

Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.

***Wairua and Wellbeing:
Exploratory perspectives from Wāhine
Māori***

**A thesis
presented in partial fulfilment of the requirements for a
Master of Science
In
Psychology
At Massey University, Albany Campus,
New Zealand.**

Paulette Ripikoi

2015

ACKNOWLEDGEMENTS

Whakataka te hau ki te uru

Whakataka te hau ki te tonga

Kia mākinakina ki uta

Kia mātaratara ki tai

E hi ake ana te ātakura, he tio, he huka, he hauhu

Haumi e! Hui e! Tāiki e!¹

Ko Panguru me Kohukohunui ngā maunga

Ko Piako te awa

Ko Hokianga me Tipaka ngā moana

Ko Ngāti Manawa me Ngāti Taurua ngā hapū

Ko Te Rarawa me Ngāti Paoa ngā iwi

Ko Tamatea me Makomako ngā marae

Ko Lorraine Baldock rāua ko Colin Ripikoi ōku mātua

Ko Paulette Ripikoi ahau.²

I would like to acknowledge and thank the eight participants for your generosity and courage in sharing very personal and private experiences. I am humbled by the insight, integrity and aroha in which you all shared your stories and I feel privileged to have been entrusted with these beautiful taonga. Each interview was a wairua experience in itself and I am deeply grateful and honoured to have shared

¹ A karakia (prayer) to begin this research.

² Acknowledgement of the mountains, river, seas, sub-tribes, tribes, marae, and people that I belong to.

them with you. You have all given me a deeper understanding of our culture and also of myself. I hope this thesis does justice to your aspirations to enhance the wellbeing of our people. Nā tō rourou nā taku rourou ka ora ai te iwi.³

To my supervisors, thank you both for sharing your knowledge and expertise in your fields and for your time, valuable feedback and advice. Dr Hukarere Valentine, your ability to help me understand my own wairua experiences and explain many of the complicated concepts of Te Ao Māori has been greatly appreciated, as was your ability to understand my cryptic questions. Dr Lily George I am deeply grateful for the many years of support and opportunities you have given me. Your dedication and passion for the wellbeing of our people and our wāhine in particular has been a great inspiration and your attention to detail and academic expertise is sincerely appreciated.

I would like to express my gratitude to the Board of Trustees of the Mana Wahine Programme for allowing this research to take place. Also to Massey University for the Purehūroa and Te Rau Puawai scholarships which have provided enormous support throughout my time as a student at Massey. My gratitude also goes to the inspiring and generous women at the New Zealand Federation of Graduate Women and also to Ngā Pae o te Māramatanga for their research awards. I am grateful to all of these organisations and their members for the encouragement, networking opportunities, financial assistance and the many friends I have made along the way.

Thank you to my friends, work colleagues and management at the New Zealand Fire Service who have supported me and accommodated for my study over the past 11 years. To those of you who endured hours of my rambling while pretending to be interested, kept me sane with your banter, encouraged me when I was losing focus, proof read my work, participated in surveys, and tested me for exams, you know who are, thank you all so much!

To my whānau and friends, thank you all for looking after my spiritual and emotional wellbeing. Your support, encouragement, patience and understanding have been very much appreciated. Thank you for our many conversations about

³Whakataukī (Proverb): With your food basket and my food basket the people will thrive

wairua and our beautiful culture and for reminding me to find balance in my own life. My love to you all.

Finally to my late father Colin Ripikoi and my grandmother Vera Baldock, who are with me always, through life and in death you have both taught me the importance and beauty of wairua and faith, thank you.

ABSTRACT

There are significant health disparities between Māori (Indigenous people of New Zealand) and non-Māori in Aotearoa (New Zealand). Initiatives to address these issues include (re)connection to Te Ao Māori (Māori world view) and the integration of Māori health perspectives within the New Zealand health system. Although wairua (Māori spirituality) is recognised as being crucial to the oranga (wellbeing) of Māori, it is not very well understood and there is little research on how wairua is manifested within this context.

The aim of this research was to enhance the understanding of wairua and highlight its importance to the wellbeing of Māori wāhine (Māori women). Guided by a kaupapa Māori (Māori cultural ideologies) approach, this research utilises narrative inquiry to explore the perspectives of eight wāhine Māori about what wairua means to them and their wellbeing, and how it is actualised in their daily lives in contemporary Aotearoa. These wāhine have all participated in a mana wahine (Māori feminist discourse, authority, influence, power of women) programme designed to enhance the wairua of wāhine by (re) connecting them to Te Ao Māori.

Thematic analysis was employed identifying three key themes; wairua, oranga and mana wahine. Further analysis revealed that these three main themes can be understood as the connection to: Wairua, Tāngata (people), Whenua (land), Tūpuna (ancestors) and Atua (God/deities). This connection was described by the participants as vital to their wellbeing through providing a sense of belonging, strength, self-determination, support, resilience, stability, empowerment, cultural identity, self-respect, motivation, guidance, and self-efficacy. Wairua was described as a spiritual essence, an intuitive knowing, a higher power or Atua. Access to wairua was through cosmology narratives and tikanga (customs) such as karakia (prayer), karanga (ceremonial call), raranga (weaving) and waiata (singing).

The purpose of this research was to explore Māori perspectives of wellbeing and enhance cultural understanding. Implications for the findings advocate (re)connection to Te Ao Māori and the integration of traditional knowledge with

medical science within Māori mental health services as pathways to positive health outcomes for tāngata whaiora (Māori mental health service users). While recognising the diversity of Māori in their desire to participate in Te Ao Māori, the choice to accessing it should still be made available.

CONTENTS

ACKNOWLEDGEMENTS	i
ABSTRACT	iv
CONTENTS	vi
LIST OF TABLES	ix
CHAPTER ONE: INTRODUCTION	1
1.1 Introduction	1
1.2 Aims	2
1.3. Chapter Outlines	2
1.4 Conclusion	3
CHAPTER TWO: LITERATURE REVIEW	5
2.1 Introduction	5
2.2 Socio-Historical Background	6
2.3 Mana wahine.....	11
2.3.1 Māori Concepts	11
2.3.2 Cosmology	14
2.3.3 Te Ao Tawhito (Ancient Māori World).....	15
2.3.4 Effects of Colonisation	17
2.3.5 Te Mana o te Wahine.....	18
2.4 Oranga (Wellbeing)	21
2.4.1 Te Ao Māori (Māori world view)	21
2.4.2 Te Ao Tawhito (Ancient Māori World).....	22
2.4.3 Tohunga (Māori Healers).....	23
2.4.4 Māori Views and Western Views of Health	25
2.4.5 Māori Health Models	26
2.5 Wairuatanga (Spirituality).....	27
2.5.1 Exploring Wairua	27
2.5.2 Wairua and Oranga	29
2.6 Māori mental health: Integrating traditional and medical knowledge	32
2.6.1 Māori Mental Health.....	33

2.6.2 Māori mental health needs	33
2.6.3 Government Initiatives	34
2.6.4 Integration of Perspectives	34
2.7 Conclusion	35
CHAPTER THREE: METHODOLOGY	37
3.1 Introduction	37
3.2 Methodology	38
3.2.1 Mātauranga Māori	38
3.2.2 Kaupapa Māori Research	39
3.2.3 Narrative Inquiry	41
3.3 Methods.....	42
3.3.1 Consultation	42
3.3.2 Wāhine - Participants.....	43
3.3.3 Semi-structured Interviews	45
3.3.4 Recording and Transcripts	47
3.3.5 Journal	48
3.3.6 Thematic Analysis.....	48
3.4 Ethics	51
3.4.1 Researching Māori knowledge	51
3.4.2 Confidentiality	53
3.4.3 Safety of the Wāhine.....	54
3.4.4 Dissemination	54
3.5 Conclusion	55
CHAPTER FOUR: KEY FINDINGS.....	56
4.1 Introduction	56
4.2 Theme 1: Wairua	57
4.2.1 Understandings of Wairua.....	57
4.2.2 Wairua and Religion	65
4.3 Theme 2: Wellbeing	69
4.3.1 Understandings of Wellbeing.....	69
4.4 Theme 3: Mana wahine	78
4.4.1 Understandings of Mana wahine	78

4.5 Conclusion	87
CHAPTER FIVE: ANALYSIS.....	90
5.1 Introduction.....	90
5.2 Connection to Wairua.....	90
5.3 Connection to Tāngata	94
5.4 Connection to Whenua	97
5.5 Connection to Tūpuna.....	100
5.6 Connection to Atua	103
5.7 Conclusion	104
CHAPTER SIX: CONCLUDING THOUGHTS	107
6.1 Introduction.....	107
6.2 Limitations.....	108
6.3 Implications	109
6.4 Conclusion	109
References.....	111
Appendices	127
Appendix A: Massey University ethics approval.....	127
Appendix B: Information Sheet.....	128
Appendix C: Interview Schedule.....	130
Appendix D: Participant Consent Form.....	131
Appendix E: Authority for the release of transcripts.....	132
Appendix F: Glossary.....	133

LIST OF TABLES

Table 1: Summary Table of Research Results.....	50
---	----

CHAPTER ONE: INTRODUCTION

1.1 Introduction

Māori are over-represented in all negative health, social, educational and economic indicators (Davies & Jackson, 1994; Oakley Browne, Wells, & Scott, 2006). These disconcerting disparities highlight the urgency to find culturally appropriate solutions. Essential to understanding this predicament is the acknowledgement of the socio historical context of colonisation and the demise of Māori world views. Māori perspectives of health for example are based on the balancing between the physical and spiritual dimensions of human existence. Wairua in particular has been described as one of the most important aspect of Māori wellbeing (Jones, 2000; in Royal, 2003; Simmonds, 2011). It is the basis for where good health begins and is essential to all things Māori (Pihama, 2001).

Wairua is recognised as important to Māori wellbeing as illustrated in current government health initiatives such as *He Korowai Oranga* (Durie, 2014; Ministry of Health, 2014), and *Te Puāwaiwhero* (Ministry of Health, 2008). However it is not well comprehended or integrated within clinical practice (Durie, 2011). Providing understandings of wairua and how it is important to Māori wellbeing may contribute toward this goal. Wairua however is elusive, complex, and subjective, making it difficult to define (Valentine, 2009). Therefore an appropriate avenue to understanding wairua could be to explore the perspectives and personal experiences of those who live within these realities.

The narratives of eight wāhine are explored in this research project. They were all involved in a Mana Wahine Programme which was designed to restore and enhance their wairua through (re)connection to Te Ao Māori. The narratives shared by these participants are about some of the physical and spiritual realities of wāhine Māori living within contemporary New Zealand. Their understandings and experiences demonstrate how wairua connects them to those things that they most value.

1.2 Aims

This research aims to explore the understandings and experiences of wairua and wellbeing of the participants. The purpose of the research is to enhance understanding into how and why wairua is essential to their sense of wellbeing and in doing so, to enhance cultural understandings of Māori health perspectives.

The objectives of this thesis are:

- To describe the background factors relevant to understanding a Māori world view and in particular Māori views of wellbeing and wairua. This includes the socioeconomic history of Māori along with the current status of Māori health and Māori mental health.
- To explore the perspectives and experiences of the participants on wairua, oranga and mana wahine.
- To explore how wairua and wellbeing manifest within the lives of the participants.

In this research it is argued that wairua is crucial to the wellbeing of Māori highlighting the necessity for understanding and acknowledging this important aspect of Māori world views and perspectives of health.

The research question therefore asks: *What are the conceptualisations and experiences of wairua and oranga from the perspectives of wāhine living in contemporary Aotearoa?*

1.3. Chapter Outlines

Chapter One/Introduction provides an overview of the background, motivations, aims and rationale for conducting research on wairua and wellbeing. It gives a brief description of the participants and consequently the perspectives from which the main conceptualisations will be viewed. The overall objective to enhance the understanding of wairua and Māori perspectives of health is briefly explained.

Chapter Two/Literature Review follows on to review the socio-historical context in which wairua and oranga will be discussed. The effects of colonisation and the extent to which Māori are over-represented in all negative health and social statistics are described. The complexities of mana wahine are explained to provide an understanding of the history of Māori women and their continued journey toward empowerment and self-determination. The review concludes with a discussion on the state of Māori mental health in Aotearoa and the importance of integrating traditional and medical knowledge.

Chapter Three/Methods discusses the methodologies and methods that were utilised in this research. Mātauranga Māori (Māori knowledge) is explained, revealing the importance of using Kaupapa Māori Research (research that takes for granted the legitimacy of mātauranga Māori) as a methodology. Narrative inquiry also informs this research and its appropriateness for its use is discussed. The methods used and ethical considerations that were taken into account conclude this chapter.

Chapter Four/Key Findings presents the main themes that were found from the initial analysis of the interviews. Presented under the three main themes of wairua, oranga and mana wahine, this chapter reveals the many similarities and diversities of understanding and experiences of these concepts. This chapter provides an insight into these complex aspects of Te Ao Māori.

Chapter Five/Analysis offers a further analysis of the research findings which demonstrates how the three main themes interconnect. As evidenced in the previous chapter and reflective of Māori holistic views, these themes overlapped and a distinct separation into specific groups was impossible and unnecessary.

Chapter Six/Conclusions Following from this is a discussion of the limitations, implications and the conclusions of this research.

1.4 Conclusion

Wairua is an important aspect of Māori wellbeing and provides a sense of connection to those things held important within Te Ao Māori. More specifically,

wāhine perspectives of wairua and oranga are immersed in notions of mana wahine. Highlighting the importance of Māori perspectives of health rejects cultural deficit theorising⁴ (Bishop, 1999) and focuses on the potential that is found in Te Ao Māori. It is hoped that through sharing these lived experiences and conceptualisations of wairua and oranga that understanding of Māori health perspectives will be enhanced and promoted and mātauranga Māori acknowledged. The following chapter will review the literature on Māori world views, wāhine, oranga and wairua.

⁴ Cultural deficit theory is the perspective that individuals or groups from a minority culture are dysfunctional and deficient in comparison to the dominant majority group.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

To understand wairua and oranga from the perspective of wāhine, it is necessary to first understand their realities. This review will journey through Te Ao Māori and the demise of Māori knowledge and ways of being through to social, economic and health disparities that Māori experience today. The impact these inequalities have had on Māori mental health are discussed as well as the need for providing culturally appropriate mental health services that incorporate Māori perspectives of wellbeing.

The first section of this chapter will explain the socio-historical background that provides a context in which to view the main themes: wairua, oranga and mana wahine. It provides an overview of the journey of Māori people from colonisation to the present and the ongoing campaign for self-determination. Reference to *Te Tiriti o Waitangi* (the Treaty of Waitangi) and the subsequent breaches of the Treaty illustrate the adverse effects of colonisation, in particular on Māori autonomy and on the current inequities in health and wellbeing.

This is followed by a description of the world of Māori women and the concept of mana wahine. Working definitions of the main concepts for this chapter are explained to illustrate their complexity, depth and multiple meanings. Cosmology narratives underpin the basis of Māori realities and a Māori world view. It explains the beginning of creation and is therefore the starting point for which the journey of mana wahine is described. The roles and responsibilities of wāhine in traditional Māori society illustrate the reverence with which they were held within their communities, and their influential positions in the realm of wairua. The effect of colonisation on mana wahine and the resulting disconnection from their roles, their land, whānau (family) and culture is then discussed. Examples of mana wahine are illustrated through three prominent wāhine leaders, and finally the importance for wāhine to reconnect to the knowledge of mana wahine is suggested.

Māori holistic views are then described through cosmology narratives, followed by traditional systems and concepts of health and wellbeing. The realm of the tohunga (Māori healers) and their traditional practices are described, through to their practices today. The main differences between Māori and western views of health are acknowledged, followed by a description of two well-known Māori health models used in contemporary Aotearoa.

An exploration of wairua is then provided, its complexities, depth, how it is intertwined with all things Māori, and how colonisation may have influenced perceptions of wairua. The importance of wairua in the context of oranga is then discussed and various concepts explained. A review of the current state of Māori mental health in Aotearoa is discussed. Māori mental health needs and government initiatives to address them are reviewed. Finally, suggestions are made for the potential benefits of integrating both medical science and traditional knowledge.

2.2 Socio-Historical Background

Inequities in health, avoidable health inequalities, arise because of the circumstances in which people grow, live, work, and age, and the systems put in place to deal with illness. The conditions in which people live and die are, in turn, shaped by political, social, and economic forces. Social and economic policies have a determining impact on whether a child can grow and develop to its full potential and live a flourishing life, or whether its life will be blighted. (World Health Organisation, 2008)

Māori are the indigenous peoples of Aotearoa originating from Polynesian descent, and arriving in Aotearoa around 1000 CE, approximately 800 years before the arrival of the first British settlers (Durie, 2009). Today Māori make up approximately 15% of a population of just over 4.2 million (Statistics New Zealand, 2013) and experience disparities in standards of health that are almost three times higher for Māori in nearly every diagnostic category (Durie, 2011). To understand these health inequities it is helpful and necessary to first understand the history of colonisation in Aotearoa (Reid & Robson, 2006).

Reid & Robson (2006) explain that colonisation is essentially the misappropriation of power and resources of the indigenous peoples by the new settlers. This transfer of power is enabled through the introduction of systems that control and distribute resources, privileging those who construct and maintain it. A main theme of colonisation was to create a new history (Reid & Robson, 2006), impose a new culture (Tuffin, 2008), and marginalise the knowledge, practices and history of the indigenous peoples (Reid & Robson, 2006). Cultural identity for many indigenous peoples is an essential prerequisite for good health (Best Practice Journal, 2008) and research has shown deculturation⁵ has been associated with poor health and acculturation⁶ with good health (Durie, 2001; Marie, Fergusson & Boden, 2008).

Many indigenous cultures throughout the world have suffered the adverse effects of colonisation (Commission on Social Determinants of Health, 2007, Mehl-Madrona, 2009; Priest, Mackean, Davis, Briggs, & Waters, 2012; Wilson, Rosenberg, & Abonyi, 2011) including the indigenous peoples of Aotearoa (Durie, 2011; Reid & Robson, 2006; Tuffin, 2008). There was a dramatic decline in the Māori population from an estimated 200,000 in 1800 to only 45,000 people in 1901 (Durie, 2011, Pool, 1991). Land confiscation and devaluation of the language and culture resulted in economic and social disparities and a lack of political autonomy that is still evident today (Durie, 2011). This all occurred despite instructions in 1839 from Lord Normanby, the Colonial Secretary, that in the process of acquiring land for settlement "Māori were not to be unfairly marginalised by British settlement and that their well-being was (to be) ensured" (Durie, 1999b, p. 82). This resulted in the signing of *Te Tiriti o Waitangi* in 1840 which was an agreement between the British Crown and Māori chiefs from various tribes in Aotearoa supposedly for a partnership and sharing of the land (Tuffin, 2008).

