, 2006; Gunnestad et al., 2010), as well as Walters and Simoni's (2002) stress-coping model, and which again have emerged from work with Indigenous peoples.

### **The Resilience Model of Family Adjustment and Adaptation:**

The *Resilience Model of Family Adjustment and Adaptation* (H. McCubbin & McCubbin, 1988; H. McCubbin et al., 1995; Patterson, 1988) helps explain the roles played by family strengths, resources, and coping mechanisms as families' progress through various life stages. This model proposes that families attempt to maintain a balance in their day-to-day functioning by utilising their capabilities (resources and coping strategies) to meet demands (stressors and strains). The meanings that the family ascribe to the situations (demands) and the resources/strategies they have (capabilities) act as mediators and are critical in achieving this balance (Patterson, 1988). The

subsequent outcome can be conceptualised as family adjustment or family adaptation, with both ranging on a continuum from good to poor (Patterson, 1988).

This model also contains two time phases; adjustment and adaptation – which are separated by a family crisis. During the adjustment phase there are only minor changes in the family functioning as their existing capabilities meet the demands. However as the demand (crisis) exceeds the family capabilities, an imbalance occurs. During this phase of adaptation, the family attempts to correct the imbalance and restore homeostasis by (a) acquiring new (adaptive) resources and strategies, (b) reducing the demand, and/or (c) changing the way they see the situation (i.e., prescribe a new meaning to it) (Patterson, 1988). This model also considers the demands and capabilities at multiple levels of systems - that is, individual family members, the family unit and its subsystems, and the community. Over time, families attempt to maintain homeostasis by using capabilities from one level of the system to meet demands at another level (Patterson, 1988). For example, a resilience characteristic such as positivity that can be considered an individual-trait of resilience, may be utilised by the whānau as a whole to help cope with adversity.

This prevention type model allows practitioners to identify adaptive resources and coping strategies that are inherent in families', which can then be utilised should the situation arise. The model has been successfully applied to post-divorce (Golby & Bretherton, 1999), military (H. McCubbin, 1988), and ethnically diverse families (H. McCubbin & McCubbin, 1988).

### **The Systems Theory of Family Resiliency:**

The *Systems Theory of Family Resiliency* (Walsh, 2006) focuses on three key processes of family resilience: family belief systems, organisational patterns, and

communication. It is essentially a meta-framework which can be used in conjunction with various interventions, and was informed by research in social sciences and clinical practice (Walsh, 1996, 2002). Briefly, a family belief system is concerned with the promotion of a positive belief system. Organisational patterns relate to the families ability to be flexible, cohesive, and the ability to identify available resources. The communication process focuses on open dialogue amongst family members and the fostering of positive levels of trust and mutual respect. In constructing a family resilience framework, Walsh (2002) combined these processes into a table for use by practitioners (see Table 2 below).

**Table 2 - Key Processes in Family Resilience:**

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<b>Belief Systems</b>
1. Making meaning of adversity; Resilience as relationally based Family life cycle orientation Sense of coherence Appraisal of crisis, distress and recovery
2. Positive outlook; Hope and optimistic view Focus on strengths and potential Active initiative and perseverance (can-do spirit) Master the possible (accept what cannot be changed)
3. Transcendence and spirituality; Larger values and purpose (future goals and dreams) Spirituality (Faith, communion, rituals) Inspiration (envision new possibilities) Transformation (learning and growth from adversity)
<b>Organisational Patterns</b>
4. Flexibility Capacity to change and reorganise Counterbalanced by stability
5. Connectedness Mutual support, collaboration and commitment Respect individual needs, differences, and boundaries Strong leadership Varied family forms (co-operative parenting/caregiving teams) Couple/co-parental relationship (equal partners) Seek reconnection, reconciliation of troubled relationships
6. Social and economic resources Mobilise extended kin and social support Build community networks Build financial security
<b>Communication Processes</b>
7. Clarity Clear, consistent messages Clarify ambiguous information
8. Open and emotional sharing Share a range of feelings Mutual empathy Responsibility for own feelings and behaviour Pleasurable interactions (e.g., humour)
9. Collaborative problem solving Creative brainstorming and resourcefulness Shared decision making and conflict resolution Focus on goals Proactive stance (e.g., prevent problems and avert crises)

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Walsh (2002) states that this type of family resilience framework is particularly useful when used by clinicians or family therapists. Firstly, the framework focuses on family strengths as opposed to pathology or dysfunction. Secondly, it assumes that no single model can fit all families or situations. Finally, family resilience processes change over time as families evolve through their life-cycles. Therefore, although there is no universal framework or criteria of family protective factors and coping strategies (K. Black & Lobo, 2008), Walsh (2002) nonetheless provides an useful starting point.

### **The Model of Development of Resilience:**

Gunnestad (Gunnestad, 2006; Gunnestad et al., 2010) developed a model of resilience following extensive research with children of two Indigenous populations in Norway and Southern Africa. Three categories of protective factors were identified, all of which contribute to resiliency through influencing basic psychological processes:

1. Network factors (external support)
2. Abilities and skills (internal support)
3. Meaning, values and faith (existential support).

Network factors can include at least one safe attachment, friends, family, and community institutions. Abilities and skills can include those such as temperament, practical skills, intellect, and strengths gained from previous experiences. Meaning, values and faith can include hope, love, honesty, faith, fellowship, and prayer.

The various protective factors can interact with each other and are not necessarily independent or mutually exclusive. For example, individuals who function as part of a social circle (network) can be positive role models for children, influencing the child's development and their skills and interests (Gunnestad, 2006). In addition, the networks also influence the values the children adhere to, as the children identify

themselves with the values of the people they hold in high regard (Gunnestad, 2006). While it is beneficial to identify the protective factors beneficial to children's resiliency, Gunnestad (2006) also drew on Rutter's (1990) suggestion that identifying the protective factors alone does not explain resiliency. But rather, resilience is developed when these protective factors initiate certain psychological process within individuals (Rutter, 1990).

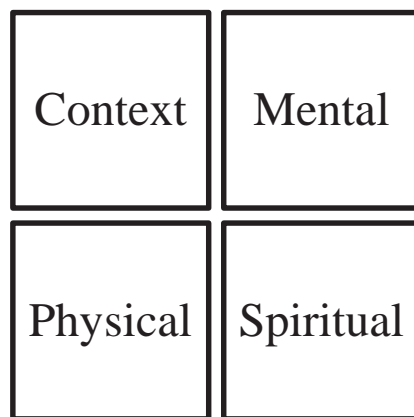
Firstly, these protective factors create resilience by building a positive self-image. For example, 'I can speak *te reo*, I am good at my schoolwork, and I *manaaki* and *awhina* (help and assist) people'. This type of self-image can motivate a child to make a greater effort to behave accordingly and therefore contribute to resiliency (Gunnestad, 2006). This leads on to the second psychological process that can initiate resiliency, which is a reduction in the effects of risk factors. For example, having an aunty or grandmother who is caring and loving (a protective factor) can help reduce the effects of a chaotic home (Gunnestad, 2006). Finally, the protective factors can promote resilience by breaking a negative cycle and opening up new opportunities. If a child's parents dropped out of school at an early age and are unemployed, the child may lose hope and have low expectations of attending school and gaining a job. However, if the family is involved in a sports group, church group or cultural group (e.g., *marae* or *kapahaka* [a traditional Māori performing arts] group) then the child may have friends whose parents are employed and can provide information and positive role modelling. In this process, hope is developed and new opportunities may arise (Gunnestad, 2006).

This *Model of Development of Resilience* (Gunnestad, 2006; Gunnestad et al., 2010) is of particular interest to this thesis as it drew on the thoughts and responses of Indigenous and minority participants. Although there is a considerable amount of

resilience and family resilience research and models, an Indigenous perspective is lacking.

### **A Relational World-view of Resilience:**

Cross (1998) provides an Indigenous model of family resilience based on a circular or relational world view (see Figure 1). Unlike the linear-based models which are framed around Western notions of cause and effect, Cross (1998) proposes a model which is more inter-dependent and made up of four quadrants.



**Figure 1. A relational view of Indigenous family resilience (Cross, 1998).**

It is similar to the *Whare Tapa Whā* model of Māori health (Durie, 1998b) in that balance and symmetry between the four quadrants is integral to fostering family resilience. Moreover, the four quadrants are labelled in a similar manner to those of the *Whare Tapa Whā* model (Durie, 1998b). These four quadrants are now discussed.

The context quadrant acknowledges ‘strength-producing or harmonizing resources’ that are evident within the social environment (i.e., family, culture, work, community, and cultural or family history) (Cross, 1998, p. 151). In this sense, the context can either positively or negatively influence the resiliency of the family. In regards to the context of the family, like Durie (1998b), Cross (1998) emphasises the



importance of family inter-dependence as a determinant of family resilience amongst Indigenous families. Cross (1998) stresses the point that family inter-dependence does not foster dependence nor does it suppress independence, but rather it is a 'system in which everyone contributes in some way without expectation of reciprocity' (p. 151). In addition to family inter-dependence, family resilience is supported by role models, elders and healers, community norms, church structures and other social organisations (Cross, 1998).

The mental quadrant acknowledges that family resilience is supported by the intellect, emotion, memory, judgement and experience of the individuals within the family. Cross (1998) highlights the fact that for many Native people the ability and intellect required to deal with adversity is quite often gained through 'story-telling' and cultural or traditional 'narratives'. That is, when sitting around the kitchen table family members will often learn strategies for interacting with society and utilising resources. It is this transmission of knowledge and intellectual skills that can create resilience in younger family members. In addition, emotions related to dealing with adversity can also be learnt from these narratives and elder family members (Cross, 1998).

The physical quadrant relates to physiological function and acumen. This can include, but is not limited to, genetics, nutrition, substance use or abuse, sleep and rest, age and health status (Cross, 1998). Cross (1998) also moves beyond the physical (body) by highlighting the importance that roles within families have on their members, in that the contributions of family members, either physically, cognitively, or emotionally can have positive effects on the family. Cultural foods, the use of food to mark special gatherings and rituals, can also be essential to the health and resilience of the family (Cross, 1998).

The spiritual quadrant acknowledges that from a relational world view, and indeed a Māori world view, human behaviour is influenced by spiritual forces (Marsden, 1992, 2003). These spiritual forces may be manifested through spiritual practices/teachings, dreams/symbols/stories, intuition, and grace. These are culturally-acquired practices which provide positive spiritual intervention, and the means to help overcome adversity (Cross, 1998).

This relational view of family resilience provides a unique Indigenous perspective on family resilience. Integral to this model, is the need to sustain a balance between all four quadrants (Cross, 1998). The acknowledgement of Indigenous perspectives, such as a holistic and relational world view, story-telling and family interdependence, provides a culturally relevant view of how family resilience can be fostered and maintained within Indigenous families. Indeed, this model has similarities to a Māori world view and has thus provided guidance to this thesis.

### **‘Indigenist’ Stress-coping Model:**

In 2002, Walters and Simoni developed a preliminary stress-coping model which incorporated an Indigenous view. Of particular importance to this thesis is the incorporation of cultural resilience moderators such as identity, enculturation, spiritual coping, and traditional healing practices (Walters & Simoni, 2002). Based on socio-economic data of Native American women, the model posits that the effect of life-stressors can be moderated by these cultural moderators by strengthening psychological and emotional health, and therefore mitigating the effects of the stressor (Walters & Simoni, 2002). Therefore, in the context of this model, these cultural moderators act as cultural buffers or protective factors. An important consideration of this model is the emphasis on the cultural buffers or cultural protective factors, as opposed to the focus

on pathology that is frequently evident in research on Native peoples (Walters & Simoni, 2002).

### **Towards a Model of Whānau Resilience:**

To conclude, these models help explain the various processes that can promote resiliency within families. Notwithstanding the dearth of literature regarding these models, there has been limited testing or recognition of Indigenous perspectives and consideration for how these might impact on the models overall validity. Besides the work of Gunnestad (2006; 2010), Cross (1998), and Walters and Simoni (2002) who all worked with Indigenous peoples, there is a lack of resilience models which have been developed purely for Indigenous populations. This lack of Indigenous perspective has not gone unnoticed, as numerous Indigenous researchers have questioned the applicability, relevance and usefulness of the resilience discourse to Indigenous peoples (Boulton & Gifford, 2011; Penehira & Green, 2010; Scarpino, 2007).

### **An Indigenous Critique of ‘Resilience’:**

Whilst the resilience discourse has received popular interest worldwide, there are many Indigenous peoples who do not necessarily agree with the suitability and relevance of the term ‘resilience’ (Battiste, 2008a; Boulton & Gifford, 2011; Penehira & Green; Scarpino, 2007). There are three reasons in particular for why some Indigenous researchers disagree with the term ‘resilience’. The first is a generic concern about the relationship between resilience and ‘failure’ (Andersson, 2008; K. Edwards, Mitchell, Gibson, Martin, & Zoe-Martin, 2008). The second reason concerns the actual definition of resilience, in that it can denote the need for Indigenous peoples to become better at coping and being more resilient despite the socio-economic and health inequalities that

exist (Penehira & Green, 2010). The third and final reason stems from the insufficiency of the term 'resilience' to acknowledge the colonisation and unique history of Indigenous peoples (Boulton & Gifford, 2011; Penehira & Green, 2010; Tousignant & Sioui, 2009; Walters & Simoni, 2002). These three issues are now discussed.

The various definitions of resilience tend to be focussed around failure, adversity, risk and coping. Some Indigenous researchers have suggested the need to move beyond the negative tone implicit in these definitions by adopting a strengths-based approach which places greater emphasis on positive attributes (Andersson, 2008; K. Edwards et al., 2008). In this sense, the positive resources inherent in Indigenous populations, such as spirituality, cultural identity, and extended family networks, form the basis of resilience from an Indigenous perspective.

In support of these issues Penehira and Green (2010) note that some Indigenous researchers have openly criticised the resilience discourse, as it assumes an acceptance of 'responsibility' regarding the state of Indigenous affairs. In other words, by examining the resilience discourse and incorporating it into Indigenous thinking, Indigenous people in fact accept that the current status of Indigenous well-being is just that, and we must simply become more resilient (Durie, 2005; Penehira & Green, 2010).

Penehira and Green (2010) believe 'resistance' is a more suitable term as it alludes to decolonisation, it indicates a collective fight-back to end further discrimination, and it better exposes the inequitable distribution of power that has resulted from colonisation. They also propose that it is worthwhile considering how other terms such as 'sovereignty', 'self-determination' and the aforementioned 'resistance' may resonate better with Indigenous views and aspirations (Penehira & Green, 2010). Like 'resistance', both 'sovereignty' and 'self-determination' allude to decolonisation, and the subsequent struggle for equality. Lambert (2013) prefers the

term ‘endurance’, when referring to the local Māori community responses to the 2011 Christchurch earthquakes. Indeed, ‘endurance’ somewhat highlights the on-going dynamic processes involved when overcoming adversity (Tousignant & Sioui, 2009).

First Nations academic Dr Marie Battiste (2008a) prefers to use the term ‘renaissance’ as a representation of her generation, while ‘resilience’ was more pertinent to her parents’ generation:

The story of my parents and ancestors has been one about resilience, while my own generation’s story in the last 25 years has emerged as one of regeneration, a renaissance, built by a first generation of Indigenous people who struggled with the many facets of the education system to achieve ‘higher’ education degrees.

(p. 3)

Battiste (2008b) distinguishes between the negative effects her parents’ generation endured, their subsequent resilience, and the resurgence and revitalisation of Indigenous customs that occurred as a result of the work of the previous generation, which she terms renaissance. In many ways, her preference for renaissance echoes the reasons behind the Māori preference for resistance, sovereignty and self-determination, all of which highlight the on-going struggles of Indigenous peoples.

Merritt (2007) argues that if the concept of resilience is used as a lens on Indigenous communities, then it must be defined from an Indigenous context. To this end, Durie (2007) takes the resilience term a step further, and applies an Indigenous lens by defining Indigenous resilience as:

Superimposed on adversity and historic marginalization, Indigenous resilience is a reflection of an innate determination by Indigenous peoples to succeed.

Resilience is the polar opposite of rigidity. It provides an alternate perspective to the more usual scenarios that emphasise Indigenous disadvantage and allows the

Indigenous challenge to be reconfigured as a search for success rather than an explanation of failure. (p. 8)

Therefore, Indigenous resilience is based on the innate capacities inherent within Indigenous peoples and focuses on success rather than overcoming challenges (Andersson, 2008; Durie, 2007; McGuire, 2010). Despite threats of genocide and ethnocide that resulted from colonisation, Indigenous peoples in the Pacific especially, have overcome these challenges to the point now in where they are in significantly stronger positions than 150 years ago (Durie, 2007). In essence, it is the re-awakening of aspects associated with social and cultural resilience that Indigenous peoples have used to sustain themselves throughout history (Wesley-Esquimaux, 2009).

Durie (2007) identifies a number of broad determinants of Indigenous resilience. These include human capability, cultural affirmation, attitudinal biases, the economy, lifestyle environments, policies of the state, Indigenous mobility and leadership. Added to this, is the 'collective' determinant proposed by Heavyrunner and Marshall (2003), which comprises of spirituality, family strength, elders, ceremonial rituals, oral traditions, tribal identity, and support networks. Combined, these determinants add to the contextualisation of Indigenous peoples' resilience (McGuire, 2010; Scarpino, 2007). Ultimately, these determinants (together and individually) mediate between positive outcomes and less desirable outcomes such as disease, disadvantage and deprivation (Durie, 2007).

An added feature of Indigenous resilience, and as highlighted by the broad determinants mentioned above, is its ability to recognise the multiple levels at which resilience may operate, as opposed to the strictly individual or family-level resilience strategies that permeate in the general Western discourse on resilience. Therefore Indigenous resilience is ecological, in that it may include individual, family,

community, national and international (across Indigenous populations) levels of resiliency. Thus each level can influence another, and all contribute to the overall theme of Indigenous resilience.

Another important consideration is that the social sciences research literature cannot be ‘uncritically transplanted to Aboriginal peoples’, nor can a research approach to Aboriginal resilience be conducted in the conventional academic manner (Tousignant & Sioui, 2009, p. 46). In this regard, the Western linear-type epidemiological models of risk and protection cannot capture the mental, physical and spiritual elements that are imperative to an Indigenous holistic world view (Burack, Blinder, Flores, & Fitch, 2007; Scarpino, 2007), and which form the basis of Indigenous resilience. Accordingly, a holistic approach to resilience will be better placed to help achieve Indigenous goals and aspirations (Cross, 1998).

Despite the objections to the applicability and usefulness of the resilience term within an Indigenous world view (e.g. Battiste, 2008b; Boulton & Gifford, 2011; Penehira & Green, 2010), there is scope in considering an Indigenous resilience discourse. The holistic and strengths-based approach of Indigenous resilience, as well as its consideration of colonisation, cultural traditions and beliefs, provides a culturally relevant lens from which to view resilience in Indigenous populations. To some extent, Indigenous researchers have adapted the term ‘resilience’ to better suit the needs and aspirations of Indigenous populations (Penehira & Green, 2010). For the purposes of this thesis the term ‘resilience’ will be utilised in its broader sense, encompassing the components of both Family Resilience and Indigenous Resilience.

## **Cultural Resilience and Indigeneity:**

This thesis seeks to demonstrate the (Indigenous) resilience processes employed by Māori whānau who have faced adversity. Whilst the international discourse has contextualised the risk and protective factors of dealing with adversity, much of the resilience research has centred on Caucasian or European participants (Clauss-Ehlers, 2003, 2004; Lopez, Prosser, Edwards, Magyar-Moe, Neufeld & Rasmussen, 2002; Stout & Kipling, 2003), with little thought as to how perspectives might differ across ethnic groups or cultures (Ungar, 2004, 2008, 2005b). Indeed, Indigenous peoples will benefit more so from resilience theory and discourse that represents Indigenous understandings, Indigenous realities and Indigenous bodies of knowledge (Penehira & Green, 2010; Scarpino, 2007).

Investigating cultural and Indigenous factors of resilience has been largely rooted in the process of colonisation (Ungar, 2008), as resilience was a critical factor in Indigenous peoples survival during and post-colonisation (Blackstock & Trocme, 2005; Durie, 2001; Greenwood, 2005). For Māori in particular, Baker (2010) found that Māori have exhibited Indigenous resiliency at various points in time since the colonisation of Aotearoa in the 19<sup>th</sup> century.

This section focuses on resilience factors found to be useful amongst Indigenous cultures. Literature surrounding resilience amongst Indigenous peoples has tended to originate out of North America. As a consequence the majority of these research projects have a particular bias. Similarities already exist between Indigenous cultures in terms of their perspectives on health and well-being; such as a holistic or relational view which incorporates spiritual, physical, intellectual and emotional dimensions, and the importance placed on various cultural constructs such as language (Durie, 2003a). Insofar as there are universal resilience concepts across cultures, it is also important to



consider the cultural context and cultural specificities (Tousignant & Sioui, 2009). Exploring how theories of resilience might similarly resonate across Indigenous populations poses some exciting opportunities as does the prospect of better elucidating the role and function of culture and Indigeneity. Moreover, the emphasis here is not on comparisons, but on investigating the resilience features within different cultures.

The Kauai Longitudinal Study provides seminal insight into Indigenous resilience over a 32-year period. From 1955 until 1987, this study followed 698 disadvantaged infants from their birth until the age of 32 (Werner & Smith, 1982, 2001). This cross-cultural study included children from various ethnic backgrounds - including Japanese, Filipino, Hawaiians, Portuguese, Puerto-Ricans, Chinese, Koreans and a small group of Anglo-Saxon Caucasians. The majority of these children were born into poverty, had a variety of biological and psychosocial risk factors, and had suffered stressful life events. However, Werner and Smith (2001) found that approximately one third who had four or more risk factors developed into competent, confident, caring and autonomous adults. The authors propose that various factors related to resiliency helped enable these individuals to prosper. Some of these factors included the development of at least one close and secure relationship (i.e., significant attachment), access to social support, as well as a sound education. While these findings are not necessarily 'Indigenous' per se, subsequent research has found similar findings amongst other youth and Indigenous populations (e.g. Felsman & Vaillant, 1987; Garnezy, 1991; Pasternack & Martinez, 1996).

Another important resilience study are those of the International Resilience Projects' (IRP) global studies on youth resilience, which shed light on the cultural factors that impact on youth resiliency (Ungar, 2008). Utilising data conducted from a 14-site mixed method study of over 1500 youth globally, the IRP studies sought to

ascertain any cultural differences in terms of resilience amongst youth. One of the IRP studies found seven common themes amongst a sample of First Nations youth from three sites in Canada, and another sample of non-Indigenous youth from outside of Canada (Ungar, Brown, Liebenberg, Cheung, & Levine, 2008). The seven themes were: access to material resources; identity; relationships; cohesion; power and control; social justice; and cultural adherence. While these themes were identified amongst all the participants and they were not dissimilar to those found in other youth resilience studies, (i.e., supportive relationships, material resources, and cultural traditions and identity), they each manifested in unique patterns irrespective of the sample site. To this end, there was as much variability within the Canadian sample as there was between the Canadian and international sample (Ungar et al., 2008).

Kirmayer, Dandeneau, Marshall, Phillips and Williamson (2011) also found a similar pattern amongst four distinct Indigenous peoples of Canada; the Mi'kmaq, Mohawk, Métis, and Inuit peoples. Investigating the community and cultural resilience of these communities found that while small differences existed between the different cultures, resilience for these cultures is grounded in the cultural values that have persisted throughout the various historical adversities these people experienced through colonisation. The cultural values include culturally distinctive concepts of the self, the importance of their history, the richness of their languages and traditions, and the importance of collectivism and activism.

The IRP studies also found that aspects of youth resiliency relate to one another in patterns that reflect the young people's culture and context. The authors found that rather than sorting the youth resilience strategies into individual, relational, community and cultural aspects, 'thematic' groupings can also explain the links across different settings. For example, self-efficacy was found not only at an individual level, but also

appeared in relationships, and in community and cultural contexts (e.g., political efficacy, influence on parents) (Ungar, 2008). From a Māori perspective, this proposition resonates well with Māori holistic understandings. In particular, the difficulty in compartmentalising Māori customs and concepts as the lines of distinction can often be blurred when viewed through a Māori lens. In this sense, a Māori concept such as *aroha* or *manaaki* can operate at an individual, family, and community level.

It appears that resilience amongst global youth is a complex myriad of cultural and contextual components. Therefore it is important to note that a ‘one size fits all’ approach to resiliency may not be the most beneficial pathway to developing resilient whānau. As such, the main implication from these IRP studies is the need to privilege local knowledge when intervening in a community (Tousignant & Sioui, 2009).

Stout and Kipling (2003) investigated the factors that promoted resilience amongst survivors of residential schools in North America. Within these residential schools, many First Nations people were physically and sexually abused, whilst at the same time losing their culture, their traditions, and their language. Stout and Kipling (2003) however, identified a number of coping factors utilised by the students during their time at the school, as well as other resilience factors which helped them later on as ‘survivors’ of these residential schools. The coping factors utilised whilst at these schools included detachment (of feelings from the situation), re-interpretation (i.e., rationalising and positivity), accommodation (i.e., reaching an accommodation with those in power) and resistance (individual and collective resistance to school rules and regulations).

As survivors, the participants spoke of a range of resources to help them cope with life back in the community and society. These included support (from spouses, family member, elders, healing circles, health services), sharing (of stories and

memories with other past students), learning (i.e., gaining school and higher qualifications), and spirituality (cultural and religious). Once again it is important to note that these strategies are not necessarily unique to Indigenous populations. They do however, represent those strategies utilised by Indigenous populations.

Native American researchers Heavyrunner and Morris (1997) uncovered similar spirituality findings as part of their work with 20 Native American educators and trainers. In addition, there was a general agreement that tribal identity, elders, ceremonies and rituals, humour, oral tradition, family and support networks are other important protective strategies for Native Americans during times of stress and adversity. Moreover, Zimmerman et al., (1996) proposed that enculturation (the process whereby individuals learn about their culture and traditions) is a protective strategy that can mitigate stressors amongst Native American youth. Likewise, Scarpino (2007) undertook a qualitative investigation exploring the resilience amongst four urban Indigenous women in Canada. Her research found that Indigenous concepts of spirituality, relationships with the environment and others, and self-determination all contributed to the resiliency of these Indigenous women.

Korhonen (2007) investigated the resilience views of Inuit elders in Canada. As a result of the interviews with elders, a number of factors - individual traits, perceptions, environmental influences - were identified that could create and foster resilience. 'Individual traits' included optimism, independence, competence, relationship building and problem solving skills. Attributes that enable people to perceive negative situations as positives include the ability to think positively, to see negative experiences as learning experiences, to see the humour in situations and understanding that bad times will pass. Finally, environmental influences included strong relationships and social support (including competence enhancing support), as well as participation and

engagement with the community (Korhonen, 2007). This investigation provided a unique Indigenous perspective, and especially as it was fashioned alongside Inuit-specific examples and traditions.

Yee, DeBaryshe, Yuen, Kim, and McCubbin (2008) focused on ethnic families represented as Asian American and Pacific Islanders (AAPIs) in the United States of America. The findings found four cultural themes that are common to Chinese, Japanese, Filipino, Southeast Asian, South Asian, Hawaiian and Samoan cultures living in the United States:

1. Collectivism – is the tendency to place group needs and goals above the goals and desires of the individual.
2. Relational orientation – is a cultural frame in which the self is defined in terms of its essential and continuing interdependence with others.
3. Familism – defines a hierarchically organised extended family system as the basic social unit.
4. Family obligation – includes both attitudinal and behavioural responsibilities in which children are expected to: show respect and affection for older family members; seek their advice and accept their decisions; and maintain proximity, instrumental assistance and emotional ties with parents across the life span. (Adapted from Yee et al., 2008)

‘Family interdependence’ proved to be a common thread that united these four themes, and also functions as a protective factor for this population (Yee et al., 2008). Of particular interest to this thesis, was that family interdependence acted as a resilience factor for protection against life risks and adversity (Yee et al., 2008). In a similar manner to Māori, many of these cultural groups utilise family (extended family) support

for assistance in child rearing, the retention of their cultural language, as well as gaining employment and academic success. Moreover, they were also critical in dealing with adversity and stressful or damaging events. The authors do however note that the Asian American and Pacific Islanders families in the USA are a diverse population, with various social and economic conditions impacting on their health and well-being, therefore demonstrating some very diverse resilience mechanisms (Yee et al., 2008).

Cohen, Slonim, Finzi and Leichtenritt (2002) investigated Israeli mothers' perspectives on family resilience following a crisis. Analysis showed that these Israeli mothers defined family resilience in terms of five main components: (a) expressiveness - self-disclosure; (b) connectedness; (c) flexibility; (d) optimism-positive outlook; and (e) family's values.

Expressiveness was considered as the capacity and freedom to express feelings and emotions amongst family members. Connectedness as a resilience resource was noted as the ability of family members to relate to the needs of the others, and an acceptance and readiness to assist others (Cohen et al., 2002), much like the Māori concepts of *awhi* and *manaaki*. Flexibility in this case, was determined by the interchanging of emotional roles between the 'supporter' and the 'supported'. This was developed by family members being able to see the needs of others and responding accordingly, similar to the concept of *tuakana-teina* (mentor-mentee) relationships. Resilience was also defined by the capacity to have interpersonal relationships characterised by humour and positivity. Finally, family values were outlined as an important component in the interplay of interpersonal interactions and family resilience. In particular, trust in family systems, and security in terms of family support, were two important family values.

Despite differences in family structures, cultural beliefs, rituals and practices, there seems to be common factors amongst different cultures and ethnic groups in regards to individual resilience and family resilience strategies (Patterson, 2002; Tousignant & Sioui, 2009). Various investigations into the resiliency of Indigenous peoples have highlighted the fact that Indigenous peoples share many of the resilience strategies employed by non-Indigenous peoples. These include spirituality, supportive relationships, social and community support, and positivity. However, an added feature of the resiliency of Indigenous peoples is the use of cultural resources and values as protective factors and coping strategies. Indeed, traditional and Indigenous knowledge and constructs has guided Indigenous peoples theorising and application of resilience (Penehira & Green, 2010). The expression of these cultural elements may differ across Indigenous populations, however, similarities exist in that they are founded on cultural traditions and beliefs, and include notions of family interdependence and spirituality.

### **Māori Indigenous Resilience:**

Research into the resilience of Māori whānau is still in its infancy. While the whānau resilience discourse is rather sparse, there has been some research into aspects of resilience amongst the Māori population and which is able to usefully inform notions of whānau resilience as well as ‘cultural’ contributors. A small number of locally-based projects are currently underway which look specifically at Māori notions of resilience. These include a Health Research Council-funded resilience project entitled ‘Facilitating whānau resilience through Māori primary health intervention’ (Boulton, 2012); the *Pathways to Resilience* project being conducted at Massey University (Robyn Munford et al., 2013), as well as various other projects funded under the International Collaborative Indigenous Health Research Partnership (ICIHRP). At present however,

there is a dearth of research which specifically considers Māori perspectives of resilience or which attempts to consider Māori cultural perspectives. Although some studies and reviews of literature have been conducted by New Zealand and Māori researchers, a significant body of evidence has yet to be developed.

The 2010 Families Commission Report on recessions and Māori resilience (Baker, 2010) provides an informative example of ‘cultural’ resilience as employed by Māori. It examined the history of Māori society in regards to the changing social, cultural, economic and structural conditions since the signing of the Treaty of Waitangi in 1840. In particular, unemployment, mental health, food security and housing statistics of the past century - highlighting the social and economic impacts Māori have endured during periods of recession (Baker, 2010). The subsequent resilience themes that arose since 1840 are discussed with particular reference to the development of the Treaty of Waitangi partnership. Emphasis was placed on specific examples of Māori overcoming these impacts and encouraging more positive outcomes.

This report considered cultural, and in particular, Māori resilience under the four following headings: 1) Resilience through *whakapapa* and the role of *ahi kaa*; 2) Resilience and the development of Māori land-based assets; 3) Resilience and education; and 4) Cultural resilience and economic opportunity. The first example surrounding *whakapapa* and resilience highlights the importance of *ahi kaa*. This term has been loosely defined as ‘keeping the home fires burning’ and maintaining links with traditional lands and networks. This process proved to be a strong cultural protective factor during the urban-drift era, and continues to do so today (Baker, 2010).

Resilience and the development of Māori land-based assets highlights the development of Māori trusts and incorporations that have been created since the 1980s to manage land that was once under Māori Reserve Lands, e.g., Wakatu Incorporation



and The Wellington Tenth Trust. These entities were developed to better manage the newly acquired (or re-acquired) assets, and these organisations play an important role in the social, cultural, spiritual and financial development of their people.

Resilience and education highlights the development of *Kohanga Reo*, *Kura Kaupapa*, and *Wharekura* as important institutions in reviving, progressing and maintaining the Māori language, culture, and values (Baker, 2010). These institutions were developed during a period when Māori achievement in education was low and real concerns were being expressed about the ongoing survival of the Māori language. These initiatives have proven to be invaluable in lifting the educational achievements of Māori, as well as promoting and maintaining the Māori language (G. Smith, 2003).

Cultural resilience and economic opportunity highlights the many successful Māori businesses that have flourished prior, and subsequent to, the Treaty settlement process. Reference is also made to the discussion document ‘The Māori Edge: Growth of Māori-owned business’ (Te Puni Kōkiri, 2007), which emphasises the economic advantage provided by including Māori traditional values, activities and protocols into business management and business models. These cultural mechanisms include (a) a culture well suited to transactions in growing markets, including the focus on relationship building and a long-term perspective; (b) the ability to combine spiritual and physical elements; and (c) dual-world skills, that is, the ability to be equally at home in more than one culture is a valuable commodity in the global marketplace (Te Puni Kōkiri, 2007).

In summary, this report outlines specific examples of where Māori have exhibited ‘cultural’ resilience across multiple sectors of society. These strategies have contributed to Māori development and will continue to help advance Māori desires and aspirations. A key theme that emerges from this report is that whānau resilience is

strengthened when whānau are supported to access and maximise their cultural, social, economic and environmental resources. Insofar as this research might inform the current study, it is clear that certain cultural constructs unique to Māori will inform how resilience is perceived and shaped. However, its scope and broad approach to resilience is likely to reduce the extent to which more precise, and whānau focused, conclusions can be drawn.

### **Resilient Māori Peoples:**

This next section canvasses the small number of studies from within Aotearoa that investigated Māori perspectives of resilience. While they may seem a loose mix of organically inspired and individually driven research projects, similarities exist across the different subject fields. At least from an individual-level, a number of resilience strategies have been identified from the Māori participants in the various studies. Indeed, these individual level strategies can be important components of a *Whānau Resilience Framework*.

The 2012 Families Commission funded report, ‘Te Pūmautanga o te Whānau: Tūhoe and South Auckland Whānau’, provides a unique glimpse into the resilience strategies of these whānau when faced with financial hardship (Baker, Williams, & Tuuta, 2012). For the sample of Tūhoe whānau, the strength of their resiliency during financial strife was based on their ‘*Tūhoetanga*’, that is, their Tūhoe identity and the values (e.g., *manaakitanga* and *whanaungatanga*) and beliefs it entails. It is also through their *Tūhoetanga* that they access a variety of cultural, social, economic and environment resources when finances were low (Baker et al., 2012). For the sample of South Auckland (non-*iwi* specific) whānau, help was sought from the wider whānau, friends, and community organisations such as churches and sports teams.

While this study provides the most comprehensive research into whānau resilience, it may not be helpful for those who are exposed to other types of adversities other than financial hardship. Nor may it be helpful for those whānau who are not from Tūhoe, or those whānau who are not 'urban'. This thesis undertakes a more broad approach to understanding whānau resilience, both in the regards to the types of adversity experienced by the whānau (i.e., redundancy, suicide, solo-parenting, incarceration, family death), and the resilience strategies that are utilised. Nevertheless, Baker and colleagues (2012) provide an appropriate starting point for considering whānau resilience strategies.

Merritt (2002) investigated the development of resilience in young Māori girls' lives, as they attended a Māori Achievers' Programme at their local secondary school. Aged between 12 and 17, the participants completed three psychosocial scales (locus of control, trust, behavioural attributes and competence), a risk factor survey and a life story essay. The findings identified a number of individual, familial, and external factors that contributed to the educational success and resilience of these young Māori girls.

In particular, the support of extended family (especially significant females) was a powerful buffer for these participants during times of stress and adversity. These significant females were generally an aunty, grandmother or older sister who was able to provide comfort, as well as unconditional love and nurturance. The author noted that external support had a minimal presence in the responses, however support from school, friends, counselling and spirituality were some examples (K. Merritt, 2002). Individual factors that helped foster resilience included communication styles that were open and honest, a caring and helpful nature, the ability to be self-reflective, a positive approach to life and maturity (K. Merritt, 2002). Lastly, it was noted that the resiliency of these

Māori girls sometimes disappeared at different times, indicating that resilience was a dynamic process that could fluctuate depending on the circumstance and stressor.

Pryor (2004) examined the resilience factors developed or employed by stepfamilies, at both family and individual levels, with an emphasis on the strengths within these families as opposed to focusing on pathological factors. Evidence suggests that children in stepfamily structures face higher risk than those from other family structures (Fergusson, Horwood, & Lynskey, 1992). Drawing on interviews and questionnaires with 90 families across the Wellington and Wairarapa regions, Pryor (2004) highlighted the multifaceted nature of stepfamily dynamics. In particular, the child's relationships with resident parent, non-resident parent and step-parent were integral to the optimal functioning of the family and the child as well. Moreover, the extent to which these relationships were nurtured and developed did influence the resiliency of these families (Pryor, 2004). Although Māori descendants were not mentioned as participants, the findings in relation to child-parents relationships may be applicable to Māori single-parent households.

Atwool (2006) explored the connections between resilience and attachment theory (Ainsworth, 1979; Ainsworth & Bowlby, 1991), and its application to New Zealand children in care. Following a description of resilience, attachment theory, and internal working models, the author outlined the connection between attachment and resilience. In particular, that quality of attachment (to a parent or caregiver) is integral to the four central areas associated with resilience (as outlined by Masten & Coatsworth, 1998; Wyman et al., 1999): 1) individual characteristics; 2) supportive family; 3) positive connections with adults and agencies; and culture. Indeed, the adults and therefore the caregivers (in the case of this research) of vulnerable children in out-of-

home care ‘need to have an understanding of the significance of relationships and the role attachment plays in resilience’ (Atwool, 2006, p. 326).

This is especially true when cross-cultural placements of children occur. Atwool (2006) cites Pihama (1997) in that New Zealand history has demonstrated that many Māori who came into care were placed with Pākehā families, resulting in cultural dislocation (Pihama, 1997, as cited in Atwool, 2006). Data has shown that 45% of children in care are Māori, and 45% of these children have been placed with kin (Brown, 2000). However, ‘that cultural dislocation continues to be imposed on already vulnerable children and young people, undermining their identity in a nation where negative stereotypes of Māori prevail, demonstrates our failure to grasp the link between culture and resilience’ (Atwool, 2006, p. 327).

