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Hauora: a socio-cultural perspective.

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

Master of Arts in Psychology at Massey University

Charles Smith Olson 1993
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HE MIHIMIHI

Ko Tararua te manga,
kO Oroua te awa,
ko Ngati Kauwhata te iwi.
Tihei mauri ora,
ki te whaeao ki te ao marama.
E nga mana e nga reo,
he mihi tenei na te ngakau iti.
Tuatahi me mihi au ki te wahi ngaro.
Tuarua ki te hunga kua mene
ki te po haere, moe mai i roto i te ariki.
Kati me kii he kohia tenei pukapuka hei titiro ma koutou.
Ko te kupu whakamutunga,
ka tapae atu tenei pukapuka
hei tohu whakamaumahara ki a Charles Smith Brown.
Otira kua takoto ia ki te rua koiwia ona matua tupuna.
Haere e pa i te tai o te ata mo te tai o te ahiahi taua tutaki au.
No reira ratou ki a ratou.
Tatou ki a tatou tena tatou katoa.
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Naku noa,

Charles Olson.
ABSTRACT

The present study investigates the role that socio-cultural factors have had on the health of Maori. To date most explanations for observed health disparities between Maori and non-Maori have been found to be inadequate and may actually be due to socio-cultural factors. Supporting this suggestion are health differences between younger and older Maori since the urbanisation of the 1950's and the similarities Maori have with other ethnic minorities globally. Measures of Maoritanga were created in the present study and completed by 128 subjects. These were used to divide the sample into acculturated, partially acculturated and enculturated Maori. Groups differing in enculturation, and gender, were compared on a number of health issues. Health was assessed in terms of subjective well-being, general distress, physical symptoms, and chronic illness. Utilisation of Pakeha and Maori health systems were also examined as well as five health behaviours that have been found to differ between Maori and non-Maori. Although the Maoritanga measure appeared to be highly reliable, it failed to find any health differences between levels of enculturation. However, females with low self-reported Maoritanga were found to exhibit significantly more physical symptoms and general distress than females with high self-reported Maoritanga. For the five health behaviours, differences were found between males and females but not between levels of enculturation. There were some differences in the way that different Maori utilised Pakeha and Maori health systems. It appears that culture does have an important role in the health of Maori consequently more indepth investigation is required.
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I, like many other Maori, was brought up in a Pakeha environment both domestically and educationally. It was an environment that was totally devoid of any cultural aspect Maori. I was the perfect example of a Maori, through generations of progressive assimilation, that had become 'Pakehaified'. But what does this mean exactly? Does it mean that I can forget the racial taunts and jibes I got as kid and still sometimes get today? Does it mean that I can forget my cultural ancestry which was so effectively rubbish during my school years? Does it mean, because of this cultural conditioning that I got as a kid, that I didn't need to feel ashamed to be a Maori? Does it mean that I can forget my salient physical characteristics such as my skin colour, the black hair, the brown eyes, and the thick lips? Does it mean that I can also forget that there are Maori who are culturally distinct from me who have retained a sense of pride in being Maori. Does it mean that I can forget the high failure rate of Maori in the Pakeha education system, that half the prison population is Maori and that the majority of Maori are in the two lowest socioeconomic classes? No, all of these issues remain with all Maori including a so called acculturated Maori. It's there every moment of every day, it's in the mirror, in the papers, on the street and in day to day relationships with both Maori and Pakeha.

All Maori, have been socially and culturally disadvantaged in Aotearoa, including Maori who have become acculturated to the Pakeha lifestyle. Contrary to what many people may believe, to be an acculturated Maori is not advantageous, it doesn't allow one to have a 'foot' in both the Pakeha and Maori worlds. For some Maori being acculturated can be personally demeaning. A person in such a situation is liable to view themselves as a non-identity as they are still called a Maori by Pakeha and sometimes an uncle Tom by some Maori. To be an acculturated Maori is to be an 'Honorary Pakeha' while simultaneously being a 'Clayton’s Maori', a person who is not quite Pakeha and yet not quite Maori. A person in such a situation is in danger of feeling inadequate in both Pakeha and Maori society. The result can be a series of negative outcomes some of which include self blame, guilt, anger, and self-destructive behaviour. In one way or another I have experienced or seen all of the above, either in my own life or in the lives of other Maori around me. For some strange reason Maori often seek the
company of others who have a background similar to their own. Maybe it is not so surprising that we have Maori gangs, and they adopt names such as the 'Mongrel Mob'.

This thesis is from a perspective of a Maori who has been acculturated and it is the accumulation of not two years work but of more than 30 years of living in Aotearoa. Hopefully it will provide not just Pakeha with a better understanding of why the Maori renaissance is so important, but also Maori like myself, with a better understanding of what may have occurred in their own lives.
'Take away a people's language and you take away their identity.
Take away a people's culture and you take away their dignity.'