Te Tiriti o Waitangi has three Articles and was first drafted in English and then translated by one of the missionaries into te reo Māori (Māori language), resulting in two very different understandings (Durie, 1999b). In Article 1, the English version states that Māori gave the Queen "all rights and powers of sovereignty"

⁵ Deculturation is the process by which aspects of one culture is lost after contact with another one.

⁶ Acculturation is the process of adopting the cultural traits and social patterns of another group

over the land (Orange, 2013, p. 39). In the Māori version the Queen was to have "te kāwanatanga katoa" (the complete governance), over their land (Orange, 2013, p. 38). The differences in translations are in the terms "sovereignty" which for the British implied the full and exclusive transfer of power to the Crown and the term "te kāwanatanga" which for Māori is governance with an "administrative authority" (Durie, 1999b).

In Article 2, the English version states that Māori leaders and people were guaranteed "exclusive and undisturbed possession of their lands and estates, forests, fisheries, and other properties" (Orange, 2013, p. 39). The Māori text however guaranteed "te tino rangatiratanga" (self-determination, sovereignty), which ensured them the complete exercise of their chieftainship over "taonga katoa" (all of their treasures). Tino rangatiratanga acknowledges the authority of the chiefs and "taonga katoa" referred to the protection of cultural, social and economic resources as well as material properties (Durie, 1999b). In Article 3 of both versions, Māori were to have "all the Rights and Privileges of British Subjects" (Orange, 2013, p. 39). From these translations many Māori thought they were agreeing to the Crown's government in exchange for protection while maintaining authority over their own affairs (Waitangi Tribunal, n.d.). There was an expectation that Māori would have full citizen rights and therefore would be equal partners in the participation of all functions of the government (Rucklidge & O'Driscoll, 2007).

Shortly after its signing, the Crown began a long history of breaches of the Treaty and made legislative rulings that directly undermined Māori culture and world views (Tuffin, 2008). In recognition of the many breaches of the Treaty, in 1975 the Treaty of Waitangi Act established the Waitangi Tribunal as a permanent commission of inquiry for claims by Māori relating to these breaches (Waitangi Tribunal, n.d.). One criticism of this initiative however, was that the Waitangi Tribunal could only make non-binding recommendations to the government regarding these breaches (Durie, 1999b).

Nevertheless, the Treaty came to have more relevance to Aotearoa society from that time. In 1988, the Royal Commission on Social Policy recommended three main principles of the Treaty with regard to social policy; participation,

partnership and protection (Durie, 1999b). Partnership implied a "working relationship between Māori and government agencies" (Durie, 1999b, p. 85). Participation referred to the involvement of Māori at policy making levels and in service provision. Protection was about Māori having the same rights and privileges as other New Zealanders, including the promotion of health and prevention of illness (Durie, 1999b). Recent statistics on Māori health however reflect a reality that is far from these principles.

Research shows that socio-economic factors are major determinants for poor health (Crampton, Salmond, Blakely & Howden-Chapman, 2000; Durie, 2000; Ministry of Health, 2010) and for Māori, health conditions are significantly lower than for non-Māori (Durie, 2011; Mark & Lyons, 2010; Royal, 2003; Ministry of Health, 2006, 2010). Reflected in recent health and social statistics in 2006, these disparities between Māori and non-Māori are still very evident (Ministry of Health, 2010):

- Suicide mortality rate of 18.8% for Māori compared to 9.5% for non-Māori (p. 45);
- High or very high probability of anxiety or depressive disorder was 11.2% for Māori and 6.0 % for non-Māori (p. 46);
- Māori are significantly more likely than non-Māori to be hospitalised for intentional self-harm (p. 44);
- Only 3% of Māori in comparison with 12% non-Māori live in the least deprived neighbourhoods, whereas 24% of Māori in comparison with 7% of non-Māori live in the most deprived neighbourhoods (p. 15).
- Household crowding - 22.8% Māori and 7.9% non-Māori (p. 17);
- Stroke mortality rate was more than one and a half times for Māori than non-Māori (p. 33). (Ministry of Health, 2010).

Statistics from other sources paint an equally damning picture:

- Unemployment for Māori in 2013 was 14.1% compared to the unemployment rate for all people, which was 6.8% in the same year (Ministry of Business, Innovation & Employment, 2013);

- The Māori prison population in December 2014 was 50.8% compared to 33.2% European, 11.3% Pacific Peoples, 3.0% Asian, 0.9% Other, and 0.8% Unknown (Department of Corrections, 2014).
- In comparison to non-Māori, the overall academic achievement levels of Māori students is low; their rate of suspension from school is 3 times higher, they are over-represented in special education programmes for behavioural issues, leave school earlier with less qualifications and enrol in tertiary education in lower proportions (Bishop, Berryman, Cavanagh and Teddy, 2009, p. 1).

In a report conducted by the Ministry of Health (2013), half of all Māori women who were surveyed had experienced unmet primary health care. Statistics from the Ministry of Health (2010) expose appalling health disparities for Māori women:

- Hospitalisation rates for ischaemic heart disease for Māori females are twice that of non-Māori females (p. 34);
- Breast cancer registration rate was 1.3 times and breast cancer mortality almost twice that of non-Māori females (p. 36);
- Cervical cancer registration was twice the rate and mortality rates three and half times that of non-Māori females (p. 36), lung cancer registration and mortality rates over four times that of non-Māori females (p. 36);
- Hospitalisation for chronic obstructive pulmonary disease rates were five times higher, mortality rates over three times higher for Māori females than non-Māori females (p. 39);
- Māori females had an assault and attempted homicide hospitalisation rate over six and a half times higher than that of non-Māori females (p. 47);
- Sudden infant death syndrome (SIDS) mortality rate was five times higher than that of non-Māori infants, the disparity greatest for Māori female infants with a mortality rate six times higher (p. 49).

Although the causes for these statistics were not fully established, *Te Rau Hinengaro: The New Zealand mental health survey 2003/2004* found that higher

prevalence of mental health disorder was associated with low household income and fewer years of education (Baxter, King, Tapsell, & Durie, 2006). Reid and Robson (2006) note that some commentators in the past have claimed the problem lies with Māori through "inferior genes, intellect, education, aptitude, ability, effort, or luck" (p. 28), rather than looking at the systematic bias for the inequities of health. However according to the World Health Organisation (2007), perpetual inequities of health conditions for indigenous peoples reflect the relationship between health and power, social participation and empowerment. Māori continue today to struggle for self-determination, greater autonomy and recognition as equal partners with the ruling government of Aotearoa.

2.3 Mana wahine

The socio-historical background for Māori has been described in the previous section. The review will now focus more specifically on the socio-historical context for Māori women as it is their narratives that are acknowledged in this research. It is necessary to first provide an understanding of mana wahine to convey the complexities inherent in this term that interconnect and overlap with other complex Māori concepts discussed throughout this research.

2.3.1 Māori Concepts

Explaining Māori terms in English can be difficult and limiting as these terms often have multiple meanings and understandings that are complex and immersed in mātauranga Māori (Simmonds, 2011). Furthermore, literal translations from one language to another can be over-simplified, losing depth of meaning and relevancy to cultural knowledge (Pihama, 2001). Some of these understandings differ from iwi to iwi, to hapū (sub-tribe), and to whānau. According to George (2012) although many commonalities are shared, "a Māori world view....has multiple perspectives" (p. 435). The nuances of these views are illustrated in the richness and depth of te reo Māori. Notwithstanding these complexities in translating between cultures, I attempt here to provide working definitions of the main concepts with which I am working.

Mana wahine is comprised of two kupu (words); “mana”, and “wāhine”. Various dictionary translations of the term “mana” include; integrity, charisma, authority, prestige, influence, status, spiritual power and control (Moorfield, 2003; Ryan, 2008; Williams, 1957). These definitions give a basic understanding of the term, but fall short in portraying the intricacies and value-laden nature of te reo Māori. Numerous authors have described the complex meanings of mana as being “multi-layered, relational, spatial and informed by spiritual influences” (Simmonds, 2011, p. 18). Marsden (in Royal, 2003) described mana as the endowment of spiritual power to act on behalf of and in accordance with the will of the gods and something that a person earned through their deeds in life.

Waitere and Johnston (2009) explain how mana is an essential element to the relationships of people and their links to spiritual, cosmological, physical, and human dimensions. Tate (2010) explains the complexities of mana and its inextricable connection with tapu (sacred):

Mana is spiritual power, authority, and prestige and status. Once it comes into existence, which it derives from tapu as its source, it is either power in potentiality [te mana i] or power in operation [te mana o]...Mana is tapu centred. In every case the mana deriving from tapu acts to manifest, address, enhance, sustain and restore its own tapu and the tapu of other beings until the goal of processing tapu in its fullness is reached. (p. 84)

It is difficult to talk about mana without also mentioning tapu which is another intricate term with a wide range of understandings. Dictionary translations include: sacred, forbidden, restrictions, inaccessible and beyond one’s power (Moorfield, 2003; Williams, 1957). According to Marsden (in Royal, 2003), tapu means that a person, place or thing is sacred or untouchable and can no longer be put to common use. Tate (2010), explains tapu as being “the restricted or controlled access [to protect against violation] to other beings: Atua, tāngata, and whenua” (p. 44). Understandings of tapu differ in accordance with the circumstances under which it is being exercised (August, 2005), however, Pere (as cited in August, 2005) explains that irrespective of the situation or context, tapu was a form of social control that was used to protect people and property. August

(2005) discusses tapu in the context of the sacredness, power, connection to Atua and the life-giving aspects of wāhine.

The *Te aka online Māori dictionary* translation for “wāhine” is “women, females, ladies, wives”. This simplified definition however is loaded with western cultural understandings that do not reflect Māori cultural understandings inherent in this kupu. Wāhine consists of two concepts; “wā” and “hine”. Wā translates to concepts of time and space, hine to a female essence, reflecting a specific stage that Māori women go through during their lifetime (Pihama, 2001). There are others; kōtiro (girl), tuakana (elder sister of a female), teina (younger sister of a female), whaea (mother, aunt) and kuia (grandmother, elderly woman), reflecting different stages of a life journey, roles, or relationships (Pihama, 2001). There are similar terms for the stages of life that tāne (Māori men) go through.

Pihama (2001) explains that wāhine and tāne should not be viewed with the same polarity that exists in western views of women and men as it does not do justice to the multiple inter-relationships in Māori society, nor of the various roles and stages of life that are inherent in these terms. Mana wahine is often regarded as “Māori feminism” (Tuhiwai Smith, as cited in Pihama, 2001), though for many Māori women, the term feminism has western notions that focus on gender issues that do not give space for Māori concepts or Māori women's voices (Pihama, 2001). Neither does western feminism include discourses around wairua, which is an essential element to mana wahine (Pihama, 2001). According to Simmonds (2011) mana wahine “is about the intersecting spaces of being both Māori and being female; however it does not exist in isolation but is entangled with mana tane (authority, influence, power of men)” (p. 14). It is not about being anti-male (Pihama, 2001; Simmonds, 2011; Te Awekotuku, 1991; Waitere & Johnston, 2009) or “elevating the status of women above men” (Turia, as cited in Herd, 2006, p. 8). Waitere and Johnston (2009) describe mana wahine as recognising the authority, dignity and power (the mana) of Māori women. Further, Simmonds (2011) describes mana wahine as:

a space where Māori women can, on our own terms and in our own way, (re)define and (re)present the multifarious stories and

experiences of what it means, and what it meant in the past, to be a Māori woman in Aotearoa New Zealand. (p. 12)

2.3.2 Cosmology

It is through whakapapa (genealogy) that we are able to see the assertion of mana wahine and the central positions and influence that wāhine held in Māori society (Pihama, 2001). Whakapapa is not just about genealogy, but also about the history and narratives of tūpuna, connecting all Māori to the beginning of the world, the divine beings, the land and to each other (George, 2012; Smith, 2000). According to August (2005), Māori knowledge about the female body that is passed down through whakapapa from Papa-tū-ā-nuku (Earth Mother) and other atua wāhine (female deities) protects the identity of Māori women. This is evident in particular tikanga that is associated with the protection of the life-giving qualities of women, linking all wāhine to Papa-tū-ā-nuku. In Māori cosmology there are many examples of the importance of female sexuality, and of wāhine as whare tangata (house of humanity/womb) and their mana (Mikaere, 2011).

The importance of female sexuality is made implicit within Māori creation narratives (Mikaere, 2011). Te Kore (Realm of Potential Being/the void) was symbolised as a womb in which Papa-tū-ā-nuku and Rangi-nui (Sky Father) were formed, moving creation into Te Pō (darkness/ignorance/the unknown) (Mikaere, 2011). The separation of Papa-tū-ā-nuku and Rangi-nui by their children moved life into the realm of Te Ao Mārama (The world of light/knowledge) (George, 2010).

The role of women connecting the past, present, and future is represented in the story of Hine-nui-te-pō (goddess of the underworld) and the creation of humankind. Hine-ahu-one (the first earthly woman) was created from red earth in the sexual regions of Papa-tū-ā-nuku by Tāne-mahuta (Mikaere, 2011). Hine-ahu-one and Tāne-mahuta created Hine-tītama, who Tāne-mahuta took as his wife. On discovering that her husband was also her father, Hine-tītama fled to the underworld demanding that Tāne-mahuta stay behind with their children. She

remains in the underworld where is she now known as Hine-nui-te-pō, and waits for her children so she can care for them in death (Mikaere, 2011).

The mana, tapu and sacred authority of women are evident within the exploits of Māui-tikitiki-a-Taranga (Demi god in Māori cosmology). Muri-ranga-whenua (kuia of Māui) held powers for great deeds, courage and adventure, and gifted her jawbone of knowledge to Māui. He was then able to fish up Te Ika-a-Māui (North Island of New Zealand) (Kupenga, Rata, & Nepe, 1990). Mahuika (kuia of Māui) controlled the use of energy, gifting her fingernails to Māui and consequently the ability to create fire (Kupenga et al., 1990). Finally, Hine-nui-te-pō (ancestress of Māui) crushed Māui between her legs as he attempted to reverse the birth process and attain immortality.

2.3.3 Te Ao Tawhito (Ancient Māori World)

In traditional Māori society many women held important leadership roles in politics, the military and in spirituality. Wairua has always been seen as an essential part of all things Māori (Pihama, 2001) and the role of whare tangata was highly revered as being integral to the sustainability of iwi, hapū and whānau due to their ability to create life (Mikaere, 2011). According to Dr Patu Hohepa (in Black & Black, 2011):

The mana of the Atua was instilled in the first woman for her to pass on to future generations. Therefore you need to take care not to trample the mana of women. They are the embodiment of Atua. They are the gene pool of Atua that is instilled in future generations. If we don't look after them properly, future generations will suffer.

The importance of the position of women and values held within Māori culture are reflected in te reo Māori. Māori women's physical realities are interwoven with the spiritual world, and as whare tangata they maintained that connection between these two realms (Pihama, 2001). For example whenua is the kupu for both land and the placenta or afterbirth, representing the responsibilities and connection of both the land and wāhine to nurture and provide sustenance to mankind (Kupenga

et al., 1990; Mikaere, 2011, Pere, 1990; Pihama, 2001). After a child is born, the placenta is buried in Papa-tū-ā-nuku, connecting and sustaining the child's mana tangata (power and status of the people) until the body is returned to earth at death (Kupenga et al., 1990). The structure of Māori society and the ability of wāhine to produce the next generation is linked through the term hapū which can mean either pregnant or sub-tribe (Pihama, 2001).

In the realm of Māori spirituality, wāhine are able to effect whakanoa (make things noa/free from tapu restrictions) any destructive energies (August, 2005) through the power of their own tapu. This can be demonstrated through the role of kaikaranga (ritual caller) where wāhine are responsible for lifting the tapu restrictions to enable manuhiri (visitors, guests) to come onto a marae ātea (courtyard of a wharenuī/meeting house) for the first time (Mikaere, 2003). A marae (complex of buildings that include wharenuī) is considered to be in a state of restriction as it is a sacred place and therefore needs to be protected from violation. Further to this, wāhine are integral to various ceremonies such as the cleansing of whare (house) from spirits. Pouroto Ngaropo (in Black & Black, 2010) explains:

A woman will walk over the threshold first during the cleansing of a whare. Women have mana over two areas, whare mate (house of mourning) and whare ora (house of life). That tradition came from Papa-tū-ā-nuku from Hine-te-iwaiwa (female goddess of childbirth) to lift the tapu of ghosts that remained there.

Men also held equally important roles and the balance of male and female roles was integral to the harmony of Māori society (Mikaere, 1994). It cannot however be assumed whether or not women were oppressed in any way before colonisation. What is clear though is that in Māori society, before the arrival of the Pākehā (New Zealander of European descent), the main values were for the wellbeing of the community and not just the individual (Pere, 1990). Primary support for wāhine was their whānau, and even if married they still belonged to their whānau, maintaining their own names and whakapapa. They were supported with child-rearing and were part of a community, giving them autonomy and the flexibility to do other things such as take on leadership roles (Mikaere, 2011). The

highly influential status of wāhine was also reflected in the fact that some of them signed *Te Tiriti o Waitangi* in 1840 (Orange, 2013).

2.3.4 Effects of Colonisation

The status of wāhine Māori and their roles in society soon changed through the processes of colonisation, marginalisation and the consequent breakdown of iwi, whānau and hapū structures. The Native Lands Act 1862 set up the Native Land Court in 1865 converting traditional communal land holdings to individual titles. This destroyed the collectivism of Māori society and enabled access to Māori land for settlement (Mikaere, 2011). Due to the massive loss of land and inability to continue to sustain themselves, whānau were forced to move to the cities to find work, resulting in nuclear family structures. Consequently Māori women were disconnected from their whānau and hapū, losing their support and the important roles they once held (Law Commission, 1999). Legislation in Aotearoa in the 19th and early-mid 20th centuries reflected assimilation policies and continued to undermine the position of Māori women, forcing them to live within the confines of patriarchal notions. The Tohunga Suppression Act 1907 outlawed traditional spiritual practices and ways of birthing, undermining Māori world views and causing the loss of knowledge around wairua and natural medicines and healing practices (Mikaere, 2011).

In 1873 an amendment was made to the Native Lands Act 1862 which required husbands to approve any deed affected by their Māori wives. However this requirement was not imposed on the husband for his wife's approval (Law Commission, 1999). The Māori Purposes Act 1951, the Māori Affairs Act 1953 and the Marriage Act 1955, contributed to destroying Māori values and social structures by deeming Māori customary marriages invalid. This made Māori women even more vulnerable, isolated from their social support system and making them dependent on their husbands. Both the Adoption Act 1955 and the Guardianship Act 1968 changed the structure and constitution of whānau to suit western notions around the ownership of children by the parents. These Acts disregarded Māori concepts of whāngai (nurture/foster/adopt) and child-rearing practices that involved the support of the wider whānau (Law Commission, 1999).