Using the behavioural model of family resilience, Pere (2007) sought to identify the factors that enable or inhibit whānau who are coping with multiple jobs. Four Māori whānau were interviewed, with each whānau having a variety of circumstances that influenced the need to take on an extra job. The reasons included having to pay off financial debt, up-skilling for future employment, parental goals to provide for the needs of children and the demand for extra luxuries, as well as those who took on an extra job in the same field of work to fill a supply and demand employment gap. As such, these reasons suggest that multiple job holding was not necessarily used to supplement income from the primary job (H. Pere, 2007).

A number of factors were mentioned by the various whānau that enabled them to cope with holding-down multiple jobs. Firstly, the presence of other resources increased the resistance of the whānau to the effects of multiple job holding. These resources included:

- affordable childcare;

- employer flexibility;
- good communication between parents;
- stable housing;
- support networks such as community organisations;
- budgeting services;
- and support from extended whānau members. (H. Pere, 2007)

Secondly, flexibility in terms of routines, roles, and expectations within the whānau system were important coping strategies as well. When change or adaptation is required, the whānau patterns of functioning must be flexible enough for change.

Finally, one particular whānau highlighted the benefits of working in a job that had a *kaupapa* (aspect) Māori focus. Such jobs provide the freedom to interact daily with Māori communities and therefore access to those support networks. This whānau highlighted the fact that a *kaupapa* Māori focus gave them the flexibility they needed to do their job without being concerned about alternatives for after school childcare. Furthermore, children were permitted to attend *hui* (meetings, gatherings) with the parent should it necessitate. These findings reflect the international literature on resilience and family resilience which identify access to resources, flexibility, and support networks as strategies that promote resilience (e.g. Walsh, 2002).

In 2002, Ballam examined the resilience factors she relied upon during her upbringing as a ‘gifted’ student from a low income family. Drawing on Masten’s (2002, as cited in Ballam, 2002) and Masten and Coatsworth’s (1998) risk and resilience research, Ballam (2002) identified two important protective factors that helped foster her own resilience as she was growing up. Firstly, the presence of a caring adult provided her with a form of social capital that helped reduce some risk factors, such as helping alleviate financial woes. Secondly, when combining social capital with good

intellectual capacity, a recognised gift or talent, positive outcomes can be attained. Both of these protective factors counteracted the risks she encountered, and held off any maladaptive outcomes she would have endured (Ballam, 2002). Again, this research highlights the importance of, amongst other things, social capital and significant attachments as important protective factors to alleviate risk. Indeed, although the author does not identify as Māori, there is reason to suggest that the findings may apply to Māori.

Ware and Walsh-Tapiata (2010) identified resilience qualities as ‘*Ahuatanga*’ (personal characteristics) amongst their sample of Māori youth. In this study, termed ‘*Manawanui*’ (meaning patience, to be patient), the participants’ demonstrated resilience by focusing on the positives and their own strengths during challenging circumstances. Planning ahead, setting goals and adapting to challenges were also examples of resilience amongst these Māori youth.

More significantly, this study highlights a number of specific cultural constructs that are more likely than current approaches to promote Māori youth development (Ware & Walsh-Tapiata, 2010). Some of the cultural constructs included *tīkanga* based practices such as *whanaungatanga* (relationship building), *mana* (collective integrity and responsibility), and *manaakitanga* (collective well-being); as well as the *Ahuatanga* qualities such as *māia* (confidence), *ihumanea* (innovative), *māhaki* (humility) and of course *manawanui* (resilience) (Ware & Walsh-Tapiata, 2010). Not only do these concepts distinguish Māori youth from other youth, but the authors also state that these cultural concepts are integral to the interaction of youth with their social groupings, the environment and resources they access. Therefore, they must be duly reflected when considering Māori youth development (Ware & Walsh-Tapiata, 2010).

In 2010, Moewaka-Barnes produced a report for the Ministry of Women's Affairs. It was a scoping report outlining Māori and international perspectives on sexual coercion/violence, resilience and healthy relationships, with an overall focus on *rangatahi* (youth who are aged between 12–25 years old) and *rangatahi wāhine* (female youth aged between 12–25 years old). The author states that resiliency can involve two sets of assets or resources: internal assets (individual characteristics) are those resources embodied in young people, and external assets (collective, structural, societal) are those resources young people call on when faced with adversity (Moewaka-Barnes, 2010).

Disparities between Māori and non-Māori women demonstrates the concern that various populations are more likely to have differential access to both internal and external assets, as well as face unequal levels of adversity (Moewaka-Barnes, 2010). This reinforces the need for future targeted research into how internal assets can be developed amongst Māori, and also how to ensure access is readily available to the pertinent external assets. As such, the report acknowledges the importance of resilience and its relation to an individual's ability to 'resist, survive and recover from sexual coercion/violence' (Moewaka-Barnes, 2010, p. 113). However, when applied at an individual level, resilience cannot address the changes required at a wider societal level, and is therefore 'unlikely to contribute to reduction of sexual coercion/violence at a population level' (Moewaka-Barnes, 2010, p. 113).

Duncan, Bowden and Smith (2005) investigated the policies and practices developed by Early Childhood Centres (ECE) to help families cope with stressful and challenging circumstances. Conducted for the Ministry of Social Development's Centre for Social Research and Evaluation, this report involved three components. Firstly, an investigation of the policies and practices employed by early childhood centres to support families. Secondly, to investigate the families (and children's) responses to



these strategies. Thirdly, to investigate how support and social agencies construct these policies and practices for the ECE's.

Utilising an ecological perspective on family resilience, the report outlines the many avenues employed by centres to help support families during times of stress and adversity. These included providing opportunities for parents to pursue work and studies, flexible arrangements and subsidies, social and agency support, and supporting parental well-being. This report offers useful resilience strategies that support parents in their endeavours to develop and provide for their families. These strategies are even more important for single parent families that may not have access to support normally provided by the absent partner.

To summarise, these studies provide a glimpse into the protective factors, coping strategies and resilience mechanisms garnered from local research within the Aotearoa population. The various studies highlight the notion that concepts of resilience can operate at the individual, family, and community level, while also being situated internally and externally within the individual. Although not a substantial body of evidence, these studies provide a basis to develop the resilience discourse within Aotearoa. While some of these studies provide a unique Māori perspective on resilience strategies, they were often part of a more ad-hoc research agenda which lacked a broader operational and strategic framework. This thesis aims to add to the current discourse by refocusing efforts towards whānau with the aim of better understanding Māori concepts and perspectives of resilience.

## **Conclusion:**

As described within this chapter, a complex array of issues has influenced the manner in which resilience theory has developed. Challenges associated with defining

resilience have been compounded by efforts to broaden the scope of resilience inquiry to include family-level strategies, as well as Indigenous perspectives. Family resilience has now emerged as a legitimate field of study but has similarly faced a quandary of how this is conceptualised and defined, and, how ideas on resilience might be adapted from individual to group settings. Moreover, it has become clear that a generic approach to resiliency may not be the most beneficial pathway to developing resilient whānau.

While there has been considerable research into the notion of resilience these studies are dominated by Western discourse, with little acknowledgement of the importance of culture, indigeneity or the multitude of historical factors that inevitably shape group perspectives and collective understandings. In addition, while family resilience has been the focus of some research, the extent to which Māori notions of whānau might be accommodated within these models and frameworks remains uncertain. It is clear however that Māori have demonstrated a range of resilience strategies over a number of generations, and in the face of multiple and often significant adverse situations (Baker, 2010; Baker et al., 2012; K. Merritt, 2002; Moewaka-Barnes, 2010; H. Pere, 2007; Ware & Walsh-Tapiata, 2010). This thesis aims to add to this debate and to investigate more precisely the resilience strategies as they apply to whānau, and how they might be reflected within a more comprehensive and culturally cognisant frame.

## CHAPTER III: 'WHĀNAU' DISCOURSE

### **Introduction:**

An examination of whānau resilience requires an understanding of the term 'whānau' - its relevance to Māori society and broader implications for government policy. The previous chapter examined the 'resilience' term, the theory and discourse in relation to Indigenous cultures, as well as its contemporary extension towards the idea of 'family resilience'. This chapter builds on the previous and serves to discuss the various meanings attached to the term 'whānau'. It also outlines the changes that have occurred to the whānau structure since colonisation, following through to the impact of World War II, urbanisation and the predictable influence on whānau structures and dynamics. Finally, government policies and strategies which seek to improve whānau health and self-determination are discussed and in order to provide additional context relevant to the wider discussion on resilience.

Social science has frequently noted that the distinguishing characteristic of Māori society is the emphasis on the collective rather than the individual (Cunningham, Stevenson, & Tassell, 2005). Indeed, collectivity and interdependence is a prominent and enduring feature of Māori society (Durie, 1998b). Of particular importance to this thesis is the whānau unit, which according to Cunningham (2004) has withstood both the colonisation and urbanisation processes and remains a unique feature of Māori society.

The term 'whānau' has received significant interest over recent decades (Kiro, von Randow, & Sporle, 2010; Metge, 1990), with a number of reports and publications presented by and for various government departments and agencies (i.e., Baker, 2010; Irwin et al., 2011; Lawson-Te Aho, 2010; Ministry of Social Development, 2004; T.

Walker, 2006). The literal translation means ‘to give birth’ (Social Advisory Council, 1987), but it is most commonly referred to as ‘family’ or ‘extended family’ (Ministry of Social Development, 2004).

‘Family’ or ‘extended family’ however, is unlikely to encompass the broader meaning of *whānau* commonly understood by Māori (Collins & Wilson, 2008), as there are a number of other associated explanations and definitions such as *kaupapa whānau* (Durie, 2001), *whakapapa whānau* (Metge, 1995), virtual whanau (Walker, 2006), *whānau matara* (Marsden, 2003), and *whāmere* (Hohepa, 1970) which exist within modern Maori society. Therefore constructing an absolute or definitive definition of *whānau* is fraught with difficulty (Collins & Wilson, 2008; Metge, 1990). Social changes and dynamic family structures have also prevented a universally accepted definition of ‘family’ (Cunningham et al., 2005), let alone a definition which adequately captures Māori perspectives, relationships, historical and contemporary perspectives.

### **Early Conceptions of Whānau:**

In pre-colonial times, Māori society was based on ‘decentralised tribal autonomy’ and the ‘organic solidarity of kinship’ (Ministerial Advisory Committee, 1988). This structure centred on four organisational levels (*waka*, *iwi*, *hapū*, and *whānau*), with all levels linked by kinship to a common ancestor. This kinship structure enabled the first generations of Māori voyagers to successfully settle and adapt to the new Aotearoa environment. As part of this process, a sense of social balance was achieved, as well as economic and demographic stability (Durie, 2003b). Significantly, at this point in time there was no co-operative form of government in Aotearoa, with *waka* linkages or connections forming the largest socio-political unit present (Ministerial Advisory Committee, 1988).

*Waka* consisted of a group of tribes who were all descendants of a common ancestor who had voyaged from Hawaiki to Aotearoa, guided only by the celestial stars. Commonly referred to as the ‘Great Migration’, Buck (1950b) considers this to be the most significant event in Māori history, as most Māori can trace their *whakapapa* to one of these sea voyaging *waka*. The various *waka* which consisted of the ‘Great Migration’ include Tainui, Arawa, Mataatua, Kurahaupo, Tokomaru, Aotea and Takitimu (Buck, 1950b, 1954). Evidence of other *waka* that arrived shortly or some time after, can be found within the various ‘Treaty claim’ documents that now exist.

As a social group *waka* were made up of a cluster of *iwi* who all (initially at least) descended from one of the original crew members. *Iwi* literally means ‘bones’, and as well as being direct descendants of a crew member, most tribes (initially) also took their ancestors name as their tribal name (Ministerial Advisory Committee, 1988). For example, Ngāti Pikiao in the Rotorua region are named after Pikiao who was a part of the Arawa *waka*. Under the leadership of the *ariki* (paramount chief), these tribes often formed their own independent, self-sufficient, and self-governing set of rules surrounding economic, social and customary practices (Ministerial Advisory Committee, 1988; Te Awekotuku, 1991).

Although the tribe was the largest group that exacted autonomy in its internal and external affairs, Winiata (1956) states that the tribe itself was a ‘loose federation of smaller constituent groups, related by common descent and ties of affinity’ (p. 216). Thus, tribes could also be divided into smaller organisational units called *hapū*. *Hapū* were similarly organised around a common ancestor whom they were named after, and this kin group was even more closely related than at the *iwi* level (Ministerial Advisory Committee, 1988). The *hapū* provided the means through which tribal structures and activities could be more easily managed, and while *hapū* joined together for war or

ceremonial occasions, each *hapū* was responsible for their own governance (Ministerial Advisory Committee, 1988). *Hapū* were led by *rangatira* (chiefs) who were deemed leaders through hereditary means.

Whānau (the biological, extended and joint family) would collectively (in larger groupings) constitute a *hapū* and was typically the smallest collective entity. Whānau usually consisted of three or four generations of extended family that lived together or within close proximity of each other (Best, 1952; Buck, 1950a; Firth, 1959; M. Winiata, 1956). The whānau unit could number up to roughly 30 people, with the *kaumātua* or elders considered to be the leaders of this unit (Ministerial Advisory Committee, 1988). Metge (1995) mentions that this model of whānau is often referred to as ‘the traditional Māori family’. However she prefers to use the term ‘classic’, as it encapsulates the late 18<sup>th</sup> and early 19<sup>th</sup> centuries (i.e., before European contact severely affected the socio-economic status of Māori) (Metge, 1995).

Within the whānau unit, a number of organisational, educational, cultural, and socialisation systems operated (Durie, 1994b; Moeke-Pickering, 1996). It is where the initial teaching and socialisation of Māori culture took place (Moeke-Pickering, 1996), as older members typically educated the younger members on the values, beliefs, and traditions particular to that whānau and *hapū* (M. Winiata, 1956). Issues connected to whānau health and well-being were also considered within the whānau unit (Buck, 1950a). Community tasks were undertaken by members of the whānau, such as *marae/pā* upkeep, planting and gathering food, and other social endeavours (R. Walker, 1979). These whānau also had special access to certain lands, waters for fishing, and food crops (Best, 1952).

In all matters concerning the *iwi* and *hapū*, there were discussions between the heads of each unit, that is, the *kaumātua* who represented the whānau, and then the

*rangatira* who represented the *hapū* (Ministerial Advisory Committee, 1988; M. Winiata, 1956). This process enabled all members of society to contribute through their representatives.

This four-level organisational system typified Māori societal, structural, and political systems through the early periods of European contact, as well as the 1800s and early 1900s. Moreover, tribes intermarried, migrated, rekindled, divided and formed new relationships with other tribes which provided a blended society (Ministerial Advisory Committee, 1988). However, with the advent of European Law, customs and systems, Māori had to adapt to a range of new societal changes. With the outbreaks of World War I and II, further changes would require Māori to adapt their living situations, changing Māori demographics forever (Kiro et al., 2010; Moeke-Pickering, 1996).

### **Whānau in the 20th Century:**

The 20<sup>th</sup> century brought a host of new challenges for whānau, and the Māori population as a whole. The discourse surrounding the ‘dying race’ was still apparent, detrimental policies were in place (e.g., the Tohunga Suppression Act 1907), two World Wars had stymied population growth, and urbanisation had a more profound impact on whānau relationships and interactions. Māori leaders of the time, such as Tā Peter Buck and Tā Apirana Ngata strove to improve Māori outcomes (Durie, 1998b; Lange, 1999), yet whānau still felt the effects of these new challenges.

Between the 1950s and 1970s, three anthropologists’ undertook ethnographic research in separate Māori communities. Pat Hohepa (1970) wrote about the small settlement of Waima in Northland, based on his anthropological research over the 1958-59 summer months. Hugh Kawharu (1975) wrote about the Orakei area in Auckland during the 1960s. During the 1950s, Metge (1964) researched the small community of

Kotare from the far north region of the North Island of Aotearoa. All three researchers investigated small-scale, kinship-based groups, which were described by the people themselves as ‘families’ in English and in Māori as ‘whaanau’ or ‘whaamere’ (Metge, 1990). This was an interesting time period as it coincided with the ‘urban drift’ era, in which a number of Māori moved into the metropolitan areas of Aotearoa in search of employment.

Despite differences in interpretations in the three ethnographic studies, Metge (1990) suggested that each of the ‘family’ groups that were studied had many features in common. Moreover, that there were and are various meanings associated with the word whānau.

### **Various meanings of whānau:**

Metge (1990) makes an important point of noting that ‘Maori people use the word whaanau with an array of referents, that its use varies according to context, and that its meaning in particular situations must never be taken for granted’ (p. 68). She mentions how Hohepa (1970), Kawharu (1975), and herself mistakenly assumed they could pin the meaning of whānau down to a single group, albeit they disagreed on which group (Metge, 1990). She attributed this misconception partly due to their own anthropological training, as well as the dominating influence of the model of whānau developed by the work of Best (1952), Firth (1959), and Buck (1950b). To clarify this issue, Metge (1990, 1995) suggests that it is important to recognise that Māori apply the word ‘whānau’ to a variety of categories and groups, depending on the situation and context.

Firstly, Māori may use ‘whānau’ to refer to a cognatic descent group of limited depth, comprising of descendants of a named ancestor, regardless of where they are



living, whether they know each other, or the quality of their interaction (Metge, 1990, 1995). These descendants are traced through both the male and female lines Secondly, Metge (1990) notes that fluent Māori speakers sometimes use ‘whānau’ for a set of siblings, exclusive of their parents. This was especially observed by Best (1952) during his research in the early part of the 20<sup>th</sup> century.

Thirdly, Māori may use ‘whānau’ to refer to a ‘cognatic descent group, comprising of those members who participate in on-going but occasional activities focused on corporate property (land, *marae*, knowledge)’ (Metge, 1990, p. 71). They also identify themselves as members of a whānau named after a founding ancestor. These whānau are usually distributed among several households, and individual members can opt out temporarily or permanently without affecting the group itself (Metge, 1990, 1995).

Fourthly, some Māori may refer to ‘whānau’ as an extended family group headed by a married couple of *kaumātua* status. This whānau will consist of the descendants of both the mother and the father, their spouses, children and *tamariki whāngai* (adopted child/children). This collection of individuals and nuclear families will be distributed among several households, they will have a commitment to each other as a group, and regularly meet up for family gatherings.

These four examples of the usage of ‘whānau’ (with the possible exception of the second example) were widespread through the 1950s and 1960s in both rural and urban areas and continued to be important in contemporary settings (Metge, 1990). However, the relative importance placed on these meanings is different between the generations (Metge, 1990).

According to Metge (1990), the older generations of Māori emphasise the first and/or the third usage as the basic meaning of whānau. That is, they stress ‘descent’ as

the basic principle for defining whānau. As such, some may not consider their spouses as a member of their whānau when referring to the descendants of their ancestor, and vice versa, they would not consider themselves to be a member of their spouse's whānau. Contemporarily however, many Māori, both old and young, use whānau to mean 'extended family' (Metge, 1990). This may or may not include the spouses (i.e., their own or those of their siblings and children). However, she states that 'for many (possibly most) young Māori, the fourth usage implying the inclusion of spouses predominates over usages which stress descent' (Metge, 1990, p. 72).

These various meanings of whānau are also evident throughout this thesis. Depending on the context and situation, the whānau that took part in the research expressed the term whānau in a number of ways. As will be highlighted throughout the results section, several of these meanings are similar to those discussed by Metge (Metge, 1964, 1990, 1995), Hohepa (1970), and Kawharu (1975), and do not always conform with classical definitions.

These whānau that were by described by Hohepa (1970), Kawharu (1975) and Metge (1964) differed substantially from the whānau of the 18th and 19th centuries, often referred to as 'the traditional whānau' (Metge, 1990; 1995). For example, these whānau rarely resided in their *tūrangawaewae* (i.e., residential unity), they lacked economic self-sufficiency, and their members only co-operated on an 'occasional' basis (Metge, 1990). Metge (1990) mentions that this occurred because 'they were integrated into a centralised market economy, which meant that members had to work individually for a money income, had limited opportunities for co-operative activity, and often had to leave their home base in search of work' (p. 64).

## Modern Conceptions of Whānau:

Changes in demographic, social, and economic patterns over previous decades have resulted in predictable changes to the composition of whānau (Kiro et al., 2010; Moeke-Pickering, 1996). As such, the term ‘whānau’ is utilised in a contemporary context by Māori to represent various family structures and situations (Metge, 1990).

The 2010 Whānau Ora Taskforce Report offers a more modern definition of whānau, in that it is Māori ‘who share common descent and kinship, as well as collective interests that generate reciprocal ties and aspirations’ (Te Puni Kōkiri, 2010, p. 12). This definition aptly describes ‘whānau through descent’ (also described as *whakapapa whānau*), however there is also support for the idea that whānau can include non-kinship ties, sometimes referred to as ‘*kaupapa whānau*’ (Durie, 2001; Metge, 1995). *Kaupapa whānau* exhibit whānau-like principles, and are evident amongst work colleagues, members of sporting teams, and other activities where collegial cohesion is evident (Durie, 2001; Metge, 1995).

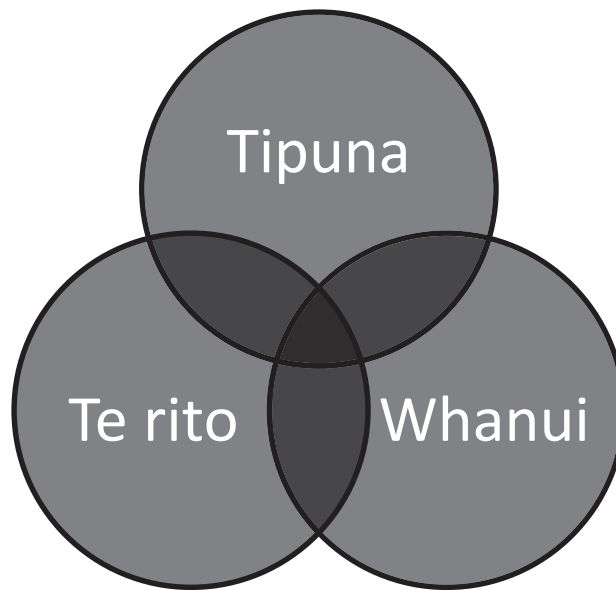
These two views on whānau composition (*whakapapa whānau* and *kaupapa whānau*) are considered by Lawson-Te Aho (2010) to be the two pre-eminent models of whānau. Although whānau in modern times share similar characteristics and functions to those whānau of pre- and early-European settlement, changes since that time period has created ‘diverse whānau realities’. Both Metge (1995) and Durie (2001) acknowledge the existence of a spectrum which represents the diversity of whānau realities. At one end are groupings of individuals who are strictly structured around a common ancestor (*whakapapa whānau*). At the other end are clusters who bear no kinship relationship but are bound instead by a common interest, goal or aspiration (*kaupapa whānau*).

### **Whānau as Kin (Whakapapa Whānau):**

The most conventional and perhaps more moderate definition of whānau pertains to the common genealogical link that binds a family together and reflects many of the whānau compositions of traditional pre-European Māori. Often referred to as *whakapapa whānau*, this is a grouping of people who all descend from a common ancestor.

In exploring this concept further, Tukukino (1985) notes that for Māori in particular, the term ‘whānau’ moves beyond the ‘nuclear’ and ‘extended family’. She provides a description of Māori whānau that is represented by three components (see Figure 2.) which are inter-related and provide ‘balance, identity and cohesiveness to the working whole’ (Tukukino, 1985, p. 69).

The *Tīpuna* (ancestor) component acknowledges the ancestor and whānau members who have passed on. It is from these ancestors that whānau develop their identity, and where they draw emotional and spiritual strength and well-being (Tukukino, 1985). The *Whanui* component recognises the importance and value of tribal families, whereby tribal family names are highlighted and links to the wider tribe are established. This enables whānau and individuals to develop more personal relationships with a wider group of people while similarly forming their own sense of unique identity (Tukukino, 1985). The third and final component, *Te rito* (the closer family), relates to the individuals family of orientation such as aunties, uncles, grandparents and so forth. This portion of the whānau provides the ‘immediate nurturance and the physical and emotional support’ (Tukukino, 1985, p. 70).

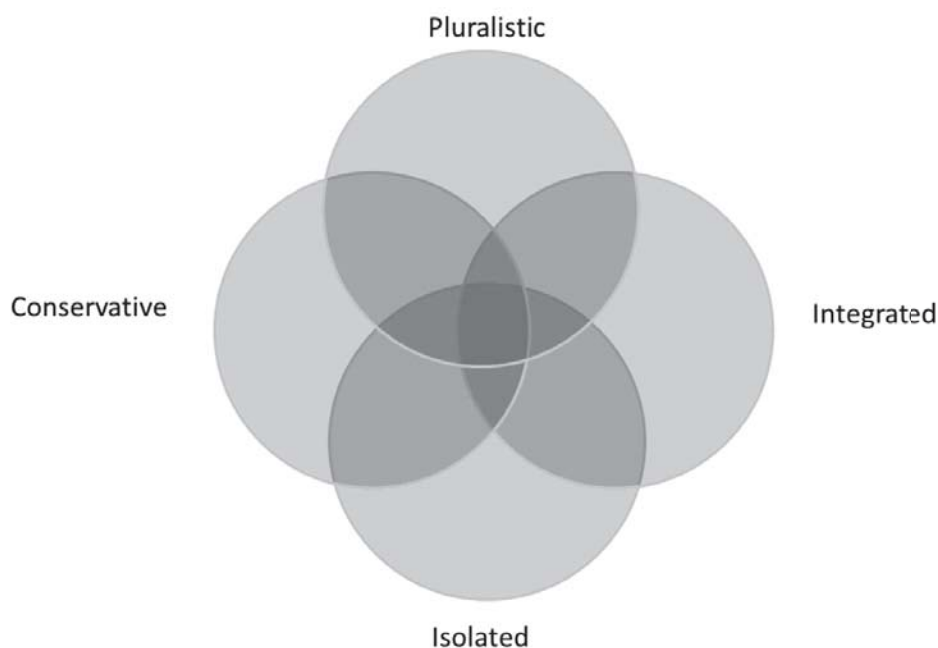


**Figure 2. A description of Whānau (Adapted from Tukukino, 1985).**

Tukukino's (1985) description of whānau provides a comprehensive description which also acknowledges the 'traditional' definitions of whānau as prescribed by Best (1952), Firth (1959), and Buck (1950b), such as the acknowledgement of whānau by descent from an ancestor. Moreover, the whānau descriptions provided by Metge (1990, 1995), Hohepa (1970), and Kawharu (1975) also align somewhat with these three overlapping whānau constructs as prescribed by Tukukino (1985).

### **Whānau diversity**

In light of these whānau constructions, it appears that strong tribal connections and familiarity with one's ancestors may be the norm for some but not all individuals and their whānau. Durie (1995) acknowledges that there are 'diverse Māori realities', in that Māori can generally associate into at least four broad groupings (refer to Figure 3.).



**Figure 3. A framework for describing Māori diversity: The ‘new Māori’ (Adapted from Cunningham, Stevenson & Tassell, 2005).**

Firstly there are those Māori who have relatively strong links to conservative Māori networks. They will have sound knowledge of their language, attendance at *marae* will be frequent, and they will be involved in networks associated with Māori cultural, social and sport groups (Durie, 1995).

Secondly, there will be Māori who have some association with Māori society, however they will be more integrated into mainstream New Zealand. This group will live similar lifestyles to their Pākehā counterparts, however they will have a strong Māori identity (Durie, 1995).

Lastly, there are those Māori who are isolated from both Māori and general society and mainstream services. These whānau may have no early childhood education, and they are unlikely to be a part of a *marae*, nor attend polytech or university. Access to Māori institutions, let alone mainstream services is not achieved by this group (Durie, 1995).

Cunningham, Stevenson and Tassell (2005) prescribe another category to this association, a pluralistic grouping, namely the growing Māori middle-class. These Māori are comfortable in both mainstream New Zealand and the Māori world, and their health and well-being outcomes are relatively better than many of their Māori and Pākehā peers (Cunningham et al., 2005).

To this end, participation in *Te Ao Māori* can be considered through the notion of a continuum, with full participation in Māori customs and social settings at one end, through to non-participation in such activities at the other end. At the family-level, conservative whānau may be able to call on resilience strategies (e.g., intergenerational *whakapapa* support) for particular stressors of which isolated whānau cannot, and vice versa.

### **Kaupapa Whānau:**

Over recent decades there has been a broadening in the definition of whānau and which now includes groupings of people who are not necessarily linked by a common ancestor. Commonly referred to as '*kaupapa whānau*', they are typically clusters of individuals who share a common goal, task or aspirations (Durie, 2001). This might include *Kohanga Reo* and *Kura Kaupapa* whānau, work whānau, *kapahaka* whānau, study group whānau, and sports team-mates (Cunningham et al., 2005; Metge, 1990; G. Smith, 1995).

*Kaupapa whānau* became more evident as a result of the 'urban drift' which occurred following the end of World War II. Otherwise known as 'urbanisation', between the 1950s and 1980s many Māori moved away from traditional homelands and their established tribal networks to the urban cities of Aotearoa (Marsden, 2003; Moeke-Pickering, 1996). Moeke-Pickering (1996) notes that:

While the traditional whānau arrangement and its related obligations to *hapū* and *iwi* was appealing to some Māori, for other Māori choosing a type of family arrangement that suited individual and family preferences was more logical given the economic driven environment. (p. 1)

This movement from an ‘agrarian society’ to an ‘industrialised urban society’ facilitated the separation for many from their tribal heritage (T. Walker, 2006).

Māori Marsden (2003) uses the term ‘*Whānau Matara*’ (meaning detached, distant, scattered) for those whānau who had uplifted and shifted away from their *tūrangawaewae* and ancestral grounds. As Māori moved into the cities, the lack of *whakapapa whānau* support motivated them to establish these whānau groups based on common interests, goals, and aspirations.

According to Durie (1989), urbanisation for Māori is not merely the situation of living in a town city, it is in fact a situation whereby:

tribal control is effectively absent; the population is heterogeneous (other tribes, other ethnicities); the individual acquires rights through residency, rather than descent; and claims to land are based on acquisition, which excludes those who do not purchase or rent. (p. 289)

Therefore, quite a significant shift in living circumstances when compared to the societal organisational structures mentioned earlier regarding the ‘Early Conceptions of Whānau’.

These *kaupapa whānau* operate in a similar manner to conventional whānau, where whānau processes are employed and codes of loyalty and mutuality are upheld. The following quote by Metge (1995) highlights this point:

lacking descent to serve as a unifying principle, *kaupapa*-based whānau place particular stress on the other characteristic feature of the *whakapapa*-based



whānau, that is, whānau values and the ways of working derived from them. (p. 305)

Accordingly, members of the *kaupapa whānau* are sometimes referred to as uncle, aunty, and cousin. In a dissimilar fashion to *whakapapa whānau* however, there is greater freedom to enter and exit the whānau when the association is no longer required (Cram & Pitama, 1998).

### **A Definition of Whānau:**

It is unlikely that any single definition of whānau will be appropriate for this study and given the diversity which currently exists (Durie, 2003b). In an attempt to consolidate these views, Metge (1995) states that the term ‘whānau’ has been expanded to include the following groups:

- a set of siblings and/or descendants of a relatively recent ancestor, which may or may not include spouses and *whāngai*;
- the descendants of a relatively recent ancestor who interact on an on-going basis;
- descent groups derived from *hapū* and/ or *iwi*;
- a group of unrelated individuals who interact on an on-going basis; and
- a group of individuals gathered for the purpose of a specific *kaupapa* (i.e., *kaupapa whānau*).

For the purposes of this thesis, the discourse provided by Metge (1995) has been the preferred definition upon which to guide the research process. Firstly, this is to adequately represent the kin structure of the whānau who were sampled, and secondly to limit the interpretations readers may develop when perusing the thesis. It must be noted however, that other representations of whānau (i.e., *kaupapa whānau*) are mentioned

throughout the results (V-VIII) and discussion (IX-X) chapters and in reference to the diverse manner in which individual respondents conceptualise whānau.

The term whānau was used interchangeably amongst the whānau cohort. In some instances they referred to *whakapapa whānau* (ranging from their household through to distant relatives), in other cases they were referred to as *kaupapa whānau* (friends, colleagues, sport/team mates).

### **Whānau Health and Well-being:**

Chapter I provided an outline of the health and well-being status of Māori and therefore whānau. It highlighted the need for further improvements in the health and social sector. It also signalled the desire of the New Zealand Government to address health inequalities between Māori and non-Māori (Ministry of Health, 2002a). The overall aim of the government's Māori Health Strategy, entitled 'He Korowai Oranga', is Whānau Ora, an approach designed to support Māori families to achieve optimal health and well-being (Ministry of Health, 2002a). To help realize this aim, the Whānau Ora initiative has been adopted as a key strategy of New Zealand social policy development, and has since become embedded in health service policy, planning and delivery (Ministry of Health, 2002a; The Families Commission, 2009). Moreover, the Whānau Ora initiative aims to support not only Māori whānau, but also those of Pacific Island descent.

A number of mechanisms have been introduced by successive governments to ensure that Māori health and well-being continues to inform government policy (Boulton, 2012). The New Zealand Public Health and Disability Act (2000) incorporates a focus on Māori health and reducing inequalities throughout the health sector. This includes the provision of additional funding for Māori through a District

Health Board (DHB) and Primary Health Organisations (PHO) funding stream, as well as greater accountability between the Crown and DHBs, and DHBs and PHOs (Ministry of Health, 2002b, 2003). More recently however, a specific strategic framework for ‘whānau health and development’ was introduced through the Families Commission (2009).

### **The Whānau Strategic Framework (2009–2012):**

In April 2010 the Families Commission launched its *Whānau Strategic Framework 2009-2012*. This strategic framework was developed over a six month period of consultation and engagement with whānau, Māori service providers and researchers, *iwi* entities and other Māori organisations and stakeholders. The framework outlines the strategy for the Commission’s advocacy and research regarding whānau. The Families Commission (2009) notes that changes and improvement in individuals’ well-being can be achieved by focusing on the whānau collective, and vice versa. Therefore the overarching goal of the framework is to ‘support whānau to achieve a state of Whānau Ora or total well-being, utilising the mechanisms of advocacy, engagement, social policy and research’ (The Families Commission, 2009, p. 4).

As a result of the six month consultation and engagement with Māori, four clear messages were received by the Families Commission:

1. Whānau Ora is a non-negotiable outcome:

To contribute effectively to their own, and to reach their full potential, whānau need to be well. Whānau must be able to achieve a state of Whānau Ora so that they and their future generations can be active participants in shaping New Zealand society.

2. Listening to the voices of whānau:

Whānau voices must be heard and considered in decision-making, engagement, policy design, research, and advocacy. Social policy which is relevant to Māori whānau should be critiqued by the Commission to ensure that whānau voices are heard, and that Māori cultural constructs are represented and applied accurately.

### 3. Speak out for vulnerable whānau:

For those whānau where education, employment, home ownership and good health are not commonly held expectations or entitlements (i.e., the socially dispossessed and/or culturally impoverished), the Commission must ensure their voices are heard at the decision-making table.

### 4. Inform best practice:

The Commission must inform ‘best practice’ for those people and agencies working with whānau. Therefore research on strategies to advance Whānau Ora, such as evaluations of effective whānau strategies and services, and investigating models of best practice must be implemented. (The Families Commission, 2009, p.6)

To implement these messages, the Families Commission will develop a number of processes. Firstly, the Commission will build specialised Māori social policy capacity to ensure that future social policy concerning Māori can be developed through a whānau lens. This capacity building goes some way in addressing the first message regarding the importance of healthy whānau.

To address the second message they will appoint and engage specialists to build relationships with whānau and key stakeholders involved with whānau health and well-being (both consumers and providers). As a result of these relationships, a more comprehensive understanding of the desires of whānau will enable the Commission to

better advocate for whānau (including vulnerable whānau), thus addressing the third message.

Finally, to address the fourth message, the Commission will refine and reorient its research programme to build an evidence base and identify innovative approaches to whānau development and whānau well-being. This process is already evident through the various research publications that have been published and commissioned by the Families Commission (for example Baker, 2010; Irwin et al., 2011; Lawson-Te Aho, 2010)

Therefore, the *Whānau Strategic Framework 2009–2012* provides a roadmap to help foster well-being, by outlining the strategy for the Commission’s advocacy and research regarding whānau (The Families Commission, 2009). This framework also resonates with this study, in that it seeks to foster whānau well-being, the voices and experiences of whānau are imperative, and examples of best practice (e.g., the *Whānau Resilience Framework*) are important mechanisms to support nationwide health providers and the ultimate attainment of whānau well-being. For whānau to promote resiliency, whānau well-being is imperative, as is the opportunity to access quality health and social care.

### **Whānau Ora:**

Social policy which enhances the ability for whānau to reach their full potential and contribute effectively to society, must be considered through a whānau lens in order to be effective. One such policy which seeks to positively enhance whānau health and well-being, and which also seeks to take into account whānau desires and aspirations, is the Whānau Ora initiative developed by the National-led Government in 2010.

Whānau Ora has previously existed as a concept, a brand, and a framework (Durie & Kingi, 2011). It has informed policy design and also strategic approaches to Māori health development (Ministry of Health, 2002a). Following on from the Families Commission's *Whānau Strategic Framework* (2009), a more comprehensive and encompassing Whānau Ora initiative was developed. The ultimate goal of this whānau-centered approach is to develop whānau resilience, whānau capacities and whānau capability (Te Puni Kōkiri, 2010). In particular, for whānau (both Māori and non-Māori) the outcomes will be:

- Self-managing – Taking control of affairs, less reliant on the state, aspirations for the future.
- Living healthy lifestyles – A move towards better health and away from negative behaviours.
- Participating fully in society – A capacity to better engage with broader society, in education, in the workforce, in social activities.
- Confidently participating in *Te Ao Māori* – A capacity to embrace *Te Ao Māori* and at a level which matches their own goals and aspirations.
- Economically secure and successfully involved in wealth creation – Financially secure and economically sound.
- Cohesive, resilient and nurturing – Whānau are secure, confident and ambitious (Turia, 2011)

Whānau Ora seeks to move away from policy initiatives which have failed Māori in the past. These have often been in conflict with the principles of The Treaty of Waitangi. Turia (2011) believes that Whānau Ora represents a 'major transformation in the way service are designed and delivered, contracts arranged and the way providers

work together’ (p. 11). As such, three key shifts in policy development and service delivery are proposed:

1. Individual → Collective
2. Problem Focused → Capability Development
3. A Silo Approach → An Integrated Approach.

The first point emphasises the need to think ‘beyond’ the individual. In this regard, there is recognition that whānau members are not isolated, but rather interconnected (Durie, 1998b). Indeed, empowering the whānau (e.g., households, or many households) as a whole is the paramount goal of Whānau Ora, as opposed to focusing solely on the individual and their issue(s). In this sense, service delivery which promotes positive and empowering family processes can mediate the recovery and resilience of vulnerable whānau members, as well as the whānau as a whole (Walsh, 2002).

The second point reflects on the need to move away from a deficit approach to policy development. This approach has plagued Māori aspirations and development for over 40 years, inhibiting our progression as a culture and as a people (Pihama & Gardiner, 2005). Drawing on her clinical experience as a family therapist and leading family resilience academic, Froma Walsh (2002) agrees with the ‘shift’ and affirming that ‘families become more resourceful when interventions shift from a crisis-re-active mode to a proactive stance, anticipating and preparing for the future’ (p. 133). Thus, a policy move towards capability development and strengths-based resources can identify and amplify existing and potential competencies.

The third points emphasises the need for a cohesive alignment of social and health services which focus on addressing the issues of employment, health, housing and educational achievement, rather than the ad-hoc or reactive arrangement that often

operates. To help achieve this, various health and social service providers have collaborated to establish regional Whānau Ora collectives. Currently, there are 34 provider collectives nationwide (representing 180 individual health and social agencies), delivering the Whānau Ora initiative within their regions (Te Puni Kōkiri, 2012a). The collectives have developed initial Programmes of Action which seek to outline their progress and the services they will provide to enhance and strengthen whānau. On top of this, ten Regional Leadership Groups (comprised of community representatives and officials from lead agencies) provide strategic leadership to ensure these whānau-centred services contribute in positive and realistic ways to the whānau and communities (Te Puni Kōkiri, 2011a).

Kōtahitanga is one such Whānau Ora collective which is made up of four Māori health and social service providers in the South Auckland area; Te Kaha o Te Rangatahi Trust, Papakura Marae Trust, Huakina Development Trust and Turuki Health Care Trust. This collective employs a large workforce of approximately 285 staff, and provides services to over 22,000 multi-ethnic whānau which includes 16,000 Māori. As with other collectives, Kōtahitanga deliver a wide range of health and social services. These include *te reo*-based *rangatahi* services, specialist needs assessment for *kaumātua*, world class accredited mother and infant services, *marae* based and integrated services. Moreover, Kōtahitanga have developed a new whānau-centred model of practice entitled *Mana Tiaki*. This is an evidence based, outcomes-driven, and strengths focused model which serves to address the unmet needs of whānau. It also enhances capacity to deliver high quality services as it supports coordinated access to a range of niche or specific services.



Although the mode of delivery may differ between the different providers and collectives, the following model of practice identifies six operational elements that are fundamental to the implementation and delivery (Durie & Kingi, 2011):

1. Whānau-centred methodologies shaped by the values, protocols and knowledge contained within *Te Ao Māori*;
2. Inter-sectoral contributions;
3. A primary focus on best outcomes for whānau, through integrated and comprehensive delivery;
4. Skilled whānau practitioners;
5. Expertise in whānau dynamics, relationships and aspirations;
6. Practices that increase whānau skills, knowledge, financial status, and self-management.

The first point recognises the need to incorporate *Te Ao Māori* values, protocols and knowledge in the implementation and delivery strategies. This may include aspects of *mātauranga Māori* and *tikanga* that is pertinent to each *rohe* (geographical region). The value in considering a *Te Ao Māori* approach has been well documented in the literature as a successful operational paradigm. Examples include the *Kohanga Reo* and *Kura Kaupapa* movement (G. Smith, 1997, 2003), and the utilisation of the *Whare Tapa Whā* model in the New Zealand health system (Kingi & Durie, 2000; Pitama et al., 2007; Rochford, 2004). An implementation and delivery strategy that is void of *Te Ao Māori* elements may well not achieve its desired success as certain elements may be alien to some Māori, and a lack of cultural regard could most likely hinder developments.

The second point relates to one of the three key shifts in policy development and service delivery which underpinned the development of the Whānau Ora initiative.

Closer and more effective collaborations between sectors of society may well contribute to achieving the Whānau Ora outcomes. These collaborations may operate at two different levels. On one level, which one may consider a policy and strategic/direction level, are those government sectors which play an important role in the long-term health and well-being of Māori whānau (i.e., Ministry of Education, Ministry of Health, Work and Income New Zealand, Child, Youth and Family Services etc.). On another level, are those sectors and organisations that are more involved in the day to day living of Māori whānau (local Police, local health providers, local schools etc.). Enhanced communication between these agencies could better identify areas of service delivery improvement and management.

While successive governments have attempted to get agencies working together and have subsequently achieved a level of success, Whānau Ora takes it a step further by locating the whānau at the 'centre'. With whānau positioned in this manner, there is greater potential for success as the whānau take ownership of their solutions (Te Puni Kōkiri, 2011b).

The third point considers the particular desires of the whānau themselves. What one whānau desires for their members may be quite different to the desires of another whānau. For example, one whānau may strive to establish a whānau-based business to ensure economic security, whilst another whānau may simply seek to instigate a whānau reunion in order to rekindle or reaffirm *whakapapa* links. More importantly however, it is paramount that the Whānau Ora provider ascertains the usefulness of a particular whānau goal, and if it may seem undesirable (from a Māori health and well-being perspective) then the provider must convince the whānau otherwise.

In 2010, Te Puni Kōkiri released a contestable funding stream entitled the Whānau Integration, Innovation and Engagement (WIIE) Fund which seeks to help

facilitate these whānau desires or whānau goals. The purpose of this fund is to build whānau capability, strengthen whānau connections, support the development of whānau leadership, and enhance best outcomes for whānau. Activities funded by WIIE include developing whānau plans, implementing priority components of these whānau plans, producing resources (e.g., *whakapapa* booklets) and information (e.g., business plans) for whānau, and supporting whānau-based activities such as whānau reunions and whānau *hui*. By 2012, almost 1,200 whānau representing some 15,000 family members had set their whānau planning activities in motion via their applications to the WIIE Fund (Te Puni Kōkiri, 2011a).

In regards to the fourth point, the whānau practitioner/broker has an important role in the delivery and implementation. As an interface between the whānau and the community support services, the broker has an important role in assisting families to develop both recovery and protective factors (Black & Lobo, 2008). This role involves addressing the needs of the whānau and providing them with easy access to a range of health and social services.

The fifth point follows on from the fourth, in that the skills and knowledge of the Whānau Ora navigator, as well as the service provider itself, are paramount to empowering whānau. To help achieve this, a number of provider collectives (e.g., Kōtahitanga, Whānau Ora ki Tūwharetoa, Te Tai Tokerau Whānau Ora Collective) provide ‘wrap around’ services which increase the range of services, skills, and knowledge available.

The final point reflects on the specific skills and knowledge that must be gained by whānau in order for them to achieve their dreams and aspirations. These may include:

- budgeting skills which would limit the expenditure on non-essential items, therefore enabling whānau to save;
- time management skills which could enable more time for the whānau to be together;
- problem solving skills which could alleviate daily stressors; and
- socialising skills which could enable whānau to improve their social capital.

The providers must ensure that whānau obtain the knowledge to practice these skills so that whānau are self-reliant and self-determined.

The Whānau Ora Taskforce Report (Te Puni Kōkiri, 2010) provides a hypothetical example which exemplifies these six operational elements. It also highlights the role of the Whānau Ora ‘navigator’ and what it may look like in practice.

*In this whānau, the mother is a sole parent who is in part-time/casual employment. She receives additional social assistance to supplement her income but finds it very hard to make ends meet. She moved away from her whānau during her teens and has had very little contact with them since. She has three children:*

- *Her 16-year-old son has repeatedly been caught driving without a licence. He worked for five months as a builder’s labourer but stopped going to work three weeks ago as he did not want his employer to know that he did not have a licence and had been to court for these offences.*
- *Her 12-year-old daughter has just been referred to Strengthening Families as a result of repeated school absence.*
- *Her 8-year-old son is repeatedly noted by the Police for roaming the streets late at night. Often when the Police return him home, there is no adult present. This has led to a notification to Child, Youth and Family.*

*This whānau has lived in a Housing New Zealand Corporation home for the past 11 years. In recent times the neighbourhood has become unsafe, with increased youth gang activity. The mother is continually focused on trying to provide for her whānau – often working late into the evening or the morning, leaving the children unsupervised. She relies on the 16-year old to get the younger ones off to school. If the older boy goes to work, the 12- and 8-year olds get themselves off to school. The mother doesn’t know that, because the 12-year-old is being bullied on the way to school, she often does not get to school. This has led to the Strengthening Families referral. Quite often when the mother is working late,*

*the 8-year-old wanders from the house. He has begun hanging out with the local youth gang for companionship, hence the police intervention.*

*This mother is so focused on providing a living for her family that she has neglected her own health. She does not have a regular doctor and has never had a breast or cervical screen.*

*In this scenario the whānau is currently involved with:*

- *New Zealand Police*
- *Work and Income*
- *Child, Youth and Family*
- *Schools*
- *Strengthening Families.*

*Each intervention is focused on an individual family member: unlicensed driver, truant child or unsupervised child. All interventions are happening in isolation of each other and none focuses on the whānau as a whole. Under Whānau Ora this whānau would be connected with a Whānau Ora provider at the first instance of need. The referral could come from any agency or from the whānau itself. The Whānau Ora provider would work with the whānau to build a relationship that enables open and frank exchanges on the real issues, and to determine possible solutions. These could include:*

- *assisting the mother to gain employment that provides more adequately for the whānau and which enables her to be at home to support her children*
- *reconnecting the mother with her whānau so they can help to support and care for the children*
- *working with the 16-year-old to gain his license, and support him to explain the situation to his employer so he can return to work*
- *supporting the mother and whānau to establish an effective relationship with the school*
- *identifying the instigators of the bullying and approach their whānau to work through the issues to enable the 12-year-old girl to return to school.*

*The mother being at home more regularly will mean that the 8-year-old is better supervised and cared for. (Te Puni Kōkiri, 2010, pp. 26-27)*

This example highlights the complexities of raising children in a single parent, low income household. It also exemplifies the shortcomings of interventions which are isolated or incongruent with the lifestyles, realities and expectations of whānau. Ultimately, this mother is capable of empowering her whānau and creating change. However, her economic situation has prevented her from fulfilling this role as a carer

and change creator. Whānau Ora would help her work through and resolve these issues and enable her to focus on being a carer and protector. The Whānau Ora ‘navigators’ are therefore specialist practitioners who work with whānau to identify their needs, develop a ‘whānau plan’ to address those needs, as well as broker their access to various health and social services which are able to meet those needs.

Engagement with a Whānau Ora ‘navigator’ is however not the sole operational element of Whānau Ora. Throughout the various collectives in Aotearoa, a number of other whānau development initiatives have also been implemented and new initiatives continue to be developed. For example, in 2012 *kaumātua* from Rātana Pa set up a food bank for the whānau of locked-out AFFCO freezing workers. Thirty six whānau from Rātana were left without income, so the local *kaumātua* took it upon themselves to seek out donations and donate from their own bank accounts or cupboards. A similar foodbank was also set-up, this time by the Māori wardens, for the 200 affected AFFCO whānau in Whanganui (Te Puni Kōkiri, 2012c).

In 2012, Ngāti Hine Health Trust opened their early childhood education centre in the Bay of Islands township of Kawakawa in the Bay of Islands. Named *Te Mirumiru*, the centre offers high quality early childhood education, as well as improved access to wrap-around health and social services including doctors, nurses, dentists and Tamariki Ora staff (Te Puni Kōkiri, 2012b). The centre also provides 25 jobs for professionally qualified staff. Ngāti Hine Health Trust is a part of the Te Tai Tokerau Whānau Ora Collective, whose vision is ‘Whānau Ora – Whānau Rangatiratanga’. This reflects a commitment to prioritise the *oranga* (health and well-being) and *rangatiratanga* (leadership and autonomy) of whānau in the Te Tai Tokerau region (Te Puni Kōkiri, 2012b).

In the small township of Kaikohe, one particular whānau exemplified the idea of whānau taking ownership of their lives. Rheumatic fever has become a key health issue in the Northland region, with a number of local children having been diagnosed with acute rheumatic fever (Ministry of Health, 2011). Te Hau Ora o Kaikohe, a member of Te Pu o te Wheke Ngāpuhi Whānau Ora Collective, conduct a screening programme within nearby schools. They were notified of two children from one whānau who tested positive to the precursor of rheumatic fever, and it was believed that these children were travelling with other whānau members in a van to a *tangihanga* (Māori grieving and burial rituals). Fortunately, the whānau took the proactive approach and booked an appointment for the whole whānau to get checked. Moreover, as no immediate appointments were available and the emergency clinic was expensive, the whānau decided to visit a nearby school screening clinic where they were able to get checked (Ministry of Health, 2011). Te Hau Ora o Kaikohe regarded this as an illustration of their ability to break down access barriers for whānau, as well as their ability to create awareness around certain health issues (Ministry of Health, 2011).

While these examples highlight Whānau Ora in action, there are still challenges in regards to the implementation, and measuring the success of Whānau Ora. Firstly, as has been alluded to previously in this chapter, the definition of ‘whānau’ will constantly change and evolve as it has since early European contact. As Metge (1995) notes, ‘new usages should not be dismissed as wrong: the people who use a language have every right to develop it in ways that suit their purposes and meet their needs’ (p. 60).

Secondly, a co-ordinated effort is required to maximise the effects of Whānau Ora. This requires a cohesive and co-ordinated effort amongst not only the government departments (i.e., Ministry of Māori Development, Ministry of Social Development,

Ministry of Health, Ministry of Education), but also the various health and social service providers (including the Whānau Ora providers).

Accounting for whānau and operational diversity has and will also pose challenges. As Durie (2001) states, whānau diversity does exist, and therefore successfully engaging with whānau and appreciating this diversity is imperative to Whānau Ora service delivery. Moreover, the different *rohe* and regions throughout Aotearoa will have different priorities regarding the best approaches to improving whānau health and well-being. This will require different approaches for the various Whānau Ora providers throughout Aotearoa, appropriate for their *rohe*.

Whānau Ora is therefore an initiative that aims to empower whānau to take control of their day to day living, with the ultimate goal of attaining and maintaining positive health and well-being. To help achieve this, the provider collectives will deliver *Te Ao Māori* centred services that seek to create healthy, resilient, self-determining, and economically secure whānau. In many ways the initiative is consistent with the objectives of this thesis and demonstrate a variety of strategies through which whānau can become more focused, more robust, more likely to experience improved health and well-being, and ultimately more resilient. To this end, it is likely to have implications for the manner in which the outcomes from this thesis are conceptualised, interpreted, and applied.

### **Whānau Capacities:**

A desire to ‘enable’ and ‘empower’ whānau is a key feature of both the Whānau Ora initiative and the *Whānau Strategic Framework*, as they aim to foster growth across social, economic, and health domains. Durie (2003) has linked these desires to the



notion of whānau capacities, that is, the capacity of whānau to provide six functions can go a long way to achieving Whānau Ora. These six functions are:

1. *Manaakitanga/Manaakitia* - the capacity to care;
2. *Tohatohatia* - the capacity to share;
3. *Pupuri Tāonga* - the capacity for guardianship;
4. *Whakamana* - the capacity to empower;
5. *Whakatakoto Tikanga* - the capacity to plan ahead; and
6. *Whakatini* - the capacity for growth. (Durie, 2003)

*Manaakitanga* is the first key function and considers the capacity of whānau to care for the young, the elderly, the impoverished, and the sick. Durie (2003) states however that in order to practice *manaakitanga* successfully, some order of material and social resources are required. For some whānau however, this may not be possible due to financial constraints, limited social capital (e.g., whānau involved in gangs), and/or geographical distance may also create particular challenges.

The capacity to share, *tohatohatia*, is the second function and involves the sharing of whānau resources (practical, emotional, financial, and cultural) as a representation of generosity and a collective responsibility to the well-being of all. This redistribution of wealth is particularly important in times of adversity and hardship. Once again however, those whānau who are isolated (socially and/or culturally), or financially deprived may struggle to provide this function.

The capacity for guardianship, *pupuri tāonga*, emphasizes the need for whānau to uphold and protect the whānau and cultural heritage. These may centre on *whakapapa wānanga* (genealogy workshops), narratives, language, *wāhi tapu* and other cultural landmarks (Durie, 2003). Some whānau however (e.g., *whānau matara*), may

struggle to fulfil this function due to their location away from their *tūrangawaewae*, and/or their lack of the required cultural knowledge. Successful management of this whānau heritage will mean that whānau members can easily access these cultural and physical resources.

*Whakamana* relates to the idea of empowering whānau members to participate in their community and wider society. Thus, whānau can act as the gateway for its members into schools, sports and employment (Durie, 2003). Instead of the individual themselves negotiating entry into such situations, the whānau resources and connections can alleviate and ease the passage of entry. To this end, human and social capital are important factors.

The capacity to plan ahead, *whakatakoto tīkanga*, centres on planning for the future development of family members. This may involve saving for schooling, housing or future unexpected circumstances such as *tangihanga*. While some whānau may focus on past grievances or contemporary problems, the key to future survival lies in developing long-term plans that are better placed to advance whānau desires (Durie, 2003).

The final component, *whakatini*, relates to the capacity for growth. Durie (2003) cites the de-population period that occurred before and during the turn of the 20<sup>th</sup> century, as an example of where *whakatini* was crucial in the survival of the Māori race. It may be argued however, that increases in whānau numbers must coincide with the capacity for whānau to care for these members, and promote their participation in wider society. Failure to provide life's necessities for children can increase their chances of lifestyle challenges later in life.

Indeed, due to their capacity and capability, not all whānau are able to provide the same level of health for their members. Durie (2003b) identifies a number of other

types of whānau which negatively impact on their members and others nearby. *Whānau tūkino* (unsafe families) have a lack of respect for others and quite often resort to violence in order to make a point. *Whānau wewete* (laissez-faire families) tend to be unorganised and lack any direction, guidance, or purpose. *Whānau pōhara* (restricted families) tend to lack the resources and or support to achieve their hopes and aspirations. While many of these types of whānau have good intentions and desires (apart from *whānau tūkino*), their lack of resources, direction, guidance, and purpose inhibits positive well-being amongst their members.

Through the various health and social service providers, the Whānau Ora initiative seeks to develop the capacity and capability of whānau to provide these functions for their members. This may involve improving access (i.e., costs, location, and service availability) for whānau to health and social services, and community, cultural institutions. As will be discussed later in this thesis, some of these functions of whānau capacity are in fact the strategies utilised by resilient whānau when faced with stress and adversity.

### **Resilient Whānau:**

With the recent implementation of the Whānau Ora initiative, resilience and whānau resilience has become of increasing interest to both Māori and non-Māori politicians, academics, and practitioners. Te Puni Kōkiri (2009, as cited in Moewaka-Barnes, 2010) notes that there is no single, agreed definition of resilience for Māori whānau. The international literature has defined ‘family resilience’ as the ability of a family unit to respond positively to a stressor or unfavourable event (Simon et al., 2005; Walsh, 1996). A similar definition for Māori whānau has also been suggested. The Families Commission report defines whānau resilience as the ‘ability of the whānau to

provide a protective environment for its members from adverse influences of both personal and collective risk factors' (Baker, 2010, p. 65). Walsh (1996, 2006) takes these definitions a step further by linking family resilience to a family's ability to make meaning of their social world, their cultural and religious beliefs, their multigenerational past, and to their hopes and goals for the future. To this end, all of these definitions are useful for considering whānau resilience here in Aotearoa, and they have all guided the research process and the focus of the thesis.

### **Conclusion:**

This chapter has outlined the difficulty in defining the term 'whānau'. Added to this are issues of diverse cultural realities and equally diverse notions of whānau composition and function. For these reasons this research has a particular role in exploring more precisely the unique characteristics of whānau resilience. The following sections have been shaped by this discourse in order to securely place whānau resilience at the centre of the thesis.

## CHAPTER IV: METHODOLOGY

### **Introduction:**

This chapter outlines the four methodological elements of this research. In particular, the paradigm, theoretical perspective, methodology and methods utilised to manage and progress the research processes. The first section considers the broad paradigm used to inform the research, *kaupapa Māori*, and the imperative to align the study with a Māori world-view. The next section discusses the theoretical perspective employed, in this case a *mātauranga Māori* perspective. The final section discusses the methodology and methods. In particular, the appropriateness of qualitative research within the resilience field and with specific reference to the objectives of this thesis. The methods section outlines the data gathering and data analysis techniques that were employed to collect, interpret and review information as well as the various processes used to ensure its overall quality and rigor.

### **Paradigm:**

Across and within disciplines there are varying views of what research is, and how this relates to the kind of knowledge being developed. Paradigms exist to help guide how decisions are made with regards to the research process. In his seminal book ‘The Structure of Scientific Revolutions’, Kuhn (1996) defines paradigms as a set of theories, ideas, and beliefs that ‘provide models from which spring particular coherent traditions of scientific research’ (p. 10). According to Priest (1999), each paradigm assumes unique philosophical assumptions including the nature of reality (ontology) and the nature of knowledge (epistemology).

In the past, two paradigms have generally prevailed in both research and evaluation. The positivist paradigm, which is sometimes referred to as the scientific, reductionist, or rationalistic paradigm; and the naturalist paradigm which is sometimes referred to as the post-positivist, interpretive, phenomenological, or holistic paradigm (Priest, 1999).

The positivist paradigm focuses on descriptive, explanatory, predictive, controlling and verifiable research inquiry (Priest, 1999). It seeks to explain 'cause and effect' relationships through scientific and quantitative methodologies such as surveys, micro-based lab studies and statistical analysis. A positivist paradigm assumes that there is a 'single' objective reality that is best identified through experimentation. This reality can be discovered by breaking it down into smaller sections - independently analysing these sections, then deriving the notion that the whole is simply a sum of the various parts.

While this approach is worthwhile in examining phenomenon that is akin to experimental and lab-based inquiry, it is less useful for complex phenomenon that involve a number of variables and unobservable influences such as those considered by the social scientist. Utilising a positivist paradigm to investigate a complex social problem (for example unemployment or educational outcomes), would involve analysing the visible manifestations (i.e., the unemployed individual or student) rather than the underlying causal mechanisms that are invisible to us (i.e., social policies, income, or access to societal resources) (Priest, 1999). Hence, positivists' prescriptions can tend to be too clinical or absolute, and without due consideration for the multiple and often diverse factors which influence an outcome.

The naturalistic paradigm focuses on subjective and creative research inquiry which seeks to construct meanings within contexts (Priest, 1999). It asserts that reality

cannot be entirely known, as there are multiple realities. Naturalistic inquiry involves working hypotheses, emergent designs, and as well as non-causative effects.

Researchers who advocate naturalism also admit to bias laden and value bound outcomes. Research often proceeds in a manner consistent with the prevailing paradigm, or scientific theory associated with the subject area.

The utilisation of a particular paradigm to guide research and scientific enquiry can be termed 'Normal Science' (Kuhn, 1996). However, sometimes the paradigm will fail to explain the science or research which it envelops. If this shortcoming is significant, and scientists or researchers begin to question its validity, a revolution can occur with the selection or establishment of a new paradigm. Kuhn (1996) termed this phenomenon as a 'paradigm shift', as the newly developed paradigm then proceeds into its own period of 'Normal Science' and subsequent research inquiry. A similar paradigm shift has occurred within Māoridom over the last three decades and which has ultimately influenced the way in which research with, by, or for Māori is undertaken (L. Smith, 2012).

### **A Kaupapa Māori Paradigm:**

While significant developments and revitalisation efforts had been ongoing since the early 1970s, the 1980s saw particular developments within academia and amongst the growing number of Māori employed within New Zealand universities. An academic revolution was underway and it was characterised by a shift away from Māori waiting for things to be done for them – to doing things for themselves (G. Smith, 2003). In other words, Smith (2003) described it as a move away from 'de-colonization' (which puts the colonizer at the center of attention) to 'conscientization' or 'consciousness-raising' (which puts Māori at the center) (p. para 1). Added to this, a theoretical

revolution was also gaining momentum amongst Māori scientists, researchers and academics. There was a general criticism concerning the constraints imposed by the traditional positivist and naturalist paradigms, and their lack of capability to account for *mātauranga Māori* (G. Smith, 1997; L. Smith, 2012).

Teariki, Spoonley and Tomoana (1992) believe that historically, Māori individuals and Māori communities had a negative attitude towards research, and that the value of the social sciences was ‘far from evident for Māori’ (p. 6). Teariki, Spoonley and Tomoana (1992) identified four reasons for this:

1. Māori saw research as an exercise in control, a tool to help local and national government control Māori. Outcomes were then used to justify policies which impacted negatively on Māori welfare.
2. Māori saw research as something that only non-Māori did. These non-Māori would enter Māori communities and conduct research in a manner which ignored Māori values and processes.
3. Māori also saw research as something that non-Māori did for personal career gain. This was regarded as ‘intellectual colonialism’ and a further abuse of Māori in the interest of non-Māori.
4. Research was also seen by Māori as a mechanism to emphasize negative statistics regarding Māori (e.g., rates of Māori unemployment and Māori incarceration), which also reinforced negative Māori stereotypes.

Te Awekotuku (1991) and Smith (2012) also proposed that research concerning Māori was mainly conducted from an outsider’s perspective, with Māori being an object and the subject of the research. In addition, Māori perspectives were also constrained by the traditional scientific methods of positivism: formulate, design, test, verify, and generalise from a pre-determined hypothesis.



Thus, there was an increased desire amongst Māori for Māori researchers and methodologies that reflected Māori realities and a Māori world-view (Bishop, 1996; Kiro, 2000). Pihama, Smith, Taki and Lee (2004) go on to argue that ‘the marginalisation of Māori has meant the privileging of Pākehā knowledge over Māori knowledge’ (p. 8). Consequently, Kaupapa Māori was born out of the desire of Māori to ‘decolonize’ the research process (L. Smith, 2012). The Native American academic Youngblood Henderson (2000) sums up this Indigenous renaissance by stating that:

Indigenous peoples are attempting to effect a paradigm shift to replace the Eurocentric way of viewing the world with a new context that would be an ecological or natural context of Indigenous knowledge rather than a refined artificial one. (p. 14)

Underscoring this position was the notion that Indigenous knowledge per se, was quite distinct from Western knowledge. Both utilise different methods of inquiry and ways of explaining, with Indigenous knowledge highly connected to the environment and the relationships that are part of being (Warren, 1989). The following table from Edwards (2009, p. 205) highlights some of these differences:

**Table 3 - Differences in Research Enquiry between Indigenous Knowledge and Western Knowledge:**

<b>Factor</b>	<b>Indigenous Knowledge</b>	<b>Western Knowledge</b>
How approached	(w)holistic	Compartmental
How communicated	Oral	Written
How taught	Observations, experiences	Lectures
How explained	Spiritual, values	Value free theory

This table reveals a number of contrasts. While it serves the purpose of identifying key divergences, it can also promote hierarchies and oppressive realities (S.

Edwards, 2009). It is more beneficial to ‘move toward radical cultural timocracy and transformative practice based on honour and ways that are *tika* or right in Māori worldview, that enhance cultural well-being and in so doing contribute to the (w)holisitc well-being of individuals and groups’ (S. Edwards, 2009, p. 206).

Nevertheless, it once again highlights the desire for Māori and Indigenous researchers to move beyond the compartmentalised and value free theory akin to Western methods of inquiry.

Smith (1997) states that the *kaupapa Māori* paradigm is founded on three key assumptions:

1. The validity and legitimacy of Māori are taken for granted;
2. The survival and revival of Māori language and culture are imperative;
3. The struggle for autonomy over cultural well-being and over lives is vital to the Māori struggle.

Nepe (1991) suggests that these three key assumptions locate Māori language and customs as essential elements in the reproduction of *kaupapa Māori*. In essence, *kaupapa Māori* research can be summed up as ‘the philosophy and practise of being and acting Māori’ (Smith, 1992, cited by Bishop, 1996, p. 12). *Kaupapa Māori* derives from a distinctive cultural epistemology and metaphysical foundations (Nepe, 1991), and infers a cultural way of framing and structuring how Māori think about those ideas and practices (Pihama et al., 2004).

While referred to earlier, the term ‘*kaupapa Māori*’ was first introduced by Graham Smith (1997) as an intervention activity that was proven successful in education, in particular, the establishment of *Kohanga Reo* and *Kura Kaupapa Māori*. Since those beginnings, it has proven successful as a research paradigm, a theory (of Māori knowledge), as well as a methodology (philosophical commitment) (Bishop,

1996). To this end, *kaupapa Māori* within the literature has been referred to as a paradigm, a Māori philosophy, a world view, a praxis, a theory, and cultural practices (G. Smith, 2003).

### **Transformative Practice Through Kaupapa Māori:**

There are a number of common key intervention principles that are evident amongst *kaupapa Māori* proponents, such as those within the health and education sectors (Pihama, Cram, & Walker, 2002; Pihama et al., 2004). Graham Smith's (1997) seminal doctorate entitled 'The Development of Kaupapa Māori: Theory and Praxis' initially identified six principles (these are detailed below) of *kaupapa Māori* that were evident within the context of education (specifically *Kura Kaupapa Māori*) and research inquiry. These principles have since been expanded by other *kaupapa Māori* theorists such as Pihama (2001) and Pohatu (2005).

These *kaupapa Māori* intervention principles can be described as a 'theory of transformative praxis' (G. Smith, 1997), that is, the practice and realisation of a *kaupapa Māori* paradigm. Although it can be considered that *kaupapa Māori* was borne out of the education sector, specifically through the *Kohanga Reo* and *Kura Kaupapa Māori* movements, Smith (1997) proclaims that *kaupapa Māori* is transferable across and within various sectors. In fact, it can be relevant to a variety of aspects of society, as it is a theory which is 'evolving, multiple and organic' (Pihama, 2001, p. 114).

During this research process, the various intervention principles (detailed below) were activated within and throughout the entire research process. In a similar fashion to the many other research projects which are influenced by a *kaupapa Māori* theory/paradigm, this particular study sought to transform the research process from one that positioned the participants and their world view on the outside, to one that

positioned the participants (whānau cohort), Māori customs, and Māori desires at the centre. This overall approach took into account the objectives of the research, but more fundamentally the background of the researcher, the expectations of the participants, as well as the broader aspirations for Māori development. Each of these principles are now discussed in relation to this particular study.

***Principle 1. Cultural aspirations:***

The cultural aspirations principle assumes that a ‘Kaupapa Māori framework asserts a position that to be Māori is both valid and legitimate, and in such a framework to be Māori is taken for granted’ (Pihama et al., 2002, p. 36). This indicates that aspects of ‘being’ Māori, such as the use of *tīkanga* Māori, *te reo Māori* and *mātauranga Māori* are all legitimate and valid aspects of research inquiry. Further to this point, *Kohanga Reo*, *Kura Kaupapa Māori*, *Wharekura* and *Whare Wānanga* (Māori tertiary education providers) are all forums where Māori customs, language and education form the prime basis for the curriculum.

My experiences as a researcher in Māori education (as a founding student of the *Kohanga Reo* movement, a *Kura Kaupapa Māori* student, and Māori boarding school student) and the support that was provided by *kaumātua*, provided the culturally competent background knowledge required for research in the chosen framework and the methodology that was employed. For this study, a number of cultural customs that have been handed down from past generations were utilised in different ways and in particular during the interviews. These included *kānohi-ki-te-kānohi* (face to face) ‘chats’ with the various whānau to reaffirm cultural links, and to enhance the transmission and sharing of knowledge, Māori terms and language (where possible), the gifting of *koha* for their time and effort, and a strong involvement of whānau for support.

***Principle 2. Ako:***

The *ako* Māori principle assumes that Māori pedagogies, which include Māori language, customs, *whenua*, and *whakapapa*, are needed to ensure cultural communication, achievement, and socialization (Pihama et al., 2002). Therefore, teaching and learning practices that are unique to *tikanga Māori* are promoted throughout this study. In order to implement the *ako* principle, the use of *kānohi-ki-te-kānohi* ‘chats’ were conducted at the *tūrangawaewae* of the whānau where possible, and the use of *te reo Māori* (where appropriate) was included in the interviews. My educational upbringing was strongly based on Māori pedagogies of learning, therefore the Māori culturally preferred pedagogy framed my thoughts throughout the research process. Moreover, by including these processes into the study, cultural transmission and acquisition was assured through the development of a Māori culturally preferred pedagogy.

***Principle 3. Socio-economic mediation:***

The socio-economic mediation principle assumes that despite the difficulties that Māori face in terms of our socio-economic disadvantages, *kaupapa Māori* mediation practices and values can successfully improve whānau well-being (Pihama et al., 2002). In this sense, the collective responsibility and support of the Māori community is emphasised. This study drew upon the knowledge of both Māori and non-Māori academics to help me interpret and conceptualise the content of the study. A collective commitment and input by academics as well as elders in my whānau and community ensured that no significant disadvantages were present.

***Principle 4. Whānau:***

The whānau principle assumes that the practice of *whanaungatanga* (kinship) is an integral part of Māori identity and culture. According to Pihama et al. (2002), ‘The cultural values, customs, and practices that organise around the whānau and collective responsibility are a necessary part of Māori survival and educational achievement’ (Pihama et al., 2002, p. 38). Conducting research from a *kaupapa Māori* approach within a westernised institution was a challenging task. To help overcome this challenge, I sought help, guidance and intellectual support from whānau and *kaumātua*. Having experience in Māori research regarding education, geography, science, technology, *kaupapa Māori*, and *mātauranga Māori*, my whānau members provided significant help towards the study. Further to this point, as a result of the kinship structure akin to a Māori world-view, I was able to seek advice and help from a number of leading Māori academics (from outside of the residing university).

***Principle 5. Collective philosophy:***

The collective philosophy principle assumes that a *kaupapa Māori* world-view is a collective vision which involves collective commitment. This collective vision involves Māori aspirations to political, social, economic, and cultural well-being (Pihama et al., 2002). The vision and development of this study was a collective input from myself, whānau participants, colleagues, and academics (both Māori and non-Māori). The study was constructed from a collective vision that sought to advance the discourse of resilience amongst Māori whānau, and contribute to Māori development. It recognises that to improve the health and well-being of Māori, there must be an acknowledgement of culture and whānau dynamics as opposed to an individual approach. Finally, being conducted within the Public Health discipline recognises the

importance of pan-population, political, social, economic, and cultural factors to improving whānau health and well-being.

***Principle 6. Tino Rangatiratanga.***

The tino rangatiratanga principle can be regarded as the main underlying theme of *kaupapa Māori*. This can mean ‘Māori control over Māori things’ or expressed more simply ‘Māori for Māori’ (Pihama et al., 2002). This principle was embedded in 1840 in the document that founded our country, The Treaty of Waitangi. Relating this principle to the current study, Māori may be in a better position to overcome adversity if there is an awareness of cultural resilience factors, and the resilience factors that have been proven successful by other Māori whānau. In this way it can offer an example of ‘Māori control over Māori things’, and hopefully an improvement in Māori well-being.

In essence, it is hoped that the ultimate achievement of this study will provide an advancement in *tino rangatiratanga*. The mere fact that a Māori researcher is conducting *kaupapa Māori* research on a Māori issue goes some way in promoting *tino rangatiratanga*. With the continuing negative connotations that are associated with Māori such as high unemployment (Statistics New Zealand, 2013), health inequalities (Ministry of Health, 2010; Robson & Harris, 2007), and imprisonment (Department of Corrections, 2012), there is a strong need for the advancement of *tino rangatiratanga* in local and government policy. Ultimately, this thesis seeks to add to the established and substantial body of evidence and discourse surrounding Māori or whānau resilience and therefore contribute to Māori development.

***Principle 7. Te Tiriti o Waitangi:***

Pihama (2001) identified another principle integral to *kaupapa Māori* theory and practice. The *Tiriti o Waitangi* principle acknowledges the unique relationship that was

initiated in 1840 between the Crown and Māori. This principle therefore provides a basis through which Māori can critically analyse government and agency relationships, challenge the status quo in regards to social/health policy, and affirm Māori rights. In relation to this research, the government's Whānau Ora policy saw a need for targeted research into family level research regarding health, well-being and self-determination. The Whānau Ora policy itself represents a formal partnership between Māori and the Crown as they seek to alleviate the growing health inequalities (Ministry of Health, 2010; Robson & Harris, 2007) that exist.

***Principle 8. Āta:***

The principle of *āta* (growing respectful relationships) is another intervention principle developed by Pohatu (2005). Developed primarily as a transformative approach within the social services sector, this principle relates specifically to the building and nurturing of relationships. In particular, it acts as a guide to proper engagement with Māori. For example, the notion of *āta haere* was utilised in this research. *Āta haere* emphasises the need to engage with participants with a sense of respect and integrity, and to also have an appreciation of the participants' context and environment.

For some of the whānau, the life shock was still fresh in their consciousness, and therefore care and respect on my behalf was paramount. The notion entitled *āta whakarongo* ensured I displayed patience, and that all senses were engaged in the conversation 'chats'. In doing so, this can impart a sense of trust, integrity and respectfulness of what is being shared (Pohatu, 2005). Te Awekōtuku's (1991) seminal piece on 'Research Ethics in the Māori Community' also emphasises this responsibility to acknowledge and protect the 'rights, interests and sensitivities' of those been studied (p. 17).



Other notions mentioned by Pohatu (2005) were also utilised throughout the entire research process, again as guiding principles. These included; *āta korero* (communication, clarity), *āta tuhi* (reflective and quality writing), *āta mahi* (diligent and valid work), *āta noho* (listening with an open and respectful mind), *āta whakaaro* (openness and reflective thinking, consider possibilities). It is somewhat evident that many of these research behaviours are closely related to Māori customs such as *aroha* and *manaakitanga*. Adopting these measures was invaluable to researching from a *kaupapa Māori* perspective.

Table 4 below provides a simple framework with a description of these principles and concepts as well as their application to the study. These principles were used to guide the study throughout and were applied in a considered and deliberate manner. To this end, some principles were more relevant to certain aspects of the research than others, however, each were threaded throughout the study and contributed to the overall rigor and integrity of the research.

**Table 4 - Kaupapa Māori Principles and their application within this study:**

<b>Principle</b>	<b>Definition</b>	<b>Research Focus</b>	<b>Application</b>
Cultural Aspirations	Cultural knowledge and perspectives are legitimate.	Provides an overall cultural framework through which Māori research can be conducted.	<i>Tikanga</i> and <i>Te Reo Māori</i> used alongside other cultural processes to conduct and enhance the research.
<i>Ako Māori</i>	Māori pedagogies which entail cultural customs, language, and beliefs.	Māori pedagogies such as cultural communication and socialization can ensure proper dissemination.	' <i>Kānohi ki te kānohi</i> ' interviews on the participants <i>tūrangawaewae</i> . The interviewer was also steeped in an educational upbringing which was framed by Māori pedagogy.
Socio-economic mediation	Cultural knowledge and customs can mediate socio-economic disadvantages.	Social support and Māori community involvement can help alleviate research issues.	Social support was sought to conduct and enhance the research.
Whānau	<i>Whanaungatanga</i> (kinship) is an integral component of Māori culture and identity.	<i>Whanaungatanga</i> thorough kin and non-kin relationships can be beneficial to the research process	The research expertise of whānau provided guidance to the research content and process
Collective philosophy	A collective vision and collective commitment by Māori.	The research aims must conform to collective desires and aspirations.	The study was initiated by a collective vision of government agencies to investigate Māori notions of family resilience.
<i>Tino Rangatiratanga</i>	Māori control over Māori affairs.	Māori research outcomes are better achieved when research is conducted by Māori.	The <i>Whānau Resilience Framework</i> represents the whānau cohorts' resilience responses.

<i>Te Tiriti o Waitangi</i>	Acknowledges the three principles of <i>Te Tiriti o Waitangi</i> .	Research that critically analyses government policies, challenge the status quo, and re-affirms Māori rights.	This thesis provides critical success factors which can align with the Whanau Ora government initiative.
<i>Āta</i>	Growing respectful relationships.	Highlights the importance of proper engagement with Māori.	Trust, respect and integrity was developed between the interviewer and whānau before the interviews were conducted.