Early 19th century ethnographers, albeit well meaning, also contributed to repositioning Māori women from roles of leadership to subservience through their reinterpretations of Māori cosmogony (Pihama, 2001). Largely due to their lack of understanding of the structures of Māori society and social relationships, early ethnologists such as Elsdon Best attempted to translate Māori culture from their own cultural views and positioned Māori women as inferior (Pihama, 2001). The missionaries enforced their Christian values and ideas of the obedient colonial wife onto Māori women and sought to “civilise” (Mikaere, 1994, p. 7) and save them from their “pagan ways” (Mikaere, 1994, p. 5). They portrayed Māori women as immoral, wanton, lacking discipline and attractive only when there weren’t any white women available. Imposing shame on their reproductive roles as women undermined the power and sacredness of their role as *whare tangata* (Mikaere, 2011; Simmonds, 2011). Gender balance in Māori society soon became distorted through the assimilation of those patriarchal values and through the processes of colonisation (Mikaere, 2011).

2.3.5 Te Mana o te Wahine

Despite the negative effects of colonisation, land confiscation, cultural suppression, and the many other breaches of *Te Tiriti o Waitangi*, protests against such acts and their effects have been “frequently led by powerful and articulate Māori women” (Kelsey, 1993, p. 233). Two important Māori health movements of the 20th century advocated for Māori determination and concepts of wellbeing and were led by women. They were the Women’s Health League and the Māori Women’s Welfare League. In 1937 the Women’s Health League was formed by a district nurse, Miss Robina T. Cameron, and was supported by various *iwi* to initiate community health schemes that were centred in the *kāinga* (home) and *marae* (Durie, 1999b). The focus was on the health of Māori women and children, and its main aims included the promotion of understanding between Māori and Pākehā women, health education, teaching of Māori arts and crafts, and working in harmony with the local *marae* (Durie, 1999b). It was a supportive and empowering organisation for many Māori women during a time of disconnection from *whānau* that was caused during urbanisation of Māori and World War II (Durie, 1999b).

The Māori Women's Welfare League was established in 1951 with aims that were similar to those of the Women's Health League; to promote understanding between Māori and non-Māori, encourage the practice of Māori culture, and progress Māori welfare (Armstrong & Armstrong, 1991). The League was concerned with health and education disparities between Māori and non-Māori, and advocated for culturally relevant health clinics that were accessible to Māori (Durie, 1999b). The League gave voice to Māori women in the political arena (Durie, 1999b) and advocated self-determination in the health arena (Armstrong & Armstrong, 1991).

Whina Cooper was the first President of the Māori Women's Welfare League in 1951 and held that position for six consecutive years (Ministry of Culture and Heritage, 2014a). Whina managed to inspire and unite wāhine all over the country to establish and support local branches of the League (King, 1983). She advocated for the independence of the League and for Māori to be free to express their Māoritanga (Māori culture, practices and beliefs, way of life) (King, 1983). Whina Cooper dedicated her life to fighting for Māori rights and in her 80th year, led the Māori Land March in 1975. This hīkoi (march) saw over 5,000 people march from Te Hapua near the top of the North Island to Parliament in Wellington, at the bottom of the island (approximately 1,000 km walk) (King, 1983; Ministry for Culture & Heritage, 2014c). On arrival in Wellington Whina Cooper presented a petition to Parliament containing approximately 60,000 signatures in protest against the sale of Māori land (Ministry of Culture, 2014c). In 1981 she was made Dame Commander of the British Empire for her services to the Māori people, and in 1991 became a member the Order of New Zealand (Ministry of Culture & Heritage, 2014a).

Another prominent wāhine and leader was Te Puea Hērangi who led a revival of Māori arts and crafts during the 1930s. Te Puea fought to build an economic base for her people and partial land settlement of Waikato's land grievances during 1946, and led the building of Tūrangawaewae, the central Kīngitanga (Māori King Movement) marae (King, 2003; Ministry for Culture & Heritage, 2005; Papa & Meredith, 2012). According to Durie (1999) Te Puea also sought to combine Māori and western knowledge of health by setting up a hospital in the marae in the early

1900s'. However, she was faced with a health system that had little tolerance for Māori views of wellbeing and although the hospital did not eventuate, she assisted Dr Monk in setting up a medical clinic at Tūrangawaewae Marae in 1946 (Durie, 1999). The clinic resulted in improving the health of Māori within the Waikato region and dispelling their reluctance to consult with doctors (King, 2003).

The Honourable Tariana Turia, a Member of Parliament from 1996 till 2014 (Department of the Prime Minister and Cabinet, 2015), was renowned for speaking on behalf of Māori (Mutu, 2004). She changed New Zealand politics when she resigned from the Labour Party in 2004 in protest against Labour's intention to take ownership of New Zealand's foreshore and seabed, initiating the formation of the Māori Party (Department of the Prime Minister and Cabinet, 2015). She was also the Minister responsible for *Whānau Ora* (a health initiative in New Zealand that is driven by Māori values, family health) which promoted a Māori worldview of health. The Honourable Tariana Turia was made a Dame Companion of the New Zealand Order of Merit in the New Year Honours 2015 for her services as a Member of Parliament (Department of the Prime Minister and Cabinet, 2015).

Marginalisation however, still continues today as Māori women experience social and economic disparities including high unemployment rates, low income (Davies & Jackson, 1994), and over-representation as victims of domestic violence (Law Commission, 1999). Māori women are also twice as likely as non-Māori women to be living in one parent families with dependent children (Law Commission, 1999). Many Māori women are still isolated from their whānau (Mikaere, 1994) and are disconnected from their cultural, social and economic resources of Te Ao Māori (Law Commission, 1999). Access to these resources is fundamental to a secure cultural identity that according to Durie (2005) is a prerequisite for positive health outcomes.

The challenge for Māori, both men and women, according to Mikaere (1994), is to rediscover and reassert tikanga Māori and unlearn the patriarchal views and values that have been forced upon us. Gender balance was central to Māori cosmogony, and by returning to Māori law this imbalance can be addressed along with the social and economic disparities. Similarly, Simmonds (2011) points out the necessity to challenge the "hegemonic discourses and assumptions" (p. 21) that

have marginalised Māori women and to create space for mana wahine knowledge. As Simmonds (2011) concludes:

The ability to (re)claim and (re)centre wairua and whānau discourses from a mana wahine perspective will go a long way towards (re)connecting Māori women to a whakapapa, whenua, and mana that is rightfully theirs. (p. 21)

2.4 Oranga (Wellbeing)

It is evident from the previous section that the journey of wāhine has originated within a highly spiritual existence, from the cosmology narratives through to the devastation of colonial imperialism and the continued struggle for autonomy and self-determination as demonstrated through mana wahine. This section of the review will now provide an overview of holism that is inherent within Te Ao Māori and Māori perspectives of wellbeing. It will describe ancient understandings of holistic health and how that can clash with western models of health that are based on biomedical science. Finally a brief description of two Māori health models that are well known within contemporary Aotearoa will be made.

2.4.1 Te Ao Māori (Māori world view)

Culture influences the way we perceive reality and consequently how we view the world (Royal, 2003). Māori views of reality are based on the interconnectedness of the spiritual realm, the natural environment and people (Royal, 2003; Valentine, 2009) which is a similar perspective held by many other indigenous cultures (Limb & Hodge, 2008; Mehl-Madrona, 2013; Priest et al., 2012). Revealed through Māori cosmology narratives, the balance and harmony of these dimensions of reality are guidelines and explanations for human existence (Royal, 2003). Although there are tribal variations to these narratives, Māori knowledge and values originate from the first stirrings of Te Kore, Te Pō and Te Ao Mārama (Buck, 1950).

Narratives about Papa-tū-ā-nuku, Rangī-nui and the creation of Hine-ahu-one demonstrate an understanding of the inter-relationship of all Māori to the spiritual

realm, the natural environment and to one another. There is no distinct separation between the spiritual and physical realms (Mikaere, 2011). Papa-tū-ā-nuku is an Atua and an ancestor, in which separation from human beings is impossible (Mikaere, 2011). The adventures of Māui, depict social obligations, the relationship between human beings and nature, and the trials, tribulations, the glory and inevitable mortality of being human (Walker, 2004). Marsden and Henare (1992) describe these narratives as a way in which the “ancient seers” (p. 3) of Māori society were able to pass on knowledge encompassing their holistic worldviews and ultimate reality.

2.4.2 Te Ao Tawhito (Ancient Māori World)

This holistic view of life is evident in Māori perceptions and practices of health and wellbeing (Durie, 1984, 2001; Mark & Lyons, 2010; Moon, 2003; Tinirau, Gillies, & Tinirau, 2011). According to Durie (1999b), Māori were able to assess their wellbeing and progress as an iwi and hapū based on the balance of mana atua (spiritual power from the atua), mana tangata, and mana whenua (power from the land, authority over the land). Mana atua, the spiritual realm, was considered to hold the most power and authority. Divine intervention was often attributed to unknown or unexplained diseases and also for the ability to heal. Mana tangata refers to the skills, prestige and abilities of the people and the health of the social and economic state of the community (Durie, 1999b). Mana whenua related to the jurisdiction of land by an iwi and was entrenched in tribal history and legends (Durie, 1999b). Wellbeing was therefore associated with identity, a sense of belonging to the land and iwi, and the sustenance provided by the land to its people.

Prior to European contact Māori society had developed a social and health system based on the concepts of tapu and noa (unrestricted) (Best Practice Journal, 2010). In this context tapu was defined as a person, place, or thing set aside from normal everyday use, signifying restrictions and uncertainty (BPJ, 2010; Durie, 1999b). Breaches of tapu could result in condemnation, physical or mental suffering or even death. Various parts of the body were considered tapu such as the head, heart and genitalia (Durie, 1999b). People who were in states of illness, who were

grieving, performing important work like whakairo (carving) and tāmoko (Māori tattooing) (BPJ, 2010) or women in the post-natal period, were considered “off limits” (Durie, 1999b). Food sources such as fishing grounds were restricted during spawning season, or rāhui (temporary ritual prohibition) would be placed on food sources that were dwindling (Durie, 1999b). Rāhui would also be used for an area that was in a state of tapu such as a part of a river where someone had drowned, and would be lifted after a specified length of time had passed.

Noa is the complementary state to tapu and represents freedom, certainty, relaxed access, and safety (Durie, 1999b; Waitangi Tribunal, 2011). Once danger had passed or food sources had become abundant again, tapu was lifted and replaced with a state of noa. In terms of health, the process for becoming well involved the balancing of tapu and noa of a person (BPJ, 2010). The harmonising of tapu and noa ensured practical measures of hygiene and safety were in place, the community was protected from illness and disease and food supplies were conserved (BPJ, 2010; Durie, 1999b; Waitangi Tribunal, 2011). It also indicated the values inherent within the culture and an appreciation and respect for oneself, each other, and the natural and the spiritual worlds which were played out in everyday life.

2.4.3 Tohunga (Māori Healers)

Prior to European colonisation, tohunga held positions of authority and respect within their whānau and hapū (Jones, 2000). They were required to go through extensive training and were the caretakers of ancient tribal practices in a variety of domains such as healing, carving, and the arts of war (Durie, 1999b). Tohunga were spiritual leaders, the mediators between the physical and spiritual realms and were considered to be very tapu (Rollo, 2013). Diagnosis of an illness did not focus just on the individual but included their relationships with the social, environmental and spiritual realms (Durie, 2001; Jones, 2000). Tohunga would often consult the atua in order to identify violations of tapu which had caused an illness. They would use karakia, rākau rongoā (herbal remedies), mirimiri (a form of massage), water therapy, interpretation of dreams and symbols, surgical

interventions, (Durie, 1999) waiata (song), and taonga puoro (musical instruments) (Rollo, 2013) as part of their healing practices.

The Tohunga Suppression Act in 1907 outlawed Māori healers, health practices and values. This Act undermined the legitimacy of Māori knowledge, forcing tohunga to go underground with their knowledge and practices (Durie, 2001; Simmonds, 2011). Although the Act was repealed in 1964, there was loss of knowledge around sickness and healing and consequently, the suppression of Māori beliefs and values in health (Jones, 2000). Therefore Māori systems of healing, Māori healers and traditional knowledge, were and remain marginalised, privileging the dominance of western biomedicine (Woodard, 2014).

Contributing to the detriment of the tohunga was the introduction of new diseases to Aotearoa due to colonisation (Jones, 2000). Diseases such as measles and influenza wiped out thousands, causing greater decimation to the Māori population than the intertribal musket wars of the early 1800s (Ministry of Culture and Heritage, 2014b). Tohunga who were unfamiliar with these illnesses were unable to provide healing and consequently lost the confidence of their people (Jones, 2000).

Despite these adversities, tohunga still practice today in contemporary Aotearoa, and according to Durie (2009) there is growing interest among Māori for traditional methods of healing. However, tohunga have little recognition in New Zealand's current health system (Baxter et al., 2006; Jones, 2000; Woodard, 2014) which is based on the dominant paradigm of western science and models of health and illness. In a study conducted by Mark and Chamberlain (2012), some healers found that mainstream doctors did not take them seriously, nor reciprocated the recommendation of patients. Other healers expressed their concerns that the authenticity of their work would be compromised through the assimilation of traditional healing methods into mainstream practices (Mark & Chamberlain, 2012). In addition, Durie (2009) maintains that some healers are reluctant to practice openly for fear of being exposed to regulations that may constrain their practices. Conversely, health practitioners might consider Māori perspectives as impractical, lacking in evidence or dangerous if particular diagnoses are ignored (Durie, 2001).

Although Māori healers and western doctors work from fundamentally different values, philosophies and practices, Mark and Chamberlain (2012) suggest that it is possible for them both to work in collaboration. According to Durie (2001) this could be achieved by acknowledging and respecting the integrity, distinctiveness and limitations of both worldviews (Durie, 2009). Furthermore, traditional Māori healing can provide insight into health and wellbeing from an emphasis on spirituality as western medicine can from its focus on physical health (Jones, 2000), thereby utilising two world views in the pursuit for knowledge and best practices in health (Evans, 2008; Jones, 2000; Waitangi Tribunal, 2011).

2.4.4 Māori Views and Western Views of Health

Māori views on health are inter-relational rather than intra-personal, and illness is a reflection of a breakdown between the individual and the wider environment (Durie, 1999b). Māori healers, for example, considered ill health to be a consequence of imbalances between the physical and spiritual realms, emotional blockages, and curses or transgressions from past generations (Mark & Lyons, 2010). Western conceptions of health are based on the dominant biomedical model that focuses more on symptoms and disease (Lowenberg & Davis, 1994; Mark & Lyons, 2010). Although there has been growing acceptance of the link between the mind and body as seen in the evolving field of health psychology (Mark & Lyons, 2010), the Māori spiritual realm which is an essential part of wellbeing for Māori (Jones, 2000; Royal, 2003; Simmonds, 2011) is given less attention.

Māori views of health and wellbeing are based on holistic understandings of reality that encompass the mind, body, spirit and environment (BPJ, 2010; Cram, Smith & Johnstone, 2003; Durie, 2005; Mark & Lyons, 2010; Waitangi Tribunal, 2011). However, some Māori healers considered the mind, body, and spirit connection to be a Pākehā concept (Mark & Lyons, 2010). Traditionally, Māori considered the mind to consist of a spiritual essence that was inter-related with the physical, with one healer describing the mind as a bridge between the spiritual and physical (Mark & Lyons, 2010). Despite agreement from other healers that the concept of “mind” was introduced by Pākehā, the mind is part of their current practice and is now regarded in western terms of cognition (Mark & Lyons, 2010). For example, in

interviews conducted by Ahuriri-Driscoll, Hudson, Bishara, Milne and Stewart (2012), Māori healers considered emotional and cognitive wellbeing as being expressed through a person's "hinengaro" (thoughts and feelings). It is also a dimension of wellbeing that is reflected in current Māori health models.

2.4.5 Māori Health Models

There are various Māori health models that reflect these holistic views and the importance of wairua, the two most commonly used are *Te Whare Tapa Whā* originally developed by Mason Durie in 1984, and *Te Wheke*, developed by Rangimarie Rose Pere in 1984 also (BPJ, 2010). The necessary components for good health are represented as the four walls of a house in *Te Whare Tapa Whā* consisting of taha wairua (spiritual health), taha hinengaro (mental health), taha tinana (physical health) and taha whānau (family health) (Durie, 1999b). All four dimensions need to be healthy to support the house, and if one of them becomes unstable it will affect the other walls and its overall stability. This signifies the interconnectedness of the four dimensions of health on the overall wellbeing of a person. Durie (2005) emphasises the importance of Māori having access to all of these dimensions of Te Ao Māori.

In the *Te Wheke* model, wellbeing is represented in the metaphor of an octopus (Pere, 1984; 1997). The head is the individual or whānau, and the eyes reflect waiora (total wellbeing); the eight tentacles represent dimensions of health that provide sustenance, and are interwoven with each other signifying the inter-relationship of the tentacles and the head. The suckers on each tentacle represent multiple facets within each dimension. The dimensions of wellbeing include wairuatanga (spirituality); hinengaro; taha tinana; whanaungatanga (extended family); mauri (life force in people and objects); mana ake (unique identity of individuals and family); Hā a koro ma, a kui ma (breath of life from forbearers); and whatumanawa (open and healthy expression of emotion) (Pere, 1997).

Whenua is an important aspect of wellbeing for Māori (Tinirau et al., 2011) and is implicit in both *Te Whare Tapa Whā* and *Te Wheke*. Disconnection from ancestral land for example can be an indication of ill health as both the physical and spiritual

well-being of Māori is intertwined with the land (Durie, 1985; Pere, 1990). This is made more explicit in other models, such as *Te Whetū* (The Star) by Mark & Lyons (2010) which includes land as one of the main dimensions of wellbeing due to its potential to cure or cause illness. Land is a point of (re)connection to whānau, hapū and iwi structures (Ahuriri-Driscoll et. al., 2012) such as access to ancestors and as tūrangawaewae (a place to stand) (Palmer, 2004).

Both models emphasise the importance of inter-personal relationships with the whānau and the environment, and the inter-connection of all health dimensions (Palmer 2004; Waldon, 2010). According to McNeil (2009), the focus on access to Te Ao Māori in the *Te Whare Tapa Whā* model acknowledges the effects of colonisation and consequent disconnection that ensued. It is congruent with the main concepts of holistic wellbeing across most iwi, is supported by research and is easy to apply due to its simplicity. Both models include wairua, hinengaro, tinana and whānau as necessary dimensions for wellbeing, and consider taha wairua as the most crucial element to good health (McNeil, 2009).

2.5 Wairuatanga (Spirituality)

Māori understandings of wellbeing as discussed in the previous section centre on the balance of the physical and spiritual dimensions of existence. This section will now focus on wairua and how significant it is within Te Ao Māori. In particular, how crucial and intrinsic wairua is to Māori perceptions of wellbeing.