By incorporating the *kaupapa Māori* research process, the researcher not only conducted research that is culturally relevant and appropriate, but research that also meets the requirements of academia. Integral to the knowledge capacity of *kaupapa Māori* is *mātauranga Māori*, a cultural body of knowledge which is derived from a Māori world view. The following section outlines this body of knowledge and its importance to Māori society and Māori development.

### **Mātauranga Māori:**

*Kaupapa Māori* can be considered as a conceptualisation of Māori knowledge (Nepe, 1991), or *mātauranga Māori*. This body of knowledge that forms the basis of *kaupapa Māori* theory and practice, was developed over a number of generations (Royal, 2007). While difficult to define, Mead (2003) suggests that *mātauranga Māori* is a recently revived construct which incorporates Māori knowledge from the past, the present, and is still developing. Winiata (2003) acknowledges this point also in that he regards *mātauranga Māori* as cultural knowledge which is handed down generation by generation, with each passing generation making a contribution to the body of knowledge (W. Winiata, 2003).

The term '*mātauranga Māori*' has been utilised by many to describe 'Māori systems of knowledge' (Durie, 1998a, p. 76), an 'epistemology of Māori' (Tau, 1999, p. 15), a 'Theory of Māori Knowledge' (Royal, 1998, p. 2), and 'traditional Māori knowledge forms' (Doherty, 2009, p. 18). Indeed, *mātauranga Māori* is embedded in Māori epistemology, and is used to differentiate between Māori knowledge and other forms of knowledge (S. Edwards, 2009; Roberts & Wills, 1998).

According to Royal (2007), confusion and misunderstandings abound when defining *mātauranga Māori*, as it is sometimes referred to as a 'body of knowledge' as well as a 'type of knowledge'. From a sociological perspective, Royal (2007) states that *mātauranga Māori* is a term used in everyday discussions to refer to a 'body of knowledge'. On the other hand an epistemological perspective gives rise to *mātauranga Māori* as a term to denote a 'type or view of knowledge and its place in our experience of the world' (Royal, 2007, p. 14). Some types of Māori knowledge can include those associated with the arts, education, food cultivation, gathering and preparation, expressed as religious knowledge, implied knowledge, tacit knowledge, and scientific knowledge (Royal, 2007). The sociological perspective notes that a certain 'body' of knowledge exists, while the epistemological perspective states the 'nature' of the knowledge.

It is also important to note that *mātauranga Māori* is a modern term (Royal, 2007). Many elders of the current generation are not familiar with this term (Royal, 2007), and Edwards (2009) encountered this belief with his research with Ngāti Maniapoto elders. In fact Edwards (2009) goes as far to suggest that *mātauranga Māori* is a Pākehā term. He suggests that we may need to reclaim the term and re-present it as *māramatanga Māori*, or Māori wisdom (S. Edwards, 2009). However, while the term

‘*mātauranga Māori*’ is new, the body of knowledge itself was created and maintained within Aotearoa over many centuries (Royal, 1998).

In addition to this notion of *mātauranga Māori*, some authors have also suggested that *iwi*-specific bodies of knowledge are more pertinent to those *iwi*, than *mātauranga Māori* alone. In fact, ‘the differences, hostilities and misapprehensions between specific tribal groups can be as profound, as alienating, and as significant, as those between Māori and *taiwi* (people of other than Māori descent)’ (Te Awekotuku, 1991, p. 15). Doherty (2009) describes this type of knowledge as *mātauranga-ā-iwi* (tribal Knowledge); that is, knowledge which is specific to an *iwi* and its *rohe*. Some examples include ‘*Mātauranga Maniapoto*’ (S. Edwards, 2009) and ‘*Mātauranga Tūhoe*’ (Doherty, 2009). While Doherty (2009) and Edwards (2009) recognise that the application of *mātauranga Māori* principles and values still occurs within these *iwi*-specific knowledge systems, *mātauranga-ā-iwi* can provide unique and ‘contextual’ knowledge as opposed to the ‘amalgamation’ of knowledge that is inherent in *mātauranga Māori*.

To conclude this section, Royal (1998) with the help of Professor Whatarangi Winiata provides the following working definition of *mātauranga Māori*:

Mātauranga Māori is created by Māori humans according to a world view entitled ‘*Te Ao Mārama*’ and by the employment of methodologies derived from this world view to explain the Māori experiences of the world. (p. 8)

‘*Te Ao Mārama*’ in this sense, is considered by Royal (1998) to represent the ‘phenomenal world’. That is a ‘picture’ of the world which is based on *whakapapa*, as per the Māori creation story regarding *Ranginui* (Sky-father) and *Papatuanuku*.

Therefore in the case of this definition, *mātauranga Māori* can only be created by the use of *whakapapa*, a notion which Royal (1998) believes requires further examination.

He goes further to suggest that the Māori can be removed from the title, therefore reserving ‘*mātauranga*’ alone to represent this body of knowledge, or this knowledge creation process (Royal, 1998).

The application of *mātauranga Māori* within this study can be considered along two parallel lines. Firstly, it provided a body of knowledge that represents traditional knowledge systems akin to *Te Ao Māori*. Secondly, this knowledge system was reflected not only in some of the responses of the participants, but is also helped frame a considerable section of the data analysis and the subsequent *Whānau Resilience Framework*. Without the application of this type of lens, it is unlikely that the findings would resonate with Māori or at the very least, place these in context which contributes to the broader developmental aspirations of Māori.

### **The Research Approach:**

This investigation of whānau resilience, the coping strategies employed and protective factors developed by whānau who have experienced life shocks, contributes to the small discourse of whānau resilience already present here in Aotearoa. In a wider context, it may also contribute to the much established international resilience and family resilience discourse.

Given the aim of this thesis, a comprehensive and pragmatic research methodology was developed. This ensured that a transparent research process was initiated and that the information was gathered in a robust and culturally considered manner. Moreover, that it was consistent with the philosophies and discourse described above. The design was fundamentally underpinned by the desire to better understand whānau notions of resilience and to ensure that the potential opportunities of the study were fully realised. To this end, a set of six secondary objectives were identified. These

were largely qualitative in nature and reflected the desire to collect information that was both robust and which was fully cognisant of the richness, depth, and diversity of contemporary Māori whānau:

1. To conduct a comprehensive review of relevant resilience literature;
2. To identify and interview a select range of whānau about resilience and resilience strategies;
3. To identify and interview experts (Key Informants) with an interest in whānau and resilience;
4. To analyse the information thematically and further consult on the findings;
5. To construct a Whānau Resilience Framework, and;
6. To ensure that the research contributes to positive Māori development.

The research methods are derived from these six objectives and are embedded in a *kaupapa Māori* research approach. As mentioned above, this approach required the application of Māori systems and processes as well as due consideration of Māori world views and perspectives. Table 4 was used to inform this process, the activities, the approach, the analysis and interpretation, and the broader developmental context within which it sat.

A qualitative research approach was employed to fulfil the requirements of this study. Qualitative research enables deeper enquiry into subjects of research, through subjective and objective enquiry (Tolich & Davidson, 1999). Quantitative research on the other hand, seeks out causal relationships through the use of measurable instruments (numbers), deduction, and experimentation (Glesne & Peshkin, 1992). While a quantitative approach to researching whānau resilience may also elicit the resilience strategies utilised by vulnerable whānau, quantitative findings tend to reduce ‘complex

wholes' into the particles that comprise them (Tolich & Davidson, 1999). This can then undermine the complex relationships that may exist within whānau life; such as socio-economic status, the social capital available to whānau, locality of the household (rural v.s. urban), and number of whānau members. Such an approach to this particular research would not correspond well with a Māori holistic world-view.

On the other hand, qualitative methods allow the researcher to collect and collate detailed information whilst still being able to acknowledge its context and meaning (Denzin & Lincoln, 2000). Ritchie (2003) identifies four classifications and functions that qualitative research can offer:

1. Contextual: describing the form or nature of what exists;
2. Explanatory: examining the reasons for, or associations between, what exists;
3. Evaluative: appraising the effectiveness of what exists; and
4. Generative: aiding the development of theories, strategies or actions.

Contextually, qualitative research enabled me to describe, interpret and contextualise the factors associated with the life shock, and the whānau responses to the life shock. A qualitative approach also allowed me to provide context to these matters in a manner that captured their inherent nature.

In terms of the explanatory function, the research methods enabled me to describe and contextualise the associations between specific life shocks, the resultant effect on whānau, and the coping strategy utilised to overcome the stressor. While the whānau interviews themselves did not concentrate on the specific reasons as to why a life shock occurred, rather focusing on the response, extrapolation from the in-depth interviews provided a glimpse of why and how it occurred.



The evaluative function of qualitative research allowed the researcher to evaluate the appropriateness and effectiveness of the categorisation of the whānau responses into a conceptual framework. This was achieved through member checking (please refer to the ‘Trustworthiness’ section later in this chapter), triangulation (ibid), as well as conference and *hui* presentations.

In terms of the generative function, in-depth qualitative research aided me in developing the proposed *Whānau Resilience Framework*. The varied and in-depth whānau responses and Key Informant knowledge, combined with the international and Indigenous resilience literature, provided sufficient evidence to construct a culturally relevant framework of whānau resilience.

Qualitative research seeks to capture the essence of what exists, therefore the potential for original or creative ideas and suggestions is very high (J. Ritchie, 2003). Kellehear (1993) explains that researchers who wish to investigate parameters which reflect the culture and its people tend to be qualitative researchers. During the foundation investigations of a phenomenon such as those objectives that were proposed by this study, qualitative research is sometimes used as a prequel to statistical inquiry because a clearer understanding and definition is required before measuring can occur (J. Ritchie, 2003). Patton (2002) further supports this stance by stating that qualitative research has been utilised in areas of research in where little is known about the topic of investigation, where little research has been completed, and where few definitive hypothesis have been made.

At present, there is a paucity of research which has sought to investigate Māori notions of resilience, let alone whānau-level resilience. Finally, because the subject area of this study was deeply rooted within my knowledge and understanding (i.e., a Māori world-view and *kaupapa Māori*), qualitative research provided various research

methods (such as face to face interviews and discourse analysis) to acknowledge these views and beliefs (J. Ritchie, 2003).

### **Qualitative Research Within the Resilience Discourse:**

A qualitative approach has strong relevance to resilience research and it can address two shortcomings noted by resilience researchers (Ungar, 2003). One is the arbitrary distinctions regarding the outcome variables, and another is the challenge of accounting for the socio-cultural contexts that can influence resiliency. When addressing research outcomes as negative or positive, and therefore defining individuals as resilient or vulnerable, quantitative research can sometimes miss the point. For example, if one does not test for the variables that can potentially represent resiliency, but instead examines variables which are more biased towards unsuccessful outcomes, one may come to an erroneous conclusion that resiliency is not present in that sample. Qualitative research on the other hand, can ascertain whether a negative outcome (such as aggression exhibited in a school class) is in fact a protective factor in other 'risky' contexts (i.e., aggression towards a chronic abuser in the household).

The impact of risk factors on individuals can be differentially influenced by geography and culture, and within the context of class, gender, race and other broad social forces (Ungar, 2003) And while quantitative methods can account for some of these contextual influences in regards to resiliency, it is qualitative methods which allow for deeper, richer descriptions of the social reality. It is this accounting for diversity in different contexts which is necessary to produce authentic representations of those people studied (Ungar, 2003).

Therefore qualitative research has relevance to resilience research, and it is well suited to fulfil the shortcomings associated with quantitative methods. As such, Ungar (2003) provides five key contributions of qualitative methods to resilience research:

1. They are more able to identify unnamed processes;
2. They study phenomenon in very specific contexts, and in combination with ‘thick’ descriptions of the context – ‘trustworthiness’ is strengthened;
3. They acquire and add power to ‘minority’ voices, which can promote unique localised definitions of positive outcomes;
4. They avoid generalisations in favour of ‘transferability’;
5. They require researchers to account for their bias in regards to their ‘social’ location.

Of particular relevance to this research, the third point highlights the ability of qualitative research to better elicit the voices of minority populations – including Māori, who make up some 15% of the New Zealand population (Statistics New Zealand, 2012). Qualitative inquiry in an Aotearoa context can highlight the unique status of Māori both in regards to their *tangata whenua* status and their socio-economic status. A qualitative approach ensured that the resilient strategies employed by Māori whānau were comprehensively captured in a manner that encapsulated their *tangata whenua* status and ensured a measure of trustworthiness to the research process.

Aligned with the six research objectives mentioned earlier in this chapter, were a range of cultural considerations. These are described earlier as *kaupapa Māori* research methods and are designed to ensure that the research is conducted in a manner which is consistent with the aspirations and expectations of Māori. The application of these methods tend to vary according to the specific objectives of any given research

investigation. While this can cause confusion and uncertainty, some broad principles have emerged, all of which are mentioned above in the *kaupapa Māori* section but which are placed in a context relevant to this thesis.

### **Whānau Interviews:**

Given that this study sought to investigate the resilience strategies (coping strategies and protective factors) employed by whānau who had experienced a life shock, only those whānau who had exhibited ‘resilient’ traits were interviewed. Moreover, there was a particular interest in the cultural strategies or factors that aided the whānau. A sample of participants such as this, are often referred to as ‘Information Rich’ participants (Patton, 2002), that is:

The logic and power of purposeful sampling lies in selecting information-rich cases for study in-depth. Information-rich cases are those from which one can learn a great deal about issues of central importance to the purpose of the inquiry, thus the term purposeful sampling. (p. 230)

Therefore, the sample of whānau was selected using the following criteria:

1. The whānau had experienced a ‘life shock’ within the past 10 years;
2. The whānau had emerged from the life shock exhibiting resiliency traits;
3. The whānau strongly identified themselves as Māori;
4. The whānau had an understanding of Māori culture and customs;
5. The whānau had expressed a positive interest in participating in the study.

There are no rules for sample size in qualitative inquiry (Patton, 2002). Given the focus of the study and the type of methods applied, fifteen (n = 15) whānau (of various sizes and age’s) were eventually approached to participate in the research. The

intent was to collect information consistent with the diversity of contemporary Māori experiences across social, economic, demographic, and composition indices. The overall sample of whānau represented those whānau who had experienced a life shock that affected their day to day to living. The various life shocks experienced by the sample whānau included either of the following examples:

- The main income earner had been made redundant (including multiple redundancies);
- There has been a breakdown in the family unit, resulting in a single parent household;
- A death within the family, such as suicide;
- Long-term chronic illness or disability within the family;
- Incarceration of a parent.

Some of the sample whānau also experienced multiple life shocks concurrently, such as redundancy followed by a family death. Additionally, as an outcome of the interviews, many whānau also spoke of other life shocks or stressors not listed above. These varied from racism encounters, to food insecurity, to mental health problems. As a consequence, these (sometimes smaller) life shocks compounded the original stressor and further affected the daily functioning of the whānau.

An important aim of the study was to ensure that the whānau cohort provided a fair and accurate representation of Māori whānau throughout New Zealand. While it is not possible to capture every type of perspective, this cohort provided sufficient diversity through which key concepts (attached to resilience) could be identified. To this extent, the sample of 15 whānau included the following demographics:

- ‘two-parent’ and ‘single-parent’ whānau living within one household;
- ‘blended’ or ‘step’ whānau living within one household;

- whānau/households who reside in both ‘urban’ and ‘rural’ localities.

The majority of the family structure research has utilised a ‘child-based’ classification system (Ginther & Pollak, 2004). This classifies a child’s family as either a ‘two-biological-parent family’ or a ‘stepfamily’ depending on the child’s relationship to the parents (Ginther & Pollak, 2004). Accordingly, a blended family is a stepfamily for one child and two-parent biological family for another. Like Ginther and Pollack (2004), a ‘family-based’ classification was utilised for the purposes of this research. A ‘family-based’ classification system acknowledges that stepchildren and joint children who live together are noted as belonging to a ‘blended family’ (Ginther & Pollak, 2004).

Urban localities are considered by the Department of Statistics (1992) as areas with a minimum population of 1000. Although there is no internationally recognised definition of a ‘rural’ area, rural areas have been regarded traditionally as those residual areas not included in the urban definition, typically up to 999 residents (Department of Statistics, 1992). As Table 5 below reveals, there are further distinctions within the urban and rural classifications.

**Table 5 - Classifications and Definitions of Urban and Rural Areas:**

<b>Urban/Rural classification</b>	<b>Area type</b>	<b>Definition</b>
Urban	Main urban	Towns and cities with a minimum population of 30,000 people
	Secondary urban	Towns with a population between 10,000 and 29,999 people
	Minor urban	Towns with a population between 1000 and 9999 people
Rural	Rural centre	Population between 300 and 999 people
	True rural	Population less than 300 people

(Department of Statistics, 1992)

The whānau cohort for this study consisted of a nine (n=9) urban and six (n=6) rural split of whānau. These were further classified as five (n=5) main urban whānau, three (n=3) secondary urban whānau, one (n=1) minor urban whānau, five (n=5) rural centre whānau, and one (n=1) true rural whānau.

**Table 6 - Urban and Rural Classification of Sample Whānau:**

Urban/Rural classification	Area type	Number of whānau
Urban	Main urban	5
	Secondary urban	3
	Minor urban	1
Rural	Rural centre	5
	True rural	1

The majority of the whānau were identified through existing networks and *whanaungatanga* connections developed by myself and the supervisory team. Once potential whānau were identified, they were notified of the objectives of the study and what was required of their participation. This was followed by an invitation to participate. Upon accepting the invitation to participate, arrangements were made to confirm a suitable time and venue to conduct the audio-recorded interview. Each whānau was provided with the opportunity to review the interview text, and to modify or correct any of their ideas and suggestions.

Determining whether these whānau were or are resilient or not, was not the purpose of this thesis. But rather, the purpose was to understand Māori notions of whānau resilience and their perspectives. Nevertheless, investigating notions of resilience provides a conundrum of sorts. Firstly, a *kaupapa Māori* approach to research emphasises the desires of the participants. Therefore in the case of this study, it was not up to the researcher to ascertain the level of resiliency a whānau possess. The whānau themselves are in a better position to determine their resiliency, as perceptions of their

own resiliency may differ to those of the researcher, or anybody else, as values and beliefs may differ (Ungar et al., 2008).

Secondly, when viewed across cultures and contexts, resilience as an outcome is indeterminate (Ungar et al., 2008). There is a problem with ascertaining 'resilience' as it is a dynamic and fluid process, and resilience outcomes are likely to be constructed differentially depending on the various social and physical ecologies in which families operate (Ungar et al., 2008). Moreover, Stout and Kipling (2003) believe there is 'considerable disagreement among scholars regarding the level of success necessary before the label can be conferred' (p. 16).

Consistent with the overarching philosophy of the research, these interviews took place in a manner consistent with contemporary Māori research expectations, as embodied by *kaupapa Māori* research. The venue was chosen by the whānau, and these tended to be their home. Each whānau was provided with the opportunity to review the interview text as well as the framework itself, and to modify or correct any of their ideas and suggestions.

### **Key Informant Interviews:**

Key Informant interviews (n=10) were conducted with a select group of experts known to have a particular interest in resilience, community development, Whānau Ora, and whānau development. While academics, policy advisors, clinicians, and practitioners were likely to provide guidance on these issues, steps were also taken to ensure that wider comment was sought. In particular from community based workers and those who could offer more pragmatic views on whānau development and resilience characteristics. To this end, a 3/2/2/3 split of academics, policy/government advisors,



clinicians/practitioners and community workers provided the general make-up of the Key Informant cohort.

The three (n=3) academics consisted of two Māori and one Pākehā. All three were senior academics at their respective universities (2 x North Island and 1x South Island). Each informant was approached as they had an extensive background in researching, reporting, and teaching aspects of whānau development and Māori social well-being. Their knowledge of the international literature pertaining to resilience, as well as Indigenous development proved invaluable to the content and analysis of this research.

The three (n=2) Māori policy/government advisors were current public sector employees within Te Puni Kōkiri (Ministry of Māori Development), the Families Commission, and the Ministry of Health. These informants were useful in envisioning the *Whānau Resilience Framework* within a policy context.

The three (n=2) Māori clinicians/practitioners consisted of two Clinical Psychologists and one General Practitioner. These particular informants were contacted due to their prolonged clinical experience with various whānau and their members. The clinical psychologists were able to reflect on their clinical experience in regards to dealing with various whānau who had sought psychological assistance. Many of the whānau issues these psychologists dealt with were similar to those experienced by the whānau cohort of this study. The General Practitioner had a long history with patients which provided the doctor with a historical understanding of some families, and how they had developed throughout the years. Their input was invaluable in ascertaining what is required to improve the health and well-being of whānau.

Finally, the three (n=3) community workers were approached due to their prominent positions in particular Māori health providers. Their role in their

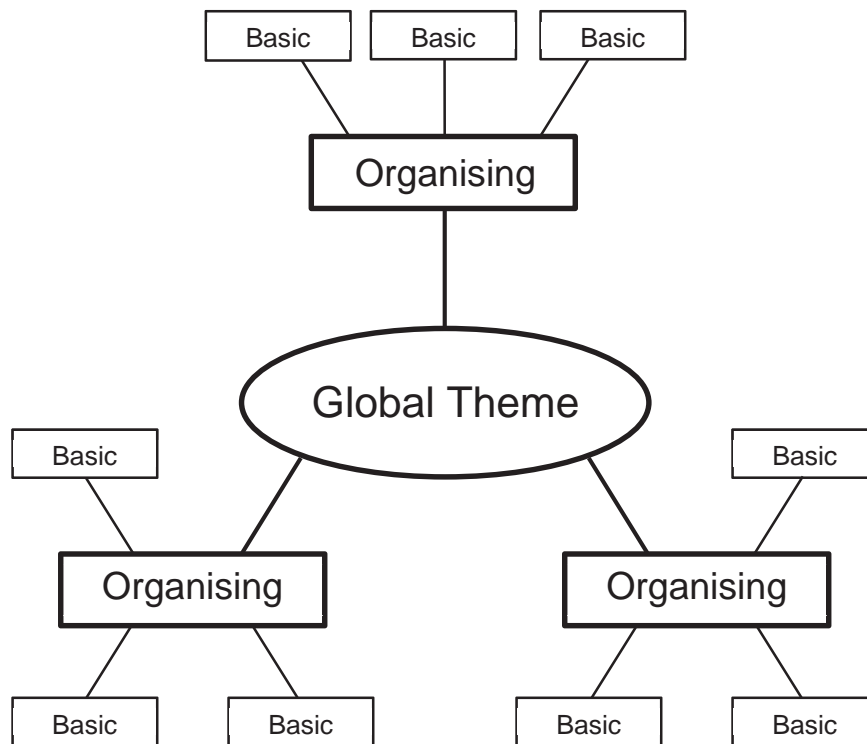
communities, combined with their life long experience of working with Māori whānau provided excellent first-hand experience of the daily struggles faced by whānau. Their input was especially noted when issues arose from the whānau responses.

All of the Key Informants were contacted by telephone (or email if un-contactable by phone) and invited to discuss the characteristics of whānau resilience. These *kānohi-ki-te-kānohi* interviews sought to discuss issues raised by the whānau interviews, as well as provide further background and pragmatic knowledge to the data. Themes or issues that lacked research depth were also the focus of these interviews. Each interview took between one and two hours. The venue was chosen by the informant, and these tended to be their workplace, home, a *marae*, or a public setting such as a café. Each informant was provided with the opportunity to review the interview text as well as the framework itself, and to modify or correct any of their ideas and suggestions.

### **Analysis:**

The information collected from the whānau and key informant interviews was transcribed and analysed thematically. Major themes were identified and clustered according to the emergent categories. Thematic analysis (also known as Grounded Theory or Narrative Analysis) breaks the whole into parts and/or sections which have ‘smaller bits of meaning’ in themselves (Kellehear, 1993). This involves noting the major point and themes, noting any arguments and their evidence, and noting only the stylistic qualities, literacy devices, or language. In this categorising and coding process the researcher seeks to develop a set of categories that provide a ‘reasonable’ reconstruction of the data she or he has collected (Maykut & Morehouse, 1994). These units are then discussed in relation to themes or ideas that emerge.

Thematic analysis therefore involves a ‘bottom-up’ approach to identifying themes and patterns from experiences (Bishop, 1996). While content analysis may refine this down to words, thematic analysis usually looks for ideas in the narrative or the text being examined. In the case of this report, the bottom-up approach helps enhance the *kaupapa Māori* approach by not adopting a top-down deductive experiment that benefits the researcher only (Bishop, 1996). The analysis was conducted manually (without the use of software) so that the complexities and richness of the information could be adequately assessed (Kellehear, 1993).



**Figure 4. Structure of a thematic network.**

To aid in the overall analysis of the themes, a thematic network was developed. Thematic networks are useful for organising representational means as they highlight explicitly, the steps employed from text to interpretation (Attride-Stirling, 2001). A thematic network can consist of three levels – basic themes, organising themes, and global themes (See Figure 4 above).

Basic themes are those codes that are derived from the textual data, and they represent lower-order themes. To make sense beyond their immediate meaning they must be categorised into organising themes. Organising themes organise the basic themes into clusters of similar issues which provides a more abstract yet coherent understanding of the text (Attride-Stirling, 2001). Lastly, Global themes are ‘super-ordinate themes that encompass the principal metaphors in the data as a whole’ (Attride-Stirling, 2001, p. 389). Such a network enabled the themes of the whānau transcripts to be understood in relation to higher order themes, all of which provided the overarching fundamentals of the *Whānau Resilience Framework*.

The various examples and concepts discussed amongst the whānau cohort were analysed, coded and then grouped together under various corresponding ‘organising’ themes. Four ‘organising’ themes were identified in relation to the ‘global’ theme of ‘Whānau Resilience’. The four ‘organising’ themes have been termed *Whanaungatanga* (networks and relationships), *Pūkenga* (skills and abilities), *Tikanga* (values and beliefs), and *Tuakiri-ā-Māori* (cultural identity).

The *Whanaungatanga* theme represents the relationship and network factors that whānau employed to promote their whānau resiliency. This ‘organising’ theme included ‘basic’ themes such as:

- *kaupapa whānau* support, and
- significant attachments.

The *Pūkenga* theme represents the skills and abilities that whānau enacted to promote their whānau resiliency. The ‘basic’ themes which were grouped under this ‘organising’ theme included:

- whānau systems;
- adaptability;

- education;
- humour;
- planning ahead; and
- previous experience(s).

The *Tikanga* theme represents the values and beliefs that whānau employed to promote their whānau resiliency. This ‘organising’ theme included the following ‘basic’ themes:

- physical exercise;
- religion; and
- positivity.

Finally, the *Tuakiri-ā-Māori* theme represents the cultural factors which proved to help provide resiliency for the various whānau. The ‘basic’ themes which were grouped under this ‘organising’ theme included:

- *whakapapa whānau* support;
- *tangihanga*;
- *mahi-ā-ngākau*;
- Indigenous spirituality; and
- *karakia*.

To summarise, a collective analysis approach was employed so that the various perspectives could be compared, sorted, and reviewed for both dissonance and resonance (Ungar, 2003). Subsequently, each member of the research team (n = 4) was given the opportunity to review the collected information, identify key themes and issues, and assess the relevance of the information. This process was designed to ensure that the various themes were in fact valid and to avoid any perceived investigator bias.

### **Framework Construction:**

By synthesising, consulting, reviewing, and presenting on the research it was possible to develop a *Whānau Resilience Framework*. In many ways this framework was the primary outcome of the research and created a mechanism through which the information garnered from the research could be prepared and presented. An important part of this process, however, was to prepare and draft the framework first (based on the research), to present on this, and to have it reviewed in a public forum by other academics and peers. This process added additional weight to the research process and offered greater confidence in the findings and robustness of the final framework.

### **Trustworthiness:**

When conducting research and inquiry of any type, there is always the possibility of flaws and biases (Priest, 1999). Fortunately, academics have developed quality control measures which seek to alleviate such flaws and bias, and ensure that the inquiry is methodologically and analytically sound (Guba, 1981). Those who undertake research from within the positivist-type paradigms (i.e., post-positivism or reductionist) utilise four measures to enhance the validity and reliability of their research. These are internal validity (the extent to which the findings accurately describe reality); external validity (the ability to generalize findings across different settings); reliability (the consistency, accuracy and replicability of the inquiry); and objectivity (inquiry that is objective [neutral] rather than subjective) (Guba, 1990).

In qualitative research that draws upon holistic approaches, the term ‘trustworthiness’ is utilised to replace the notions of validity and reliability. In a similar manner to positivist research, four measures are used to achieve a level of trustworthiness within qualitative research: ‘credibility’, ‘transferability’,

‘dependability’, and ‘confirmability’ (Guba, 1981; Lincoln & Guba, 1985). While these measures mirror those of the positivist inquiry, they are measures that better attend to qualitative biases. Finally, although these measures are explained and separated below, they should be viewed as intertwined and interrelated.

***Credibility:***

Credibility is regarded as the positivistic equivalent of internal validity. Lincoln and Guba (1985) consider it as one of the most important factors in establishing trustworthiness. The credibility measure refers to whether the outcomes of the research can be interpreted correctly, and whether these outcomes of findings are congruent with reality (Merriam, 1998; Priest, 1999). In other words, credibility refers to the validity of a researcher’s reconstruction of a social reality.

Lincoln and Guba (1985) recommend a set of activities to improve research credibility: prolonged engagement in the field; persistent observation; triangulation; negative case analysis; checking interpretations against raw data; peer debriefing; and member checking. For this particular research process, the majority of these activities were attended to. The research team (student and supervisory committee) consider this thesis and its research process to be credible through a number of mechanisms.

As the main researcher (interviewer), I more often than not, knew the majority of the whānau that participated in the study, or knew them through existing networks which were one person removed at the most. This allowed for a measure of trust between me and the whānau being interviewed. This close relationship also helped establish a match between the views of reality of the whānau and those of myself.

The credibility (background, qualifications and experience) of myself as the researcher is an important factor as the researcher is the main data collector and analyser (Patton, 2002). Maykut and Morehouse (1994) recommend supplying biographical

information of the researcher which is relevant to the phenomenon under study.

Moreover, Lincoln and Guba (1985) state that a prolonged engagement in the phenomenon under study is also important to the credibility of the research. Please refer to 'The Researcher' section of Chapter I for biographical details and evidence of my lifelong involvement in research and Māoridom.

Guba and Lincoln (1989) consider 'member checks' as the single most important measure to help promote a study's credibility. These are checks relating to the accuracy of the data which can occur during or after data collection. The whānau cohort and Key Informants were supplied their transcripts to check for the accuracy of the interviews. It is also advisable to undertake 'member checking' to seek verification of emergent themes and inferences of the raw data. The emergent whānau resilience themes that were gleaned from the whānau interviews were discussed with the supervisory committee and Key Informants to ensure that the themes accurately reflected the responses of the whānau cohort. The emergent themes were also discussed with audiences that were present at seven national and three international conferences. These audiences were typically made up of national, international, and Indigenous academics, politicians, and community based workers. Again these discussions sought comment regarding the emergent themes; their accuracy, relevance, and applicability to whānau resilience and social well-being policy. In particular, this process of peer scrutiny enabled the opportunity to challenge the assumptions made by the researcher.

Triangulation methods can also help improve credibility. The use of Key Informants from a wide range of backgrounds can provide a richer viewpoint of the attitudes and behaviours of those under investigation (Shenton, 2004). The Key Informants for this research study came from four different vocations (academia, government policy, clinical, and community). While the Key Informants were fairly



similar in that they held a strong affinity to their Māori identity, their respective vocations and experience provided a varied and rich source of information in regards to whānau functioning, well-being, and resilience.

It is also important to examine previous studies which investigate similar issues and phenomenon, in order to assess the degree of congruency between findings (Silverman, 2000). To this end, there was a strong focus on Indigenous ‘resilience’ literature during the research process. It is well known that Indigenous cultures throughout the world share similar views and beliefs. Therefore it seemed plausible to investigate closely those resilience studies which were either framed from an Indigenous perspective, or involved Indigenous participants. Along the way, it became clear that the findings of these previous Indigenous studies mirrored those of this study.

To conclude, utilising these avenues enhanced the probability of ensuring that the outcomes represented the true meanings and realities of the whānau interviews.

***Transferability:***

Transferability is regarded as the positivistic equivalent of external validity. The transferability measure refers to whether the research outcomes can be applied or transferred to other settings or groups of people (Lincoln & Guba, 1985; Polit & Hungler, 2003). While the author or researcher can provide suggestions regarding transferability, it is the reader who must be convinced and decide whether the findings are adequately transferable to other settings or groups of people (Graneheim & Lundman, 2004; Priest, 1999). This then places the responsibility on the researcher to ensure sufficient contextual information is provided (Lincoln & Guba, 1985). To therefore facilitate transferability, it is important to provide a clear and ‘thick’ description of the culture and context, the selection and characteristics of the

participants, as well as the data collection and data analysis methods (Graneheim & Lundman, 2004).

In this particular thesis, the section within this chapter entitled ‘Whānau Interviews’ clearly outlines the selection and characteristics of the participants (i.e., whānau) who were interviewed. The sections entitled ‘Whānau Interviews’, ‘Key Informant Interviews’, and ‘Analysis’ provide in-depth descriptions of the data collection and data analysis processes. The ‘Whānau’ chapter (Chapter III) provides a historical and contemporary description of the term ‘whānau’, and its function within the cultural context of Māori.

Graneheim and Lundman (2004) state that a ‘rich and vigorous presentation of the findings together with appropriate quotations’ can also enhance the transferability of research findings (p. 110). The four results chapters (V, VI, VII and VIII) provide vivid and robust quotations which help describe resilience strategies utilised, as well as the context in which they were enacted. The content and context of the findings are explained clearly to allow readers to apply the outcomes to their own, or other whānau and Whānau Ora-based providers. As the Māori concepts that were investigated are reasonably universal amongst Māori, there is reason to suggest that the research outcomes can be applicable to other whānau throughout Aotearoa. To conclude however, it is important to note that ‘there is no single correct meaning or universal application of research findings, but only the most probable meaning from a particular perspective’ (Graneheim & Lundman, 2004, p. 110).

### ***Dependability:***

Dependability is regarded as the positivistic equivalent of reliability. Priest (1999) regards the dependability measure as the extent to which the researcher can perceive and interpret the data or phenomenon adequately. To address this measure, I

grew up in a family which has been fully immersed in *Māoritanga* (Māori culture, a Māori way of life), therefore I have reasonable background knowledge in terms of the Māori content and how Māori families live their lives (see ‘The Researcher’ section of Chapter I). Furthermore, my interest, participation, and research (by way of undergraduate and postgraduate studies, as well as vocational employment) in Māori health and well-being provided a unique cultural lens through which the data could be interpreted and pragmatic outcomes identified. The additional academic help provided by the supervisory committee, Key Informants, and *whakapapa whānau* members (by way of ‘member checking’ and ‘triangulation’) also contributed to a more consistent understanding and interpretation of the literature and interviews.

Lincoln and Guba (1985) see the dependability measure as the ability of the researcher to account for changes in the data as society is continually changing. As the data gathering process evolves, new insights are discovered which may require a re-think of the methods and/or direction of the study. Again, the process of ‘triangulation’ and ‘member checking’ enabled the researcher to identify confidently, any discourse changes that proved important over the course of the research process. Moreover, Lincoln and Guba (1985) consider credibility and confirmability to be closely tied to one another, as addressing the former goes some way in ensuring the latter. This can be achieved through overlapping methods such as triangulation and member checking (Shenton, 2004).

The positivistic equivalent of dependability is ‘reliability’. Positivists make a concerted effort to discuss their methods in detail so that should the study be repeated in the same context with the same participants and methods, similar findings would ensue. While Marshall and Rossman (2011) argue that with the continuous changing nature of the phenomenon under qualitative inquiry, such provisions can be problematic. Shenton

(2004) however, suggests that qualitative inquiry should undertake the same reliability process. Providing an in-depth description can allow the reader to develop a thorough understanding of the methods and their effectiveness in achieving the research objectives, as well as the knowledge and possibility of repeating the study (Shenton, 2004). In particular, Shenton (2004) states that the text should include detailed descriptions of (a) the research design and its implementation (please refer to ‘The Research Approach’ section of this chapter), (b) the operational detail of data gathering (please refer to the ‘Whānau Interviews’ and ‘Key Informant Interviews’ sections of this chapter), and (c) reflective appraisal of the project (this was a continuous process involving the academic supervisors, as well as various community and conference presentations).

***Confirmability:***

Confirmability is regarded as the positivistic equivalent of objectivity, that is, the extent to which the inquiry and research addresses objectivity and investigator bias (Priest, 1999; Shenton, 2004). In qualitative inquiry, steps must be taken to ensure that the findings and conclusions reflect the subjects’ experiences and views, rather than the characteristics and preferences of the researcher (Shenton, 2004). For this particular research, there was some obvious personal perception and interpretation bias as my knowledge (in aspects of *Māoritanga*) and experience (in life and Māori health) was an integral component of the analysis. More importantly, Marsden (1992) states that when investigating aspects of Māori culture, ‘abstract interpretation is a dead end. The way can only lie through a passionate, subjective approach’ (p. 117). Ungar (2008), goes further by arguing that more culturally embedded resilience researchers’ are required to counteract the Eurocentric bias that exists within the discipline. Nevertheless, the following measures were undertaken to lessen the effect of investigator bias.

Miles and Huberman (2014) suggest that a key process to address confirmability is for the researcher to admit their own predispositions. This can include the reasons why certain paradigms and methods were adopted in favour of others. In the case of this research, the researcher prescribes to a *kaupapa Māori* paradigm, therefore acknowledging the validity and legitimacy of *mātauranga Māori* (please refer to the ‘A Kaupapa Māori Paradigm’ section of this chapter for this rationale). Due to the relative lack of in-depth Māori resilience research, qualitative interviews were chosen as the more suitable method of data gathering (c.f., Ungar, 2003), and thematic analysis served the data analysis purposes.

Shenton (2004) considers the use of triangulation as a useful approach to help reduce the effect of investigator bias. By triangulating the data and information with peers and Key Informants (who analyse the data in parallel), the whānau themselves (to reaffirm their contributions), and outside experts (who act as *devil's advocate*), investigator bias is limited. As mentioned in the analysis section, triangulation was a key component in ascertaining the exact strategies utilised by the whānau cohort. Shenton (2004) also emphasises the need to provide a detailed methodological description of the research process to highlight the progression from the raw data stage to the final themes or constructs. This ‘audit trail’ can enable the reader to identify any bias in regards to the data analysis. The discussion and diagrams (see Figure 4) in the previous ‘Analysis’ section exemplifies the ‘audit trail’ of this particular research. In addition, the credibility and dependability issues that have been alluded to previously, helped alleviate any bias in the research process.

In summary, it was vital that the issue of trustworthiness in qualitative research was addressed and alleviated to the best of the researcher’s ability. Identifying these

matters and developing countermeasures alongside, and in accordance with *kaupapa Māori* research, provided the research process with a greater degree of trustworthiness.