2.5.1 Exploring Wairua

Wairua is essential to all things Māori (Pihama, 2001) and attempting to give it a specific definition would be almost impossible (Valentine, 2009). Further to this Te Awekotuku (1991) cautions that "because wairua is so deeply entrenched in Te Ao Māori, to isolate and analyse aspects of wairua could threaten its very fabric" (p. 135). Valentine (2009) describes the expansiveness, depth and complexity of wairua, explaining that it "enables Māori to engage with their reality" (p. iii) and has been conceptualised as:

an intuitive consciousness...an avenue through which Māori identity is expressed and maintained, relationships are forged, balance is maintained, restrictions and safety adhered to, healing is transmitted, and the mechanism through which the tūpuna and atua remain connected to the living. (p. 134)

In a literal context, Pere (1997) explains that wairua consists of wai (water) and rua (two), signifying the importance of balancing and integrating both the physical and spiritual realms (Pihama, 2001). Continuing with this literal translation it has also been expressed as “the spiritual essence emerging from the two fluid sources present at the conception of birth” (Penehira, Smith, Green & Aspin, 2011, p. 179).

Māori have a unique understanding of spirituality that is entrenched in cultural concepts and understandings (Ihimaera, 2004). Religion is not the same as spirituality, and western notions of spirituality are not the same as wairua (Ihimaera, 2004). Durie (1999b) explains that while belief in Atua is a reflection of wairua, it “is not synonymous with regular churchgoing or strong adherence to a particular denomination” (p. 70). This understanding was expressed by the healers in Jones’ (2000) research, explaining that wairua was not specific to any set beliefs or religion, but instead incorporated “any otherworldly phenomena” (p. 19). Moon (2003) quotes Hohepa Kereopa (a tohunga who Moon interviewed) as saying: “For me, Christianity, as a religion, means nothing. What really matters is what you believe in, not what you call yourself” (p. 81).

A Māori world view considers people as the most important thing in the physical world as they are made in the image of the Creator, and the Creator is the most powerful influence there is (Pere, 1984). Similarly, according to Ahuriri-Driscoll et al. (2012), the source of all healing energies originated from Io (The Supreme Being). Ihimaera (2004) points out that both Christianity and colonisation have influenced contemporary concepts of spirituality and hence there may be a combination of both western and traditional Māori spiritual beliefs for some Māori today. Some contemporary Māori healers, for example, use karakia based on Christian prayers instead of the Māori deities (Durie, 2009). Māori however are not homogeneous; some are actively part of Māori society while others have minimal contact or understanding of Te Ao Māori and prefer to be part of the

general society and some may be disconnected from both (Durie, 1994). Not all Māori have the same perceptions or understanding of what wairua is for them.

2.5.2 Wairua and Oranga

According to Moeke-Maxwell (2014), “Wairua is a fundamental dimension of health care, which underpins all Māori cultural beliefs and practices” (p. 14). Ahuriri-Driscoll et al. (2012) suggest that the state of spiritual health and wellness is expressed in wairua and is characterised as peacefulness, contentedness and being centred. Durie (1985) explains that Māori spiritual awareness includes an understanding of the “spiritual communion between human beings and the environment” (p. 483), and without this awareness a person is susceptible to illness and misfortune. Similarly, Penehira et al. (2011) explains that connection to Māori spirituality is essential to principles of Māori wellbeing and includes knowledge, understanding and practise of karakia, pure (incantations to remove tapu) and waiata. Various researchers such as Ahuriri-Driscoll (2014), Ihimaera (2004), Kingi (2002), Mark and Lyons (2010), Palmer (2004), and Valentine (2009) who have described and/or measured wairua, have all noted the importance of wairua to Māori wellbeing. It is therefore important that health practitioners be aware of this emphasis for their Māori patients (Cram et al., 2003).

Durie (1985) explains further that taha wairua is also about the interconnection with ancestors. When the physical body dies, the wairua leaves the body to return to the spiritual realm, and is therefore considered eternal (Moeke-Maxwell, 2014). Upon death, the wairua will stay with the body for a few days, which is why it is so important to Māori that they retrieve the body from the undertakers as soon as possible. During tangihanga (process of grieving/funeral) the body of the deceased will usually be taken to a marae where grieving friends and whānau will farewell the person and their wairua is encouraged to move into the spiritual realm. There is a link with the spiritual world as mourners are able to feel the presence of the deceased and experience continuity with their ancestors (Durie, 2005).

For the Māori healers in Jones’ (2000) research, focus on the spiritual element of patients was considered to be the most effective for working with illness and a

spiritual connection was imperative, to be able to “feel what’s happening to them” (p. 22). They considered mainstream doctors to be working within a narrow framework by only focusing on the presenting issues while ensuring detachment from their patients. This sentiment was also found in research conducted by Cram et al. (2003) where Māori participants perceived the focus on physical symptoms by Pākehā practitioners as treating only the symptoms and not the cause of the problem. Hopeha Kereopa, a well-known tohunga, also spoke of the need to connect with a person’s wairua to be able to find out where the problems lay (Moon, 2003).

Wairua as a dimension of wellbeing is notably absent from the World Health Organisation’s (WHO) definition of health: “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (World Health Organisation, 2003). While acknowledging the physical, mental and relational aspects of health, it ignores the spiritual dimension. McNeil (2009) and Simmonds (2011) suggest that it is the inclusion of spiritual health that sets indigenous world views and knowledge apart from western perspectives.

An important concept relating to Māori health and wairua is “mauri”. This refers to the life force or essence of a person that stays with them until they die (BPJ, 2010; Moeke-Maxwell, 2014) and if the mauri is weakened, it can cause ill health (BPJ, 2008, 2010; Moeke-Maxwell, 2014; Smith, 2000). The state of a person’s mauri can therefore be an indication of their wellbeing (O’Hagan, Reynolds, & Smith, 2012). “Mouri” (a dialectical variation of mauri) has also been explained as “the forces that activate us to do things and to operate and interact with our world” (Penehira et al., 2011, p. 180). Everything has a mauri; water, forests, rocks and even te reo Māori and objects (Bush & Nia Nia, 2012). It is not only human beings that possess this energy (Durie, 2005; Moon, 2003); everything that exists in the world has a mauri. It is a power that has been gifted by Io (Rollo, 2013) and has been described as “being in relationship to the Creator, which *is* the life force” (Bush & NiaNia, 2012, p. 349).

Whānau also have a mauri, which can be weakened by such things as disconnection from whānau members or disrespectful behaviour (O’Hagan et al, 2012), reflecting the wellbeing (or lack thereof) of the whānau. There are many

deep and complex understandings of mouri in the context of health, such as the relationship between the mouri of tā moko (traditional Māori tattoo) and the mouri of a person. This relationship can affect a person's sense of wellbeing and reveals the interconnection between the physical and spiritual realms (Penehira et al., 2011). Similarly, Durie (2005) describes mauri as "a dynamic force" that "retains its momentum...because of its relationship with the mauri of others" (p. x). Hohepa Kereopa describes mauri as integral to the process of healing - "If I don't acknowledge the mauri, and don't respect the mauri, then I have no special abilities at all. I can't help sick people" (as cited in Moon, 2003, p. 92).

The concept of mana, although referred to in the section on mana wahine, is discussed again to demonstrate its importance in the context of health, its complexity and multiple meanings. Durie (1985) describes mana as self-esteem, personal prestige and charisma that is bestowed by the gods and is an indication of good health; "to possess mana is to know health" (p. 484). Mana relates to the achievement of a person's abilities and qualities and how they conduct themselves. This enhances a person's mana and they are able to influence and lead others because of it. A loss of mana however can cause a person to become depressed or unwell (BPJ, 2010). It is therefore important to Māori wellbeing that a person has opportunities available to them to reach their potential (BPJ, 2010). Tate (2010) explains that mana is spiritual and not physical strength, as expressed through a whakataukī (proverb) used by Mere Tana; "Ko te kaha kei te tinana, ko te mana kei te wairua" (Kaha is the strength of the body whilst mana is the strength of the spirit) (p. 85). Negative events, disharmonious relationships with others, alcohol and drug abuse are all things that can weaken a person's mauri and mana, and make them susceptible to negative spiritual experiences (Bush & NiaNia, 2012).

Some illnesses such as "mate Māori" (cultural illness related to spiritual causes) cannot be explained through western classifications of illness and are directly linked to spiritual causes (BPJ, 2010). Mate Māori is, for example, "unresolved traditional Māori 'dis-ease' that can result in physical, psychological, relational and spiritual suffering or even death" (BPJ, 2010, p. 349). Mate Māori refers to spiritual causes of illness rather than specific presenting symptoms and may require the intervention of tohunga (Durie, 2005).

Māori whānau will often be reluctant to discuss mate Māori with health professionals for fear of ridicule, or not being understood (BPJ, 2008; Durie, 2005; Ihimaera, 2004; Mark & Lyons, 2010). Therefore health practitioners need to have greater knowledge regarding cultural explanations for illness and consider the importance of involving whānau members in consultations (Mark & Lyons, 2010). Marginalisation of Māori perspectives and definitions of health continue when these understandings are not reflected in health services (Ihimaera, 2004). This in turn may result in potential barriers to early intervention (Ihimaera, 2004).

Matakite (visionary, psychic) refers to the ability of a person to "see beyond the physical realm" (p. 349). The ability to see or hear deceased people from a Māori world view is not uncommon for Māori (Bush & NiaNia, 2012; Durie, 2001; Mark & Lyons, 2010; Moon, 2003) and can be considered to be a gift (Bush & NiaNia, 2012). Some matakite are viewed as communicators who can pass on messages from deceased relatives to the living (Mark & Lyons, 2010). Tohunga, for example, can use this ability to communicate with ancestors during healing processes (Mark & Lyons, 2010). Matakite also refers to being able to see spiritual tohu (signs) through dreams, animals or smells (Mark & Lyons, 2010). These culturally accepted spiritual experiences of seeing and hearing the deceased can however be misdiagnosed as psychosis by mainstream health practitioners, when there are no other presenting symptoms (BPJ, 2010).

2.6 Māori mental health: Integrating traditional and medical knowledge

The previous section illustrates how wairua underpins all that is Māori and is essential to Māori wellbeing. This chapter will focus on the potential for integration of these traditional perspectives with medical knowledge. An overview of Māori mental health as it is today in Aotearoa and Māori Mental health needs will be provided. Government initiatives to alleviate mental health disparities between Māori and non-Māori will be discussed followed by suggestions in providing culturally appropriate mental health services for tāngata whaiora.

2.6.1 Māori Mental Health

The Ministry of Health (2008) reports that there are alarming disparities between Māori and non-Māori “in terms of the prevalence, severity and burden of mental illness, and a greater lifetime risk of Māori developing a mental illness” (p. iii). The 2003/2004 *Te Rau Hinengaro* mental health survey was the first comprehensive national mental health survey in New Zealand (O'Hagan et al., 2012). This survey found that one in three Māori adults had experienced a mental disorder in the past month, and one in two had experienced a disorder at some time in their life (Baxter et al., 2006). Life time prevalence for anxiety disorders was the most common mental disorder and was experienced by 31.3% of Māori in the survey, lifetime mood disorders was 24.3% and life time substance use disorders 26.5% (Baxter, 2008). Interestingly, this survey also found there was higher satisfaction with those Māori who saw a spiritual practitioner (76.3% very satisfied, 17.3% satisfied) than those who saw a psychiatrist (32.3% very satisfied, 30.8% satisfied) (Oakley Browne et al., 2006). In a report on Māori mental health needs, Baxter (2008) reveals hospitalisation rates for mental disorders was 1.8 times higher for Māori than non-Māori. The rate for hospitalisation for schizophrenia was 3.5 times greater for Māori than non-Māori and two times greater for bipolar disorders (Baxter, 2008).

2.6.2 Māori mental health needs

The assumption by some health professionals that these high statistics are due to Māori being more genetically prone to psychosis and other serious mental illnesses is unfounded (BPJ, 2008). In a review presented to the Ministry of Health, Baxter (2008) reports that there are higher mental health needs for Māori who experience high deprivation, poor physical health, low household income and less education. Although they are not the only determinants for mental health, there is evidence that these wider inequalities impact on Māori mental health and increase the risk for mental health illness (Baxter, 2008). Furthermore, despite these high statistics, only half of Māori diagnosed with a serious mental health disorder had any contact with health services (Baxter et al., 2006) indicating that their needs for treatment are not being met (Baxter, 2008; BPJ, 2010). Baxter (2008) states that

this implicates the need for a focus on reducing disparities, prioritising access to health services that are appropriate and effective for tāngata whaiora, and for further information on why Māori are being hospitalised at such a high rate.

2.6.3 Government Initiatives

A strategy called *Te Puāwaiwhero: The second Māori mental health and addiction national strategic framework 2008-2015* (Ministry of Health, 2008) was developed to provide guidance to the mental health and addictions sector in responding to Māori mental health needs. The overall aim of this framework was *Whānau Ora*: supporting Māori families toward maximum health and wellbeing (Ministry of Health, 2008). The concept of *Whānau Ora* is complex and is based on traditional Māori views of wellbeing that acknowledges the interconnection of whānau members, their wider communities, ancestors, land, and the physical, emotional, spiritual and the social health of the individual (Kara et al., 2011).

Te Puāwaiwhero recognises the importance of reducing inequalities and that whānau members are able to participate in Te Ao Māori and the wider New Zealand society (Ministry of Health, 2008). It also acknowledges the link between health and culture, the importance of addressing both the clinical and cultural needs of tāngata whaiora and the diverse realities of whānau. Finally it suggests that tāngata whaiora should experience “services that provide choice, are effective, efficient, timely and responsive to their needs” (Ministry of Health, 2008, p. 14). Whilst the acknowledgment of Māori health needs and perspectives within *Te Puāwaiwhero* appears promising, it is a strategy only which does not guarantee it will be put in place nor does it contain a process for its implementation (Ministry of Health, 2008).

2.6.4 Integration of Perspectives

Durie (2011) and Macfarlane, Blampied and Macfarlane (2011) advocate the integration of both clinical and cultural knowledge within Māori mental health

services. Macfarlane et al., (2011) suggest a practical way for increasing the likelihood of a positive experience for tāngata whaiora with mental health services is through increasing the cultural understanding of psychologists. This could enable them to recognise when the assistance of kaumātua or Māori cultural advisors would be beneficial to or desired by tāngata whaiora (Macfarlane, et al., 2011). Furthermore, crucial to Māori access to healthcare (Cram et al., 2003) and essential to a positive therapeutic outcome is the therapeutic relationship⁷ in itself (Valentine, 2009). Acknowledging and respecting cultural perspectives can therefore contribute to either a positive or negative experience. This in turn has the potential to determine the likelihood for future engagement of mental health services for tāngata whaiora and their whānau.

As discussed earlier in this chapter, access to Te Ao Māori and wairua is essential to Māori wellbeing (Durie, 2005). Therefore incorporating tikanga programmes, kaumātua and tohunga as part of the therapeutic process may also be beneficial to the effectiveness and relevance of Māori mental health services. Whilst being mindful that not all Māori subscribe to a Māori world view (Valentine, 2009), according to *Te Puāwaiwhero, Te Tiriti o Waitangi*, and the *Code of Ethics for Psychologists Working in Aotearoa/New Zealand* (Evans, Rucklidge, & O’Driscoll, 2007) which abides by the Treaty principles, there should be at the very least the choice to engage in it or not. According to Durie (2009), there are many advantages of incorporating indigenous knowledge and medical science such as that illnesses are better understood in the context of the relevant culture; a wider scope of knowledge is available on the effectiveness of mental health care; and tools for assessing, measuring and managing mental health problems can be enhanced.

2.7 Conclusion

The first objective of this thesis was to describe the background factors relevant to understanding a Māori world view and Māori views of wellbeing and wairua. This included the socioeconomic history of Māori and wāhine in particular, and the

⁷ The patient-therapist-relationship where the patient’s perception of the therapist’s positive regard and empathy is known as the therapeutic alliance. A positive therapeutic alliance can lead to positive therapeutic change. (Kim, Roth, & Wollburg, 2015).

health status of Māori living in New Zealand today. This review has demonstrated that wairua is essential to Māori perspectives of wellbeing. Wairua was intrinsic to traditional beliefs and practices, and traditional roles of wāhine. The interconnection of and balance between the physical and spiritual dimensions of human existence was essential to the integrity and health of Māori society and the individual. Wairua is complex, expansive and difficult to define. It has been described as intuitive knowledge, a pathway to healing and maintaining relationships and restrictions.

The devastating effects of colonisation disrupted Māori knowledge and ways of being. For many Māori this resulted in disconnection from their land, whānau and spiritual understandings that are inherent within Te Ao Māori. Māori have now become over-represented in all negative health economic, educational and social statistics and understandings of wairua as an integral part of Māori wellbeing has been marginalised.

Current research identified that the way forward for Māori mental health services includes the incorporation of Māori views of health and recognising that wairua is an important element of that. While there is commitment to cultural understanding as illustrated in government health initiatives, there is limited understanding of wairua and how it relates to a sense of wellbeing for Māori. According to Durie (2011), wairua is not very well integrated into clinical practice and is one of the future challenges for Māori mental health. This research seeks to explore wairua and wellbeing through the perspectives of wāhine to gain insight into how it operates within their daily lives, and shed light on how essential it is to their health.

CHAPTER THREE: METHODOLOGY

3.1 Introduction

In his paper to the 1999 Te Oru Rangahau conference, Moana Jackson (as cited in Pihama, 2001) stated:

I have a request for this conference...it is the hope that we reclaim for ourselves our own reality. That we be brave enough not just to do research that will have a practical application in the world as it is, but rather that we are visionary enough to undertake research that will help our people in a world as it may be. That we be not afraid to dream, and that we accept that if we are spiritual people, and I believe we are, then we understand that the spirit is the base of our dreams. For if we conduct research in a dreamless world then we do not create a vision of hope for our mokopuna (grandchild). (p. 43)

The history of research for Māori has been detrimental in numerous ways. Research findings have often been generalised to the whole of Māori (Pihama, 2001); Māori realities have been misrepresented (Jahnke & Taiapa, 2003); and Māori knowledge has been undervalued and not considered as being legitimate (Bishop & Glynn, 1999). Experiences of exploitation have resulted in deep mistrust, suspicion and the rejection of mainstream research (Moewaka Barnes, 2000; Pihama, 2001; Smith, 1999; Walker, Eketone, & Gibbs, 2006). These negative experiences have also resulted in a desire for self-determination and consequently saw the development of Kaupapa Māori Research (Walker et al., 2006). Māori culture is steeped in spiritual notions of mauri, wairua and tapu, and this is the environment in which Māori research occurs (Jahnke & Taiapa, 2003).

The main focus of this study is to explore the conceptualisations and experiences of wairua and wellbeing, from the perspectives of wāhine Māori. Wairua is

immersed in Māori understandings and knowledge of the spiritual realm, wellbeing is contextualised from a holistic Māori view as *oranga*, and the perspectives are all from *wāhine* Māori. Some of these perspectives are intimately linked with *wairua*, *mana wahine* and *oranga*. It is therefore appropriate and necessary to use methodologies and methods that respect and value the thoughts and beliefs of Māori as a people and *wāhine* in particular. This chapter will describe and explain the methodologies and methods that were used and the philosophical and theoretical assumptions that underpin them to provide the rationale for their use (Willig, 2008).

Firstly I will explain *mātauranga* Māori from which *Kaupapa* Māori Research is drawn, and thereby give explanation as to why it has been used as a methodology. Secondly I will give a brief outline of both *Kaupapa* Māori Research and Narrative Inquiry. Then I will describe how those methodologies have guided the methods through the various processes of this study. The methods used and the processes of the research will be described and explained and finally important issues surrounding ethics and dissemination will be discussed.

3.2 Methodology

3.2.1 Mātauranga Māori

Mātauranga Māori is a modern term that refers to knowledge that was originally brought to Aotearoa by the ancestors of present-day Māori (Royal, 2012). It includes past, present and still developing Māori knowledge from a vast range of subjects (Mead, 2003). According to Durie (2012), it is knowledge that is constantly evolving from values that were developed a long time ago. It is a *taonga* (treasure) that has been handed down from the ancestors and is therefore considered to be *tapu* (Bishop & Glynn, 1999; Mead, 2003). *Mātauranga* Māori is associated with values, notions of correctness, appropriateness, and restrictions (Mead, 2003). Esoteric knowledge in particular was held by certain people; it was the domain of the *tohunga* and considered *tapu* (Mead, 2003)

As described in Chapter Two, a Māori world view is enveloped in whakapapa. Jahnke & Taiapa (2003) explain that cosmological narratives such as Tāne-mahuta's (god of the forests and birds) quest for the three baskets of knowledge, portrays a Māori theoretical framework for research. Tāne-mahuta had to be tested to prove his worthiness for receiving such knowledge, which also came with great responsibilities. The knowledge he sought was to be shared, it was not for his benefit alone, and the type of knowledge he received in the three kete (baskets) was essential to the well-being of everyone. These narratives reflect concepts of tikanga Māori that is relevant when researching the lives of Māori people today (Jahnke & Taiapa, 2003). For example, knowledge is for the collective needs of the group rather than the individual, who the researcher is accountable to (Jahnke & Taiapa, 2003), and how that knowledge is then used is crucial (Bishop & Glynn, 1999).

3.2.2 Kaupapa Māori Research

Choosing a methodology that would guide this research using tikanga was of paramount importance given the tapu nature of mātauranga Māori, of wairua in particular and to respect the mana of our wāhine. Kaupapa Māori Research draws on mātauranga Māori (Durie, 2012; Pihama, 2010); with origins from Papa-tū-ā-nuku and Rangi-nui, it provides the cultural philosophies required to inform this study. It ensures that tikanga will be followed during the research process (Walker et al., 2006) and "cultural integrity is maintained when analysing Māori issues" (Pihama, 2010, p. 149). Often referred to as 'by Māori, for Māori, and with Māori' (Smith, 1999), all of those directly involved in this research study; the researcher, two supervisors, all participants and kuia (female elder) were wāhine Māori.

Kaupapa Māori Research asserts the right for Māori to provide our own understandings and explanations of the world based on Māori values, perspectives, knowledge and philosophies (Pihama, 2010). Key principles in Kaupapa Māori Research include; having tino rangatiratanga over the research of Māori issues (Bishop, 1999; Cram, 2001; Pihama, 2010); a Māori world view (Moewaka Barnes, 2000); tikanga guides the research processes (Cram, 2001); whakawhanaungatanga (establishing and maintaining relationships in a Māori

manner) (Bishop & Glynn, 1999); research should benefit those being researched (Smith, 1999); and is empowerment-focused (Walker et al., 2006). Further to these principles, Te Awekotuku (as cited in Smith, 1999) suggests seven basic guidelines for Māori research ethics that are part of Kaupapa Māori practices:

1. Aroha ki te tāngata (a respect for people);
2. Kanohi kitea (the seen face, that is present yourself to people face to face);
3. Titiro, whakarongo... kōrero (look, listen... speak);
4. Manaaki ki te tāngata (share, host people, be generous);
5. Kia tupato (be cautious);
6. Kaua e takahia te mana o te tāngata (do not trample over the mana of people); and
7. Kaua e mahaki (don't flaunt your knowledge). (p. 120)

According to Walker et al. (2006), there are no clear indications on *how* to do Kaupapa Māori Research as it is a philosophy first and then a strategy. Durie (2012) describes it as an approach that utilises mātauranga Māori to guide research practice and this is what makes Kaupapa Māori Research distinctive. Royal (2012) concurs that imperative to Kaupapa Māori Research is that it is based on mātauranga Māori and follows tikanga. It is more of a theory and less concerned with methods of inquiry (Milne, 2005; Royal, 2012) and therefore can draw upon westernized research designs (Moewaka Barnes, 2000; Walker et al., 2006). Kaupapa Māori Research supports a Māori world view, provides appropriate cultural guidance and safety, maintains the validity of Māori knowledge, and is empowerment focused and therefore the most appropriate choice of methodology for this study.

3.2.3 Narrative Inquiry

Narrative inquiry is also utilised as a methodology in this research. Particular kinds of qualitative research such as narratives are compatible with and can be interwoven with Kaupapa Māori Research (Walker et al., 2006). Māori have traditionally used oral methods of recording history so the use of narratives is a valued form of acquiring and transmitting knowledge (Bishop & Glynn, 1999). It is through narrative that personal identity and self-concepts are made (Riessman, 2008), how human beings make sense of their experiences (Polkinghorne, 1988), and bring meaning and order to life (Wertz et al., 2011). Narrative inquiry focuses on the lived experiences of people (Caine, Estefan, & Clandinin, 2013; Clandinin, 2007), and takes into account the cultural and historical contexts in which they are told (Creswell, 2013).

It is through a collaborative relationship between participant/s and researcher that understanding and the social significance of experience is made (Caine et al., 2013). The field of narrative research is diverse (Riessman, 2008), and it is distinguished by a focus on narrated texts that represent a whole life story or aspects of it (Wertz et al., 2011). Relationships are central (Clandinin & Connelly, 2000), and responsibility to the participants comes first (Caine et al., 2013), which fits well with Māori notions of whakawhanaungatanga and empowerment of the wāhine. This research employed an experience-centred approach of narrative inquiry which focuses on the meaning of words in a narrative and the importance of experience on people's lives (Squire, 2013).

Semi-structured interviews are often used and are conducted more like conversations to elicit detailed narratives and to keep it participant-centred (Riessman, 2013). According to Squire (2013), an experience-centred approach considers narratives as defined by theme rather than structure, are sequential and meaningful, and can involve interviewing several people about the same phenomena. They are human sense-making, and constitute and maintain sociality. Narratives re-present experience, as they can never be told the same way twice and are told differently under certain social circumstances, thereby taking into account the research situations and interpersonal and social contexts. Lastly,

narratives represent personal changes and involve normalising experiences (Riessman, 2013).

3.3 Methods

3.3.1 Consultation

Initial consultation was made with the kuia who was the Manager and founder of the charitable Trust that provided the Mana Wahine Programme⁸ from which the participants were recruited. To ensure the confidentiality of the wāhine, the name of the Trust is not recorded in this thesis. Contact was initiated by one of my supervisors, who organised a meeting with the kuia and Board members of the Trust to seek approval for my intended project and its suitability for the wāhine involved. Once approved by the Board, a hui (meeting) was then held with the kuia and myself to discuss my intentions, what would be an appropriate topic, how the wāhine would be recruited and many other ethical issues on the safety of all persons involved. Our first visit followed the processes of tikanga and began with a karakia and then whakawhanaungatanga, in which we established our connections through our iwi.

This initial meeting reflected issues of tino rangatiratanga, where research is approved by the group rather than the individual, as the kuia represented the committee and the wāhine in the programme, and initial approval from the Board had already been secured. This is indicative of power sharing in research processes that is a requirement for Māori self-determination (Bishop & Glynn, 1999). Further, research with Māori will often involve the emotional and spiritual support of a kaumātua or kuia, beginning with a face-to-face meeting to establish the relationship and clarify the purpose of the research and accountability issues (Walker et al., 2006). Ongoing consultation with and guidance from the kuia continued throughout the research process.

The Mana Wahine Programme was an initiative by the Trust to preserve, promote and develop the spiritual, cultural, educational and economic welfare of wāhine

⁸ To minimise confusion, when referring to the programme from which the participants were drawn, 'Mana Wahine', 'Mana Wahine Programme' or 'programme' will be used.

and their whānau. The main goal of the programme was to restore and enhance the wairua of wāhine through karakia, waiata, counselling, and group and individual activities such as weaving and karanga. It enabled wāhine who identified as being disconnected to learn or relearn and connect to Te Ao Māori. The programme included the promotion and preservation of the stories of wāhine Māori and the roles of wāhine in relation to Te Ao Māori, and was inclusive of both Māori and non-Māori women.

3.3.2 Wāhine - Participants

The pseudonyms for the participants are as follows:

Anahera, Anika, Creartive, Gina, Hana, Mere, Tahlia, and Tia

Upon receipt of ethical approval from Massey University (see *Appendix A*), I was able to start the process of data collection. The sampling of wāhine was purposeful rather than random as the main goal was to explore detailed and descriptive understandings of wairua in the context of wellbeing, rather than to generalise a definitive meaning to the entire population of wāhine Māori (Riessman, 2008). The women were all recommended by the kuia as she was able to recognise those who were not in a vulnerable state or at risk from re-traumatisation through retelling their stories. They were all past participants from the Mana Wahine Programme at some stage within the past 10 years and therefore had experience and knowledge of wairua, wellbeing and mana wahine, and were able to talk at length on these topics. The women entered the programme either via recommendation from a Māori health provider or self-admission after having heard of the course through word of mouth.

The sample size was relatively small, however this number of wāhine was considered suitable as the goal was for exploring rich and detailed descriptions rather than generalising to the wider population (Creswell, 2013). According to Guest, Bunce and Johnson (2006), data saturation occurs between six and twelve interviews for non-probabilistic sampling. The sample size was also determined by

the amount of time given to complete a thesis project, interviewing, transcribing and whakawhanaungatanga processes.

The Information Sheet (see *Appendix B*) was emailed to the kuia, providing information about my whakapapa, a summary of the intended research project, the rights for participants and what was expected of them. The kuia spoke with each woman, explaining the research process and intentions and gave them a copy of the Information Sheet. To ensure their safety and wellbeing, contact details for support services were included should they experience any distress or discomfort due to being part of the research. I was given a list of names of those women who showed interest in participating and then made initial contact with them via telephone or email to introduce myself, further explain the research intentions and procedures and arrange for an interview date and time if they wished to be involved. All nine wāhine who were approached to participate in this research accepted the invitation to participate. One wahine (woman) declined prior to the interview due to time restraints, leaving eight wāhine in total.

The ages of these wāhine ranged from early 30s to mid 60s, they varied in their marital status and employment with some being married, single or divorced, and were engaged in either full time, part time or casual employment, or unemployed. They came from various iwi and had different levels of association with Te Ao Māori. Some had been brought up on a marae within a Māori community and were surrounded with tikanga while others had minimal contact with their hapū or iwi.

The privilege of interviewing and having access to these wāhine was largely due to the mana held by the kuia. Further to this, my meeting with the kuia was due to the connections she had with one of my supervisors. This reflects notions of whanaungatanga and the interconnections of Māori society, highlighting the importance of respecting the mana of all those involved. I had been entrusted to work with these wāhine and with that came responsibilities for my actions, not only toward them, but also for the potential to have an impact on those interconnected relationships.

3.3.3 Semi-structured Interviews

Narrative interviewing aims to generate detailed rather than brief accounts of experience (Riessman, 2008). This research utilised semi-structured interviews that was guided by an Interview Schedule (see *Appendix C*). This included topics that were presented to the wāhine rather than specific questions to encourage them to elaborate on their experiences. This enabled the wāhine to tell their own stories from their perspectives, which situates them as the expert and requires the researcher to give up control (Riessman, 2008). This also promotes tino rangatiratanga as each wāhine determined what was to be discussed by choosing what they considered to be of importance to them.

Presenting topics rather than specific questions also acknowledges that there may be many areas of the topic that the researcher had not considered or was even aware of. The interview becomes more like a conversation (Riessman, 2013) as both participant and researcher work collaboratively toward a common goal of understanding experiences (Riessman, 2008). This process enables both parties to learn and change, while also providing a validity check to the analysis as meaning is negotiated (Crewswell, 2013). We interconnect through telling stories to each other (Caine et al., 2013), a concept that reflects notions of whakawhanaungatanga.

Whakawhanaungatanga was fundamental to this research process (Bishop & Glynn, 1999), particularly due to the cultural and personal sensitivity of the topic. Prior to the interviews I had briefly met four of the wāhine at a hui, one participant I had established a relationship over a few months, another I had met at a hui a year before, and two I had no previous contact with. Interviews were held at various locations according to the suitability and convenience of each wāhine, which included their homes, work places and marae. Before each of the interviews we spent some time talking to become better acquainted. I was able to discuss further my intentions and explain my own personal assumptions and beliefs on the research topic thereby creating transparency of my intentions and acknowledging the importance of reciprocity.

My approach to this research and the interviews in particular was quite subjective, as the interest in learning about wairua was very much a personal journey as well

as part of a research project. This subjectivity is essential to making meaningful connections when working with Māori. My aroha (love), respect and genuine concern for the wellbeing of the participants were part of a wairua experience that by its very nature required subjectivity and that I be fully engaged on an emotional and spiritual level with the wāhine. This can best be explained by Marsden (in Royal, 2003):

The route to Māoritanga through abstract interpretation is a dead end. The way can only lie through a passionate, subjective approach. This is more likely to lead to a goal. (p. 2)

My whakapapa was already known to the wāhine through the Information Sheet I provided; however the details it included were discussed again to ensure they were aware of their rights and of the research process. They were then given a Participant Consent Form (see *Appendix D*) to clarify their understanding of the research process and their rights and their acceptance to be interviewed and recorded. All of the wāhine acknowledged their informed consent and signed the consent form.

Each interview began and ended with a karakia which followed tikanga processes and was particularly important due to the tapu of our topic. Kanohi-ki-te-kanohi (face-to-face) interviews were held which is a preferred form of communication with Māori. They took between 40 and 90 minutes long with no time restrictions given. An indication of 60 to 90 minutes was provided on the information sheet so they could organise their time for the interview. We shared kai either before or after the interview, which is a customary practice that involves the processes of whakanoa, manaakitanga (sharing, caring, hospitality, support, generosity) and the balancing of any power differentials that may be occurring.

In the spirit of manaakitanga and reciprocity, I brought kai to share with the wāhine as a form of respect and gratitude for their commitment to the research, and for their interviews which I considered to be a taonga that they had given me. In two instances however, this was not possible due to time restraints and other commitments of the wāhine. On two other occasions the wāhine prepared a kai for

me. A \$30 petrol voucher was given as koha⁹ (a gift) to each participant to acknowledge and respect the time and knowledge they had given. Koha is a Māori custom of reciprocity and can be used within the cultural norms of researchers and or participants (Massey University, 2015). Providing koha, kai and a consent form for their protection was therefore an opportunity for me to manaaki (show respect, generosity and care) the wāhine and display respect, generosity and care.

3.3.4 Recording and Transcripts

The interviews were recorded on a digital voice recorder and a password-protected cell phone, then the recordings were downloaded to a password-protected computer and deleted from the recording devices. I transcribed the interviews myself which involved a fastidious and time-consuming process that gave the advantage of knowing each individual narrative intimately and enabled me to see at an early stage what the main themes were. During the transcribing process, I would say a karakia at the beginning and end of each recorded interview in order to keep myself safe and to acknowledge the importance of the information I was transcribing.

Once the transcripts were completed they were taken back to each individual to check and approve. This gave the participants an opportunity to ensure that what I had recorded and transcribed were accurate accounts of their kōrero (discourse) and to withdraw any part of or their entire interview. This was also an opportunity for me to get to know the wāhine further, to continue whakawhanaungatanga and to clarify the meaning of any part of their kōrero that I was unsure of. In many instances this experience was an emotional and spiritual experience for the wāhine and for me as they found meaning, empowerment and growth through reading their own stories. All of the wāhine signed the *Authority for the Release of Transcripts Form* (see *Appendix E*) and either provided a pseudonym, or allowed me to provide one for them

⁹ Koha is a traditional Māori custom of reciprocity and is often seen on the marae as manuhiri will lay down koha to the tāngata whenua (hosts/local people) in acknowledgement of their hospitality.

3.3.5 Journal

I kept a journal for self-reflexivity and to record the processes of the research and any observations or experiences I had during that time. According to Watt (2007), keeping a journal can assist the researcher in becoming aware of how their own thoughts and behaviours may be influencing the research. It also enabled me to pick up on potential themes from the very beginning of the research process. The journal was also beneficial for my own wellbeing as a means of downloading what were at times very emotional reactions to some of the narratives.

I also noted observations of the audio-recorded interviews such as the sound of people in the background calling out their greetings to one of the wāhine as she spoke about the importance of community. In another recording, I noted the sound of birds in the background as another wāhine spoke about being connected to the natural world. Through this exercise I realised I was becoming more aware and sensitive to the nature of the topic of this study, particularly the interconnection of all things and holistic understandings of reality, and recorded my own journey and understanding of what wairua meant for me.

3.3.6 Thematic Analysis

Thematic analysis is a qualitative analytic tool (Boyatzis, 1998) that is widely used within psychology for identifying, analysing and reporting themes in data (Braun & Clarke, 2006). It has been utilised within this research due to its theoretical flexibility in analysing qualitative data and the potential to provide rich and detailed accounts of data (Braun & Clarke, 2006). Data analysis began during data collection where notes were made in a journal during interviews and ended with the final discussion in Chapter Five.

Transcribing the interviews allowed for full immersion in the data as it involved numerous and sometimes tedious readings of each interview. Each transcription was then coded manually in preparation for finding themes and a long list of potential themes was made. A matrix was then developed to see where the codes overlapped and to find patterns that would indicate major and sub-themes within, between and across each transcript. Due to the intention of this thesis as an

exploration to discover understandings of a specific phenomenon (wairua) within a specific context (wellbeing) and by a specific group of participants (mana wahine), the themes fell naturally into the three main constructs that were relevant to the research question. Extracts from the interviews were then categorised within these main themes. These main findings are illustrated in Table 1.