### **Ethical Approval:**

The conventional ethical approval process was undertaken for this study and to ensure the safety of participants. An application was lodged with the Massey University Human Ethics Committee at the initiation of the study. The initial response from the committee was to grant provisional approval, subject to the clarification of certain queries. The majority of these were spelling and grammar related, or points that required more explanation, while others were connected to recruitment plans and whānau interview participation.

The committee queried what the alternative recruitment strategy would be should the researcher not recruit the intended number of n=15 whānau. The response to this was that no problems were anticipated recruiting in this regard, as there was already significant interest in the study. However, if recruitment did become difficult, other whānau would have been contacted via the extended networks of the research team (i.e., the student and three supervisors). Given the fact that only 15 whānau would be involved in the study we did not anticipate that this would be an issue and again reinforced this point to the ethics committee.

The committee was also interested in knowing who exactly from within the whānau would be involved in the interviews. Given the diverse nature of whānau, the committee questioned whether the views of non-Maori whānau members (e.g., Pasifika, Pākeha) would be sought or included. Consistent with the desire to adopt a research approach which was aligned with the broad notion of whānau, we were determined to interview whānau as a collective. Within this context, whānau membership is likely to

be diverse with non-Māori being part of the whānau unit. It will be important that they too are able to contribute to these discussions and to consider (for example) the challenges associated with living in an ethnically and culturally diverse whānau environment. Moreover, how these interactions and association impact on how strategies for resilience are employed.

Upon providing these explanations to the Massey University Human Ethics Committee, the study received ethical approval.

## **Conclusion:**

The methods employed to conduct this research were derived from various knowledge systems and approaches – both Māori and non-Māori. In many ways conventional interviewing and analysis techniques were applied as well as the more usual reviews of literature, peer reviews and expert consultations. However, the broad framework within which these techniques were applied was derived from a Māori base, from Māori approaches, Māori systems, and Māori expectations. These assumptions or expectations existed at a higher level but provided the necessary foundation upon which the research could take place in a culturally legitimate and valid manner.

Integrating these various approaches was key to the success of the research and fundamental to the research process. This process, while deliberate was also highly intuitive and organic. It rested heavily on the experience of myself and the confidence of knowing when and how to adopt a particular approach, how conventional methods could work alongside *kaupapa Māori* philosophies, and how the integrity of the research could be maintained. To this end, and while the work of others has been used

to rationalise the approach, methods, and theories – the processes described are unique to this study, and unique to the voices, aspirations, and insights of those who took part.

A less obvious, though equally as important methodological process was to ensure that the research made some contribution to Māori development. While this was somewhat detached from the primary academic goals of the thesis it was nevertheless consistent with the overall research approach, the Māori research paradigms and philosophies, and the broader intent of the thesis. To this end, it is hoped that the thesis will have a translational component and be used as intended to inform strategies for positive Māori development and especially those which place emphasis on whānau well-being, whānau growth, and whānau resilience.

The next four chapters discuss the pertinent findings gleaned from the whānau cohort. Each of these four chapters represents a particular resilience platform. At the end of each quote, the particular life shock experienced by the whānau is mentioned in parentheses. For example, family death in parentheses indicates a death within the whānau. This may include the nuclear whānau or the wider whānau. For some whānau, they experienced multiple life shocks throughout their lifetime. Therefore, when speaking of the resilience strategies that they utilised, it was unclear which specific life shock they were referring to. In these cases, multiple life shocks are included in parentheses instead of a specific life shock.



## CHAPTER V: WHANAUNGATANGA PLATFORM (NETWORKS AND RELATIONSHIPS)

*“Ka ara au i a koe, ka ara koe i a au”*

*I am you, and you are me*

### **Emergent Themes:**

There were a number of examples connected to the global theme of ‘networks’ and ‘relationships’ that were mentioned by the whānau cohort, and which contributed to their perspectives on resilience and resiliency. Gunnestad, Larsen, & Nguluka (2010) define ‘networks’ and ‘relationships’ as healthy connections with family, relatives, friends, workmates, neighbours, other members of the community and organisations. It is not surprising therefore that the findings from the interviews highlighted similar issues, albeit from a Māori perspective. These themes included strong social networks such as *kaupapa whānau* support and significant attachments. Intergenerational family connections (*whakapapa whānau* support) emerged as an aligned theme and which similarly resonated with this platform. However, and due to the strong connection to *whakapapa*, it was suggested that this theme would sit more securely within the *Tuakiri-ā-Māori* platform of whānau resilience (see Chapter VIII).

The following table (Table 7) summarises the two emergent themes from the whānau cohort interviews, and the resilience mechanisms they foster.

**Table 7 - The Resilience Themes and Associated Facilitative Processes of the Whanaungatanga Platform:**

<b>Resilience Theme</b>	<b>Facilitation of Resilience</b>
<i>Kaupapa Whānau</i> Support	Emotional and Psychological support Financial support Practical and Functional support Resource support
Significant Attachments	Close and secure relationship Emotional and Psychological support Practical and Functional support Resource support <i>Tuakana-teina</i> relationships

To better elucidate and describe these two themes, the following sections provide additional detail and discussion, with specific reference to the whānau cohort responses.

### **Kaupapa Whānau Support:**

Support from *kaupapa whānau* (e.g., friends, colleagues, sport team mates) was identified by various whānau as a primary coping strategy. Although not typically related by kinship connections, *kaupapa whānau* still fulfil the support and caring roles one would expect from *whakapapa whānau*. This support was provided through a range of mechanisms and demonstrated through emotional support, financial support, practical support, and resource support. The following comments were typical:

*“Although we had lost a son at a tragic time, it was really special that we had people around that cared for us at that time, and not just family. More than anything else, it was people that really knew us well. And you’re still embraced by that – still steeped in that Māoritanga. We’re not even talking blood here. We were still being embraced, without even realising it, by all the whānau of the school [where the parents were employed] – the students, staff, and the other whānau that lived there.”* (Suicide)

*“It’s ten years since the passing of his death – at the immediate time the word whanaungatanga comes to mind – whether we were related or not, there were people there that supported us through this whole journey.”* (Suicide)

*“I was just fobbing her off and thinking that work was more important than her, but actually, it’s meant that a whole community has raised her.”* (Single Parent Household)

*“It was also the caring I think within the environment at school, the extended whānau of the school...and all the communities and people where we were all working....The school was actually a huge support really when you think about it. I know there was sadness attached to it but because of the nature of the school and the fact that it was strong in cultural and traditional practices, there was that aroha and manaakitanga long after his passing.” (Family Death)*

These examples highlight the cultural, emotional, and practical support that was often provided by *kaupapa whānau*. The fact that these *kaupapa whānau* had a strong association with *Māoritanga* meant that these concepts would often manifest as expressions of *aroha* and *manaaki* with the benefits able to be accrued by the whānau in times of crisis.

The following comments build on the previous examples and highlight the joy and sense of ‘belonging’ when work colleagues provided emotional support following a family death:

*“I had amazing support. We had wonderful support from our workplaces. When Hone died I was at the primary school then and they came out [to the marae] and they were all out there waiting for us....Working here makes me feel better, because it’s a Māori team, because you feel once again that whole shared responsibility, whānau and stuff.” (Family Death)*

The presence of the other staff members at the *tangihanga*, evoked a sense of ‘belonging’ (to the group of work colleagues) for this particular individual. These feelings were akin to the notion of relatedness and a more innate psychological ‘need’ (Deci & Ryan, 1985). Relatedness is characterised by the desire to feel connected with others and feel a sense of belonging within social settings (Deci & Ryan, 1985). Such settings can re-affirm social and emotional support, and contribute to positive perceptions of the primary stressor.

One particular single-parent whānau estimated that the majority of the support they received during various times of adversity was gleaned from their *kaupapa whānau*:

*“So most of our resilience would be in our Māori friends and personal friends. That’s been the crux of our support, is our own friends and our mother’s friends....Most of them, I’d probably say 98% of them, are not blood related in any way. So they were our support mechanisms. Those were most of our coping mechanisms – my mum’s mates, our friends and the ACC providers. They would be the three key ones.”* (Single Parent Household)

The importance of *kaupapa whānau* also emerged when whānau moved away from their *tūrangawaewae*. For some whānau, the new location served to isolate them from their *whakapapa whānau*, and *kaupapa whānau* would often function as a proxy to the conventional roles and positions normally expected from *whakapapa whānau*:

*“But yeah, initially, now that I’m away from my tribe again, I go straight to my mates. They’d probably be my biggest support.”* (Single Parent Household)

For one whānau, dealing with the suicide of their child caused considerable distress. Fortunately they were aided by the love and support of the local community. In this particular case, the support continued till long after the *tangihanga*, at a time when the *whānau pani* (the bereaved family) were still coming to grips with their loss:

*“It’s a hard realisation once everybody’s gone, and you’re back in your own whare (house) with your whānau – that can be quite difficult. It was difficult for a while, because you’re sort of embraced by everyone and then you’re sort of on your own, and everyone’s gone. But I suppose with that awahi (help) that you get from everybody – being surrounded by all those people and their aroha and everything, it does give you strength. We were lucky to be in that [school] community – living there, because we had people close by....Afterwards we had people close to us that would just pop over, come in and say hello. That was neat. That was awesome – especially in the first few months afterwards when you’re still trying to come to terms with those lonely nights or those lonely times when you think everyone else has moved on, and you’re still stuck in your sad place. But we were at a real advantage living up there, we had people close by coming over, and others ringing up. Someone you can see face to face, to talk to.”* (Suicide)

Some whānau involved in sport identified the support they received from their team-mates as important coping strategies during their crisis. As a solo-parent, the father in the following example describes his sporting pursuits as not only an outlet, but also a crucial support system. Integral to this support system, was the whānau-like

atmosphere created amongst the team-members and their families, whereby fatherly and motherly roles were taken up by various members of the team/group:

*“They have been the main support for us over the past 10 years. It was my main outlet from work so I was at training or at a game a lot. Most of the time I had to take my daughter with me so as a result she got to know all of the boys. The teams I played for mainly contained Māori and the atmosphere was a whānau one. Most of them took their kids with them and all the kids hung out...Quite often some of them would babysit for me if I had to go away. Some of the wives used to come pick her up, take her shopping or do girly stuff. The wives also used to give me advice on girls, things I didn’t have a clue about.”* (Single Parent Household)

The following comment by a recent widow also highlights the role of sport as a social moderator and a coping strategy for her father-less children. Once again, paternal roles were taken up by various friends:

*“They would go along with their father’s friends and kids, because they played sports as well, and they were always there for us. And the wives would be there, the men would be out with the boys and so they became the surrogate fathers of my kids.”* (Family death)

In conclusion, the *kaupapa whānau* theme is closely related to the notion of ‘social support’, one of the most significant protective factors during times of adversity (Muller & Lemieux, 2000). Different types of social support can include instrumental, emotional, informational, tangible aid, positive social interaction, affection, and esteem (Armstrong, Birnie-Lefcovitch, & Ungar, 2005). The evidence suggests that the whānau cohort accessed their social support systems as both coping strategies and protective factors. These social support systems provided emotional, spiritual, practical, and functional support during times of adversity. A key difference however is that these social supports are often constructed from within a cultural frame or construct and more often than not linked to cultural concepts and more familiar notions of *whanaungatanga, aroha, awhi, and manaakitanga*.

## Significant Attachments:

Moving beyond *kaupapa whānau* support, those interviewed spoke about having a ‘special’ relationship with someone significant. These people were usually an aunty, uncle, nanny, close friend, teachers or clinician (e.g., psychologist). For the majority of these whānau, these significant attachments were people who were great listeners and nurturers. Indeed, family clinicians have noted that it is not simply the size of one’s networks which is important, but rather the quality of those relationships and the strength of these connections (Walsh, 2006).

This significant attachment relationship differs slightly to the *kaupapa whānau* support in that it is focussed on a significant relationship with a single person rather than a grouping of people. It also differs from *whakapapa whānau* support in that the significant person does not necessarily have to be kin related.

Ballam (2002) found that a significant attachment was a strategy employed by young Māori girls in times of adversity. Cross (1998), Higgins (1994) and Rutter (1987) found that individuals who had at least one supportive relationship or significant attachment (including siblings, grandparents, teachers, and clinicians) tended to function better than expected when considering the issue or crisis they had faced. Werner’s (1990, 1993) seminal studies on resilience also found that resilient children were those who had developed a close bond with someone who provided them with stable care.

A member of the following whānau highlighted the psychological support she receives from her psychologist as an important pillar of her resiliency:

*“So that is one of my biggest supports – that’s my resilience. She is my resilience. If I lose her, I’m going to go through another six months of not being able to understand my behaviours. I get re-occurring nightmares and I need to talk to her about that stuff.”* (Single Parent Household)

Integral to patient-clinician relationships is clear and positive communication (Walsh, 2006). Moreover, the need to understand and interpret colloquial language of the patient and how this could accelerate the healing process. The same parent again speaks of the connection with her psychologist and how this provided support in a critical time of need:

*“To have the ability to sit in there and kōrero [talk] pigeon English-Māori to her and she just gets it straight away. Because when you’re frustrated and you’re stressed, it just comes out however it comes out, that’s how you want the person to take it. It’s hard when you get a psychologist who just doesn’t understand us Māori.”* (Single Parent Household)

The following two quotes illustrate similar points but instead focus on the parent-child relationship and how this could provide a support mechanism for both. This single-parent family relies on each other as a coping strategy, providing further motivation for the parent in pursuing aspirations of the whānau:

*“I actually want to say that the children were a great resilience coping mechanism for us, because they motivated me. They kept me going, all that sort of thing.”* (Single Parent Household)

*“That’s another thing that’s important to me is that my kids know that mum’s always there for them, no matter what. I love my kids so much, and there’s been pros and cons through the journey, tough sort of stuff along the way, but that love, that aroha for each other remains. We have our ups and downs, but at the end of the day, as I say to my tamariki [child or children] with regards to resilience, that we’ve got each other.”* (Single Parent Household)

This relationship between the mother and her children has parallels to the Māori concept of *tuakana-teina* (mentor-mentee or reciprocal relationships). These reciprocal type of relationships usually involve an older or more expert (*tuakana*) helping and guiding a younger or less expert (*teina*). Sometimes, however, the roles can be reversed, requiring the *tuakana* to rethink and reposition themselves into a co-learner role or to acknowledge that the *teina* may possess knowledge, skills, or expertise that they do not. Such relationships have also been compared to mentoring or role modelling (Ware & Walsh-Tapiata, 2010). From a resilience perspective, Cohen et al., (2002) found these

types of relationships were also important family resilience strategies amongst Israeli families. The following example builds on this notion and highlights the positive behaviours a mother developed from the relationship with her young daughter in regards to social interaction:

*“She’s a blessing and she’s a huge partner in it all....from when she was born I just looked at her and knew she was really ancient, and she really brought a whole lot of understanding about what it means to be connected to people. Because over the years I got quite disconnected from people. I’d been carrying things around and translating them into what was wrong with me. You just start to make walls and she broke them all down. So number one, having just our connection that we have. There was really this understanding, that interconnectedness at a different level and having someone be reliant on you for their well-being.”* (Single Parent Household)

It is apparent that the mother in this case held a negative self-perception which hampered her interpersonal functioning with others. Fortunately, the child inadvertently was able to break down these barriers. In one sense, the mother provided the maternal love and care required of the child, while at the same time, the child had a positive effect in influencing the mother’s thoughts and behaviours towards relationship building with others. In essence, their relationship reflects those aspects of a *tuakana-teina* relationship but also one which is symbiotic and mutually beneficial.

Finally, one parent spoke of the *tuakana-teina* support she provided to another whānau who had experienced a life shock or adversity. In this instance, this whānau drew upon their own experiences to help out another whānau. It appears that the opportunity to *awhi* and *manaaki* another whānau contributed to her own resilience:

*“In terms of a resilience point of view, by giving and by sharing that knowledge to others, or just people gaining that knowledge it gives them a confidence to be able to go on. And your own resilience is enhanced as well.”* (Family Death)

To summarise, the presence of a warm, nurturing and supportive relationship with at least one parent or significant attachment provided the foundation upon which individuals were able to protect against or mitigate the effects of whānau adversity. This



finding was also consistent with other research and broader notions of resilience. (e.g. Ballam, 2002; Cohen et al., 2002; Cross, 1998; Gribble et al., 1993; Herrenkohl, Herrenkohl, & Egolf, 1994; Higgins, 1994; Rutter, 1987; Walsh, 2006; Ware & Walsh-Tapiata, 2010; Werner, 1989, 1993; Wyman et al., 1999). In some sense, these significant attachments also promoted catharsis amongst whānau and their members. That is, the purging of emotions and feelings, resulting in positive emotional well-being (Cross, 1998). For Māori these attachments are likely to function in ways that are consistent with other cultures and established discourse. However, the nature, context, and extent of these attachments differ or manifest within a reality which is uniquely Māori.

## **Conclusion:**

This chapter opened with the Māori *whakatauki* – ‘*Ka ara au i a koe, ka ara koe i a au*’, which can be translated as ‘I am you, and you are me’. This *whakatauki* emphasises the notion of supporting one another. For example, *tuakana-teina* relationships which represent reciprocal relationships promotes social support. As such, and for Māori whānau to flourish in the face of adversity, whānau must ensure they develop extensive and meaningful relationships with significant others, the community, and other whānau to help enable them to experience positive health and well-being.

The responses from the whānau cohort highlights the various types of social support (in its broadest sense) they received during times of adversity. This social support was offered by friends, colleagues, team mates, clinicians, and other professionals. Evidence from the literature also highlight similar types of support mechanisms (c.f. Ballam, 2002; Cohen et al., 2002; Cross, 1998; Greeff & Human, 2004; Gribble et al., 1993; Herrenkohl et al., 1994; Higgins, 1994; Rutter, 1987; Walsh,

2006; Ware & Walsh-Tapiata, 2010; Werner, 1989, 1993; Wyman et al., 1999).

Consequently, community and social support systems can offer a deep, protective sense of belonging and cohesion for families which enables them to adapt and move forward (K. Black & Lobo, 2008). Fundamentally – to become more resilient.

## CHAPTER VI: PŪKENGA PLATFORM

### (SKILLS AND ABILITIES)

*“Mā te huruhuru ka rere te manu”*

*(Without feathers the bird cannot fly)*

#### **Emergent Themes**

The whānau cohort referred to various individual and family-level attributes and skills (*pūkenga*) which positively contributed to their resiliency. Gunnestad, Larsen, & Ngulukua (2010) link intellectual skills, practical skills, and temperament characteristics to resilience and which are in many ways not dissimilar to the types of resilience factors identified by the whānau cohort. The resilience factors mentioned by the whānau cohort included family systems, adaptability, education, humour, previous experience(s), and planning ahead.

Table 8 summarises the main resilience themes that emerged from the whānau cohort interviews, the resilience mechanisms they foster, and which further provide a platform for discussion.

**Table 8 - The Resilience Themes and Associated Facilitative Processes of the Pūkenga Platform:**

<b>Resilience Theme</b>	<b>Facilitation of Resilience</b>
Whānau Systems	Emotional and Psychological support Financial support <i>Whanaungatanga</i>
Adaptability	Adaptability (family roles and responsibilities) Re-prioritise family needs
Education	Problem solving skills Goal setting
Humour	Re-appraise the stressful situations Buffers anxiety and stress
Previous Experience(s)	Utilisation of previous coping strategies Development of social support
Planning Ahead	Development of skills and abilities for later use Financial security

To better elucidate and describe these themes, the following sections provide additional detail and discussion, with specific reference to the whānau cohort responses.

### **Whānau Systems:**

Some whānau reflected on their own whānau systems as coping strategies or protective factors when dealing with the adversity of a family member's death. These whānau systems often centred on whānau committees and whānau *hui*. It was evident from their responses that many of these whānau committees and *hui* were originally set-up in response to the 'urban-drift' period of the 1950s. They emerged as a coping strategy for whānau who were grappling with life in the city and offered the social and financial support needed when whānau were required to return back to their *tūrangawaewae* for *tangihanga*, *hura kōhatu* (unveiling) and other significant tribal or community events.

The whānau committees and *hui* provide the opportunity to re-acquaint with each other, discuss upcoming gatherings, as well as plan for future events. Integral to these committees is the opportunity to share resources. A shared whānau bank account may be an example of this, in which each sub-whānau deposits an amount of money each week, month, quarter, or year. These whānau accounts serve to provide financial assistance should one of the whānau require support. When considering the function of these types of committees and *hui*, a typical comment was:

*“Keep the family together and also support each other when it comes to tangihanga’s and things like that....When we first started it off, when we were first getting it going, you were given a koha [donation] to help your families.”*  
(Family Death)

*“And most Māori families in our community used to have whānau committees and that was to look after them. As I can remember, my mum had theirs and it was all the whānau, and then there was like the Ratana Church had a whānau group...and that was to keep the support there and provide help once they were in trouble. Or if they needed support and that kind for tangihanga, illness or whatever. That’s why those things were set up.”* (Family Death)

As described below, once the children of the *whakapapa whānau* had become adults and had children of their own, they often branched out to create their own whānau committee with regular whānau meetings:

*“When we came to Auckland, Hamiora then organised his family to have a whānau committee. So all the brothers and sisters used to have a whānau and when our kids got old enough then you went out and had your own family committee. So yeah, that’s how it was structured sort of. You had a bigger whānau and your immediate own whānau and that was to support when anything [bad] came along. Sometimes for tangihanga’s and things like that.”*  
(Family Death)

The whānau *hui* and committees offered members with tangible support when adverse situations arose (such as *tangihanga*) or when financial assistance was required. As described below, those who did not have access to this type of system could be at a disadvantage:

*“We probably don’t realise how lucky we are to have that [family committee] because although in mum’s and them’s world there was those families around,*

*we know a lot of families don't have those things to support each other at those times, and money might be an issue.” (Family Death)*

*“I think then how fortunate it was that we had a whānau account related to our whānau meetings, that could support me to go overseas because even none of my sister in laws could go [to the hospital].” (Family Death)*

Walsh (2006) reports that economic resources can buffer family experiences of loss and positively influence their adaptation. Worden (1996) also found that families with higher income disposal exhibited lower psychological issues than those families on lower incomes when dealing with the loss of a parent. The following quote similarly reinforces the importance of family systems and financial support when dealing with adversity. In this example, the death of a family member:

*“When we lost dad it was like it was really the end of the world I suppose. But we were lucky we had a strong family that already had things in place like whānau hui, regular whānau meetings, and the family bank account. So we were quite strong together as a family, tight. And the money we had put away helped us with those tangihanga things.” (Family Death)*

It is not surprising therefore that access to adequate financial resources can buffer the effects of the stressor, and especially if the stressor is derived from financial pressure or insecurity. The construction of a whānau committee and bank account allows whānau members to draw on financial assistance when required. Easing the burden of financial woes (which can compound the effects of the stressor) and enabling the whānau to focus their efforts on overcoming the original stressor. While many stressor are not financially related, a proactive approach to collective saving or financial management can serve to mitigate monetary concerns when they emerge or reduce the impact or duration of other stressors.

## **Adaptability:**

The ability and skill of whānau and its individual members to adapt to changing circumstances appears to help buffer some whānau from stress and adversity. Walsh (2002, 2006, 2007) identifies flexibility as a key process in family resilience. The capacity to change, re-organize, and adapt to fit challenges over time encourages high functioning in couples and families (Walsh, 2007). One particular parent identified the need to be flexible, and therefore adapt the family belief systems and her own coping strategies when adverse or challenging situations arose:

*“I know one of my sons is smoking, but I want him to know mum’s here. It breaks my heart. I think he could be taking marijuana. Sometimes I get myself into a panic attack, like ‘Oh god’, and then I think, ‘I’ve got to let that go’, I need to find some other strategy to deal with it.”* (Single Parent Household)

Family resilience requires the ability to be flexible enough to change as family members go through crises and challenges (Walsh, 2006). Indeed, Pere (2007) found that family systems which incorporated flexible roles and routines, was an important resilience strategy employed by Māori whānau who held multiple jobs. The following quote acknowledges the fact that circumstances change, and in order for the whānau to function effectively and move forward, the parenting techniques and the family systems need to evolve in accordance with this:

*“My strategies of parenting and resilience have evolved over time. I’m less rigid compared to what I used to be and I have to accommodate contemporary challenges for adolescents. I have to move and shift with what’s working for my tamariki [children].”* (Single Parent Household)

The following quote by the same parent acknowledges that in order for her and her children to deal with the divorce, she had to adapt and re-prioritise what was important to ensure the well-being of her whānau:

*“So I had ideals I had learnt through my education, and past beliefs about what was important. Now I’ve moved and shifted in order to survive.”* (Single Parent Household)

Another whānau, whose father had been imprisoned, spoke about how they had to adapt the roles and responsibilities within their whānau, in order to live their day to day lives in a positive and productive manner:

*“The bro was, well I can’t explain it really. Me and him would kind of share the jobs like parents would. But we we’re bro and sis and it kept us, well it kept me sane. Both of them [her brother and father] filled that gap that was missing, and they still do.”* (Incarceration)

To summarise, the ability of these whānau to be flexible in their strategies, roles and routines, enabled them to adapt to their changing circumstances. This strategy maintained their health and well-being in spite of the adversity they were facing. The key here was an ability to quickly evolve in order to accommodate their new situation. Whanau who could refocus or re-prioritise were better positioned to mitigate if not address the adversity they faced, to overcome these challenges, and to map a positive pathway forward.

### **Education:**

Various whānau mentioned the education they received as both a protective factor and coping strategy in times of adversity. Education and learning can enable people to acquire knowledge of coping and resilience strategies (Korhonen, 2007). For example, it enables individuals to analyse situations, predict possible consequences or outcomes, plan ahead, and problem solve (Korhonen, 2007). For many Native Canadians who suffered psychological and emotional harm whilst attending the residential schools of Canada, gaining an education through formal learning later in life helped them on their journey of healing (Stout & Kipling, 2003). In doing so, these survivors were able to ‘channel their energies toward a positive goal while reclaiming, as adults, what was denied to them as children’ (Stout & Kipling, 2003, p. 49). Added to



this, was a re-energized pursuit of learning cultural traditions and Aboriginal language, both contributing to the healing process (Stout & Kipling, 2003).

For the following single parent whānau, education provided her with ‘higher-level resilience’. On one hand, education offered skills to survive and overcome problems, and on the other, it instilled the values of success and achievement in the whānau (as a whole) as an attainable goal:

*“I want to say that education, higher education, for me as a Māori woman, throughout this journey, has been absolutely crucial to survival and higher level resilience. Because it has enabled me to role model success and achievement to my children at all costs. So that’s important to me as a Māori woman.”* (Single Parent Household)

Her desire to role model success and achievement to her children indicates that she has, and would, endeavour to provide sound education to her children. For example:

*“And that’s part of the resilience is, you’ve got to be highly advanced in today’s world to be able to manage systems. I’ve taught my children how to manage systems and they’re highly advanced in that. So these are three Māori men, young men, that are highly advanced from their mother bringing them up from a young age with a multiplicity of experiences.”* (Single Parent Household)

Much of this desire to educate and help her children stems from the knowledge, skills, and opportunities this parent had acquired through her education:

*“So I have a background of army training, intellectual capacity, nursing training, to draw on in my resilience strategizing as a parent and as a whānau.”* (Single Parent Household)

Indeed, some researchers suggest that parental education can directly influence the parents’ ability to provide the family with problem solving skills and access to adequate knowledge (Heath & Orthner, 1999). Other resilience researchers have found that a supportive educational climate and model parental behaviour can encourage constructive coping strategies (Garmezy, 1985; Rutter, 1985). Similarly, other studies have revealed that children with a higher IQ (who have suffered family adversity and/or lived in maltreated homes) are more resilient than those with lower IQ (Herrenkohl et

al., 1994; Werner, 1989). This indicates that education may contribute to the resiliency of individuals as they acquire new knowledge, new skills (i.e., problem solving skills), and an aligned psychological boost should educational success manifest.

To this end, it is worth noting that simply attending school or having access to public education is not a proxy for the development of resilient individuals. In fact, it is less about the access to education but more about the quality and nature of education – how it is able to be absorbed by the individual and accordingly how they chose to utilise or apply it. For the purposes of this thesis, education is therefore considered in its wider sense. This includes formal (e.g., primary and secondary, university) and informal education (e.g., learning from family elders), moreover, that educational and learning environments can manifest in a number of diverse ways. For example, the following parent commented on the parenting skills provided by her own father, while the father of her child was in prison:

*“Yea dad was able to teach me kind of fatherly things, like, what dad’s would do for discipline and just being a father really. It just made the whole solo-parenting situation a lot easier for me, and so I could look after my girl better, because I had that understanding now.”* (Incarceration)

Through a holistic approach to resiliency and Māori development, educational experiences are provided outside of the classroom in various other environments such as in the home, in sporting or exercise pursuits, within the forest or sea, and cultural forums such as *marae* and church (G. Smith, 1997). For example, the following father spoke about teaching his children to dive for seafood. Should they require food in the future, then having the skill to go and collect their own food may prove beneficial during times of financial hardship:

*“Yea we ended up going to the beach a lot as a whānau. Getting in the water and smelling the fresh air just made us happier for some reason. I also started to teach the kids how to dive for kaimoana [seafood]. So we would get paua’s, kina’s and crayfish. I thought to myself that, at least these are life skills that the*

*kids can use when they grow up. You know, food on the table for them and their whānau. And to this day, they're still diving all the time.*" (Suicide)

In summary, educational and learning experiences can help develop key skills and abilities to assist with overcoming adverse situations. These educational and learning experiences may come about through formal learning institutions, or might likewise be experiences, skills and abilities transferred by other family members. As such, supportive educational climates and positive parenting modelling can help promote coping strategies within whānau members (Garmezy, 1985; Rutter, 1985).

### **Humour:**

Two single-parent households noted that humour has enabled them to move on from difficult challenges. Numerous studies have supported the anecdotal view that humour and laughter are therapeutic for relieving tension and anxiety (Cohen et al., 2002; Iris Heavyrunner & Morris, 1997; Korhonen, 2007; Kuiper & Martin, 1998; Moran & Massan, 1999). Humour is an important adaptive response to stressful situations (Clinton, 2008), as it appears to buffer individuals against the negative effects of stress (Able, 1998). Kuiper, Martin and Olinger (1993) identify two moderating effects of humour. Firstly, a sense of humour can enable individuals to judge their environment as less threatening than it is, and therefore may experience less stress in their lives. Secondly, in situations that are stressful, a sense of humour can help people cope better with the situation as they make more 'benign reappraisals' of the stressors (Kuiper et al., 1993, p. 82). In essence, individuals that are humorous (or more open to humour) are often more receptive to positive psychological adjustment when faced with stressful situations.

The following comments outline the use of humour as a coping strategy by two whānau:

*“So the important thing in that is if I didn’t have bloody humour I’d be lost. And that’s the other thing, being able to laugh at myself more and more, you know. That’s the best medicine. Just understand that life happens and sometimes there is no reason to it, you just have to laugh sometimes. If I didn’t have a sense of humour, I’d have given up ages ago. Oh god yeah, you gotta laugh at yourself.”* (Single Parent Household)

*“And I have a lot of humour, I have to. I have to laugh about things, otherwise I’ll end up in a institution. I laugh a lot, I have to, I have to see the funny side of things.”* (Single Parent Household)

These examples highlight how humour can enable individuals to re-appraise the stressful situation, and consequently, reduce the negative affective consequences of the perceived threat. In this sense, humour has been able to buffer these individuals from anxiety and stress-related thoughts.

### **Previous Experience(s):**

The ability to draw on previous adverse experiences was highlighted by the whānau cohort as both a protective factor and coping strategy. If families experience and successfully overcome similar crises earlier in life, they can approach a new and similar crisis with more confidence (Beavers & Hampson, 2003; Walsh, 2006). A number of the whānau had experienced multiple stressful events over time, and therefore some of the resilient strategies that had worked previously, could then be applied to other (although often dissimilar) stressful events that occurred later in life:

*“I think that there is a dark side to life, but if you don’t see that dark side, how can you develop resilience strategies that are going to be long lasting right? And so I think that it’s important to experience some of the tough challenges in life and I’ve allowed my children to experience some of those things.”* (Single Parent Household)

The following quote speaks about the ‘grounding’ and ‘foundation’ a family attained during an early bout of abuse. The subsequent skills (i.e., coping strategies and protective factors) that were acquired were seen as being useful should a similar situation arise:

*“When our first kaupapa of abuse hit us, that gave us enough of a grounding to provide a foundation for ourselves. To help deal with things later on. To deal with any future stuff.”* (Single Parent Household)

The following parent speaks of the greater understanding she has gained, and the openness exhibited by her children, as a result of the various adverse situations the whānau have faced:

*“If things had gone well then I wouldn’t be who I am today and I feel like I have more capacity to love, more capacity to give and contribute to be happy....Like I said, the adversity has brought them [children] out more and made me understand them at a deeper level which I wouldn’t have otherwise.”* (Single Parent Household)

It was similarly noted that experiencing stressful events (such as death and redundancy) can promote resilience strategies and coping factors, from which one can learn and implement at a later date. Moreover, the following quote also highlights the importance of time as a factor of healing (Walsh, 2006):

*“Because one of the things is like when you have all those experiences in life, burials of your close whānau, lose your house, lose your job, lose your son – it makes you a doctor of PhD in those areas – because they’re life experiences that lots of people don’t travel through. You can actually talk directly to it. It’s not learned from a book, but from your own experience, and what we tend to forget is that in life we become the master of our own destiny. Coupled with experience comes time, because to learn [from] those experiences, takes a wee bit of time.”* (Suicide)

Past experience at events like *tangihanga* had allowed many whanau to better deal with challenging situations. In some instances, the deceased may not be known personally, however there was typically a *whakapapa* or collegial link. Nonetheless, these experiences can often enlighten individuals on the notion of death and dealing with grief. A Māori world-view holds many cultural beliefs, traditions, and metaphors that acknowledge the afterlife and the separation of the mind, body and soul after death (Mead, 2003; R. Walker, 2004). The following quote is in relation to dealing with a family death (suicide) and how previous attendance at *tangihanga* had instilled cultural meanings and beliefs of death that helped ease the pain they were experiencing:

*“I think as you grow up as a little kid to a rangatahi [youth], through to a parent, there’s stages in your life that you get taught about tragedy and grief, in little ways. And it teaches you some of that resilience stuff which helps you later on.” (Suicide)*

The following example further highlights the social support that was developed earlier in life, and which is still available should the mother require it. In the event that this whānau experience life shocks in the future, the social support provided by these friends can serve as both a protective factor and coping strategy:

*“I pretty much say most of our resilience would’ve happened within mum’s friends. There was an era when there was a bunch of them, their men used to abuse them. So that collective just helped each other and I know that mum still has those support networks with those ladies from 20 years ago, you know. Some of them may have dropped off and be in different places of course, but mum still has a connection to those women. So that’s good for us [as a whole or a family unit].” (Single Parent Household)*

These illustrations highlight the significance of life experiences as important aspects for life development. It seems that some of the skills, attributes and abilities that are developed throughout the life course of the family (i.e., through social interactions and previous stressful experiences), can serve as both protective factors and coping strategies later in life. These encounters enable individuals or whānau to learn and develop new responses to various life shocks or stressors. Added to this, the social support that whānau develop throughout their lifetime can also provide much needed help when adversity strikes at a later date. Indeed, the ability to transfer these skills into other contexts and situations can positively contribute to resiliency.

### **Planning Ahead:**

The ability of whānau to plan ahead had helped two whānau in particular. One whānau mentioned the idea of developing skills and abilities as protective factors throughout one’s life. That is, should a difficult situation arise – you can then draw on these skills and abilities (protective factors) to help overcome the situation. In essence,

this relates to the previous section whereby previous experiences help mitigate the impacts of an adverse situation. Moreover, how some whānau were able to establish financial support structures in order to anticipate or moderate future events or challenges. The difference in the following case, is the actual planning for a future event:

*“The resilience dynamics, as long as they’re firmly built in at the beginning, and you consolidate them, and you move with the pros and cons of those foundational principles, then those strategies of resilience come through later on in life.”* (Single Parent Household)

From a more practical perspective, the following widow outlined the financial decisions she made to ensure that the housing situation of the whānau would not be compromised once her partner passed away. A serious illness, death, or job loss can seriously affect the economic resources of a whānau, therefore financial security is vital for resilience (Walsh, 2006). The ability to attain freehold status on the family home provided a protective factor (as in stable housing and a potentially stronger financial position) for the impending family death:

*“About 15 months before he died I made sure that with the little money that we had, that the mortgage was paid up and things like that. And so when he died it (the house) was freehold.”* (Family Death)

These two whānau were able to plan ahead and therefore ameliorate the effects of unforeseen circumstances such as redundancy. This provided these whānau with the necessary protective factors which helped them overcome adversity at a later stage of life. Again, protective factors are useful resilience mechanisms as they moderate the effects of crises or risk (T. Newman, 2004).

## **Conclusion:**

This chapter opened with the *whakatauki* – ‘*Mā te huruhuru ka rere te manu*’, which can be translated as ‘without feathers the bird cannot fly’. The feathers of a bird

are used metaphorically to describe their importance in terms of flight. The metaphor similarly implies that for Māori whānau to flourish in spite of adversity, they must ensure they develop certain skills and abilities to overcome stressful events. These skills therefore become proxies for feathers and likewise enable them to extend themselves and take flight.

The skills and abilities that have been mentioned in this chapter and developed amongst whānau and its members, appear to act as coping strategies, protective factors, and strong buffers when faced with adversity. These findings indicate that the development of skills and abilities such as family systems (i.e., whānau *hui* and committees) adaptability, education, humour, previous experience(s), and planning ahead can all contribute to whānau resilience.



## CHAPTER VII: TĪKANGA PLATFORM

### (VALUES AND BELIEFS)

*Ahakoā he iti kete, he iti nā te aroha*

*(Although it is small, it is the thought that counts)*

#### **Emergent Themes:**

There were a number of examples related to ‘values’ and ‘beliefs’, that were mentioned by the whānau cohort as important factors of their resiliency. Values can guide people through life, helping them avoid problems and nurture well-being (Gunnestad et al., 2010). Beliefs provide families with coherence and enable them to make sense of crisis situations (Walsh, 2006). Current research suggests that a variety of belief systems can serve as protective factors in the resilience process (Benzies & Mychasiuk, 2009; Patterson, 2002; Walsh, 2006). Families are able to cope with adversity by making meaning of their experience; by linking it to their social world, to their cultural and spiritual beliefs, their multigenerational past, and their hopes and dreams for the future (Walsh, 2006).

The three resilience themes mentioned in this chapter include positivity, exercise, and religion. A number of the following examples (e.g., positivity and exercise) are related to, but somewhat different, to the previous section on ‘abilities and skills’. Indeed, skills and abilities cannot be developed or displayed without an inherent belief in their meanings and values. Table 9 summarises the main themes that emerged from the whānau cohort interviews, and the resilience mechanisms they foster.

**Table 9 - *The Resilience Themes and Associated Facilitative Processes of the Tikanga Platform:***

<b>Resilience Theme</b>	<b>Facilitation of Resilience</b>
Positivity	Improves psychological and emotional health
Exercise	Positive cognitive shift Reduce stress, anxiety and depression
Religion	Emotional support Spiritual support Forgiveness

To better elucidate and describe these three themes, the following sections provide additional detail and discussion, with specific reference to the whānau cohort responses.

### **Positivity:**

How whānau view their crises and struggles, and the options available to them can determine their coping and resiliency towards the situation (Walsh, 2006). Key elements to a positive outlook include hope and optimism; focussing on strengths and potential; initiative and perseverance; courage and encouragement; and mastery and acceptance (Walsh, 2006). It became evident throughout the whānau interviews that positivity, confidence, or having an optimistic outlook (in spite of obvious adversity) can help whānau remain upbeat and resilient during periods of adversity. The ability to be optimistic and focus on the positives has been identified by numerous resilience researchers as a characteristic of resilient families (Cohen et al., 2002; Korhonen, 2007; Lee et al., 2004; Rutter, 1987; Walsh, 2002), as well as Māori youth (Ware & Walsh-Tapiata, 2010). In this sense, what meaning whānau ascribe to adversity is crucial to their resilience as positive models can also be transposed to new crises (Walsh, 2006).

Notwithstanding the value of maintaining a positive outlook, it is likewise imperative to stress the importance of not creating false positivity or false hope. The

sense of positivity must be realistic, in that the positives that are prescribed must be attainable and achievable. Failure to do so can lead to depression, a lack of hope, and may contribute to a cycle of failure or unmet expectations (Walsh, 2006).

Korhonen (2007) found that a sense of optimism enables individuals to not see themselves as helpless or incapable, and such a positive outlook contributed to their resiliency. The following quotes from the mother of a single-parent household exemplifies the benefits of prescribing a positive meaning to the situation, which can also improve one's own psychological and emotional health:

*“Perception is crucial in resilience, you know, and perception changes and it shifts. I try to stop focusing on the things that aren't so cool and remember to be grateful for the things that I do have, and the more I do that the better life is.”* (Single Parent Household)

*“You learn a lot about yourself, you learn these strengths and weaknesses. I stand here today, humble, or just at peace with everything, like what a wonderful opportunity.”* (Single Parent Household)

*“This is part of the resilience journey. You work through a very tough journey, but have faith, keep going, don't give up, believe in yourself, believe in your whānau. And something always keeps me going throughout our whānau's journey. I believe in my children, I believe in myself. Through the tough times and the good times, I believe in them and I believe in myself and I think that that's also the philosophical foundation of resilience is self-belief. You've got to believe in the goodness of people. Where I'm at now is a sense of peace, is a sense of – you know, when you come through a very tough journey.”* (Single Parent Household)

Looking beyond the immediate situation, and considering the positives of life within the current circumstances can indicate a positive outlook and a more optimistic view of the future. Despite the negativity surrounding this whānau, the following comment by the same solo-parent highlights the positive outlook she instils within her children:

*“Let's move forward. Why do we have to dwell on the past? I certainly don't want to. And in our whānau, that's one of our kaupapa's. A lot of the korero is often negative, about the past, but where we are at, in the broader whānau, is let's not go over that tough terrain. We want to move forward and that's what I'm trying to build with my tamariki. We've had our negative time. Now it's time*

*to move forward. I just want peace, I want a lot of love, I want a lot of joy, I want a lot of excitement, I want positive, proactive movement forward through the good and the bad....I think that's a big thing of coping and resilience in today's world is that you've got to see beyond the little things to the big picture."* (Single Parent Household)

Her optimism reflects the research that suggests that focussing on the positives within adverse situations can contribute to family resilience (Cohen et al., 2002; Korhonen, 2007; Lee et al., 2004; Rutter, 1987; Walsh, 2002; Ware & Walsh-Tapiata, 2010). The conviction that 'we want to move forward' and the relentless search for happiness promotes family resilience (Walsh, 2006).

For another solo parent, she noted the benefits of bringing up her children without the presence of a new partner. She was optimistic, and found this challenge to be an engaging, proactive, and exciting situation:

*"So, one's development and learning process of being a parent, there's pros and cons of being a single parent, but I would advocate, in terms of resilience, that there's a lot more pros. It's the only kaupapa I know, because I've never had a partner that's been by my side....Too much out there is the negative side of single parenting. But I've actually found it quite a positive proactive opportunity....And also with a passion and commitment to parenting, it's really exciting, and I'm being positive to the best of one's ability."* (Single Parent Household)

Although sometimes a positive outlook is not necessarily achievable at the time of adversity, it is sometimes at a latter point that positive perceptions can arise out of the adversity. This can occur at a later date as recovery begins to take effect (Walsh, 2006). One particular whānau re-appraised their fragile situation (dealing with the suicide of their child) as character building, at a later date. According to the father:

*"I see it as character building in some ways – building character in families – strengthening families. Although we lost a son, we've gained in other areas, which is sometimes what we tend to forget. Now we've got a beautiful mokopuna [grandchild], and another one coming along. So, although we've lost a son, there are certainly opportunities available for us to be able to provide for another mokopuna – to know that he lives on in those kids – that our tragedy wasn't just the end of everything for us."* (Suicide)

This positive perception and acknowledgement of becoming strengthened through adversity, was also highlighted by the mother:

*“Before his death we’d been through some real hardship. Hone [the husband] lost his job, lost our home, and then we lost our son. But I think one of the most important things is that we have strengthened and we’ve grown as a husband and wife, as parents. Now, even though we had all that glum time, we’ve been able to buy ourselves a new home.”* (Suicide)

When families are faced with a devastating loss, it is important to encourage families to rebuild their lives and revisit lost hopes and dreams (Walsh, 2006). This shift in attitude from damaged to challenged enabled this whānau to direct their attention to the positive aspects of their lives, such as the arrival of a new whānau member or the purchase of a new home.

Focussing on achievable goals and making concrete steps towards achieving those goals is important for fostering resilience (Walsh, 2006). To this end, the same whānau decided they would develop a youth-based Trust, to help assist young Māori youth in their decision making, and also help with their own personal development:

*“It’s another opportunity to redevelop ourselves and get over our own grief. It has certainly helped. It certainly helped me to think of things positively, from that area of tragedy from losing our son and then thinking positively.”* (Suicide)

To summarise, ascribing a positive meaning to situations of adversity had been beneficial to the ability of these whānau to cope. In other words, being optimistic promoted feelings of excitement, as well as a positive attitude towards future goals and what may lay ahead in the future of the whānau. To some extent, ‘a positive outlook’ will be an innate characteristic of one’s personality and which cannot easily be quantified or replicated. It may simply be a feature of who they are and how they have always been. In any regard, and notwithstanding, the ability to view negative situations from within a positive frame will build resilience. Moreover, the ability to prescribe a

positive meaning to negative situations helped promote positive emotions which can help promote positive health and well-being.

### **Physical Exercise:**

Three whānau spoke of sport and exercise as an outlet in times when life shocks occurred within the whānau. These whānau held a belief that exercise (or sport) is an important ‘outlet’ to help overcome stress and adversity. Some researchers (Gleser & Mendelberg, 1990; Ross, Holliman, & Dixon, 2003) have suggested that exercise can serve as a source of distraction or a ‘time out’ strategy from daily worries and depressing thoughts. The psychological benefits (both acute and chronic) of participating in sport and exercise is well documented, with reductions in stress, anxiety and depression the most commonly cited benefits (see Weinberg & Gould, 2011). Physiologically, the release of endorphins during exercise has also been shown to improve mood and feelings of well-being (Steinberg & Sykes, 1985).

Although there is no mention of the whānau exercising together as a group, the following quote highlights the importance of exercise and physical activity to the health and well-being of this solo-parent when they are in distress:

*“An absolute foundation of survival has been exercise...exercise is absolutely crucial to good health. And when the kids were younger...I couldn’t afford some things, but what I thought was most essential and found it essential was actually going for a run. I’m a runner, I’m a walker. It’s crucial to have exercise in your life if you’re challenged. You’ve got to exercise no matter how hard it is, you’ll feel better afterwards.”* (Single Parent Household)

When asked about how the children coped with their fathers’ death, one particular whānau spoke about how sport provided them with an outlet to keep them busy:

*“Oh well they coped because I kept them in sports. Summer sport and winter sport. It kept them busy. They went from summer sport straight into winter sport.”* (Multiple Life Shocks)

Similarly, a wife spoke of how her husband concentrated on his sporting endeavours (both in New Zealand and overseas) as he dealt with the death of their child:

*“I think he did a bit. He would go out and do it all the time. I think that going overseas to compete was an outlet for him as well.”* (Family Death)

Again, another whānau spoke of sport participation as a coping strategy to help with the grieving process. This time however, coaching a sports team was the outlet:

*“Yeah, and that was probably a coping strategy. He used those as coping methods, like coaching the boys, and always over at the college taking them for sport.”* (Suicide)

These comments reinforce the idea that participation in sport and exercise can serve as a coping strategy during times of adversity. On one hand it can provide an outlet, distraction, or a re-orientation of focus (i.e., a cognitive shift). On the other, sport and exercise participation in itself can help reduce the stress, anxiety and depression that may develop due to the life shock (i.e., positive psychological adjustment). In addition, and as described in Chapter V, involvement in team sports can facilitate access to other individuals (for social support) and institutions which can further support networks and contribute to fostering resilience.

### **Religious Conviction:**

Overseas research has identified religion as a strong resilient factor, especially amongst Indigenous cultures and minorities (Greeff & Loubser, 2008; Korhonen, 2007; Stout & Kipling, 2003). That is, organized belief systems which involve shared moral values and beliefs (Wright, Watson, & Bell, 1996). Amongst Native Indians, religious faith seems to promote optimism and help people to cope with difficulties as religious beliefs can provide an explanation and purpose in life (Korhonen, 2007; Stout & Kipling, 2003).

Throughout various life shocks in their life, one particular whānau found solace in their religion:

*“And how we’ve dealt with that is we have gone to a hāhi [religion], particularly Ratana [a religious denomination] to look for guidance and support, ever since I was young actually.”* (Multiple Life Shocks)

For this particular whānau, the religion provided the support (emotional and spiritual) that they could not attain from their *whakapapa whānau* as they had relocated away from their *tūrangawaewae* and tribal links:

*“The other thing too, was when you gather at the marae, you feel that unity of ‘one’ which we were lacking. And that’s what we we’re seeking, we didn’t have that connection to our iwi. We didn’t have those links. Whereas when you go to Ratana and you go through the gate, he iwi kotahi tātou nē [we are all one].”* (Multiple Life Shocks)

Religious beliefs offer some individuals meaning and purpose to their experience, which can lead to an understanding and acceptance of their loss (Parrot, 1999). As outlined below, a mother was able to ascribe a range of important values to her religious upbringing. The loss of her son through suicide caused her to develop thoughts associated with blame and guilt, which can trigger bouts of low self-esteem. Significantly however, the Christian value of forgiveness had enabled her to forgive herself as well as her deceased son:

*“For me – that’s probably another thing that really helped me get through the dark times when we lost our son. I was a born-again Christian. Like how [my husband] talked about forgiveness? That was something that I sort of learned through my Christian upbringing. I learned about forgiveness. So, because I sort of knew about that kind of stuff, and even though I was at that low point, you have to learn to forgive yourself...because you go through all those emotions of blame and guilt. And it knocks your confidence as a parent when you lose a child through suicide, but you have to learn to forgive. I had to forgive [him] in my heart.”* (Suicide)

Therefore to summarise, it appears that religion and religious beliefs can provide whānau and their members with a number of benefits and which accordingly promote resilience. For one whānau, their religion provided guidance and support (emotional and



spiritual), while another whānau received both emotional and spiritual support from their religion as they were located away from their *tūrangawaewae*. One parent in particular drew on her religious upbringing to promote forgiveness within herself and her deceased son.

## **Conclusion:**

The beginning of this chapter opened with the Māori *whakataukī* – ‘*Ahakoā he iti kete, he iti nā te aroha*’ which can be translated as ‘although it is small, it is the thought that counts’. This refers to the importance of thoughts and ideas, the arrangement of these, and the results from this contemplation. In this sense, while the ultimate goal may not be achieved, it is the original thought or idea that matters. Within the context of this chapter (and broader thesis) it is symbolic of the notion that for Māori whānau to flourish and overcome adversity, it can be the thoughts and ideas (derived from values and beliefs) which are important and in spite of whether or not they come to fruition.

A positive attitude despite adversity, acknowledging the benefits of exercise, and an affinity to a religion has been shown to be beneficial to coping with stressful events. These strategies can provide a meaning to life, the assurance of higher-beings or entities, a sense of transcendence, and a guide so that people might avoid problems and risky behaviour (Gunnestad et al., 2010). A number of these strategies are closely related to the previous section on ‘skills and abilities’. Indeed, skills and abilities cannot be developed or displayed without an inherent belief in their meanings and values.

## CHAPTER VIII: TUAKIRI-Ā-MĀORI PLATFORM

### (CULTURAL IDENTITY)

*“E tipu e rea, mo ngā rā o tou āo, ko tō ringa ki ngā rākau a te Pākehā hei ora mō te tinana, ko tō ngākau ki ngā tāonga a o tīpuna Māori hei tikitiki mo to mahunga”*  
(Thrive in the days destined for you, your hand to the tools of the Pākehā to provide physical sustenance, your heart to the treasures of your ancestors to adorn your head)

#### **Emergent Themes:**

Throughout the whānau interviews various themes were to emerge and which related to the notion of cultural identity, and its relationship to whānau resilience. These themes included *whakapapa whānau support*, *tangihanga*, aspects of *mahi-a-ngākau*, Indigenous spirituality, and the practice of *karakia*. While some of these themes align with the previous chapters, they sat within a world-view which was uniquely Māori and which was anchored within Māori concepts of cultural identity.

Cultural identity can have a profound influence on an individual’s sense of health and well-being (McGoldrick, 2003). Cultural identity for Māori has been defined as an ‘amalgam of personal attitudes, cultural knowledge, and participation in Māori society’ (Durie, 1998b, p. 57). In particular, this can involve (but is not limited to) self-identification (i.e., through knowing one’s *whakapapa*), participation in *marae* activities, involvement with whānau, access to one’s *tūrangawaewae*, relationships with other Māori, and the use of Māori language, concepts and customs (Durie, 1998b). While there is no single definition of what constitutes Maori identity (Durie, 1994b), this thesis provides a conceptualisation of Māori identity based on the whānau cohort.

More importantly however, characteristics of one’s culture that are necessary to support resilience (Tousignant & Sioui, 2009).

The following table summarises the main themes that emerged from the whānau cohort interviews, and the resilience mechanisms they promote.

**Table 10 - The Resilience Themes and Associated Facilitative Processes of the Tuakiri-ā-Māori Platform:**

<b>Resilience Theme</b>	<b>Facilitation of Resilience</b>
<i>Whakapapa Whānau</i> Support	Cultural, Emotional, Financial, and Practical support Sense of belonging
<i>Tangihanga</i>	Social support Cultural, Emotional, Financial, and Practical support
<i>Mahi-a-ngākau</i>	Emotional and psychological support Practical support Positivity
Indigenous Spirituality	Spiritual support Emotional and psychological support Overall health and well-being Practice of <i>mahi-a-ngākau</i> concepts
<i>Karakia</i>	Healing mechanism Expression of gratitude Spiritual presence of ancestors Seek guidance Emotional and psychological support

To better elucidate and describe these themes, the following sections provide additional detail and discussion, with specific reference to the whānau cohort responses.

### **Whakapapa Whānau Support:**

A significant number of whānau noted the support provided by members of their *whakapapa whānau* as integral to coping with adverse events in their lives. This support was provided through a variety of mechanisms connected to cultural support, emotional support, financial support, practical support, and resource support. .

It is possible that support provided by *whakapapa whānau* could also sit within the ‘*Whanaungatanga*’ (Networks and Relationships) platform of Chapter V, as it is strongly related to networks and relationships. However, because Māori place a particular emphasis on ‘extended’ family (Durie, 1998b), it seemed more suitably placed within this cultural identity platform.

The following quote highlights the important role that *whakapapa* and *whakapapa whānau* play in the resilience of a single parent household:

*“As I connect back up home and spend more time on our marae’s, spend more time with my kaumātua, spend more time learning about how deep and rich our culture is, the more it makes sense. The more I do that the more complete I feel. That’s what I mean about whakapapa being within you, it shapes the way you behave, and the way you react to things....So learning that history and learning my whakapapa, learning my place within this lifetime has been so helpful too, so important for me and my girl as we go through life.”* (Single Parent Household)

The example below also mentions the emotional, financial and practical support she received from her *whakapapa whānau*. The parent acknowledges that without this support, she and her household would have struggled with their day to day living:

*“Of course my whānau, they’re always there no matter what crap we’ve been through or given each other. Just to know that they’re always there whether it’s money, whether it’s just support, like I could not have done this post-doctorate without them. You know, work full time and be a single mum, impossible, especially the travel that I do.”* (Single Parent Household)

*“It was actually the wider whānau that could take that perspective, step away from the kaupapa (issue), and have that perspective of looking inwards. So they were the ones that were providing the support when it came to our link into the hāhi and finding the people in the hāhi that could support us.”* (Single Parent Household)

A further example reveals how a mother and father used the strong connections they had with their *taha Māori* (Māori identity) to build resilience and which included aspects of their *whakapapa* such as access to their *marae* and *hapū*. These aspects helped them cope with the loss of their son through suicide and provided a sense of belonging (e.g., relationships with elders and ancestors) and enlightenment:

*“It’s that manaakitanga, like having that strong connection to your whakapapa, your marae, your hapū and all that. You know, I attribute a lot of our getting through all the down times that we’ve had from losing our son through that strong connection to our whānau, our marae, and our whakapapa. So there is whanaungatanga and all that manaakitanga.” (Suicide)*

*“I really appreciate the Pākehā women that really supported us because there were heaps of them. I really acknowledge them for that, but for me it was my culture, my Māori side. I was needing to be with my Māori whānau.” (Suicide)*

*Whanaungatanga* appears to be a strong theme within these two previous examples. *Whanaungatanga* can provide a sense of togetherness or belonging (through genealogical links), affection (such as the purpose of *manaaki*) and closeness (e.g., with the group, to ancestors, and within the space of *marae*) (Waiti, 2008).

At numerous times, the extended whānau would be called upon for assistance. Sometimes extra money may be required, guidance on choices and specific issues, or a place to stay. The quote below is typical of the type of assistance and support provided, and identifies the importance of these support networks when physical violence is present, and where children were required to relocate to a relative’s home for safety reasons:

*“One of my mum’s safety mechanisms for us, when our father was involved with his alcoholism, was if she knew that the abuse was going to happen in the house she would say, ‘get down to Aunty Betty’s house’.” (Single Parent Household)*

If the parents are not available or able to provide support, other family members or mentors may take up the roles as provider, supporter, or protector (Aronowitz & Morrison-Beedy, 2004; Rutter, 1987), and is particularly important for single parents (Anderson, 2003). For one of the single-parent families interviewed, the closeness and intimacy of the whānau meant that although the child was fatherless on a day to day basis, the wider whānau (both *whakapapa* and *kaupapa*) were able to step in and take over the fatherly roles:

*“I mean aunties and uncles in a real broad term. So she’s got heaps of aunties and uncles even though I’ve only got four brothers and sisters, but she’s got*

*heaps of aunties and uncles and cousins. So all of those people have supported me through this.*” (Single Parent Household)

Another whānau also reflected on the fatherly role being taken-up by another *whakapapa whānau* member:

*“I guess one important thing for me is that he [the birth mother’s brother] was there for baby’s birth, and could take up a fatherly sort of figure. It really just gave me that support that I was needing at that time, and even later on back home and stuff.”* (Incarceration)

The same whānau also felt a need to provide care and support for the new-born *mokopuna*, even if it meant giving up vocational opportunities:

*“Like for example my dad. When Arama [the biological father] went inside [to prison], that was about when dad was working for the government. Dad made the decision to turn down that job offer and come back down here and just tautoko (support) us. So it was just to be there for us while that fella [Arama] was inside.”* (Incarceration)

The mother in the example below outlined the pastoral care provided by her extended whānau during times of adversity. Even so, this type of support seemed fragmented and disjointed to her non-Māori counsellor:

*“They don’t understand the complexities of what happened to me, I had to live with this auntie, I had to live with that auntie, I had to go to that uncle. But those were the support mechanisms, but they look at that as being fragmented, unstable, no continuity or anything like that. So it’s kind of like, well, no, because that was my way of coping and I quite liked hanging with my cousins at that house.”* (Single Parent Household)

Nevertheless, her *whakapapa whānau* provided the pastoral care and support that was missing within her main household.

Often, the presence of older whanau members such as *kuia* (female elder or elders), *koro* (male elder or elders), great aunties and uncles would also alleviate negative emotions that were associated with stress and adversity. Their mere presence in fact could provide warmth and *aroha*. Heavyrunner and Morris (1997) found a similar finding in their research with Native American Indians. The following whānau

reiterated the intergenerational support provided to them by *kaumātua* whilst dealing with a whānau suicide:

*“Probably the main thing for me would be the whanaungatanga, and the manaaki that you get from the whānau whānui [wider family]...It’s awesome to be surrounded in that manaaki and that love that they have for you and your whānau, like in our own whānau. We were lucky, because when we lost Hemi, immediately things just, you know – people gather around like the older ones. We had all those kaumātua and that – the likes of those people that came and embraced us in that time of difficulty when you’re not thinking straight or clearly. They kind of just stepped up and took care of things, made us feel loved and together.”(Suicide)*

The following whānau member also reflects on the intergenerational support provided by *kuia* as they were grieving over the death of a family member:

*“After dad passed, me and mum would go around and visit all the aunties. It was just so good to go there to see her [an aunty], have a cuppa and that. And she was so happy, especially to see mum. So I think it’s that intergenerational kind of support that can help people when they’re feeling down. I don’t know what it is, but those old people, there’s something about them that makes you feel at ease” (Family Death)*

This desire for intergenerational support is also reflected by the mother in the following comment:

*“The other thing I did when he died was every fortnight I would take the kids and go up north to the cemetery with all the aunties and that, and go visiting. So Auntie Rita would be up there and Auntie Tete and all those aunties. So it was good being up there because they all looked after us, and I just needed to be around those aunties.” (Family Death)*

These older family members (i.e., aunties) often serve as expressions of *ahi kaa*. Simply translated as ‘keeping the home fires burning’, *ahi kaa* whānau are those whānau members that remain living within the boundaries of the tribal lands (i.e., *tūrangawaewae*). These whānau members play an important role in the upkeep of the *marae*, and the preservation of tribal traditions and *mana*. *Ahi kaa* whānau are therefore critical to the maintenance of the *tūrangawaewae* for the *hapū* and *iwi*, as well as the intergenerational welfare of those whānau living elsewhere (Baker, 2010). Without *ahi kaa* whānau, there would be limited opportunities for descendants to maintain a sense of

*tūrangawaewae* (Baker, 2010). For the whānau above, returning to their *tūrangawaewae* and visiting *whakapapa whānau* members helped them cope with the loss of their family member. The following quote from the same whānau re-iterates the importance of those *ahi kaa* whānau:

*“So you know those people in the far north never lost their importance in our minds or anything, they were always a part of our life. Simply because of the love they showed us.”* (Family Death)

*Whakapapa whānau* support is not unlike social support, as social support can include instrumental, emotional, informational, tangible aid, positive social interaction, affection, and esteem (Armstrong et al., 2005). Social support is also seen as one of the most significant protective factors during adversity (Muller & Lemieux, 2000). Greeff and Human (2004) found that this type of support was critical to the development of coping strategies employed by South African families who had lost a parent. Their findings emphasise the role of intra-familial emotional and practical support in recovery and enhancing outcomes. Walsh (2006), and Reed and Sherkat (1992) also found that support from relatives and friends made it easier to bear the loss of a parent. The support provided can include practical assistance, companionship, and a sense of security and solidarity (Reed & Sherkat, 1992; Walsh, 2006). The following comment does much to support these ideas:

*“He [the deceased partner] had a lot of time for my family, like we had all my mum’s brothers and sisters were all alive in 1983[when he died]. So I already had the strong support from my aunties and uncles and that also gave me the strength when Hamiora passed away...it was emotional support and just helping us out really.”* (Family Death)

Support from *whakapapa whānau* may not necessarily come from living relatives. Reference to deceased ancestors as a form of emotional support was also noted by the various whānau. A *Te Ao Māori* worldview places a strong emphasis on acknowledging and respecting those ‘*kua haere ki tua o te arai*’ (those who have passed



on) (R. Walker, 2004). The reference to *tīpuna* in *whaikōrero*, and the naming of *marae* in respect of *tīpuna* are just a sample of the reverence to the deceased (Salmond, 1975; R. Walker, 2004). The following parent reflects on the importance of her ancestors as an ongoing coping strategy and from which considerable strength can be drawn:

*“The other major thing that helped us was whānau support. Like I think through all of this and all the different experiences, is that my whānau includes all those that have gone before us. And it just gives you a lot of peace really, because it’s beyond this lifetime. And that’s a real cultural understanding I reckon. You don’t get that anywhere else. That understanding that it’s not just me, it’s all those that have gone before, that really comforts me. It’s never just me, I’m never alone, but for years I felt alone because I didn’t understand that I carry all my ancestors with me, they’re with me all the time.”* (Single Parent Household)

For this particular parent, reminiscing on deceased family members gave the parent emotional peace and reassurance which provided a sense of grounding during difficult times.

*Whakapapa whānau* links enabled some whānau to access culturally aligned social and health services that they may not have accessed otherwise. After unsuccessfully attempting to access a Māori service provider through conventional means, the perseverance and support of whānau members facilitated access to culturally relevant services:

*“We also went back to a different line of our whakapapa – and it wasn’t a direct line of our whakapapa, it was three cousins removed – where we had a whānau member who was well versed in psychology and had been in that field of work for a long time. So that person was a key pivotal point to getting me in touch with Māori ACC providers for counselling and stuff like that, for that support mechanism stuff. Now it took nearly 19 years to find the key Māori providers in the system, cause every other person I’d had was European and they probably only had me for a year. So the resilience part to that was actually my investigation through my whānau and then being able to support me that way.”* (Multiple Life Shocks)

As noted above, her *whakapapa whānau* acted as a bridging resource and consequently alleviated her disenchantment with the health services.

To summarise, the examples in this section of the chapter highlight how *whakapapa whānau* support can function as a protective mechanism and coping strategy for whānau when adversity strikes. Māori maintain that a dependence on family can strengthen and enhance an individual's maturity (through teaching and learning, i.e., *tuakana-teina*, or reciprocal relationships), development, and more importantly, kinship ties. As such, 'Interdependence rather than independence is the healthier goal' (Durie, 1998a, p. 72). This interdependence is similar amongst other minorities throughout the world, in that they also seek cohesion, strength and loyalty towards one another (Gunnestad et al., 2010).

### **Tangihanga:**

For those whānau who experienced a death in their family, *tangihanga* emerged as a critical mechanism which, also with the grieving process, contributed to their resiliency. The beliefs and meanings surrounding death can be rooted in multigenerational family legacies, in ethnic and religious beliefs, and societal values and practices (Walsh, 2006). Although the experience of bereavement is not the same for everyone (Papalia & Olds, 1992), it seems that amongst this whānau cohort, *tangihanga* helped these whānau deal with the grief. Indeed, the *tangihanga* process has maintained its presence within Māori society since traditional times (Dansey, 1992; Mead, 2003).

In contemporary times, *tangihanga* can last anywhere between three and seven days. It is a period of mourning whereby a number of cultural rituals and concepts serve to acknowledge the deceased, as well as those who have already passed on (Mead, 2003). Visitors are welcomed and hosted by a *marae* which is most often connected to the deceased through *whakapapa*. All through the *tangihanga*, *whaikōrero* are

conducted to farewell the dead (R. Walker, 1979), and visitors will often travel from throughout Aotearoa to attend (Mead, 2003). It is an opportunity to support the *whānau pani*, and pay their respects to the deceased. Other cultural rituals include *poroporoāki* (farewell) or *pō whakangahau* (entertainment night to farewell the deceased), religious ceremonies, and then the burial at the *urupā*. The importance of *tangihanga* to Māori is exemplified in the following quote:

*“I think if we took that ability away of a three day tangihanga – for Maori it would be like taking away a life line. Because [tangihanga] it’s about understanding that whole concept of Ranginui and Papatūānuku – of how Māori are. In the beginning, from when we are born to when we return back to the whenua [earth].”* (Family Death)

It appears that the *tangihanga* provides a variety of forms of social support. This social support is enacted through emotional, practical, cultural, and spiritual support. Greeff and Human (2004) found social support to be critical to the coping strategies of South African families who had lost a parent, while Walsh (2006) and Reed and Sherkat (1992) found that support from friends and relatives helped ease the loss of a parent.

The following quote highlights some of these forms of support:

*“With the tangihanga, we have that whānau thing all the way through and you are not on your own. The whānau pani was not left on their own. When I think what my aunties did when Hamiora died and how they came to the marae, everyone came to the marae. They picked up [our youngest mokopuna], took him away so we didn’t have to worry about him and all those sort of things that they do to make it all happen. Make us [the whānau pani] be able to deal with the grief and they just looked after the children and it was pretty remarkable.”* (Family Death)

There are many cultural concepts that are entailed in the *tangihanga* process (Dansey, 1992). These might include *poroporoāki* or *pō whakangahau* the night before burial which involves in most cases a church service, speeches (both *whaikōrero* and informal speeches), *waiata* (song), *haka* (traditional war dance) and story-telling to farewell the *tupāpaku* (the body of the deceased), *whanaungatanga*, and spending quality time with everyone on the *marae* (Mead, 2003). To this extent, the *tangihanga*

and the *marae* provide a forum whereby the *whānau pani* can seek assistance and support from those closest to them, as well as the community. The response of the community can have a ‘powerful influence on the ultimate resolution of the trauma’ (Herman, 1992, p. 70), and therefore sharing the traumatic experience with others can significantly aid psychological recovery (Cross, 1998).

The practical, spiritual, social and cultural support gained from the *tangihanga* process can further be critical in enabling whānau to move forward (Cross, 1998). The following example emphasizes the importance of family support when dealing with a family death, and that which is evident during *tangihanga*:

*“Yeah support, total support, coz all my cousins were around, my aunties, everyone....in a way when I look at it there is a whole thing of family support....That whole feeling going on, of having a shared understanding that Māori have and shared responsibility that Māori have.”* (Family Death)

In fact, it may not be just *whakapapa whānau*, but also friends and colleagues (i.e., *kaupapa whānau*) providing the required support. The following quote acknowledges the presence of *kaupapa whānau* and distant friends or colleagues at the *tangihanga*, much to the surprise of this family member:

*“I suppose that is how we grow resilient, is acknowledging that other people who you might not expect, they have got the same love for your loved one. I think that blew me away at dad’s tangihanga, they were as devastated as us and somewhere in that you gain strength.”* (Family Death)

Walsh (2006) notes that open and honest communication amongst family members who are dealing with a family death as a positive coping strategy. People are able to tolerate stress and adversity if it is offset by positive communication that exhibits love, appreciation, and respect (Walsh, 2006). Moreover, Raveis, Seigel, and Karus (1999) found that family relationships which are characterized by a sharing of information and the open expression of feelings about the deceased, are more likely to experience healthy adaptation following the death of a parent. Sharing stories of people

and one's culture helps to build coherent identities, and helps make sense of the larger social context and one's place within it (Walsh, 2006).

The *marae* forum, *tangihanga* processes, as well as the *poroporoāki* provide active opportunities for open and honest communication, and the open expression of feelings. For example, *whaikōrero* at *tangihanga* are made directly to the body (of the deceased) because it is believed that the spirit does not leave the person until the burial (R. Walker, 2004). The following quote from a whānau who suffered a suicide within their whānau, highlights the emotional and spiritual benefits they gained at the *poroporoāki* of their deceased child:

*“Going through that tangihanga process was good. When they get up and tell the stories about Hemi. When they got up you have a laugh, you have a cry, you have a sing, you watch the kids get up and do their haka's [war dance] and waiata – and even though you're in that real numb dark place at that time, you forget about it for a little while.”* (Suicide)

*“Just being surrounded by lots of people. I remember probably all the good things that he did in his life, and sharing that. And that whānau atmosphere of all sleeping together, eating together. Yeah, that's a wonderful thing that Māori have when they're in their dark place....I think the other thing that really helped us, and we were lucky in a way that we were able to stay on [afterwards] at the marae, because I sort of felt that as a healing thing too.”* (Suicide)

This process of story-telling and paying tribute to the deceased during *tangihanga* through speeches, *haka* and *waiata*, is not unlike the techniques employed by family therapist when dealing with their patients who have suffered a family loss. In her capacity as a family therapist, Walsh (2002) mentions that helping family members in the aftermath of loss should involve ‘finding ways to transform the living presence of a loved one into cherished memories, stories, and deeds that carry on the spirit of the deceased and their relationship’ (p. 135).

The whānau quote above also speaks about the spiritual support that is evident at *tangihanga*. The spiritual aspect of *tangihanga* also relieved the emotional pain for

some other whānau. The presence of elders, wider whānau, friends, as well as the use of *marae* as a cultural gathering forum, provided a loving and spiritual atmosphere:

*“There was quite a bit of quite spiritual stuff happening at her [daughter] tangihanga. I think you are in a different zone, a spiritual zone that is all around. I think that as well as sharing your grief, it takes you back to a lot of memories, a lot of happy times, a lot of shared times.”* (Family Death)

*“It’s good eh, even though you might not be out the front by the tupāpaku – you might be somewhere else with a cousin or a friend – you don’t have to be actually there all the time. Just being part of that whole process is healing, and you all sort of pass that on to each other, and your wairua [spirit] is uplifted, the karakia, the waiata – everything helps you with your grieving.”* (Suicide)

For the following whānau, the cultural rituals and support came to the fore when a member of their whānau passed away. Although this whānau had been somewhat isolated from their culture, the cultural rituals, values and customs that underpin *tangihanga* provided support during this time of adversity:

*“As soon as that happened, that whole culture just kicked in big time, I could hardly believe it. I could hardly believe that it would come in so strong after being sort of away from it for quite a while. It just validated that that whole support stuff is there. You can swim around in your life just dealing with everyday stuff and your mates and stuff like that and you might not give it [your culture] a lot of thought. But when something happens like this, it just totally kicks in.”* (Family Death)

The cultural concepts which often underpin cultural identity, enabled the whānau (below) to better manage the loss of their child. This example highlights the cognitive appraisals associated with death and the *tangihanga* process. Indeed, a cultural identity would usually involve spending countless nights at *marae* attending the *tangihanga* of whānau and colleagues or friends, listening to the local history, customs and stories of the *hau kāinga* (the tribal/sub-tribal hosts). The meanings, values and beliefs behind these traditions and that of death, are then transmitted to those present. The last part of the quote below highlights the use of culturally relevant social support, whereby commonly held beliefs relating to the grieving process can be manifested and nurtured:

*“We just see it as a normal process [death] in being born, and dying and all those sorts of things. That’s why we can carry those things with us. It’s a challenge, but it’s better if you can share it with somebody that does have those values and concepts – those understandings, the processes of tikanga, and of whakapapa. If the two partners – the husband and wife – share those same values, it’s so much easier. It even gets better if the people that you associate with have those concepts, and if you can share it in the environment that you’re in.” (Suicide)*

One particular whānau spoke about the practical support provided by the wider whānau in organising the *tangihanga* of their daughter:

*“I think the cultural support is amazing, and not to mention everything else that goes with it. I’m just looking at the logistics of it, but to actually lift up me, my son, and my husband is fantastic. You know all that spiritual stuff kicking in, all that whānau stuff kicking in.” (Family Death)*

The practical support provided to the whānau enabled them to solely concentrate on grieving:

*“Someone rung me and said ‘bring her home, we are ready’. So basically everything was organised. The venue was organised, the tangihanga was organised, the people are organised, the coffin, the urupā [burial site], before you practically even turn around in a way. So I had my family there organising what was happening at the house and with the body and stuff. And I also had my other family up north, my whānau whānui saying we are ready!...Like I have not organised one little thing, it all just fell into place, it just about blew me away actually. Simply because the [marae] systems were already in place. You realise what a powerful force it is. If I had to suddenly organise something like that on the spot, no way you can do it. It’s a huge force that just makes it happen, pulls it all together. So we were free to just think about our baby (daughter who had passed away), without having to worry about everything else.” (Family Death)*

In this example, the organisation and logistics of the *tangihanga* was undertaken by the wider relatives of the immediate whānau. This provided its own set of unique challenges as some significant *marae* organisation was required and which involved tasks such as the preparation of food, the organisation of *ringawera* (kitchen staff), *whaikōrero* speakers and *karanga* (female callers) experts, as well as forms of communication to inform whānau and friends of the death (Mead, 2003). With the wider whānau undertaking these various roles, the *whānau pani* was then able to focus on the grieving process. Amongst other things, this involves keeping a vigil next to the

*tupāpaku* at all times throughout the *tangihanga* (Salmond, 1975). This vigil may last several days:

*“I guess in a way, having the marae and your family take over, I think it takes away some of that stuff you would have to do and focus on. Whereas you’re left alone to actually have a bit of a spiritual thing going on. And when you think back to it, you think of the good stuff instead of thinking about how you had to run around and have to try and pay for the coffin, practical things like that. So getting people together, telling people she died, cooking food, that’s not part of my memory. My memory is about how wonderful it all was that my family and my culture kicked in and they did all that stuff. So you remember the good stuff, big stuff like sitting there, seeing and feeling the spiritual feeling. You can’t get that spiritual feeling if you are running around trying to organise people to cook a meal for you. So all the stress, all the practicalities and all that stuff was taken off me so we could just concentrate on dealing with our sadness.” (Family Death)*

It is clear from these comments that family cohesion or a cohesive environment is required for *tangihanga* to function properly. Gunnestad, Larsen, and Nguluka (2010) found family cohesion as a strong protective factor amongst the Travellers (Norway) and San (Botswana) people. These groups celebrate together, share goods and services amongst themselves in order to survive both physically and socially (Gunnestad et al., 2010). For *tangihanga* to occur in a positive manner, specific roles need to be undertaken, the *marae* needs to be functioning, food requires preparation, burial arrangements made, and a plethora of other cultural undertakings developed and adhered to. Without a cohesive group or *whānau* controlling these roles, *tangihanga* will not function well and the *whānau pani* may not be able to experience a culturally enhanced grieving process.

To summarise this section, the various modes of support associated with *tangihanga* were viewed as a strong resilience factor for those *whānau* who had experienced a family death. These modes of support may include emotional support, spiritual support, cultural support, practical assistance, or more often than not, a combination of all. Implicit in *tangihanga* is the spiritual benefits obtained by the



*whānau pani*. As such, sharing the experience of a death (in a manner akin to *tangihanga*) can promote both immediate and long-term adaptation for the *whānau pani*, strengthening the whānau as a unit (Walsh, 2006). This final quote reinforces the *tangihanga* processes as an integral component of Māori identity and a Māori world-view:

*“I found it easier, plus I think that Māori get taught to deal with it. Not exactly taught to deal with it, but I think Māori culture deals with death better. Because it’s a whole sharing thing, a shared grief thing. Because I know how everybody feels about her [the deceased] from the tangihanga and that.”* (Family Death)

### **Mahi-ā-ngākau:**

*Mahi-a-ngākau* was another theme that seemed to contribute to the resilience of this whānau cohort. Metge (1995) defines *mahi-a-ngākau* as ‘work done from the heart’ (p. 98), or duty, as according to Ngata (1993). *Mahi-a-ngākau* includes a number of Māori customs and concepts such as *aroha*, *manaaki*, *awhina* and *tautoko* (Metge, 1995), all of which are foundational pillars of traditional and contemporary Māori society (Dansey, 1992). In many ways, *mahi-a-ngākau* provides the similar support to that of emotional, spiritual, practical and cultural support.