Table 1: Summary Table of Research Results

Main Themes	Subordinate Themes
Wairua	Understandings of Wairua Subjective Spiritual essence Source of strength Higher power and faith Expressions of wairua: Aroha, tika (right order/right response), pono (truth/integrity), koha, manaakitanga Matakite Discretion Wairua and Religion
Wellbeing	Understandings of Wellbeing Taha Tinana Taha Whānau Taha Hinengaro Taha Wairua
Mana wahine	Understanding of Mana wahine Mana and tapu Leadership Empowerment Raranga Karanga Cosmology narratives and cultural identity

Further analysis of these main findings revealed that these themes were interconnected. Consistent with the literature on Māori holistic views of reality and the interconnection between physical and spiritual dimensions, patterns emerged

from these narratives that reflected this world view. Five main categories of connection were evident:

- Wairua;
- Tāngata;
- Whenua;
- Tūpuna;
- Atua

These themes were then organised into a narrative sequence that reflected Māori realities of interconnection. Then they were discussed in relation to the research question and the literature review providing a more in-depth analysis of the research findings.

3.4 Ethics

Tikanga guides ethical behaviour from a Māori perspective as it encapsulates Māori values and beliefs (Hudson, Milne, Reynolds, Russell, & Smith, 2008). The ethical processes pertaining to this research project involved consultation and deliberation with both supervisors and the kuia who were all knowledgeable in tikanga Māori. There was also a significant amount of karakia in both te reo Māori and English to ensure the spiritual safety and wellbeing of everyone involved, including myself. These processes were followed throughout the various stages of the research to ensure its integrity.

3.4.1 Researching Māori knowledge

It was with great reverence and a healthy sense of trepidation that I embarked on this journey of wairua. There were responsibilities with respect to wairua, to the people involved in this study, and my own safety, that I took very seriously. It was a slow process that has required deep contemplation, experiential learning and the guidance of my kuia and supervisors in the values and practice of tikanga.

Concerns of the potential to further marginalise wairua, wāhine and mātauranga Māori by sharing these narratives within a Western academic arena has been a constant reminder to tread carefully with my words and actions and to follow the processes of tikanga.

This topic has evolved from various “coincidental” events and “chance meetings” of many wonderful people and learning to have faith in my own wairua. Originally the thesis topic was to be about whanaungatanga after hearing one of our kaumātua speaking on our marae. His kōrero had a profound effect on my beliefs and understanding about wellbeing. “Coincidentally” the Mana Wahine Programme that the wāhine in this study participated in was partly based on his teachings. I had also considered researching the resilience of wāhine but due to various turns of events and circumstances these topics did not eventuate. Both of these concepts however can be found in the domains of wairua, wellbeing and mana wahine.

What confirmed to me I was on the right path with this topic, was a healing wānanga that I was fortunate to have been invited to. Being in the presence of over 30 indigenous wāhine healers, researchers and health practitioners was one of the most powerful wairua experiences I have been blessed to have had. One of the assumptions I bring to this study therefore, is that taha wairua is intrinsically related to wellbeing. Further to this, mātauranga Māori has knowledge of this dimension of wellbeing which can be beneficial to mental health services for Māori. These assumptions affected how I conducted the interviews and how I analysed the narratives. Most of the wāhine in this study emphasized the importance of sharing their experiences if by doing so it could be of benefit to others. This sentiment has been eloquently expressed by Royal (2012):

Work in mātauranga Māori is not merely concerned with ethnic pride and cultural revitalisation. Its deeper call relates to notions of indigeneity – how we can improve the way in which humankind exists and lives in the world through new strategies of indigeneity, rekindling kinship between people, and between people and the natural world. Kaupapa Māori too will make significant contributions in this direction. (p. 37)

Kaupapa Māori Research aims to make a positive difference for those being researched (Moewaka Barnes, 2000; Smith, 1999) and to enhance the self-determination of Māori (Bishop & Glynn, 1999; Walker et al., 2006). Furthermore, Māori research that utilises a Kaupapa Māori framework is promoted by Te Ara Tika¹⁰ ethical guidelines as best practice (Hudson et al., 2008). This thesis provides space for the wāhine to assert their mana wahine, to voice their experiences and realities and contribute to understanding the complexities of wairua and wellbeing in modern Māori society. Consequently tino rangatiratanga is enhanced through acknowledging the validity of mātauranga Māori. In giving voice for wāhine, I am aware that although a wāhine myself, I cannot assume that I know what the women mean. Māori realities are diverse and there is a responsibility to acknowledge and reflect that in research processes (Massey University, 2015). Hence narrative inquiry has been beneficial in conducting conversational interviewing that promotes mutual understanding of experiences. Additionally, giving voice is not absolute, as segments of the narratives are selected and interpreted by the researcher (Braun & Clarke, 2006).

3.4.2 Confidentiality

The safety and protection of the wāhine was at the forefront of this research. To protect the identity of the wāhine and ensure confidentiality pseudonyms were used and the name of the Trust that facilitated the Mana Wahine Programme was omitted. Additionally the contacts for support people have been omitted from the Information Sheet as shown in *Appendix B* of this thesis as it contained the name of the Trust and the facilitators. All storage for the recordings and transcriptions of the interviews were password-protected and the only people that viewed the raw data were my two supervisors, myself and each participant who viewed their own individual transcript

¹⁰ Te Ara Tika is a framework that sets guidelines for Māori research ethics and was developed by Hudson et. al., (2010) and published by the Health Research Council of New Zealand.

3.4.3 Safety of the Wāhine

Consideration on how to recruit participants was discussed at length between the kuia, both supervisors and myself as some of the wāhine that had been recommended to the Mana Wahine Programme had experienced trauma. The kuia was a trained counsellor and knew the wāhine and their backgrounds; therefore she was in the best position to recommend those whom she felt were not in a vulnerable state. Another measure taken to safeguard their wellbeing was to provide a list of contact details of mental health support people should they experience any negative effects from being interviewed. The list included: Lifeline, Health Line, Samaritans and Suicide Prevention Helpline. This list also included contacts of support people associated with the Trust; therefore the list has been omitted from this thesis to ensure confidentiality of the Trust and therefore the wāhine. The kuia was also available to the wāhine and to myself for counselling and spiritual safety; additionally karakia was conducted before and after interviews.

3.4.4 Dissemination

Another principle of Kaupapa Māori Research concerns ownership of the research with regard to addressing Māori determination (Bishop & Glynn, 1999). The narratives shared in this thesis ultimately belong to the wāhine, their whānau, hapū and iwi, therefore a copy of the thesis will be sent to each of the wāhine who participated. The presentation of this research was primarily for submitting a thesis for a Master of Science in Psychology at Massey University. The main aim is to contribute to mātauranga Māori and raise awareness and understanding of the importance of wairua and wellbeing. Dissemination of the findings of this research could therefore include health or indigenous journals or conferences.

After receiving approval from the wāhine, I contributed findings from this research as part of a group workshop at the World Indigenous Peoples Conference on Education (WiPC:E) in O'ahu, Hawai'i, May 2014. Titled *Mana wahine, mana tupuna: Enduring narratives – Our guiding lights*, I joined with three wāhine researchers in presenting issues surrounding Māori experiences of domestic violence, imprisonment, empowerment, and supervision. My presentation was

titled *Wairua, wellbeing and mana wahine: Exploratory perspectives from Māori women* and included one quote from each of the wāhine from this research project. The aim was to contribute to indigenous knowledge and indigenous ways of knowing. Although initially there was some concern from the participants over the dissemination of this research at the WiPC:E conference, the assurance of confidentiality and the purpose of the conference and my own intentions and motivations were discussed with the wāhine and the matter was resolved, and approval was granted.

3.5 Conclusion

The methodology and methods used in this research combine both Māori and Western knowledge. Guided by Kaupapa Māori and utilising Narrative Inquiry worked harmoniously due the many similarities. An emphasis on positioning the participants as being the holders of knowledge and conducting face-to-face interviews within a collaborative search for understanding, reflected notions of tino rangatiratanga and whanaungatanga. Both methodologies focused on the importance of the relationships made with the participants and the responsibilities toward them. Mātauranga Māori was acknowledged, upon which Kaupapa Māori Research is based, as are the main topics of wairua and oranga and mana wahine.

The ethical processes of this research were guided by tikanga through the combined knowledge and experience of the kuia and supervisors. This was essential to this research project as I had limited knowledge of tikanga myself and the sacredness of Mātauranga Māori needed to be respected. Tikanga ensured the protection and integrity of the research and the safety of all those involved.

Thematic analysis allowed for the development of themes and patterns, many of which came from the use of symbolisms, analogies and metaphors expressed within the narratives. The process of creating a matrix of themes and subthemes provided a handy tool to rearrange the data into definable groups. This was made relatively easy, given the complexity, overlapping and interrelatedness of the main themes.

CHAPTER FOUR: KEY FINDINGS

4.1 Introduction

The objective of this thesis was to gain an understanding of wairua in the context of wellbeing, through various descriptions and personal experiences from the wāhine participants. The intention of this research project was not to give a definitive meaning of these concepts, but rather to explore how wāhine living in contemporary Māori society experience and perceive wairua and oranga within their everyday lives. In appreciation of their diversities, these participants have varying degrees of understanding and connection with Te Ao Māori. For some of the participants, knowledge and experiences shared with their tūpuna, whānau, hapū and iwi have contributed to shaping their understandings of these concepts. Additionally, reconnection to Te Ao Māori through channels such as the Mana Wahine Programme, have helped some of them to understand, articulate and share their experiences and perspectives.

According to Durie (2011), Māori ways of thinking are directed outward towards associated relationships rather than looking inward at the internal structures. Dissecting information and analysing the smaller parts to find meaning is prevalent in scientific thinking and is directed inwards. Accordingly, most of the participants' narratives of wairua, oranga and mana wahine were illustrated through the sharing of very private and intimate life experiences that was filled with beautiful imagery and metaphors. As Tia explains:

imagery in terms of how Māori work is really important...all our words are made up of something else, it's not a whole word it's all pieces of our whole whakapapa. (Tia)

The participants experiences and understanding of wairua, oranga and mana wahine were as diverse as their backgrounds; however common themes of connection between the physical and spiritual realms permeated throughout their narratives.

4.2 Theme 1: Wairua

4.2.1 Understandings of Wairua

Traditional Māori ways of being have changed and consequently so too have the understandings of concepts such as wairua within contemporary Māori society (Valentine, 2009). In conjunction with this, the depth, complexities and scope of wairua (as described in Chapter Two) can make the task of comprehending and articulating its meaning quite challenging. Some of the participants expressed this difficulty, Tahlia noted that *“it’s a huge subject”*, with Mere stating *“its unexplainable, you can’t explain it”*, and Hana saying *“to put in words is hard, it’s more of an action or feeling”*. Having to explain wairua in words proved difficult for some and as Valentine (2009) explains, some of the ways wairua is communicated is through waiata and karakia. Furthermore, these interviews were conducted in English rather than te reo Māori which could account for some of that difficulty in expressing Māori concepts (refer to Chapter 2.3.1).

a) Subjective

Wairua is more of a knowing, an unspoken understanding, and something that is not often explained through words (Valentine, 2009). My own unease in trying to describe wairua and perhaps similarly for some of the participants, is partly due to the respect for and understanding of the sacredness of this dimension of Māori reality. I was also mindful of my lack of experience and knowledge in this area, so did not want to misrepresent myself as an authority or expert of wairua. Gina illustrates how subjective wairua is and her own personal challenge where there has been unease in giving a right or wrong answer:

So I think I’m comfortable now with the fact that...you can’t really explain it...you certainly can’t put it in a box and say this is what it is because it’s different to everybody...and that’s ok [but] it’s not for me to say ‘well this is what wairua is’. (Gina)

Anahera highlights its subjective nature as she indicates at the end of her interview that it was easier to describe wairua from personal experience, rather than attempting to provide a global understanding:

I didn't think it would come as easily as that. But it wasn't a hard question to answer. The way it was asked in a broad sense, I could bring that back down into what it means to me. (Anahera)

Despite the initial challenges that some of the participants noted, they were all willing and able to give rich and descriptive accounts of what wairua meant to them and how it resonated within their lives.

b) Spiritual Essence

Tahlia, Mere and Anahera described wairua as an 'essence'. Anahera talked about this spiritual essence as being fundamental to her sense of identity, where she comes from, her purpose for living, and a sense of continuity as wairua links her to the past present and future. Anahera said:

It [wairua] is an essence, a spiritual essence....I identified my wairua with home; it was a way of grounding who I am, what I am, who I belong to. And that's what I mean about my essence. It really denotes who I am as a person and why I'm here today. Without that I wouldn't have been able to pass that onto my own tamariki (children) or share that with my koro (grandfather) and kuia at home or stand in the urupā (burial ground) and feel my tūpuna, my whānau around me. To me that's what wairua is....I grant myself extremely lucky I'm Māori because culturally we can acknowledge that....That is part of how I was raised...it was something we woke up to and went to sleep to. (Anahera)

Wairua as a spiritual essence links both the physical and spiritual worlds and being open to it is an integral part of wellbeing, regardless if one is aware of it or not.

Mere explained:

It's the most inner essence of our lives...[it] carries us through each section to birth and it brings us out into Te Ao Mārama, the world of light...Wairua is a connection between the spiritual and the physical...because its invisible doesn't mean it's not there, you know....9 times out of 10 our people who are clinically sick, maybe they need to identify that matakite or tohungatanga (priestly knowledge/expertise) or healing as we call it or rongoā Māori (Māori treatments, cures, medicines), they need to identify it within themselves instead of blocking themselves. (Mere)

Tahlia's description of wairua as an essence also gives reference to a sense of the past, present and future being interlinked:

it's the essence that comes from our source, the oneness of our source. So wairua is part of me, part of everything that we see, feel, can be, have been.
(Tahlia)

c) Source of strength

Wairua is described as a source of stability, strength and power that requires faith in its existence and belief in a higher force that holds you accountable for your actions. Connection to this source manifests as an ability to reach a higher mode of being and achieve one's goals in life, which in turn enhances a sense of empowerment and wellbeing. Wairua is an essential element of Māori wellbeing (Mark & Lyons, 2010) therefore disconnection from it can be detrimental to a sense of wellbeing.

Creartive talked about her experiences of depression and anxiety, attributing it to being disconnected from her wairua:

like an inner strength, it's the only place where your strength comes from as far as my journey is concerned. Over the years I have been back and forth into my wairua...I had times where I was disconnected from my wairua. To put it in the context of wellbeing, it's like you have to relearn all over again....When I was in that dark dismal freezer, so to

speak, and then I came back to New Zealand...it was like the freezer door had been lifted up a bit and you just saw a fraction of light. But because you get so comfortable being in the dark dismal space if somebody opens up the freezer door and you can see a little bit of light out there, you sort of want to step out and into it but it was like having chains. (Creative)

Mere considered that wairua can guide one's destiny; however we are still accountable for and free to make our own choices in life. In this context, we are not left to the winds of fate; instead connection to wairua provides a sense of spiritual power that motivates us to follow our own truth and enhances a sense of self efficacy to achieve our goals in life:

Wairua means to me the unseen, the unknown, and its potential to become its greatest within. So it's actually looking at the deeper inner [part] of you and finding the switch to turn it on when you need it. I believe we have the power in wairua to perform anything that we can on this physical realm....Wairua for me has...directed me here in teaching...maybe the Pākehā call it destiny or something like that. I believe it's our wairuatanga and the power that we have in order to make our own pathway in life you know. (Mere)

d) Higher power and faith

Most of the participants spoke of wairua as a higher power. Anahera described this higher power using the metaphor of a physical embrace, which gives the impression of wairua as supportive, protective, comforting, nurturing and loving:

You sense that there is something bigger than yourself...and if you had to put it into a word, it's wairua, it's something that embraces you. (Anahera)

Tia talked about the necessity of being able to trust in wairua and how that can lead to expanding one's own boundaries:

There is something out there that is bigger than you. That you don't know anything about but you do deep down inside. So it has to have a huge power of trust and belief in something bigger than yourself that will drive you to these places. And sometimes to places that you never dared to dream to go to and yet somehow you walk the edge because you trust this wairua or this something bigger than yourself. (Tia)

e) Expressions of wairua

Three of the wāhine spoke of wairua as being expressed through aroha, tika, pono, koha and manaakitanga. For Mere, wairua is “*universal love as Pākehā call it*”. Tahlia explains that “*love is...part of your wairua*” and when she compares wairua with Buddhism she explained that they both have “*the same kaupapa (theme) of aroha*”. For Anika, wairua means “*aroha, tika and pono*”. Tate (2010) describes these three principles as integral to the functioning and survival of the marae as “each of them addresses, manifests, enhances, sustains and restores tapu and mana’ (p. 114). In this context these three principles can also be utilised as a guideline toward right relationships as we enhance and restore the tapu and mana of ourselves and of others (Tate, 2010). They are the processes of whanaungatanga which require correct behaviours and intentions to maintain quality relationships, (Tate, 2010).