*Aroha* at its simplest, can be defined as love, affection and compassion (H. W. Williams, 1971). *Manaaki* can be simply defined as showing kindness to people (H. W. Williams, 1971), or respect to others (Metge, 1995). *Awhina* can be translated as help and assistance (Metge, 1995), and *tautoko* can be considered as support, or to prop up (Metge, 1995). In essence, they all represent the notion of showing compassion, and providing care and support for others. They can also denote practical support (such as the provision of goods, financial support and resources) and moral support (such as a physical presence) during times of adversity (Metge, 1995). While there may be

variance amongst different *iwi*, and within different contexts, the definitions above have been utilised for this thesis.

Although these conceptions of *mahi-a-ngākau* may be regarded as succinctly different from each other, Metge (1995) states that within a whānau context, they are all synonymous with each other. Moreover, their importance in both traditional and contemporary Māori society (Dansey, 1992), deems them important enough to be considered within this platform of *Tuakiri-ā-Māori*. The following quote by a whānau member acknowledges the simple use of the term ‘love’ as an expression of the *aroha*, *manaaki*, *awhina* and *tautoko* exhibited by this whānau:

*“I found another thing that has been important in terms of our resilience is us being able to tell each other that we love each other....I think we pretty much say it most of the time. I suppose it reflects our aroha and awhi for each other....I think the freedom to be able to say ‘I love you’ to someone is really important.”* (Family Death)

Korhonen’s (2007) research with Native Canadian elders found that when people feel they have a positive role in the lives of others, it builds connections, self-esteem and competence not only within themselves, but also those they are helping. The following whānau mentioned the importance of helping others (i.e., *tautoko* and *awhina*), as another whānau nearby had to deal with a death in their whānau as well. The ability to help other whānau seemed to promote resilience within themselves as well:

*“So in terms of a resilience point of view, then it’s kind of by giving by sharing that knowledge or people participating and gaining that knowledge gives them a confidence to be able to go on. And I think that helping others, also helped us with our grieving, even though it was a while after.”* (Family Death)

Another whānau mentioned the *mahi-a-ngākau* aspects they provided to other whānau who were dealing with stress and adversity. This whānau was able to draw on its own negative experiences and help guide other whānau through theirs. Like the previous whānau, helping other whānau through their struggles seemed to help this

whānau with their own adverse situations as well. This example is not unlike a *tuakana-teina* relationship, be it at a whānau level involving more than two people:

*“So, one of the big things about going through the adversity that we had, was being able to use that to help other people – help our whānau, help other people. To me, that’s a wonderful thing – and it’s healing for us, too – that we can go and manaaki people who’ve been saddened... We’re talking about a culture. That’s what I say – we’re reciprocal. That’s what makes the difference, because they know that you can do that [support] for others as well, so they come and support you.”* (Suicide)

The *mahi-a-ngākau* received by one solo parent provided her with a sense of positivity. At the time, various life pressures were affecting her ability to carry out normal daily functions, and was only compounded her emotional troubles she was experiencing:

*“I was overwhelmed actually, because I was working at the time but there were people just helping out. Like I went away one time and I came back and they had come around, stacked my wood and mowed my lawn. And so experiencing aroha was so special. It just makes your life seem so much nicer. It helped me get up when I was down.”* (Single Parent Household)

The example below reflects on a solo parent’s commitment to the well-being of her children. She suggests that her ability to provide and care (i.e., *mahi-a-ngākau*) for her children stems from her decision to raise them on her own, thereby enabling her to totally devote her time and resources towards the children:

*“Well, what my children have, which I think is a pro, is a mother that’s been able to give them 100% in terms of not having a partner. There’s pros and cons to that. What I’ve done is I’ve tried to show them the best of it. I remind them, that mum didn’t put that extra energy into a partner. And so that means that all my time goes into my tamariki and that’s a positive resilience strategy that I want to mention, the concerted time you have and the relationship connection with your tamariki.”* (Single Parent Household)

To summarise, the various components of *mahi-a-ngākau* seemed to help whānau with particular adverse situations they were facing. In addition, helping other whānau through enacting *mahi-a-ngākau* aspects also seemed to contribute to their own resilience. As was mentioned by one whānau, the aspects of *mahi-a-ngākau* enacted

upon them, also promoted a sense of positivity within themselves. For another parent, *mahi-a-ngākau* qualities were a foundation for her children's upbringing. Indeed, the concepts associated with *mahi-a-ngākau* are important components of a Māori identity (Dansey, 1992; Metge, 1995).

### **Indigenous Spirituality:**

Spirituality has been identified by a number of researchers as a protective factor and coping strategy for families and individuals during times of stress and adversity as it can foster a sense of purpose and meaning (Angell, Dennis, & Dumain, 1998; H. K. Black, 1999; Greeff & Human, 2004; Iris Heavyrunner & Morris, 1997; Juby & Rycraft, 2004; Parrot, 1999; Walsh, 2006). For Native Americans, spirituality has been the cornerstone of their survival through generations of adversity and oppression (Iris Heavyrunner & Morris, 1997). Black (1999) found that spirituality also gave meaning to the adversities experienced by impoverished black women, instilled a sense of self-esteem, kept despair at bay, and provided hope.

Spirituality is based on the principle that there is more to life than what we can observe materially (Echard, 2006, as cited in Vanistendael, 2007). It can be associated with internal values that provide a sense of meaning, inner wholeness, connection with others, and the realisation that there is a force more powerful than ourselves (Greeff & Human, 2004; Juby & Rycraft, 2004; Stout & Kipling, 2003).

Spirituality can be experienced within or without religious structures (Walsh, 2006). Spirituality from an Indigenous perspective, moves away from religious beliefs and those focused on a single deity, but instead focusses on culturally specific and culturally relevant deities, such as the personification of environmental landmarks (Durie, 1985, 1998b; Walsh, 2006). Moreover, families are able to cope with crisis and

adversity by making meaning of their experience through linking it to their multigenerational past and their cultural and religious beliefs (Walsh, 2006). The following comment highlights the acknowledgment of ancestors, and positions it from within an Indigenous spirituality construct:

*“So te taha wairua [spirituality] from my viewpoint as a single parent has actually being absolutely crucial for assisting us in our journey of resilience and coping. It’s important for our family because our ancestors are very important to our whānau.”* (Single Parent Household)

The following two comments relate to specific spiritual experiences, where a sense of transcendence has occurred and a meaning to the experience has been prescribed. In these two examples the spiritual experience provided these whānau members with feelings of belonging (e.g., the presence of the *wairua kaitiaki* [spiritual guardians]), elation and self-confidence:

*“And I thought, ‘Oh shoot. What can I do, as a single mum on my own with my two babies? Well, there’s nothing I can do.’ And so I took a big breath, I looked up, and I saw it was a figure, a black figure. But you know, it was a protective feeling. So I looked up and the figure stopped at the baby cots, then went to the window and then it was gone. And I said to my mum and my sister, who I often talk to about these experiences, is that it must have been our wairua kaitiaki [spiritual guardians]. Just going to have a look at the babies, see the babies are alright, have a look over to see if mum’s okay, and then move off. And I often had those experiences when the kids were under five, living on my own...So our spiritual guardians are at the heart of our coping and adaptation, and resilience in the contemporary period.”* (Single Parent Household)

*“A few weeks later I had this beam come through me, this sort of light, and it’s the most beautiful feeling in the world, I was just blown away. For me it was [the family’s deceased daughter] telling me that everything was alright, that she was alright. It gave me confidence to move on. It kind of just made me feel better about things.”* (Family Death)

The comment below provides an example of a *marae* that was named after the deceased daughter of this particular whānau. This mother recalled the naming of a school *marae* after her daughter, and how her daughters’ spirit rested within it. Walsh (2002) points out that in the aftermath of death, remembering loved ones through cherished memories, stories, and deeds that captured the ‘spirit’ of the deceased can

help with the psychological adjustment of the survivors. In this particular case, the daughters' spirit is cherished and represented through the school *marae*:

*"It's very special that place to me. I know that, that place [the school marae] has Maia's spirit, and I know it supports other Māori kids up there [in the township]." (Single Parent Household)*

Environmental associations were also reflected upon by several whānau. This affinity operates through different mediums such as the creation story of *Ranginui* and *Papatūānuku*, the personification of landmarks, and the *kaitiakitanga* (stewardship) of natural resources. For some whānau, connections to the environment (emotionally, cognitively, spiritually or physically) was imperative to good health, well-being and the healing process:

*"I ended up going to Tangaroa [God of the Sea] quite a bit after the tangihanga. And I still do that heaps now too. It lets me reconnect with the wairua out there, and it just makes me feel good. We all go out there and do that actually, all the whānau enjoy our time out there by Tangaroa." (Suicide)*

*"Yeah, I mean, nature's always been a healer for me and that's why I've brought [my daughter] up with it too. She just understands that at a deep level.....It's not just about your ancestors, it's about the environment too. ...My kuia taught me that, to go to the environment to get my peace and remind me that I'm part of a bigger whole. Sometimes it centres me and reminds me of those who have gone before us." (Single Parent Household)*

In the following example, pent up anger towards a significant other was diminished through recognition of spiritual beings. This shift in thinking has enabled this mother to practice the concepts of *mahi-ā-ngākau* such as *aroaha*:

*"I had lots of reasons to be angry with him, but what I kept telling myself was that I loved him although I hated what he was doing. And whenever I started to get angry I'd remind myself that I loved him. And so that's what's helped me get through, is to remember if I'm a spiritual being, everybody else is too. I try and remind myself to love rather than to choose the other way. That's been a huge help for me." (Single Parent Household)*

Therefore it appears that a sense of Indigenous spirituality can help buffer these whānau from the adversity they were experiencing. For some, Indigenous spirituality can help increase resiliency by empowering individuals through their relationship with a

higher power (Juby & Rycraft, 2004) such as their *wairua kaitiaki*, while for others, spiritual connections with the environment provided them with an improved sense of well-being.

### **Karakia:**

An integral part of spirituality amongst Māori is the practice of *karakia* (prayer, chant, or incantation). *Karakia* aligns closely with religion and Indigenous spirituality, in that knowledge in this area can determine the use of *karakia*, and the type of *karakia* used. *Karakia* came to the fore as an important coping strategy for many whānau. For some, it acts as a healing mechanism, while for others it is a way of expressing gratitude for the wonders in their life:

*“When you’re on your own or something and you’re feeling a bit down, just to have a karakia to myself to help pick me up. I don’t know what it is about karakia, but I feel better afterwards. Or sometimes when we are all feeling down, we will sit down as a whānau and have a karakia together. It’s just a normal thing for our family, like karakia before kai [a meal] or long trips, special occasions and things.”* (Suicide)

*“It’s something about being spiritual, which doesn’t mean you go to church on a Sunday, it’s about the way you live your life and that’s what I aspire to. I’m certainly not there yet. So karakia really reminds me and brings me back to that.”* (Single Parent Household)

*“And that’s part of karakia for me, is to voice your gratitude for the things that we have, for the kai (food) that we have, for the company that we have, for the connections, for the aroha and all that manaaki.”* (Single Parent Household)

For some members of whānau, the use of *karakia* was a way to acknowledge their ancestors and their spiritual presence, and to also seek guidance from them. To this extent, *karakia* was utilised as a mechanism to contact their ancestors and attain emotional support:

*“I ask for guidance from my ancestors all the time. Karakia is something I’ve really learnt to help me. When I’m really lost, or freaked out or panicking, that’s what I do. I pray and meditate.”* (Single Parent Household)

*“At night, going to the corners of our property and saying a karakia, with a glass of water and flicking my face and asking our tīpuna to help us. And you know, I’d go to bed and often in the morning I was really clear about what I had to do next.” (Suicide)*

*“It just reminds me about my place in the whole of it. It reminds me of where I descended from and that I’m connected to everything. So it just takes away the panic that you feel if you’re just this one person all alone. So it’s more of a reminder for me and then as I’m realising the power of words and the power of intention and energy that you can’t see, karakia is expanding.” (Single Parent Household)*

To summarise, the use of *karakia* acted as healing mechanism for some whānau by providing emotional support from their ancestors, while for others it is a way of expressing gratitude for the wonders in their life. Although it is unclear whether *karakia* based on Christianity beliefs were used, or whether they were pre-European contact *karakia*, their usage was nevertheless important to helping whānau deal with adversity.

## **Conclusion:**

The beginning of this chapter opened with a section of the well-known *whakatauki* uttered by the late Tā Apirana Ngata in 1949 – ‘*E tipu e rea, mo ngā rā o tou āo, ko tō ringa ki ngā rākau a te Pākehā hei ora mō te tinana, ko tō ngākau ki ngā tāonga a o tīpuna Māori hei tikitiki mo tō mahunga*’. This can be translated as ‘thrive in the days destined for you, your hand to the tools of the Pākehā to provide physical sustenance, your heart to the treasures of your ancestors to adorn your head’. In some ways, this *whakatauki* speaks about the importance of being knowledgeable in both *Te Ao Pākehā* (The Pākehā world, Western world) and *Te Ao Māori*, in order to progress positively through life. Therefore, the ability to operate comfortably in both worlds can help ensure whānau are able to navigate towards those resources which help alleviate the stress of adversity.



This chapter further highlights the fact that the existence of a cultural identity can provide culturally relevant support (emotionally, practically, and spiritually) based on a Māori world view. To this extent, the term ‘enculturation’ may apply, loosely defined as the degree of integration within a culture (Fleming & Ledogar, 2008), it has been identified as a protective factor in alcohol/substance abuse, academic achievement, depression, and suicidal ideation amongst Native American’s (LaFromboise, Hoyt, Oliver, & Whitbeck, 2006; Whitbeck, Hoyt, Studden, & LaFromboise, 2001; Whitbeck, McMorris, Hoyt, Studden, & LaFromboise, 2002; Yoder, Whitbeck, Hoyt, & LaFromboise, 2006). Therefore, a sense of one’s culture can provide ‘convictions and practices that maintain mental well-being’ (Greeff & Loubser, 2008, p. 288). Indeed, the findings thus far highlight the numerous examples in where Māori cultural factors and a secure identity have provided coping strategies and protective factors which contribute to whānau resilience.

## CHAPTER IX: WHAKAORANGA WHĀNAU - A WHĀNAU RESILIENCE FRAMEWORK

### **Introduction:**

*Whakaoranga Whānau: A Whānau Resilience Framework* (see Figure 5) reveals that whānau resilience (both the protective factors and coping strategies) can be divided into four platforms. These four platforms were synthesised from the whānau cohort and Key Informant interviews. In particular, each platform represents a collective of resilience themes (protective factors and coping strategies) which were regularly mentioned throughout the whānau interviews. These themes were later re-organised and revised based on Key Informant suggestions and feedback from conference and symposium presentations. Specific Māori terms were utilised to represent these four resilience platforms. These terms were chosen because of their broad definitions, and their ability to encompass a number of other cultural concepts that promote resiliency.

These four platforms are listed as:

1. Whanaungatanga Platform (Networks and Relationships)
2. Pūkenga Platform (Skills and Abilities)
3. Tīkanga Platform (Values and Beliefs)
4. Tuakiri-ā-Māori Platform (Cultural Identity).

Attached to each of the four platforms are specific resilience themes (protective factors and coping strategies) and subsequent examples of psychological adjustment (facilitation of resilience), which are designed to show how each platform might manifest in tangible ways. It also shows how whānau might apply these strategies independently or collectively and depending on what resources are available to them.

However, it further suggests that optimal outcomes and resilient whānau are more likely to emerge in situations where a comprehensive suite of strategies and platforms are available. The following discussion describes these issues in greater detail and summarises each of the four platforms.

### **Whanaungatanga Platform:**

The term '*whanaungatanga*' was chosen to represent a reflected suite of themes which highlighted the value of networks and relationships. *Whanaungatanga* can equate to conventional notions of 'relationships' and 'kinship' (Mead, 2003; Ryan, 1995). From a *Te Ao Māori* perspective however, *whanaungatanga* also incorporates the practices of *aroha* and *manaakitanga* (Mead, 2003). Mead (2003) states that *manaakitanga* involves 'nurturing relationships, looking after people, and being very careful about how others are treated' (p. 29). *Manaakitanga* can be expressed through a process of caring, sharing, respecting, helping, assisting, relieving, reciprocating, balancing, and guardianship (Hirini, 1997). More importantly, *whanaungatanga* can generate observable behavioural processes which promote and enhance whānau functioning (Hirini, 1997).

While the themes mentioned by the whānau cohort within this *whanaungatanga* platform are not necessarily kin-based (i.e., *kaupapa whānau* support and significant attachments), the values and practices which underpin *whanaungatanga* can still apply to non-kin - hence the use of the term to represent this platform. This platform considers issues which have been well covered within the contemporary discourse, and includes facilitative processes such as social, emotional, financial, practical, and resource support. It centres on relationships and networks and can reflect significant attachments,

social support, and community involvement. Indeed, investing in affiliation and collaboration increases the chances of overcoming adversity (Walsh, 2006).

Two resilience themes were mentioned during the whānau cohort interviews. Table 11 highlights these resilience themes, and the specific mechanisms which contributed to facilitating resilience. Both of these resilience themes have been discussed extensively in Chapter V.

**Table 11 - *The Resilience Themes and Associated Facilitative Processes of the Whanaungatanga Platform:***

Resilience Theme	Facilitation of Resilience
<i>Kaupapa Whānau</i> Support	Emotional and psychological support Financial support Practical support Resource support
Significant attachments	Close and secure relationship Emotional and psychological support Practical support Resource support <i>Tuakana-teina</i> relationships

The theme of *kaupapa whānau* support provided emotional, psychological, financial, practical, and resource support. It is apparent that these forms of support proved vital to the resilience and recovery of those whānau who dealt with suicide, family death, and the various challenges associated with living in single-parent households. Moreover, this theme is closely related to the notion of ‘social support’, one of the most significant protective factors for overcoming adversity (Muller & Lemieux, 2000). The evidence suggests that the whānau cohort accessed their social support systems as both coping strategies and protective factors. A key difference however is that these social supports are often constructed from within a cultural frame or construct

and more often than not linked to cultural concepts such as *whanaungatanga*, *aroha*, *awhi*, and *manaakitanga*.

The significant attachment theme is centred on the presence of a warm, nurturing and supportive relationship with at least one parent or significant attachment. It appears such attachments were able to protect against or mitigate the effects of whānau adversity. For example, having an aunty or grandmother who is caring and loving (a protective factor) can help reduce the effects of a chaotic home environment (Gunnestad, 2006). In some sense, these attachments promoted catharsis amongst whānau and their members, which in turn promoted positive emotional well-being (Cross, 1998).

Both *kaupapa whānau* support and significant attachments provide the opportunity to discuss matters and seek advice from individuals who have a close and secure relationship. Having people to talk to can help focus on the pertinent issues and identify strategies to move forward. The ability to identify strategies to move forward and overcome adversity can further promote resilience.

Finally, should whānau require a specific resource (i.e., money or materials) to overcome a challenge, then having a larger pool of people increases the chances of being able to attain the resource. Integral to this option, is social support (i.e., *kaupapa whānau support*), and close, secure and mutual relationships such as those akin to significant attachments. To help foster and sustain these relationships, special celebrations such as 21st birthdays and weddings can provide the forum whereby the concepts of *whakawhanaungatanga*, *mahi-a-ngākau* can be practiced and upheld. Thus enhancing the quality and nature of these relationships and attachments.

In addition to agreeing with the themes mentioned by the whānau cohort, the Key Informant interviews revealed other characteristics that they regarded as important

for whānau resilience (see Figure 5). The Key Informants revealed how celebrations such as weddings and 21<sup>st</sup> birthdays can provide a forum to rekindle relationships with kin and non-kin. *Hura kōhatu* and other similar memorial ceremonies also offer the opportunity to celebrate the lives of past family members, or for some, to reach closure on particular issues or events. Family therapist Froma Walsh (2006) also notes these celebrations as key processes in her framework of family resilience (see Table 2 in Chapter II). Some Key Informants also mentioned the need to be involved in the community as it can provide social support and access to resources that may not be available otherwise.

### **Pūkenga Platform:**

The *Pūkenga* platform centres on the skills and abilities that whānau and their members are able to draw upon when faced with adversity. The term '*pūkenga*' is translated in the Williams (1971) dictionary as 'skilled in, versed in' (p. 307). These may relate to physical and intellectual attributes, as well as practical and social skills. These various skills and abilities are also listed by family therapist Froma Walsh (2006) in Table 2 of Chapter II.

Six resilience themes (protective factors and coping strategies) were mentioned during the whānau cohort interviews. Table 12 highlights these resilience themes as well as the specific mechanisms which contributed to facilitating resilience. These themes have been discussed extensively in Chapter VI.

**Table 12 - The Resilience Themes and Associated Facilitative Processes of the Pūkenga Platform:**

<b>Resilience Theme</b>	<b>Facilitation of Resilience</b>
Whānau Systems	Emotional and psychological support Financial support <i>Whanaungatanga</i>
Adaptability	Adaptability (family roles and responsibilities) Re-prioritise family needs
Education	Problem solving skills Goal setting
Humour	Re-appraise the stressful situations Buffers anxiety and stress
Previous Experience(s)	Utilisation of previous coping strategies Development of social support
Planning Ahead	Development of skills and abilities for later use. Financial security

The whānau systems theme centres on the benefits gained from a shared whānau bank account and regular whānau meetings. As well as a heightened sense of *whanaungatanga*, these whānau systems also promote emotional, psychological, and financial support, while financial resources can buffer the effects stressors derived from financial pressure or financial insecurity. Thus easing the burden of financial pressures (which can compound the affects of the stressor) and enabling the whānau to focus their efforts on overcoming the original stressor.

The adaptability theme is concerned with the ability and skill of whānau and its individual members to adapt to changing circumstances and its role in buffering whānau from stress and adversity. Indeed, Walsh (2002, 2006, 2007) identifies flexibility as a key process in family resilience. The capacity to re-organise family roles, re-prioritise

family needs and adapt to fit challenges over time encourages high functioning in couples and families (Walsh, 2007).

Education also emerged as a theme which proved to be a protective factor and coping strategy for whānau during times of adversity. Gaining an education and acquiring knowledge (of any type) can enable people to think and learn a variety of resilience strategies such as problem solving and goal setting (Korhonen, 2007). For example, it enables individuals to analyse situations, predict possible consequences or outcomes, plan ahead, and problem solve (Korhonen, 2007).

The humour theme was especially highlighted by single-parent households. These whānau noted how humour and laughter enabled them to re-appraise the stressful situations and buffer anxiety and stress. Humour is an important adaptive response to stressful situations (Clinton, 2008), as it appears to buffer individuals against the negative effects of stress (Able, 1998). In essence, whānau and individuals who are humourous (or more open to humour) are often more receptive to positive psychological adjustment when faced with stressful situations.

The theme of previous experiences acknowledges the utilisation of previous coping strategies, and the development of social support throughout the family lifetime as both protective factors and coping strategies. A number of the whānau had experienced multiple life shocks over time, and therefore some of the resilient strategies that had worked previously, could then be applied to other (although sometimes the same) life shocks that occurred later in the family's life. One whānau in particular also spoke of the social support they had developed through close relationships with *whakapapa whānau*, as a coping strategy when adversity struck the family later in life.

The ability of whānau to plan ahead appears to have helped two whānau in particular. One whānau reflected on the notion of developing skills and abilities as



protective factors throughout ones life. That is, should a difficult situation arise – it becomes possible to draw on these skills and abilities (protective factors) to help overcome various stressors and life shocks. In essence, this links to the previous theme whereby previous experiences help ameliorate adversity which may be encountered at a later date. Moreover, some whānau were able to establish financial support structures in order to anticipate or mitigate future events or challenges.

In addition to agreeing with the themes mentioned by the whānau responses, the Key Informant interviews provided other suggestions which related to the *Pūkenga* platform. Sport and exercise was suggested by some Key Informants as an ability or skill that can contribute to whānau resilience. In a similar fashion to what was mentioned by the whānau cohort, it was suggested that sport and exercise can provide an outlet and wider social support. However, after discussion it was suggested that sport and exercise was considered to be linked with the *Tikanga* (values and beliefs) platform, as opposed to the *Pūkenga* platform. This was because it became apparent from the whānau cohort that a ‘belief’ in the benefits of sport and exercise contributed to whānau resilience, as opposed to the ‘skill’ of exercise or sport.

### **Tikanga Platform:**

The *Tikanga* platform is centred on the values and beliefs that whānau prescribe to. At its basic, the Williams’ *Dictionary of the Māori Language* (1971) refers to ‘*tikanga*’ as a custom, rule, method or plan. *Tikanga* can also be considered as a set of beliefs (Mead, 2003). The *Tikanga* theme is more nebulous, difficult to define, but no less important in the promotion of resilience within whānau. It highlights the significance of having higher level values and beliefs, philosophies for recreation, living

and working, engaging with others, communication and empathy, but also a belief in guidance and support from beyond the physical realm.

Three resilience themes (protective factors and coping strategies) were mentioned during the whānau cohort interviews. Table 13 describes these resilience themes and the specific mechanisms which contributed to facilitating resilience. These resilience themes have been discussed extensively in Chapter VII.

**Table 13 - *The Resilience Themes and Associated Facilitative Processes of the Tikanga Platform:***

<b>Resilience Theme</b>	<b>Facilitation of Resilience</b>
Positivity	Improves psychological and emotional health
Exercise	Positive cognitive shift Reduce stress, anxiety and depression
Religious Conviction	Emotional support Spiritual support Forgiveness

The positivity theme focusses on the notion of positive perceptions and a positive outcome, which appears to improve psychological and emotional health. Ascribing a positive meaning to situations of adversity appears to have been beneficial to the ability of these whānau to cope. In other words, being optimistic appeared to promote feelings of excitement, as well as a positive attitude towards future goals and what may lay ahead in the future for the whānau.

The physical exercise theme focusses on the positive cognitive shift, and reduction in stress, anxiety and depression that was evident amongst the whānau cohort. These whānau held a belief that exercise (or sport) is an important ‘outlet’ to help overcome stress and adversity. Researchers have revealed that exercise can provide ‘time out’ and a distraction from daily worries and depressing thoughts (Gleser &

Mendelberg, 1990; Ross et al., 2003). Moreover, the psychological benefits (both acute and chronic effects) of participating in sport and exercise has been shown to reduce stress, anxiety and depression (Weinberg & Gould, 2011).

The religious conviction theme focuses on the guidance and support (emotional and spiritual) provided by religious beliefs. Another parent in particular drew on her religious upbringing to promote forgiveness within herself and her deceased son. Therefore it appears that religion and religious beliefs can provide whānau and their members with a number of benefits and which accordingly promote resilience.

In addition to agreeing with the themes mentioned by the whānau responses, the Key Informant interviews procured other suggestions which align with the *Tikanga* platform. These included hope, and a commitment to the survival and development of one's whānau. Having hope is not dissimilar to the theme of positivity in that it involves the feeling of optimism or a desire that something will happen. Again, such hope may improve psychological and emotional health, much like 'positivity' appeared to do so for the whānau cohort. Some Key Informants also spoke about the value in committing to the survival and development of their whānau. In this regard, the actions and behaviours of whānau members is totally focussed on maintaining and improving the health and well-being of the whānau. Such an approach helps ensure that the whānau are not exposed to risk factors (e.g., physical abuse), and therefore increase the chances of resilience towards negative whānau outcomes such as suicide.

### **Tuakiri-ā-Māori Platform:**

The final platform of the *Whakaoranga Whānau Framework* draws attention to cultural identity. Initial discussions on the framework reinforced the utility of the first three components – *Whanaungatanga* (networks and relationships), *Pūkenga* (skills and

abilities), and *Tikanga* (values and beliefs). All of these are similar to Gunnestad et al's (2006; 2010) seminal precis on resilience amongst the San people of Botswana and Travellers of Norway. However, further discussions and additional consultations revealed the need for a fourth platform - '*Tuakiri-ā-Māori*' and which was able to capture notions of cultural identity.

It was felt that while some of the resilience themes of *Tuakiri-ā-Māori* were potentially linked to other platforms, the fit was often awkward and incomplete. Insofar as the inherent cultural beliefs associated with some themes did not sit so well within the other platforms, further highlighted the need to present it as an independent and culturally-aligned platform within the framework. In essence, this presented a way in which the framework could be more securely anchored to a Māori world view.

Moreover, several researchers have noted the importance of 'cultural identity' as an important factor in the resilience of individuals, and especially those from minority or oppressed cultures (H. I. McCubbin et al., 1998; H. I. McCubbin, Thompson, Thompson, & Fromer, 1995a, 1995b).

The term '*Tuakiri-ā-Māori*' was chosen to represent those themes that reflected customs and concepts pertinent to a Māori identity. *Tuakiri* is translated by Te Taura Whiri i te Reo Māori/Māori Language Commission as 'identity' (Te Taura Whiri i te Reo Māori, 1996, p. 63). Mead (2003) further dissects the term *tuakiri* into two separate words: '*tua*' meaning 'the farther side of something' and '*kiri*' meaning 'skin' (p. 273). Therefore, conceptualising *tuakiri* in this sense means that one's identity is not simply what is on the surface but what also lies beneath or beyond. It therefore refers to the feelings, emotions and thoughts of a person – things that cannot be seen or touched (Mead, 2003). To add to this, some have stated that there are no observable characteristics which help distinguish a Māori identity, as cultural identity

characteristics are ‘merely the surface manifestations of an identity which is not itself observable’ (J. E. Ritchie, 1963, p. 45).

Five resilience themes (protective factors and coping strategies) were mentioned during the whānau cohort interviews. Table 14 displays these resilience themes, and the specific mechanisms which contributed to facilitating resilience. These resilience themes have been discussed extensively in Chapter VIII.

**Table 14 - *The Resilience Themes and Associated Facilitative Processes of the Tuakiri-ā-Māori Platform:***

<b>Resilience Theme</b>	<b>Facilitation of Resilience</b>
<i>Whakapapa Whānau</i> Support	Cultural support Emotional support Financial support Practical support Sense of belonging
<i>Tangihanga</i>	Social support Cultural support Emotional support Financial support Practical support
<i>Mahi-a-ngākau</i>	Emotional and psychological support Practical support Positivity
Indigenous Spirituality	Spiritual support Emotional and psychological support Overall health and well-being Practice of <i>mahi-a-ngākau</i> concepts
<i>Karakia</i>	Healing mechanism Expression of gratitude Spiritual presence of ancestors Seek guidance Emotional and psychological support

The *whakapapa whānau* support theme acknowledges the various forms of support (cultural, emotional, financial, and practical), and sense of belonging that can be

provided by whakapapa whānau during periods of adversity. Indeed, Māori maintain that a dependence on family can strengthen and enhance an individual's maturity, development, and more importantly, kinship ties (Durie, 1998a). This interdependence is similar amongst other minorities and Indigenous groups throughout the world (Gunnestad et al., 2010), and Pere (2007) also found similar findings amongst resilient Māori whānau who held multiple jobs.

The *tangihanga* theme acknowledges the various forms of support (social, cultural, emotional, financial, and practical) provided by this cultural tradition during times of grief and bereavement. Social and emotional support was provided by the various people who attend to pay their respects. These were typically friends, colleagues, immediate whānau, distant whānau, and long-lost relatives. Practical support was also provided by those that were present, and this was enacted through the uptake of various roles associated with the *tangihanga* process and the roles pertinent to the *marae*. Cultural support was provided by the *marae* or church venue, and the various cultural aspects associated with *tangihanga*. Financial support is also provided through the gifting of *koha* during the *tangihanga*. As such, the various modes of support associated with *tangihanga* seemed to be a strong resilience factor for those whānau who had a family death.

Although the experience of bereavement is not the same for everyone (Papalia & Olds, 1992), the whānau cohort were quite similar in reflecting on the various supports they received during the *tangihanga* process. As such, sharing the experience of a death (in a manner akin to *tangihanga*) seems to promote both immediate and long-term adaptation for the *whānau pani*, strengthening the whānau as a unit (Walsh, 2006).

The *mahi-ā-ngākau* theme acknowledges the culturally specific forms of support (emotional, psychological, and practical), and positivity provided through the cultural customs of *aroha*, *manaaki*, *awhina* and *tautoko* (Metge, 1995). These various components of *mahi-a-ngākau* seemed to help whānau with the adverse situation they were facing. In addition, helping other whānau through enacting *mahi-a-ngākau* aspects also seemed to contribute to their own resilience. One whānau in particular spoke of how aspects of *mahi-a-ngākau* offered to them promoted a sense of positivity within themselves, which helped promote whānau resilience. For another parent, *mahi-a-ngākau* qualities were a foundation for her childrens upbringing. Indeed, the concepts associated with *mahi-a-ngākau* are important components of a Māori identity (Dansey, 1992; Metge, 1995).

The Indigenous spirituality theme focusses on the support (spiritual, emotional, and psychological) and overall health and well-being gained from an awareness of the spirituality realm. It appears that Indigenous spirituality can help buffer these whānau from adverse situations. For some, Indigenous spirituality helped increase resiliency by empowering individuals through their relationship with a higher power (Juby & Rycraft, 2004) such as their *wairua kaitiaki*. While for others, spiritual connections with the environment provided them with an improved sense of well-being (emotional and psychological support).

The *karakia* theme offered a number of mechanisms which acted as a coping strategy for the whānau cohort. These included its use as a healing mechanism, a means to express gratitude, experiencing the spiritual presence of ancestors, and a way of seeking guidance. All together helping to provide emotional and psychological support.

In addition to agreeing with the themes mentioned by the whānau responses, the Key Informants procured other suggestions which align with the *Tikanga* platform. One

Key Informant mentioned the importance of ‘*ahi kaa*’ as another resilience factor that is pertinent to Māori and whānau. Indeed, Baker (2010) also speaks of ‘*ahi kaa*’ as a factor of resilience for Māori during times of economic recession. *Ahi kaa* provides a grounding for those whānau members who live afar, and serves to provide spiritual, practical and functional support should those members need or wish to return to their *tūrangawaewae*.

Several Key Informants also mentioned the importance of a cultural identity, especially so for Māori and whānau resilience. Indigenous and non-Indigenous resilience researchers have similarly promoted the positive link between cultural identity and resilience (Andersson & Ledogar, 2008; H. I. McCubbin et al., 1998; H. I. McCubbin et al., 1995a, 1995b; Stout & Kipling, 2003; Ware & Walsh-Tapiata, 2010). For example, Andersson and Ledogar (2008) found that pride in one’s heritage (see cultural identity) was a significant resilience factor amongst youth of the First Nations of Canada. Stout and Kipling (2003) also note that one’s culture is an important source of pride and self-esteem which provide support during periods of adversity. Indeed, cultural identity is an important component of overall well-being (Durie, 1998b, 2001).

Indigenous peoples have often placed high value on cultural identity as a critical determinant of well-being, arguing that there is an enduring connection between well-being (or lack thereof) and alienation from cultural markers such as language, diminished participation in Indigenous networks and cultural activities, and a lack of cultural knowledge (Battiste, 2008c; Durie, 1998b). Durie (2001) found that a secure identity amongst a sample of Māori could protect against health and well-being, while a secure cultural identity has often been suggested as a protective factor for Māori mental health (Moewaka-Barnes, 2010). Ware and Walsh-Tapiata (2010) found that a secure cultural identity was a resilience factor amongst Māori youth. In this sense, it is



imperative that any attempts to conceptualise or facilitate whānau resilience must take into account the importance of cultural identity.

It is important at this point to note two significant differences which will significantly inform the manner in which resilience for Māori and Māori whānau are conceptualised. The first concerns the interpretation and manifestation of resilience mechanisms and strategies. It has been noted that support from other family members, social cohesion, networks and access to resources are likely to aid resilience and that these universal concepts have broad and generic appeal. However, and as demonstrated, these are often couched in ways which take advantage of cultural practices and protocols, cultural concepts and ways of working. In a broad sense having access to extended family is known to enhance a family's ability to confront adversity. This is consistent with traditional notions of *whanaungatanga* and *manaakitanga*, the desire to seek support from extended family and also the obligation to provide assistance when needed. Likewise, the notion of social cohesion might best be demonstrated through the process of *tangihanga* or *mahi-ā-ngākau*.

There is a risk however that these types of traditional concepts are too easily equated with western terms. Indeed, it is unlikely that conventional views of an extended family can be easily compared to whānau or *whanaungatanga* nor can the complexities of *tangihanga* be easily explained through theories of social cohesion. It is in this regard that the second major difference has emerged. That is, that cultural identity is a legitimate, though relatively under-explored, contributor to whānau resilience.

The evidence to support this idea is highlighted within this research, though it is perhaps more difficult to interpret – at least as an independent marker of resilience. There are at least two challenges in this regard. The first is that cultural identity in

modern times is difficult to locate at population or ethnic level and to the extent that no single concept of identity will be applicable to all Māori. There are no absolute markers of Māori cultural identity and consequently little agreement on its constitution and characteristics (Pomedli, 2008). Secondly, it might be reasonable to propose that cultural practices (such as *tangihanga*, *karakia*, or *whanaungatanga*) are in fact an expression of cultural identity. Furthermore that these expressions are best considered within or as part of an existing frame – such as those which are attached to values and beliefs. The *Whānau Resilience Framework* does not necessarily propose that a secure Māori cultural identity alone, can provide adequate resilience strategies. Instead, as Falicov (1998, 2003) found with immigrant families, a bicultural approach to resilience was advantageous to these families.

To summarise, a healthy cultural identity requires identifying the innate cultural strengths in that culture (Van Breda, 2001). The *Whakaoranga Whānau framework* goes some way in identifying the strengths of Māori whānau as per a secure cultural identity. As noted by Van Breka (2001), ‘these strengths may or may not differ from the strengths of other cultures – the emphasis here is not comparative, but rather looking at features within individuals’ (Van Breda, 2001, p. 215).

### **Whakaoranga Whānau - A Whānau Resilience Framework:**

The major focus of this thesis was to explore and better understand Māori notions of resilience and the relationship to whānau. The discussion thus far has provided a range of insights and has revealed (amongst other things) that Māori and conventional notions of resilience are not too dissimilar and in fact share many common characteristics and features. Of interest however has been the fact that a range of other factors, unique to Māori and to whānau, were also located. These factors highlighted the

utility of applying a resilience lense that was culturally cognisant and culturally considered.

To better synthesise this information, the *Whakaoranga Whānau Framework* was constructed and is a seminal outcome of this thesis (see Figure 5). It was based on interviews with whānau, an analysis of the international literature, recommendations from Key Informants, and past presentations to a variety of audiences including academics, clinicians, health providers, researchers, policy makers, service providers and *kaumātua*. As mentioned beforehand, the framework consists of four resilience platforms. Attached to each of these platforms are specific protective factors and coping strategies mentioned by the whānau cohort. Finally, these protective factors and coping strategies facilitate resilience through various mechanisms such as financial or practical support, and various positive cognitive shifts.

<b>WHĀNAU RESILIENCE</b>	<b>Resilience Platform</b>	<b>Protective Factors/Coping Strategies</b>	<b>Facilitation of Resilience</b>
	<i>Whanaungatanga</i> (Networks and Relationships)	<i>Kaupapa Whānau</i> Support Significant Attachments	Close and secure relationship Emotional and psychological support Financial support Practical support Resource support Tuakana-teina relationships
	<i>Pūkenga</i> (Skills and Abilities)	Whānau Systems Adaptability Education Humour Previous Experience(s) Planning Ahead	Emotional and psychological support Financial support Whanaungatanga Adaptability (family roles and responsibilities) Re-prioritise family needs Problem solving skills Goal setting Re-appraise the stressful situations Buffers anxiety and stress Utilisation of previous coping strategies Development of social support Development of skills and abilities for later use. Financial security
	<i>Tikanga</i> (Values and Beliefs)	Positivity Exercise Religious Conviction	Improves psychological and emotional health Positive cognitive shift Reduce stress, anxiety and depression Emotional support Spiritual support Forgiveness
	<i>Tuakiri-ā-Māori</i> (Cultural Identity)	<i>Whakapapa Whānau</i> Support <i>Tangihanga</i> <i>Mahi-ā-ngākau</i> Indigenous Spirituality <i>Karakia</i>	Cultural support Emotional support Financial support Practical support Sense of belonging Social support Psychological support Positivity Spiritual support Overall health and well-being Practice of mahi-a-ngākau concepts Healing mechanism Expression of gratitude Spiritual presence of ancestors Seek guidance

**Figure 5. Whakaoranga Whānau: A Whānau Resilience Framework.**

In discussing the *Whakaoranga Whānau Framework*, there are a number of points that must be considered for it to be useful and pragmatic for whānau. Firstly, the

*Whakaoranga Whānau Framework* provides a conceptual framework of whānau resilience, as conceptual tools are required just as much as techniques (Walsh, 2006). Moreover, the *Whakaoranga Whānau Framework* does not provide an exhaustive list or blueprint of resilient whānau, but rather offers a flexible framework which identifies a range of resilience strategies. For Māori whānau, having a *kete* (resource kit) of various coping strategies and protective factors, can enable them to utilise specific strategies depending on the adverse situation. Indeed, different combinations of these themes can help promote resilience through psychological and more pragmatic processes. As Rutter (2001) suggests, people are likely to have a repertoire of different ways of dealing with problems rather than one particularly effective coping strategy they always use. It is therefore important to note that a ‘one size fits all’ approach to resiliency may not be the most beneficial pathway to developing resilient families (Ungar, 2008).

This leads onto the next point, regarding a holistic outlook on whānau resilience. As it is ‘important to gain a holistic view of the family system and its community linkages’ (Walsh, 2006, p. 43), so too is it important to consider the *Whakaoranga Whānau Framework* from a holistic perspective. According to Māori Marsden (2003), a holistic approach seeks to develop the co-ordination, integration and reconciliation of the various elements involved in the situation. For example, should a whānau experience a particular life shock, then it is imperative that a variety of resilience strategies are utilised to help overcome the stressor. This may mean a combination of network factors (*Whanaungatanga* platform) to access social support resources, certain skills and abilities (*Pūkenga* factors) to help cope with the adversity, as well as an Indigenous spirituality approach (*Tuakiri-ā-Maori* platform) to improve psychological and spiritual emotions. Accordingly, Burack and colleagues (2007) believe that a holistic approach to resilience must integrate mental, physical and spiritual components.

In her role as a family therapist, Walsh (2006) also acknowledges a holistic viewpoint by noting that it is important that mental health professionals need to attend the many aspects that are intertwined in family functioning, and to also assess the strengths and vulnerabilities of families on multiple levels, once again emphasising the need to consider various potential strengths of whānau.

Thirdly, depending on the life shock, only certain coping strategies or protective factors will be useful. For example, a whānau experiencing redundancy will more than likely benefit from financial support such as a whānau bank account as opposed to the skill of humour. Likewise, a whānau dealing with suicide will most likely seek support from a variety of sources such as *whakapapa whānau* support, *kaupapa whānau* support, and maybe professional help.

Finally, when discussing resilience mechanisms it is not enough to identify the resilience factors (i.e., protective factors and coping strategies) alone, as resilience is only created when certain psychological factors are initiated within individuals and families (Rutter, 1990; Stout & Kipling, 2003). Firstly, protective factors and coping strategies create resilience by building and developing a positive self-image (Rutter, 1990). For example, the abilities and skills of individuals and families make them feel good about themselves when they become aware of these skills (Gunnestad, 2006). Although not explicitly stated by the whānau cohort, the *pūkenga* factors which contributed to their resilience (i.e., whānau systems, flexibility, education, humour, previous experiences, and planning ahead) can have the effect of fostering a positive self-image as the mastery of skills can create feelings of competency (Deci & Ryan, 1985).

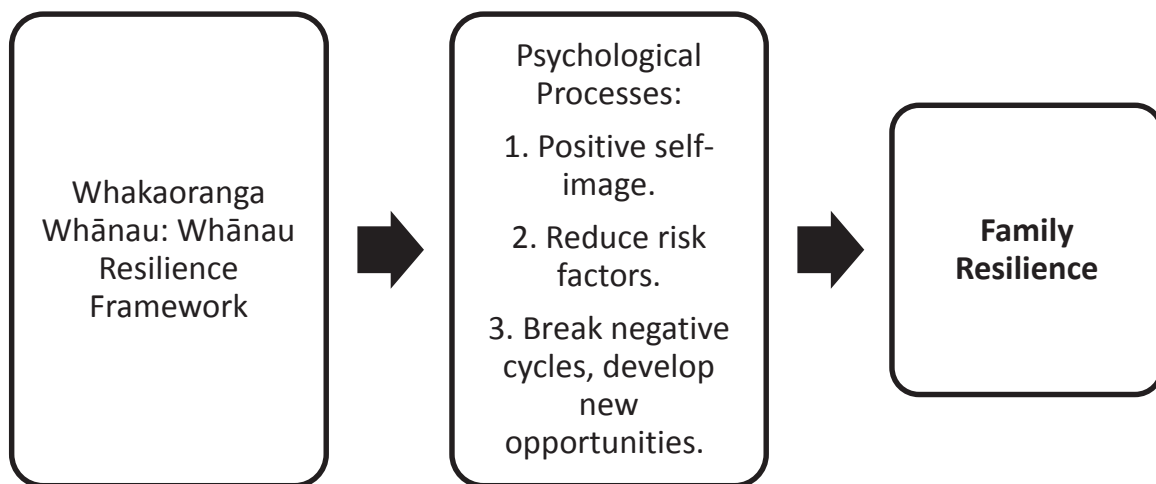
The people that individuals and whānau feel connected with can also enhance self-image (Gunnestad, 2006). As such, social support, by way of *whakapapa whānau*

support, *kaupapa whānau* support, and significant attachments, can provide a sense of belonging and connectedness. Moreover, the religion, *tangihanga*, Indigenous spirituality, and *mahi-a-ngākau* resilience themes have been shown in the previous chapters to also provide a sense of belonging and connectedness.

Secondly, the protective factors and coping strategies can create resilience by reducing the effect of and prevalence of risk factors (Gunnestad, 2006). For example, a significant attachment such as an aunty or grandmother who is caring and loving (a protective factor) can help reduce the effects of a chaotic home. The previous point highlighted the development of a positive self-image, this too can also negate the possibility of undertaking risky behaviour as been exposed to such behaviour can negatively impact one's self-image.

Thirdly, the protective factors can promote resilience by breaking a negative cycle and opening up new opportunities (Gunnestad, 2006; Rutter, 1987). For example, if a child's parents has become incarcerated, the child may lose hope and have low expectations for the future. However, if the family is involved in a sports group, church group or cultural group (e.g. *marae* or *kapahaka* group), or they have strong *whakapapa whānau* and *kaupapa whānau* support, then those support structures can provide information and positive role modelling. In this process, hope is developed and new opportunities may arise through social modelling (Gunnestad, 2006).

Figure 6 shows how the *Whakaoranga Whānau Framework* can promote the creation of family resilience. The various resilience themes (the protective factors and coping strategies) associated with the four platforms (*Whanaungatanga*, *Pūkenga*, *Tīkanga*, *Tuakiri-ā-Māori*) can help promote and develop the three psychological processes which can lead to family or whānau resilience.



**Figure 6. The development of family resilience through the Whakaoranga Whānau Framework.**

To summarise, the *Whakaoranga Whānau Framework* highlights the various resilience strategies utilised by Māori whānau to overcome various life shocks. A distinct component, and one that is integral to this framework, is the acknowledgement of cultural identity. The various resilience themes which form the cultural identity platform provide culturally relevant resilience mechanisms for Māori whānau. In addition to the resilience themes associated with other three platforms, the *Whakaoranga Whānau Framework* can foster the three psychological processes outlined by Rutter (Rutter, 1990). In turn, whānau resilience is developed.

### **Conclusion:**

The major focus of this thesis was to explore and better understand Maori notions of resilience and the relationship to whānau. The discussion thus far has provided a range of insights and has revealed (amongst other things) that Māori and conventional notions of resilience are not too dissimilar and in fact share many common



characteristics and features. Of interest however has been the fact that a range of other factors, unique to Māori and to whānau, were also located. These factors highlighted the utility of applying a reliance lens that was culturally cognisant and culturally considered. The final chapter focusses more closely on the seminal outcomes of this thesis, as well as the contribution to academia.

## **CHAPTER X: HE KUPU WHAKATEPE - TOWARDS AN UNDERSTANDING OF WHĀNAU RESILIENCE**

### **Introduction:**

This thesis has considered the multiple ways in which whānau have nurtured the health and well-being of its members. Unlike other studies, the notion of health and well-being has been constructed within the context of whānau resilience – how whānau have encountered and overcome adversity and how various mechanisms were harnessed to both confront and challenge significant life shocks.

Most of these events or life shocks were not particular to Māori whānau and were in many ways consistent with what many families were likely to experience over the course of a life-time. The national and international literature shed light on this concept and further revealed a consistency in how families, however defined, often drew upon a universal set of support structures, resources and mechanism (e.g., Baker et al., 2012; Gunnestad, 2006; Gunnestad et al., 2010; H. McCubbin & McCubbin, 1988; H. McCubbin et al., 1995; Walsh, 2006). The thesis revealed however, that while strategies to promote resilience share a common thread, cultural considerations, identity, and traditional constructs are critical and fundamentally shape the manner in which Māori whānau engage and overcome adversity. In short, the cultural constructs often provide the foundation and context within which strategies for resilience are expressed and adversity ultimately overcome.

## **Thesis Review:**

Chapter I revealed a number of historical and contemporary events and their subsequent effects on Māori health, Māori well-being and Māori development. It explored the various issues and initiatives which shaped the post-colonial experience of Māori, and the resilience strategies which helped alleviate these experiences (c.f., Baker, 2010). It concluded by outlining the rationale and objectives of the thesis.

Chapter II built on the previous one but honed in on the concept of ‘resilience’. It described an initial emphasis (at least within the literature) on individual rather than collective resilience factors, and how a field of study had emerged to encompass other interests and applications. The chapter accordingly considered the resilience implications for families and what discourse had emerged to build and focus a collective thinking on resilience. Indigenous and Māori notions of resilience were also introduced. This revealed a comparative dearth of information and inquiry, but further served to highlight an emerging interest in how culture might fundamentally shape resilience perceptions and resilience applications.

Chapter III was again an extension of Chapter II, and cast its lens on the meaning of ‘whānau’. Unlike the previous chapter however, considerable information on this concept was available, as was the idea that locating a single or universally relevant definition of whānau was unlikely. The chapter, while emphasising the difficulty of defining whānau, further highlighted the level of cultural diversity which exists within the Māori population and how this extended into equally diverse notions of whānau composition and function. In the end, a proposition was put forward and which offered a working definition of resilient whānau, and a means through which the concept could be explored and a hypothesis examined.

Chapter IV outlined the research methodology. The methods employed to conduct the study were derived from various knowledge systems and approaches – both Māori and Western. In many ways conventional interviewing and analysis techniques were applied as well as the more usual reviews of literature, peer reviews, presentations and consultation with Key Informants. However, the broad framework within which these techniques were applied was derived from a Māori base, from Māori approaches, Māori systems, and Māori expectations. These assumptions existed at a higher level but provided the necessary foundation upon which the research could take place in a culturally legitimate and valid manner.

Chapter V discussed the various themes to emerge from the whānau interviews and how these were categorised under the *Whanaungatanga* platform (networks and relationships). This chapter considered how aspects related to ‘*kaupapa whānau* support’ and ‘significant attachments’ enabled whānau to adapt to certain life shocks, to overcome these and to become more resilient as a consequence.

Chapter VI revealed how the whānau interviews could be categorised further under the *Pūkenga* platform (skills and abilities). This chapter discussed how concepts such as ‘whānau systems’, ‘adaptability’, ‘education’, ‘humour’, ‘previous experiences’ and ‘planning ahead’ enabled whānau to adapt to challenging situations and to overcome significant life shocks.

Chapter VII introduced the *Tīkanga* platform (values and beliefs) and which was similarly derived from the whānau interviews. This chapter highlighted how aspects related to ‘positivity’, ‘physical exercise’, and ‘religious conviction’ enabled whānau to adapt to certain life shocks and to add an additional flavour to building a whānau-centred approach to resilience.

Chapter VIII introduced the *Tuakiri-ā-Māori* platform (cultural identity). This chapter revealed how aspects related to ‘*whakapapa whānau* support’, ‘*tangi*’, ‘*mahi ā ngākau*’, ‘Indigenous spirituality’, and ‘*karakia*’ enabled whānau to adapt to certain life shocks. In many ways this chapter was consistent with what had been revealed in earlier discussion, but chose to focus more securely on cultural variables and those of particular importance to Māori whānau.

Chapter IX synthesized the findings from Chapters V, VI, VII and VIII to reveal the *Whānau Resilience Framework - Whakaoranga Whānau*. It further discussed the specific components of the *Whakaoranga Whānau Framework*, how these function, how they intersect, and how they can promote whānau resilience.

Chapter IX discusses the implications of the *Whakaoranga Whānau Framework*. A particular emphasis is placed on the seminal outcomes of the thesis and the contribution to academia.

### **Limitations:**

It is important that the limitations of the study are also considered. One possible limitation could be the narrow range of life-shocks experienced by the sample whānau. The study only explored life-shocks as they related to incarceration, redundancy, long-term illness, disabilities, family death, and single parent households. While a broader range of life-shocks would have provided a more comprehensive understanding of resilience strategies employed by whānau, time and resource constraints typical to most PhD study led to these constraints. Other life-shocks relevant to Māori whānau that are worth investigating could include experiences related to; racism, cultural dislocation, natural disasters, domestic violence, physical/emotional/sexual abuse, homelessness, bankruptcy, and unplanned pregnancy. However, as the literature pertaining to

resilience from a New Zealand context, and more so from a Māori context is rather limited, this study sought to develop a body of resilience discourse which could kick-start more specific investigations in the resilience field from within Aotearoa.

A second possible limitation of this study, and the Whānau Resilience Framework as a whole, could be the overemphasis on resilience strategies that are related to ‘collective’ behaviours and practices. One could argue that there is a lack of applicability for Māori who are independent. While there exists that notion that Māori are largely ‘inter-dependant’ on each other (Durie, 1998b), this may not reflect all Māori. Nevertheless, the Whānau Resilience Framework still promotes a number of resilience strategies that can be developed and utilised by sole individuals. These may include adaptability, education, humour, positivity, exercise, religious conviction, and the practice of *karakia*.

### **A Framework To Shape Whānau Resilience:**

Insofar as the *Whakaoranga Whānau Framework* has emerged from the research it has also revealed five seminal outcomes of the thesis. It has shown that cultural factors are likely to shape the context within which resilience is framed and likewise the strategies employed to build resilient and robust whānau. The *Whakaoranga Whānau Framework* has revealed too that Māori and conventional resilience strategies are not too dissimilar and share many common threads. Whānau as well are unlikely to employ resilience strategies in a uniform manner and will draw on various approaches according to what is required and what is available. Leading on from this, is the very real idea that not all whānau have access to core coping strategies and that both conventional and cultural strategies are not always available. Finally, it is clear that adversity operates in an indiscriminate manner and that no amount of planning or mitigation can prevent this.

While the strategies outlined in this thesis (both cultural and conventional) are likely to promote resilience, they will not prevent these challenges emerging in the first place.

Their role therefore will be to prevent what is preventable, reduce impact, and aid recovery.

## **1. Culture and Whānau Resilience:**

It is perhaps unsurprising that cultural factors have so obviously shaped the thesis and the *Whakaoranga Whānau Framework*. Indeed, part of the drive behind the research was to explore these concepts and to better understand their function and intent. However, the role of core cultural constructs were to surface in ways that underscored their value and purpose, but which also considered them in a new and unconventional light. *Tangihanga*, for example, has been considered from multiple perspectives with various writers exploring its role and function in both traditional and contemporary times (Mead, 2003; R. Walker, 2004). To a large extent these precursors have touched on the grieving process, bringing about a sense of closure, *whanaungatanga*, honoring the lives of others, and connections with tribal traditions and protocols. These issues are ultimately intertwined and reveal the multiple ways in which *tangihanga* (and its outcomes) might be viewed.

Cast with a resilience lens however, the process has a more active function and serves as a more deliberate tool through which the death of a loved-one can be encountered and overcome. It is a process unique to Māori, which is firmly grounded on *tikanga* Māori, but which allows whānau to encounter and embrace adversity and to ultimately overcome and endure. Other cultural mechanisms can be viewed in a similar light. *Whanaungatanga*, for example, might simply be viewed as family connections and relationships. However, for Māori whānau, these connections are likely to be broad

and complex, extending beyond conventional notions of family and which allow for a wider network of support to emerge. The *Whanaungatanga* platform therefore, is a further example of how processes, protocols, activities and cultural practices (unique to Māori ) can serve to promote and sustain resilience. While it is certain that these types of practices have deeper cultural meaning and function – their role in facilitating whānau resilience remains at the heart of this thesis.

## **2. Conventional Constructs:**

While this thesis has highlighted the value of culture and cultural practices, it has also shown that these are neither a panacea or exist within vacuum independent of other variables. Conventional resilience discourse has highlighted the value of factors such as education and income or the sense of security which comes from belonging to a community or institution. These factors are independent of culture and will offer benefits irrespective of an individuals background or beliefs.

This idea is not insignificant in that it further highlights the fact that cultural and conventional factors are not independent. Moreover, and in order to facilitate optimal whānau resilience, a mix of both is required. Having access to culture and cultural institutions will assist whānau when they encounter adversity, but this will need to be complimented by more conventional strategies, systems, or approaches. Likewise, a generic approach to resilience is unlikely to completely resonate with Māori whānau unless a cultural lens is applied and cultural variables considered.

## **3. Access To Resilience Resources:**

The review of literature (in particular) revealed that while certain factors, relationships, or qualities promoted or sustained resilience, access to these were not



universal, with some individuals or groups having greater access than others. This study has revealed that for many whānau a similar issue exists and that not all will be able to engage the type of cultural support required or desired. For some, cultural support might underpin their overall approach to resilience, while for others it might simply be an addendum and only one part of a broader strategy. This idea is not too dissimilar to the concept of ‘diverse Māori realities’ and which is founded on the premise that Māori individuals are not homogenous and in fact coalesce within a cultural paradigm which is disparate and dynamic (Cunningham et al., 2005).

The implications for this thesis is that whānau are unlikely to have equal access to cultural practices and institutions and may not draw upon them in a similar way. It cannot be expected that all whānau will embrace culture to the same extent or that they will have the same desire to do so. Nonetheless, and regardless of context and access, those interviewed showed similar levels of enthusiasm for its function and role in promoting resilience and mitigating the impacts of various life shocks.

#### **4. Limited Access:**

While access to both cultural and conventional support mechanisms can vary, the research also revealed that access to both can be limited and which will often place whānau in a pernicious position. There is a risk therefore that one type of support might be perceived as being able to compensate when another is not available or that equal forms of support are accessible. In reality however, and for some whānau, access to both conventional and cultural resilience will be limited and which places them at significant risk of not being able to overcome adverse life events.

## **5. Encountering Adversity:**

Although resilience has underpinned the development of this research and the wider objective to better understand how whānau can become more resilient, it is also clear that while some challenges can be avoided - others cannot. This point is important within the context of the thesis and implies that although building resilience is a primary objective, whānau will inevitably encounter challenges and adversity and will need to prepare for this. As an outcome of this thesis, emphasis is therefore placed on mitigating as opposed to eliminating adversity.

### **The Implications of this Thesis:**

The implications of this thesis will inevitably be drawn from the outcomes produced and in particular the *Whakaoranga Whānau Framework*. As described above, there are at least five key considerations to emerge from the framework and which add insight to the current discourse, its implications for whānau, its relevance to Māori, and when contextualising a cultural perspective. However, and beyond these high-level considerations, the framework and thesis also offer more specific guidance on how whānau resilience might be promoted and what issues and opportunities exist.

As noted, cultural values and process can play a critical role in overcoming adversity, and we also know that knowledge and access to this is likely to vary, especially in modern times, and as whānau embrace other cultures and traditions. However, and for most whānau, these cultural factors exist at a more intuitive rather than deliberate level, they do not form part of their conciseness nor do they necessarily occupy their daily thoughts or interactions. In this regard, culture functions in the purist possible sense in that these behaviours and interactions become second-nature, they are imbedded within the lives of whānau and require very little thought or effort. Building

and maintaining relationships with others, for example, is never seen as an insurance against adversity, nor is participating in cultural traditions and practices. Nevertheless, it is often these activities and connections which promote and enhance resilience and which are fundamental to the ability of Māori whānau to flourish and endure.

Given the cultural diversity which exist across whānau in modern times, coupled with the difficulty of promoting culturally aligned interactions or interventions, it would make little sense to view culture from a policy perspective or as a deliberate means of building resilience. However, it is worth highlighting the connections between culture and resilience and the idea that when the multiple contributions of culture to Māori development are considered, that resilience is etched as a cornerstone or at the very least a part of the rationale for its promotion and growth.

For whānau who are anticipating, encountering, or overcoming adversity it will therefore be important that these cultural concepts (however defined) are actively utilised and promoted. Moreover, they can also be utilised as a safeguard in anticipation of future challenges, a way of mitigating events which may emerge or aiding recovery. As noted, these are likely to occur in an intuitive or organic manner but should also be viewed as a clear signal to whānau that investment in culture is also an investment in their ongoing health and well-being.

Notwithstanding the role and value of culture to Māori development and Māori resilience, it cannot, however, be viewed as a panacea or in isolation from other domains. A whānau who are culturally secure and who have extensive networks are unlikely to flourish if they are not sustained by more pragmatic supports – an adequate income, a safe home, secure employment, or access to a standard of education. In fact, the role of these issues cannot be understated and are no less important to Māori as they are to other populations. The literature is especially consistent in this regard and reveals

that in many ways the forces which dictate resilience are remarkably consistent with other areas of human development.

For many whānau their ability to navigate adversity and demonstrate resilience is shaped by their capacity to generate the type of support required. An inability to do so (economically or socially) will likely compromise what options are available to them. Moreover, and if the issue is linked to a financial challenge – then it becomes even more difficult. Likewise, a lack of education or poor employment prospects can both create pressure as well as reduce options. They further reduce the ability of a whānau to plan ahead, to build on previous experience, and to move forward in a positive manner. The impacts are cumulative and interrelated but ultimately shape a resilience profile which is less than optimal.

In the end, these issues point to an integrated approach to resilience; one which focuses in part on the various resilience platforms which enable resilience, but also those multiple and diverse actions which protect against adversity, which build capacity, and which are often linked to other sectors and broader endeavours.

Psychological endowments along with an innate ability to deal with adversity (irrespective of other factors) are likewise of importance. Building attachments with others has already been discussed and is linked to broader notions of *whanaungatanga* and social capital. However, these types of interactions rely on more than just activities or investments or perhaps a process of interaction. They are in fact more complex than this and require a willingness and ability to foster trust and empathy, to establish a bond or connection. To a large extent, they rely on personal attributes and qualities (or skills and abilities) rather than processes and procedures. The same is true for those wishing to build significant attachments with others, who attempt to promote a positive outlook, who have sense of humour or encourage laughter. All these factors are well-known to

promote resilience but again are qualities rather than processes. This is not to say that individuals or whānau cannot acquire these skills, but it does suggest that a deeper understanding of resilience is applied and that resilience cannot be built by activity or investment alone.

A final issue to touch on, and one which is of particular relevance to Māori whānau, is the relationship between resilience and the belief in some higher being or higher order. In the conventional literature, these factors are often equated with a religious or spiritual beliefs and function in ways that offer security and hope in situations where challenges or adversity are encountered. This belief can offer security in the face of extreme events or situations and will often serve to contextualise a circumstance and offer confidence that eventually things will be okay.

Faith is often the catch-cry here, as is the idea that something beyond what is tangible or obvious is available to provide support and reassurance. A recent example serves to illustrate this point and centres on the widely reported deaths of three people (one adult and two children) involved in a head-on car crash (New Zealand Herald, 2014). The incident occurred in Rakaia, near Christchurch, and as a consequence of a collision between a Dutch tourist and another vehicle. While the tourist had been charged for the incident, the family of those killed were unwilling to ascribe blame and instead chose to reach-out to him, to offer support, and to focus instead on working through the tragic event. To a great extent, it was the family's faith which signalled this approach and which has also allowed them to deal with the tragedy and to garner the type of support they need.

For some Māori whānau, this belief sits within a similar religious context and is equated with an organised faith or church. Quite apart from the support afforded from developing relationships with other members, the faith itself can provide the means

through which tragic or unforeseen events can be dealt with and in the absence of other forms of support. It will often be utilised when whānau feel powerless or when the outcome has already been determined. Faith may serve to prepare whānau for future events, but is more likely to allow them to deal with existing challenges, tragic events, or in circumstances where all appears lost.

However, and for other whānau, these beliefs are more abstract or may be derived from cultural rather than religious constructs. It is clear that Aotearoa as a country is becoming more secular and that the numbers of those indicating that they have no particular religious or spiritual belief is increasing. However, a lack of interaction with religious institutions is a poor proxy for faith and belief. Indeed many now have limited association with church (for example) but maintain a belief in spiritual or divine influences. In a similar way to those that attend formal religious activities or events, this organic or less structured system can offer the tools needed to overcome adverse life-events. It offers faith in the unknown and a belief in a higher order.

When overlaid with a cultural lens, these approaches become even more relevant to Māori whānau and as they seek to draw strength from cultural practices and norms. It is without question that many whānau would draw considerable resolve from a *karakia* at a *tangihanga* in spite of the fact that they may not know the precise meaning of the words or have a particular affiliation with the religion. Likewise, prayers from a *kaumātua* will take on particular relevance when couched in a way that draws upon ancient and cultural concepts, Māori models, Māori knowledge, or even traditional gods and deities.

The point here is that faith or a belief in something other than which exists in the physical realm can have a profound impact on the ability of a whānau to deal with adversity. These concepts will emerge in various shapes and forms (both conventional

and cultural) and will not always be part of the collective consciousness of the whānau. However, faith will often provide the support needed, and allow the whānau to move forward with greater confidence and hope in the future.

All the issues described here will most certainly operate in concert with each other. Whānau will draw on what is available and depending on what is required. For many, it will be their culture that provides the primary support, while for others it may be their faith or their psychological resolve. The point is that these resilience factors will have greater relevance to some whānau than others, they can be used collectively in equal measure, but likewise some may take primacy over others.

The implication is a fairly simple proposition - that resilience for Māori whānau is made-up of multiple domains, but that within these domains, whānau preferences and whānau capacities will ultimately dictate how these factors are used, to what extent, and in what order. An added feature is that this type of organisation is further influenced by the type of adversity and life shock encountered and the situation they might face. A *karakia* or prayer, for example, might provide the support needed when encountering a whānau death or tragedy, while networks and relationships (i.e., the *Whanaungatanga* platform) might be used to address financial pressures or employment concerns.

In the end, the process is entirely dynamic and reflective of the diverse environments and pressures within which whānau exist. As far as cultural factors come into play, the implications are less clear. For some whānau, culture may constitute an independent and isolated part of their broader resilience strategy, while for others all aspects of their lives are overlaid within a cultural context, even when the resilience catalyst (income or education for example) has no obvious cultural bent. This inevitably raises the question – does culture matter? A simple response to the question is - yes. However, it is a qualified ‘yes’ and in that it will matter to some whānau more than

others, it will be more important to some situations than others, and will not necessarily be based on tradition and custom.

### **The Contribution of this Thesis:**

The seminal outcomes of this thesis have so far been described and are illustrated within the *Whakaoranga Whānau Framework*, its various components and features along with its implications and opportunities. In many ways the issues described are consistent with conventional theory and discourse. However, it has been the addition of a cultural lens which has underscored the relevance of this work and its broader contribution to scholarship and the academy.

Extending knowledge and illuminating the unknown is the more primary function of a PhD thesis, and is a constant that binds multiple fields of inquiry and irrespective of methodology or mode. The quest for new knowledge is what drives the investigator and which ultimately lays the platform for examination. The new knowledge created in this thesis is both pragmatic and profound. The methods used to undertake the research were in many ways based on conventional theory and practice. However, the considered introduction of Māori processes and procedures (i.e., kaupapa Māori and mātauranga Māori) in conjunction with Western theory (e.g., the resilience discourse), offered a particular edge to the study and revealed how both could sit alongside each other, and how they could coalesce without conflict or compromise. Moreover, the approach suggested that for investigations like this, a blended method is required and that the validity of the investigation would in part be derived from the necessity and ability for these two paradigms to work in unison. In this regard, the methodology alone has created insight of its own and carved a path for similar studies and future research endeavours in resilience and *kaupapa Māori*.



However, the notion that culture has a role to play in promoting whānau resilience has guided the thesis and shaped its intent. The structure and design of the research would suggest that this was an unsurprising revelation – especially given the focus of the thesis and the information garnered from similar studies. Nevertheless, the true insight generated from this study is derived, only in part, from exploring this relationship. Where added (and perhaps more significant) knowledge is gained from examining the nature and context of these connections – how culture functions within a resilience frame, its limitations, applications, and contributions.

In many ways the conclusion here is clear - while culture certainly has a role to play in whānau resilience, that role is not always quantifiable or absolute. It will be more relevant to some whānau than to others and more valuable in one context when compared to another. It may rely on support from other factors to truly take effect, but in some circumstances function independently as the primary source of support. In the end – it really just depends on the whānau and the particular adversity they face.

This finding is less of a revelation and more likely an instruction; a guide which suggests that the relationship between culture and resilience should be examined in a considered and informed manner. Also suggested is that absolutes are unlikely to be helpful, and that strategies designed to promote whānau resilience need to be equally as informed, open to interpretation, and fundamentally driven by the needs of the whānau rather than an overly prescriptive framework.

The *Whakaoranga Whānau Framework* should be viewed in this light and as a general guide rather than a set of absolutes. Its primary function is to elucidate what is possible as opposed to prescribing what is needed. The key therefore is to ensure that its application is adaptive, cognisant of the realities within which whānau exist, and that it is able to function in a dynamic and informed manner. This is in part due to the reality

of whānau diversity, but is likewise a nod to the fact that adversity comes in various shapes and forms, and that no single approach to every situation is possible.

As this thesis draws to a conclusion, it is also worth noting that whānau resilience sits within the broader scope of whānau well-being and wider still to encompass Māori development. Within this context, the *Whakaoranga Whānau Framework* should be seen to add its own contribution to the aspirations of *iwi* Māori and to ensure that future generations of Māori whānau are able to flourish and endure, to embrace change with certainty and control, and to look towards the future with an optimistic gaze.

It is perhaps this point which underscores the primary motivator behind the thesis. While it has been shaped and driven by academic and methodological considerations, its true test is yet to come and is dependent upon its ability to promote positive change within Māori communities, to add its own sense of optimism, and to ultimately contribute to improving the lives of Māori whānau.

Kia ora.

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## APPENDICES



# ***Whakaoranga Whānau: Whānau Resilience***

## WHĀNAU INFORMATION SHEET

Tena koe,

This research project entitled “Whakaoranga Whānau: Whānau Resilience”, is a study looking at the ways in which Maori whānau flourish and overcome adversity. Mr Jordan Waiti is conducting the research as part of his PhD in Public Health. His supervisors are Dr Te Kani Kingi, Professor Mason Durie, and Professor Chris Cunningham.

### **Project Description and Invitation**

This research project seeks to identify the strategies and resources utilised by Maori whānau when faced with adversity, whether it be redundancy, education problems, housing difficulties, a family death and/or ill-health. Identifying these culturally relevant strategies and resources will contribute to whānau development. We would greatly appreciate your participation in this research project.

### **Participant Identification and Recruitment**

Participants for this research project will be recruited through a number of pathways. There will be a total of 15 whānau (including their non-Māori members) who will be interviewed as a whānau collective. This number was chosen as it would provide a rich and comprehensive data source. For your time and effort, each whānau will be offered a koha voucher of \$200 which can be used at a local supermarket.

### **Project Procedures**

Should you agree to participate, we will need approx 1 to 2 hours of your time to participate in an audio taped interview. You can nominate the time and place for the interview.

### **Data Management**

The audio taped interviews will be transcribed and all participants' names will be changed to pseudonyms, to guarantee anonymity. Each participant will also be given the opportunity to review the tape transcripts. The audio tapes and transcripts will be locked in a cabinet in Jordan Waiti's office, where after 5 years the data will be destroyed. Once the study findings have been analysed and summarized, you will be contacted to see if you would like a copy of the project findings.

### **Participant's Rights**

*You are under no obligation to accept this invitation. If you decide to participate, you have the right to:*

- *decline to answer any particular question;*
- *withdraw from the study at any time;*
- *ask any questions about the study at any time during participation;*
- *provide information on the understanding that your name will not be used unless you give permission to the researcher;*
- *be given access to a summary of the project findings when it is concluded.*
- *ask for the recorder to be turned off at any time during the interview.*

### **Project Contacts**

If you have any questions about the project, either now or in the future, please feel free to contact:

Lead Researcher: Jordan Waiti,  
Te Pumanawa Hauora, Massey University Wellington.  
(04) 380 0625, 027 623 7243

Supervisor: Dr Te Kani Kingi  
Te Mata o Te Tau, Massey University Wellington  
(04) 380 0620

This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern A, Application \_09\_/64\_\_ . If you have any concerns about the conduct of this research, please contact Professor Julie Boddy, Chair, Massey University Human Ethics Committee: Southern A, telephone 06 350 5799 x 2541, email [humanethicsoutha@massey.ac.nz](mailto:humanethicsoutha@massey.ac.nz).



## ***Whakaoranga Whanau: Whanau Resilience***

### **WHĀNAU CONSENT FORM - INDIVIDUAL**

I have read the Information Sheet and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

1) I agree/do not agree to the interview being sound recorded.

2) I wish/do not wish to have my recordings returned to me.

3) I agree/disagree to participate in this study under the conditions set out in the Information Sheet.

**Signature:** ..... **Date:** .....

**Full Name - printed** .....



# ***Whakaoranga Whānau: Whānau Resilience***

## **INFORMATION SHEET FOR KEY INFORMANTS**

Tena koe,

This research project entitled “Whakaoranga Whānau: Whānau Resilience”, is a study looking at the ways in which Maori whānau flourish and overcome adversity. Mr Jordan Waiti is conducting the research as part of his PhD in Public Health. His supervisors are Dr Te Kani Kingi, Professor Mason Durie, and Professor Chris Cunningham.

### **Project Description and Invitation**

This research project seeks to identify the strategies and resources utilised by Maori whānau when faced with adversity, whether it be financial struggles, education problems, housing difficulties and/or ill-health. Identifying these culturally relevant strategies and resources will contribute to whānau development. We would greatly appreciate your participation in this research project.

### **Participants**

As well as interviewing a number of whanau (n=15), we are also looking at talking to key informants (n=10) about their views on family resilience, as well as some of the issues that maybe raised by whanau. The key informant content will provide further valuable insight into this notion of family resilience.

### **Project Procedures**

Should you agree to participate, we will need approx 1 hour of your time to participate in an audio taped interview. You can nominate the time and place for the interview.

### **Data Management**

The audio taped interviews will be transcribed and all participants' names will be changed to pseudonyms, to guarantee anonymity. Each participant will also be given the opportunity to review the tape transcripts. The audio tapes and transcripts will be locked in a cabinet in Jordan Waiti's office, where after 5 years the data will be destroyed. Once the study findings have been analysed and summarized, you will be contacted to see if you would like a copy of the project findings.

### **Participant's Rights**

*You are under no obligation to accept this invitation. If you decide to participate, you have the right to:*

- *decline to answer any particular question;*
- *withdraw from the study at any time;*
- *ask any questions about the study at any time during participation;*
- *provide information on the understanding that your name will not be used unless you give permission to the researcher;*
- *be given access to a summary of the project findings when it is concluded.*
- *ask for the recorder to be turned off at any time during the interview.*

## **Project Contacts**

If you have any questions about the project, either now or in the future, please feel free to contact:

Lead Researcher: Jordan Waiti,  
Te Pumanawa Hauora, Massey University Wellington.  
(04) 385 5924, 027 623 7243

Supervisor: Dr Te Kani Kingi  
Te Mata o Te Tau, Massey University Wellington  
(04) 380 0620

This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern A, Application \_09\_/64\_\_ . If you have any concerns about the conduct of this research, please contact Professor Julie Boddy, Chair, Massey University Human Ethics Committee: Southern A, telephone 06 350 5799 x 2541, email [humanethicsoutha@massey.ac.nz](mailto:humanethicsoutha@massey.ac.nz).



## ***Whakaoranga Whanau: Whanau Resilience***

### **KEY INFORMANT CONSENT FORM - INDIVIDUAL**

I have read the Information Sheet and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

1) I agree/do not agree to the interview being sound recorded.

2) I wish/do not wish to have my recordings returned to me.

3) I agree/disagree to participate in this study under the conditions set out in the Information Sheet.

**Signature:** ..... **Date:** .....

**Full Name - printed** .....

..... **Date:** .....  
.....



**MASSEY UNIVERSITY**  
TE KUNENGA KI PŪREHUROA

6 November 2009

Jordan Waiti  
34 Lyall Bay Parade  
Lyall Bay  
**WELLINGTON 6022**

Dear Jordan

**Re: HEC: Southern A Application – 09/64**  
**Whakaoranga Whanau: Whanau resilience**

Thank you for your letter dated 6 November 2009.

On behalf of the Massey University Human Ethics Committee: Southern A, I am pleased to advise you that the ethics of your application are now approved. Approval is for three years. If this project has not been completed within three years from the date of this letter, reapproval must be requested.

If the nature, content, location, procedures or personnel of your approved application change, please advise the Secretary of the Committee.

Yours sincerely

Professor Julie Boddy, Chair  
**Massey University Human Ethics Committee: Southern A**

cc Dr Te Kani Kingi  
Research Centre for Maori  
Health & Development  
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