Tahlia recalled how wairua was evident throughout her childhood and describes how it works within the process of koha:

it [wairua] wasn't spoken so much when we were little...that certain word of wairua....manaakitanga serving, looking after [others], being clean around the house I mean those are all aspects of wairua. Even receiving and giving, that type of wairua work where you see people giving away too much of themselves, sometimes those people never receive. Sometimes they don't take their koha when they've been handed it. What happens from my idea is that we stop the flow of wairua [from] constantly working....everybody needs to learn how to give and everybody needs to learn how to receive or koha. (Tahlia)

f) Matakite

Understandings of wairua are also spoken about in terms of matakite. Acknowledged and culturally accepted within Te Ao Māori, matakite relates to the ability of perceiving things and having insight into the spiritual realm (Royal, 2003). The wāhine talked about their various experiences of seeing, hearing, smelling and feeling things in the spiritual realm. Mere could see spirits from an early age, which was not something that was out of the ordinary within her whānau. Within this narrative she recalled an incident where her whānau had fallen ill as a result of mākutu (curse). These two occurrences required the knowledge and skills of a tohunga who was brought in to help them understand what was happening and to resolve the issues:

I was seven years old and me and my mother, we were getting very ill and we were wondering why....and then all I can hear was this banging down our hallway but no one was there. It was like a person was going down with their tokotoko (traditional carved ceremonial walking stick) banging down our hallway. And I could see this figure but I wasn't quite sure what it was. Anyway we had a tohunga to come in and see what the hell was going on. (Mere)

For most of the wāhine, matakite was considered to be a gift. Anika noted:

I said to my mum, "I don't know what it is but I'm getting these feelings that someone is going to pass away". She says "you see too much kehua(s)" (ghosts/spirits) and I [said] "it's not kehua(s) mum...I don't know but it feels weird. And my mum says, "no that's in you, that's built in you, that's your special gift". (Anika)

For others however, this gift was not always welcome. Hana explained that although she was used to seeing things since childhood, she was afraid her family members, particularly her children, might be frightened by them:

I get a lot of visits all the time. Spiritual type things, so for me I try and cut it off, and so everybody says I'm just too scared. But not really I'm just trying to protect my little whānau network because I don't want them being scared and afraid of that. (Hana)

Having experiences such as seeing spirits can also open people up to accepting and connecting to their wairua. Hana explained that her husband had a pivotal experience which connected him to his own wairua and set him on a journey of healing:

My husband....he started to believe in it...with our first child, me being pregnant, that's probably when he first got his real big visit....I think that's when he started to heal himself with his things and...accepting his healing, his wairua, and his wellbeing....That's when he felt it and jumped and got into protection mode; he did a random haka (traditional dance/challenge) not knowing it, and then he was quite freaked out. I thought it was quite funny because I'm used to it, but he just freaked out. (Hana)

Matakite is not just about seeing things in the spiritual realm however, three of the wāhine explained that it also involves smelling or physically feeling things and being able to tell if someone is sick. Mere spoke about knowing her grandfather's spirit was present through the sense of smell:

I believe wairua comes in indications of smells. My grandfather had this specific smell and it was a sulphur smell....We used to go to... the sulphur baths...and now when I know that he's around, I can smell sulphur. (Mere)

Creartive described her experience of feeling her uncle having a heart attack:

I said "I can't breathe, there is something wrong", you know as if I was having palpitations, and I said "something's not right, I just, my heart just has stopped working". They said "well it can't have stopped working because you are still talking". I said "yea but it's really heavy like someone's just pulled my heart out". So I had to sit on the side-line and it wasn't until I got home that afternoon that I found that my uncle had died of a heart attack on the rugby field and I felt it. (Creartive)

Hana talked about being able to tell if someone is sick by connecting to their wairua:

Sometimes it's not just spirit type things; it could be somebody who's sick, and you know I connect to their wairua. (Hana)

g) Discretion

Talking openly about experiences with wairua was something that most of the participants did not feel comfortable doing, most of them sharing their experiences with their whānau only. Hana was more comfortable talking with Māori on this topic due to the acceptance of the spiritual realm within Māori culture:

I would only share stories like that with, I guess, people who are open to it...I wouldn't go out and tell some random person or a colleague at work because of their thinking or they're not open to that... I'm more comfortable with Māori because it's just natural and [they are] open to it. (Hana)

Although she expressed this with humour, Tahlia revealed that she was reluctant to talk about wairua after feeling as though she was previously misunderstood through sharing her experience:

I told this story to somebody else and I think they thought I was a bit worpy (slang for crazy). (Tahlia)

Mere also is aware that some people may not understand kōrero around wairua, and therefore protects her children by teaching them not to speak about it outside their home. Her protectiveness of her children and herself indicates the great importance she attributes to wairua, how deeply personal wairua is for her and the amount of trust required for her to speak about it:

Unless you are there in the moment then you would think I'm nuts....I've brought my kids up not to talk about those things outside of our home....I don't talk about wairua just to anyone I'm very private and I have my own boundaries, I have to protect me and my children. (Mere)

4.2.2 Wairua and Religion

The distinction between wairua and religion was a major sub-theme and was spoken at some length by six of the participants. Wairua was referred to as Māori spirituality, and religion was often synonymous for Pākehā concepts of spirituality. Western literature also distinguishes between the terms spirituality and religion as two separate constructs (Tovar-Murray, 2011). Religion is oriented toward institutions, rules and regulations, whereas spirituality is considered to be a broader construct. From a psychological perspective, both religion and spirituality are considered to be part of the realm of transcendence, a dimension of human existence involving a search for meaning in life (Unterrainer, Lewis, & Fink, 2014), and have been positively associated to physical and mental health (McIntosh, Poulin, Cohen Silver, & Holman, 2011). Spirituality in this thesis focuses on Māori spirituality and Māori understandings of what that means.

According to Tate (2010), there is debate about whether or not there was a Supreme Being above all the Māori deities. While most tribes acknowledge Io as the Supreme Being, some authors have disputed whether it is an authentic pre-European term (Tate, 2010). The naming of 'God' is beyond the scope of this thesis, however for the purpose of clarity and in acknowledgment of the diversity of the participant's beliefs, the term "Atua" was sometimes used to identify the Christian God and also the various Māori deities, while the term "Io" as used specifically for the Māori Supreme Being. Tia suggested that the naming of God is less important than the belief that there is a higher power:

The higher person, or higher being or the divine, or your God or the atua. There is something out there that is bigger than yourself. (Tia)

Anahera made reference to the Bible as representing Pākehā spirituality, and consequently made this distinction between religion and wairua:

When I say spirituality I think, when I look at the Pākehā concept, it is not from the Bible. (Anahera)

Hana also makes the association of religion with Pākehā, and although she was brought up in a within a Catholic whānau she found religion too restricting:

The religion type thing it was too, for me, Pākehā...they only focused on certain things and it didn't really, every now and then it moved me, I guess spiritually, but...it was missing something. (Hana)

Hana explains that although her grandfather's traditional healing practices were not spoken about, they were automatically accepted. This could be interpreted in several ways; for example, it could indicate that there may have been conflict between Catholic faith and Māori spirituality in previous generations. It could also mean that it was not an issue and although they were Catholic, traditional practices of healing and belief in wairua was just a way of living and did not require explanation. It could also reflect the belief that wairua was the domain of the tohunga who was guardian of that tapu information:

We were quite strong in our Catholic religion because of Mum and Dad and my Nan. But with my Pop, he was Catholic, but he was [steeped] heavily in Māoritanga; he was more like a tohunga type person. But he never shared those with anyone, but he did practice certain things with the kids. So like, if somebody was sick he would go and do a little ritual with them, without them knowing. Oh they did but he never actually truly explained it; you just knew to take it. (Hana)

Tia was comfortable within both worlds and did not feel a need to have to choose between the two. Although she felt a strong connection to Christ and Catholicism, she also found its patriarchal structures a bit too restrictive as a wāhine Māori. Her perspective was that incorporating both worlds could be advantageous:

Growing up steeped in Catholicism because of my mother but also steeped in tikanga because of my dad. Those two worlds did clash. But it didn't change the way I thought about prayer, because I got both of those worlds to have a look at it, but it's up to me to interpret how I want. Do I want to interpret it as a Māori [or] do I want to interpret it as a Catholic? Do I want to interpret it as somebody who is in the middle of these two worlds and get something really good out of it?...but I think I have a stronger inkling for taha Māori because it speaks about Māori spirituality. Catholicism has got a beautiful spirit;

it's got a really rich connection to Christ. But it also has a really strong hierarchal whakapapa which mostly is about men and power. So for me...I have a little bit of a challenge in those places, so I work stronger with Māori spirituality. (Tia)

Gina on the other hand was brought up in a strong Catholic environment by her Pākehā mother. She had little understanding of Māoritanga until she reached adulthood and began her journey “to find [her] whānau hapū and iwi” (Gina). She experienced some conflict with her religious and spiritual beliefs as she learns about and reconnects to Te Ao Māori. This conflict seems to have been just as much about her cultural identity as it was about challenging her religious and spiritual beliefs. She appears to have resolved this conflict by accepting that that she is both Pākehā and Māori and understands just what that means for her:

I learnt...about Rangi (Rangi-nui) and Papa (Papa-tū-ā-nuku) and their children and the separation. I've learnt some of that stuff I'm sure that there's a huge amount that I have yet to learn. I did struggle originally when I first got heavily into this journey of being who am I as a Māori woman. Because I've been raised as a Christian woman with the one God and creation and resurrection and those sorts of things, and the Ten Commandments - thou shalt not have other gods before me - and that sort of thing. When we talk about those kaitiaki (guardians), we often call them Gods don't we. So that was an issue for me to begin with, and I struggled with that for a while trying to reconcile my religious Pākehā upbringing, Christian upbringing, with my Māori mythology. Mythology to me is a bit of a disrespectful word because it makes less of the reality of what those beliefs were and for our ancestors to make sense of the world that they lived in; that's how they made sense of their world. So as a Christian Pākehā person that I was raised as, that was kind of heathen, that was kind of wrong for me to start to entertain that those ideas were acceptable or normal or right in any way. So I think now I've come to a point where I can go 'actually mum has her beliefs very Pākehā very Christian western you know appropriately because that is who she is'. But I've always been

this person with a little Māori girl inside trying to understand my connection to the world and my relationships with people and things in the world....I couldn't believe what she believed because I'm this completely different person to her. And I have to satisfy both sides of myself I've come to my own belief system. (Gina)

Gina explains further that her spiritual development came also as a resolve that regardless of what name was used, for her it was all the one God:

I still believe in God and I know as Māori we believe in Atua, Io the name that wasn't spoken....So to me it's ok because we both believe in one God. Māori believe in one God, Christians believe in one God, so my God is the same God, just in Māori we call them one thing and in Pākehā we call it something else....I think...for me it's my own personal journey [which] has gone along and my personal understanding of who I am. (Gina)

Mere was brought up within Te Ao Māori and also went to church when she was younger. The association between religion and cultural identity is made as she describes her negative experiences with a Christian church:

And what I found in the Pākehā church was they were really horrible to us....That's where I found out that I was a Māori, in church...through other children telling me that I'm different. I didn't like church...because they used to say to me and my brothers "if you don't read this verse in the Bible you [are] going to burn in hell and Satan's going to come and get you"; so we were absolutely petrified. (Mere)

Mere explains that as she got older she moved away from the church to find her "own inner person" and her "own spirituality". She now practices Iotanga (faith in Io¹¹). Mere expresses her spiritual connection to the land through an analogy of the sky as her church, and Papa-tū-ā-nuku as her mat, and a place for growth:

I practice Iotanga every morning. Iotanga was the religion that was here before the missionaries came....Iotanga to me is connecting with

¹¹ See Tate, (2010) and Shirres, (1997) for information on the Io tradition

the earth, with the sky, with the stars at night before I go to bed...The way I do that is karakia and with a lot of love for all the world...This is my church you know; the sky is my church, Papa-tū-ā-nuku is my mat, my whāriki (mat) for me to walk on, to grow in. (Mere)

Tahlia has an experience of wairua while practising Buddhism, and regards the two as having many similarities:

Within this year of Buddhism...I did have a strong wairua experience where...I actually connected to the environment, where it just all sparkled. [I] had that type of walking, not quite walking, of being huge, so everything just glittered. But that was after extensive work, of inner work, and it's the only time I had that experience of where everything became one....The same kaupapa of aroha, love, manaakitanga...we are one so you don't harm. Everything has that Godliness, that wairua. Even in Buddhism....there is a devotion to truth so you are still entitled to seek your truth as a person. (Tahlia)

These narratives show a great reference for wairua. The participants have described what wairua meant to them, how it operated within their lives, and how it was accessed. Wairua was associated with their sense of identity and provided them with much strength a sense of belonging and connection between the physical and spiritual.

4.3 Theme 2: Wellbeing

4.3.1 Understandings of Wellbeing

Wellbeing was described as having a balance between, and taking care of, the spiritual, physical, mental and relational dimensions of human existence. These reflected the concepts of health that are found in the Māori health model *Te Whare Tapa Whā* (Durie, 1999b), which most of the wāhine were familiar with. The participants gave examples of how this operated in their lives. These dimensions are all intertwined and were often discussed in conjunction with each other. The following discussion is set out in the four major sub-themes of wellbeing; taha

tinana, taha whānau, taha hinengaro, taha wairua. However, most of the narratives emphasised the importance of wairua to the other three dimensions.

a) Taha tinana

Tia, Gina, Tahlia and Mere talked about the importance of balancing the various dimensions of wellbeing. However, taha tinana was notably the least spoken about dimension of wellbeing. Mere emphasised the spiritual and physical dimensions of human existence. Ignoring the spiritual side was considered by her as being “arrogant” because everything is connected; eating well, exercising and dealing with stress will all affect your wairua:

Wellbeing is balancing your physical state with your spiritual state, and how well you manage to make both of them come to unite together....Wellbeing is a state of health that you are in, mentally and physical[ly]....It's being able to maintain and cope with the diseases that we have today and in the hinengaro; it's being able to cope with the stresses that are happening to our people today. Without being arrogant to the fact that it may be your wairua, you know....eating the right kai, getting the right fitness, being healthy in everything we do....if our wellbeing is not right then our spirituality is going to go down also. We are going to diminish the state of our wairua...if our wellbeing is not being kept in a nutritional state. (Mere)

b) Taha whānau

Wellbeing includes the relational dimension of wellbeing (Durie, 1999b), and according to Tia, it was important to start with the relationship with the self and then with others. Maintaining the wellbeing of wairua involved role modelling good behaviour to our children, teaching them to respect themselves and others, and to nurture their wairua through karakia:

For starters we look after ourselves well, we speak well to ourselves, we say karakia for ourselves, we do all these things that keep us healthy

and fit...Then when we do that, we do it with our children. So we look after our children like that so that we love them and they love us back, and then we teach them about role modelling....We teach them how to restore and enhance and forgive and let go...to keep that wairua flowing through the family. (Tia)

Tia then goes on to highlight the importance for the interconnection of people, saying that healthy relationships require the ability to listen to your wairua and act on it:

When you go to work you have that same communication, that same feeling in your work place. You will sense straight away how the other person's wairua is when you interact with them. You can almost see if they are tired or they are hurt or they're in pain....Most times people say "are you alright?" "Yea course I'm ok" and you just leave it at that. But your wairua stirs and says she needs awahi (support) or something like that. (Tia)

The importance of relational wellbeing and moral behaviour is explained by Tahlia as she points out that treating others well will affect your own wellbeing. There is an obvious understanding here of the interconnection with all people:

Wellbeing is about everything of a person...[being] balanced. Conducting yourself well with other people, your relationships, being truthful...you don't harm people. (Tahlia)

Indicative of the values and importance of extended family members within Māori culture (Durie, 2001), Tahlia also points out that through whanaungatanga and living amongst many relatives, she was taught the skills and ability to relate well with other people:

I think that because of being brought up in that whanaungatanga type where you've got uncles, aunties, koroua (grandfather)...we as Māori, I believe when you are brought up like that you can relate to anybody. (Tahlia)

c) Taha hinengaro

Part of mental wellbeing was understood by three of the participants as the need for a quiet mind in order to hear what their wairua was trying to say to them. It is not auditory hearing they are talking about, but rather a knowing on a spiritual level, or a feeling. Tahlia talks about her practice of meditation that she learnt about through Buddhism to quieten her mind so she could hear her wairua clearly:

Meditation - it can be as simple as going by the beach, spending time there; it can be gardening, it can be, you know just something that you really love and where you can be quiet. It can be waiata, that's a lovely wairua moment...You have to listen to yourself...you have to be a little bit silent within yourself to be able to hear that type of thing to come through, because if you are too noisy it gets mixed. (Tahlia)

Tia explains that spending too much time in the mind will stop you from hearing your wairua. She also talks about the need for balance between having an active mind and listening to your wairua, and the importance of prayer to connect to your wairua and to understand how it works:

If you are working at this level down here [it] almost puts you in a stop place...you've got to rest and find that place, quiet, yoga. All these people who do prayerful times, it's always in a quiet place...that builds your deep inner capacity to understand how your wairua works. You can get skilled at doing the two but it takes away a lot of energy. (Tia)

Through her experiences of depression and anxiety, Creartive illustrated her torment from repetitive thinking and ruminating that she was unable to suppress. Her resolution was found through meditation and her experience is similar to the practices of mindfulness and acceptance (Thompson, Arnkoff & Glass, 2011). She discovered that it was not through suppression, but acceptance of her thoughts and feelings that enabled her to move on from her repetitive thinking. However for Creartive, it was more about re-connecting to her wairua through meditation that put her mind at ease:

I was too much in my mind. I had so many stories and incidences throughout my life that kept going through my head over and over

again. And actually I found that's what disconnected me, totally...the stories were just like a great big wheel and they just kept going round...I couldn't make sense of anything. And I didn't know how to stop that wheel from turning. It wasn't until one day that I found out through my sister actually, that maybe I should try meditation to help. Not necessarily to stop my head from having all these thoughts, but just to calm myself down because I got so agitated. I was very angry, a very angry person, and not realising why, you know. I shut a lot of my childhood out, because I found it was just too painful....I do lots of meditation to keep in touch with that [wairua]. I listen to audios to keep myself, my mind positive, because I know when I start getting in my head that I lose touch with me. So I can distinguish between the two now. (Creative)

An important aspect of mental wellbeing for Māori is being able to express one's thoughts and emotions freely (Durie, 2001), and Tahlia talks about how fortunate she felt to have been brought up that way:

We were allowed to express ourselves quite freely....I'm very lucky I had my mother who allowed me that space and time to be emotional because I am a very emotional person. (Tahlia)

d) Taha wairua

Wellbeing was described as learning to trust in the higher self and being able to listen to your intuition. The use of karakia was important in reconnecting to wairua and in making you spiritually aware and mindful of your actions and words. Without that connection you are open to illness and closed to healing. The tapu and mana of wairua is also described as illustrating the importance of hygiene, and the link between the physical and spiritual dimensions of health. It is the dimension of wellbeing that strengthens as we get closer to death.

Tia explained that wairua as the higher self knows the difference between right and wrong, and it can help guide you if you are able to listen to it:

Once you connect with what is right or what you think is right or what you feel is right, it feels good and it sits again. And then you start to ride again, go along here and you get to a bump and it holds you back and you kind of fall off...that's your wairua moving in you. Its saying you have to get it right. It pushes you here and it pushes you there and you've got to go there, it's not the right place....And so that's what your wairua does. It takes you to the right places. (Tia)

In line with this understanding, Tahlia explained how not trusting wairua can be detrimental to wellbeing by neglecting your own sacredness. Her emphasis on trusting intuition, dreams, seeing, hearing and feeling also reflects an appreciation of the senses as a source of knowledge rather than relying solely on cognitive processing:

If you don't look after your wairua, if you don't trust that intuition, if you don't trust your dreams, if you don't trust those sorts of things you are open to illnesses, because you know we forget to look after that side of ourselves. If you don't listen to yourself, you don't trust in what you are seeing hearing or feeling; you disconnect and then you have the ability to get sick, or mentally ill or addictive because you just need to reconnect again....It diminishes the tapu within yourself aye you know if we don't feed our tapu our sacredness within it diminishes and disappears. (Tahlia)

Creartive illustrated what trust in wairua means through her experience with agoraphobia and depression as she found the courage to overcome her fears:

For me it was like having to trust my wairua again. I had to do it that way and I had to really draw on that strength of my wairua to get me down those steps, and once I got down those steps it was to the clothes line. (Creartive)

Tapu restrictions also served to ensure practices of hygiene (Durie, 1999b). Tia explained the link between physical and spiritual health through these tapu restrictions, and how to look after your wairua in relation to hygiene:

Everything that you do is karakia; cooking food, looking after your clothes. In terms of our Māori beliefs, not mixing your tea towels with your normal washing. Why? Because you don't want to contaminate the wairua. So it's all about cleanliness in terms of wairua. That's why you keep certain things separate. So you want to keep your wairua clean. (Tia)

Three of the participants discuss wellbeing in the context of healing. Anika stressed the importance of healing her wairua:

Healing, just healing, because I've had quite a bit of healing to do to get me where I am today...mainly my wairua. (Anika)

Healing requires the engagement of wairua (Jones, 2000; Moon, 2003) and according to Tia, that is how transformations are achieved:

Sometimes if we don't engage with their wairua the session is not even worthwhile because their energy is either low or high, and if they really want to help their inner pain, their wairua is present and wants to do the mahi (work). But if they don't want to do it, their wairua isn't present. It's hard to pick up and engage them because you can't get transformation. Wairua helps you to transform. (Tia)

Māori practices and knowledge of healing involves the use of tikanga such as karakia, waiata and mirimiri (Durie, 1999b; Rollo, 2013). Tahlia talked about these methods of healing are successful, but she also expresses her frustration that some people take that knowledge and claim it as their own:

Māori culture has a lot of main keys to healing our people. We have seen it; we work it, we live in it, so we truly know it works, and I am hōhā (fed up) with [others] capturing our tikanga and turning it into theirs. (Tahlia)

All of the participants talked about the importance of wairua for wellbeing. Gina's work is predominately around palliative care, and she notes that wairua becomes even more prominent as we near death. She referred to *Te Whare Tapa Whā* model to illustrate the strength of wairua:

And yet people at the end of their lives, the wairua, the spirituality, becomes more and more important. As the other sides of the house start to weaken and fall away, often it is the spirituality, the wairua side that stays strong and gets stronger. (Gina)

Creartive illustrated how matakite can be lifesaving as she recalls hearing her grandmother's spirit talk to her, as she was about to commit suicide:

And that's when I realised the things, the visions I was having, the feelings that I was feeling, and the voices that I was hearing, are absolutely real...because if they weren't, I would have committed suicide just like that. That's when I said to her [grandmother] ok...if my time is not up yet then you need to get support people to help me get through this, because now I realise I cannot do it on my own. It's too hard to do it on my own. (Creartive)

When asked how she took care of her wairua, Mere explained that she continued the practice of karakia that she had learnt from her grandfather with the understanding that it connects her to Atua and her natural surroundings. For her it is an act of gratitude:

getting up in the morning and acknowledging my surroundings, my environment, my connection with God with Atua....every day. I don't take anything for granted. (Mere)

Gina noted that it is the close connection with the natural world that makes Māori more aware and open to taha wairua, saying that separation of Pākehā with the land over many generations has resulted in disconnection between wairua and the land within the Pākehā psyche. Much of her kōrero has been around reconnecting to her taha Māori and this perhaps illustrates part of that journey and living in a bicultural society as she identifies as being both Pākehā and Māori:

We are much closer to that physical connection with the world around us, and so we can we are not afraid to talk or feel or explore those unseen things that we think of as kind of wairua, or a bit, you know, a bit spooky or a bit Godly or a bit otherworldly or whatever words you

want to give to it. Whereas on the Pākehā side that was so many generations and so many hundreds and hundreds and hundreds of years ago now, that we are too busy doing other things and we have forgotten our connection with the earth and with the world around us.

(Gina)

Anahera also experienced a connection with her ancestors, as she feels a sense of protection and security from them:

There can be moments when you suddenly feel touched, blessed might be another way of putting it....We [had] no electricity at home; we were brought up on kerosene lamps and candles. So the dark...our kēhua (ghosts/spirits) around, they weren't anything to be feared. Maybe when I say touched, it's to know that I am being looked after....I feel very safe in that, very safe. (Anahera)

Creartive went on to explain that it is through wairua that she was able to find strength in the connection with her tūpuna and to the spiritual realm:

That's where the strength comes from; strength comes from your wairua. When you tap in it's like you are not the only person, you know. All the tūpuna, all the ancestors, all the spirit guides, the animal guides - everything possible in the spirit realm are there for you. (Creartive)

Hana also talked of the strength gained through communicating with her deceased grandparents and relatives and the spiritual support she feels from them:

I'm always reflecting back, mainly to my nan and pop and asking for their strength to push me forward and help me. And if there is any other whānau with them to also help, but they are the two that I always refer back to. (Hana)

The inner spiritual strength that comes from wairua is explained by Tia as resilience. This resilience comes from an expression of wairua as an intimate relationship with the spiritual realm, whether it is ancestors or a Supreme Being, illustrating that it may be different for everyone:

Resilience and wairua for me work along the same lines. You can't get good strong wairua without being conditioned to have resilience....gaining resilience is because you hung in there with the wairua. You have to go through some experiences in life to gain the deep, the depths of what it is you are experiencing. To give you a new place to come out of and when you come out of that new place it...gives you a real strong inner support that nobody else can give you. It's your wairua. And then you hang onto that experience as one of your pou (post/support/pole). So you go into another one and the same thing happens, only you and that deepest place of pain/ hurt/joy/whatever, you can't express it in words. But in its holding and then your deep discerning with your God, your ancestors or whoever it is that you need to get support from. That you can't get from physical help. (Tia)

The balance between the spiritual and physical dimensions was important to these wāhine. Taha tinana was spoken about the least, with much emphasis on the importance of taha wairua. Narratives about taha wairua and wellbeing centred on karakia, healing and the tapu restrictions for hygiene when cooking and cleaning. Matakite was also relevant to wellbeing as one of the wāhine spoke about her suicide attempt. They spoke about acknowledging the tapu within the self and the importance of being connected to atua, tūpuna, whānau and tāngata. Disconnection from wairua was associated with illness.

4.4 Theme 3: Mana wahine

4.4.1 Understandings of Mana wahine

To gain an understanding of a wāhine perspective on wairua and wellbeing, it is helpful to first understand their perceptions of mana wahine. Much of the discourse from the participants around their understanding of mana wahine related directly to having participated in the Mana Wahine Programme from which they were recruited for this study. The main aim of the programme was to restore and enhance the wairua of these wāhine through learning or relearning their taha Māori.

a) Mana and tapu

The belief that underpinned the teachings of the Mana Wahine Programme was that through strengthening taha wairua, the wāhine would be able to balance the rest of their wellbeing. Tia explains that restoration and enhancement of mana and tapu is about recognising the sacredness in a person and by doing so, their power is enhanced. Mana wahine in this context is about wāhine first recognising that in themselves and reclaiming their own strength and determination. Tia explained that this can be achieved through working with and reconnecting to wairua:

Mana is what we call the actualisation of tapu....Tapu at its highest, its utmost, which is really about the highest safety for anything and anyone, and the highest respect....That's why you cry when you see certain things happening to people just because you know their tapu has been violated or hurt or whatever. If you understand that, then the power that's generated from having tapu acknowledged at its highest, comes into the mana of an individual, their power or their inner authority to achieve goals is huge, can't stop them, from visioning ahead. Mana is...working with your wairua...wairua can't work on its own. Wairua needs to be with something or someone to manifest action, growth. Mana is the power to do that. (Tia)

Tahlia explained that many of the women from the Mana Wahine Programme have experienced a sense of empowerment and enhanced self-worth through working with their wairua:

And that's about them respecting themselves, knowing that they are valued...[the] wairua work that we do in Mana Wahine [the programme] is that empowerment making...wāhine realise that they so deserve a lot more. (Tahlia)

Mere talked about spiritual strength enabling women to get through the challenges and hardships they may face in life as physical human beings, and highlighted the importance of connecting to her own wairua in keeping herself well:

find their potential within themselves to be able to carry themselves through this life, through the violence, through depression, through what the normal physical being goes through you know...You've got a wairua in there somewhere - let's bring it out and let us see this part of it, and see how comfortable you are with yourself as being whole. Because it does, for me it does anyway, it's my whole being and my whole essence of wairua...and if I didn't find spirituality I tell you what, I'd be a crazy woman. (Mere)

b) Leadership

Tahlia summarised her understanding of mana wahine as leadership, and the strength and spiritual power that is found within Te Ao Māori:

Connecting back to the source or our Atua....Leadership of our whānau, our tamariki, iwi, hapū, into a place where we want our future to be. It's about the kaha of wāhine getting into those leadership roles. It's about manaakitanga...capturing our stories for future wāhine. It's all about our dreams, our protection of our tamariki...being courageous and [to] stand up in this society. To learn Māori kaupapa such as karanga which is another aspect of mana wahine...we connect...to past, present and future, tūpuna. (Tahlia)

Further to this understanding of mana wahine as strength, Tia explained that wāhine are the “centre posts” of whānau, and once their mana and tapu have been restored then they are able to support and enhance the wellbeing of their whānau:

as being women because they are the centre posts of their whānau and until they can have that restored and strengthened then that's the only

time they can have the power to enhance and restore their family. They have to work with themselves first and have to heal themselves first. Because when one does their own work around themselves, things around them change. (Tia)

Mana wahine for Tahlia is also about enhancing the mana and tapu of all women, and she discussed the importance of teaching her son to respect women. Through role modelling and being a strong woman herself she hopes that he will recognise that sacredness in all women:

You got a mana wahine mum, why would you treat this young lady like that. Women should be loved...loving caring mother who provided for you....I hope that my son has the ability to be able to treat another woman with great respect. After seeing what his mother has done for him. (Tahilia)

c) Empowerment

Most of the women spoke about experiencing empowerment through having gone through the Mana Wahine Programme and reconnecting with their wairua. Creartive claimed that she now felt more in charge of her life having established a stronger self-image, increased sense of self-efficacy in facing life's challenges and making decisions, independence and the capability to keep boundaries with other people to keep herself safe. Her mana and tapu have been restored:

I know who I am. I can take on challenges a lot better; like anything in life that requires decisions or boundaries or what have you, I can do that. (Creartive)

Anahera experienced empowerment through her learning to respect and care for herself:

The word empowerment comes up. For many of us wāhine, for whatever lifestyles we came from. I know for myself personally - abuse, of all kinds from a very young age....Mana Wahine [the programme] showed me that I didn't need anybody else except me. Start with me, to

look after me and my wellbeing. I couldn't rely on anybody else if anything, and that truly did empower me. (Anahera)

Anahera went on to explain that she felt reconnected to her wairua through completing the Mana Wahine Programme:

I think it was reconnecting possibly with what we might have lost, and I know I lost quite a bit when I arrived down here. I felt as if I'd lost some of my wairua. I ended up in a huge city that I couldn't handle. (Anahera)

Mere says:

It's actually empowered me to share with the other women, my experiences of wairua. (Mere)

Tahlia also experienced healing through the sharing of stories and connecting with other wāhine:

It was nice to be there and listen to a couple of women who said that they got divorced from their husbands and making it quite humble, and a little bit humorous. Because I found that I was quite whakamā (embarrassed) to come out and say I was divorced,...I got my load lifted from hearing a lot of the women [their stories]; just little bits, even one word. (Tahlia)

And for Anika:

Mana wahine...gives me confidence. It's helped me through my journey from being enclosed into an egg and not allowed to let my feelings [out]....It's mellowed me out, I've gotten stronger... I've gone calm. (Anika)

The Mana Wahine Programme was not necessarily just for those who have had trauma in their lives, or were experiencing difficulties or hardship. All wāhine have the potential to enhance their mana and tapu by connecting with others. Gina explains that she was humbled by her experience after realising that she had

something to learn from the other women, even though she felt at the start it was unnecessary:

I looked at myself in this group of women, I thought “do I really belong here because I’m able to find out this information on my own”...I’m comfortable in the world... Whereas some of the girls that were doing the course with me had a lot of hardship in their lives. Had faced violent relationships - I hadn’t....[But] what I gained personally and what I learnt out of that was, I probably can’t even put that into words. You know that whole ‘I’m no better than anybody else.’ I learnt off those people just as much as hopefully they may have learnt off me. It was very humbling to be a part of that group and to witness the growth of all of us because we all grew in that time that we spent together. (Gina)

d) Raranga

Cultural practices such as raranga (weaving) were available in the Mana Wahine Programme, and for Anahera, the opportunity to do that reconnected her to Te Ao Māori and to her past, her whenua, her home:

I have connection or an affinity to the harakeke (flax) as well and I don’t know if that’s because of where I’ve been. But through Mana Wahine when the harakeke, the raranga class was provided for the Mana Wahine [Programme], I took to it like a duck to water. And that I think although when we were at home, it was mainly stripping back the harakeke and doing it with our mussel shell. Prepping the flax I never got to weave. I sat there and watched. I loved it. I could do that all day. And that was as far as I got with the harakeke. (Anahera)

e) Karanga

The role of the kaikaranga is held in high regard within Māori culture. The responsibility of this role belongs to wāhine (Te Awekotuku, 1991). The karanga is

the first voice that is heard on the marae and without the kaikaranga a hui (gathering) cannot proceed any further (Mikaere, 2003). Her job is to karanga the manuhiri, bringing together both the living and the dead (Mikaere, 2003) and preparing space for wairua within various cultural practices (Shirres, 1997). Tia explains how this is conducted on a marae; the importance of the role reflecting the importance of wāhine and of wairua within Māori society:

The karanga onto the marae where those energies all come together....we describe those energies as wairua or spirit feelings from everyone's whakapapa that is gathered there and all those generations of tūpuna we think about. And then all the energies of peoples' stored memories of their mountains and rivers and tūpuna, just present there in spirit. And then you all stand side by side you just sense it....the job of the karanga is to connect to all of that. So that it can open up a safe pathway for all of those who are moving towards the marae [to] feel safe. And then when they open up, well then the wairua touches you know because we hear that sound. And then the response and then it touches your puna roimata (well of tears) and [there] could be some flow of tears, it doesn't have to be physical but it could be inside. (Tia)

Tia goes on to describe the effect of the karanga as it opens people up to connecting with the wairua:

People are at all different stages of wairua recognition and so ones who understand the depth of that and have been through the experience often, know how to hold it and recognise it. And ones who are brand new to it, may not even have a clue. And yet they're still moved. And ones who are developing in it are almost too shy to even say or show that they are getting this high energy. (Tia)

Anika illustrates the great responsibility she feels as kaikaranga toward her ancestors, the marae and consequently the manuhiri and tāngata whenua and their ancestors during that process:

If you're going to be a kaikaranga you are up there with your tūpuna behind you your grandparents and your mum beside you, you are the pou of that marae. (Anika)

Karanga can also be conducted during the process of giving birth; in this instance Hana talks about her mother guiding her daughter into the world:

She [her baby] was very stubborn, but I had mum there and so I knew mum would do her little karakia with her coming through in her karanga, calling her into the world. (Hana)

Childbirth is a highly spiritual time where both the mother and baby are in a spiritually and physically vulnerable position. Karakia is used to protect them both and provides comfort for the mother. Hana's experience of giving birth was an extremely spiritual one:

I guess with you putting all your energy and tapping into all that side while you are giving birth, because you are actually pushing out a lot of you and you are open to all those elements...you are vulnerable at that time when you are bringing in a new life, so I guess all your energy is focused on another life and making sure that life comes into the world safely....with my first son I asked my mum and dad to be there with me. To do karakia and chanting...because I didn't want to take any medication at all, so I needed to tap into my wairua to give me strength to go through that process of birth. So that was my medication for me, having my parents doing that chanting and karakia and then tapping into myself just to give me strength to go through it. (Hana)

Hana also notes that karanga can be done as part of a daily ritual to acknowledge the wairua in everyday life, and how it can be intergenerational:

My nan used to karanga to anything and everything; it was her way of looking at life. So she would karanga to the birds, to the trees, depending on how she felt. I guess, without realising, it has been passed onto us but I guess at different levels. You see it in my Mum, she may

not karanga to everything but you can tell that she is because she's just bright with life. She's always bubbling with life so that's her way of her karanga to different things and different people and tapping into [wairua]. (Hana)

f) Cosmology narratives and cultural identity

Cosmology narratives link all Māori back to Papa-tū-ā-nuku and Rangi-nui, and speak of many strong atua wāhine (Kupenga et al., 1990; Mikaere, 1994). It was through cosmology narratives that Creartive was to establish her own identity. Explaining that she had no prior knowledge about these narratives, she found an understanding and acceptance of her spiritual experiences, a stronger sense of identity and a purpose and direction in life:

I connected it to some of the spiritual experiences that I had, and like the Atua you know, it was like having them guide me, lift me and guide me....And I thought to myself...you have too much to achieve, too many people to help....You have something to say and to express that is through your art work you know....once I connected with Io and Papa-tū-ā-nuku and Rangi-nui...I found myself. I knew who I was, I knew where I was going, and then I started making decisions for myself. (Creartive)

The strength of the wāhine in the cosmology narratives enables wāhine of today to gain insight, meaning and courage to deal with life's challenges as Tahlia points out:

So within that cosmology [there is] enough mana and kaha for wāhine to realise that we definitely can be leaders of our family. So it's something you can hold onto. We as wāhine sometimes have to make difficult decisions....All of the actions of these wāhine were based on their children. Hine-ahu-one, her decision to go underground to Hine-nui-te-pō in those pūrākau (ancient legend, story), it's a reflection where us wāhine can also link up to these women and realise the similarities that we have in everyday life. (Tahlia)

Reconnection to their taha Māori involved reclaiming their own stories and identity as Māori women. Various authors support the link between strengthened cultural identity and wellbeing (Brougham, & Haar, 2013; Durie, 1999a, 2005; Houkamau & Sibley, 2010; Mathieson, Mihaere, Collings, Dowell, & Stanley, 2012; Stuart & Jose, 2014). Some of the women spoke of the challenges of living within a bicultural society and for Gina, who has a Pākehā mother and a Māori father, is able to make the best of both worlds. Describing her two cultural identities as oil and water, she nevertheless manages to navigate her way successfully through life by identifying and feeling confident within both cultures:

My own personal journey has gone along and my personal understanding of who I am. I'm a Māori woman. I'm a Pākehā woman. I'm both of those things...it's a bit like oil and water - they might not ever truly mix and form one cohesive substance - but it is what it is and I am who I am and so I bring these different things. They journey alongside and sometimes one becomes a little bit more prevalent more than the other just depending on where I am what I'm doing and who I'm with. And my work is very bicultural because I spend a lot of time with my colleagues who are predominately Pākehā and then my patients who are Māori. (Gina)

Understandings of mana wahine included narratives about the recognition of the mana and tapu of the self and recognising that in others; empowerment; leadership; kaha; protecting tamariki; and the ability to restore and enhance the wellbeing of the whānau. They spoke about self-efficacy, self-respect, connecting to other wāhine and increased confidence. Reconnection to Te Ao Māori was made through raranga and karanga and strengthening their cultural identity through the cosmology narratives.

4.5 Conclusion

The second objective of this thesis was to explore the perspectives and experiences of the participants on wairua, oranga and mana wahine. Wairua was described

with great reverence and could be accessed through Te Ao Māori because it was entrenched within tikanga practices and Māori cosmology narratives. Wairua was associated with the higher self, a higher power, Atua, and an essence that required faith in its existence. It was described as subjective, a source of strength, stability, and healing. It was considered fundamental to their sense of identity and a link to the past, present and future, connecting them to their homes, communities, whenua, whānau and tūpuna. Wairua was expressed through aroha, tika, pono, manaakitanga and koha. Experiences of matakite were described as the ability to see, hear, smell and feel things in the spiritual realm, providing comfort and guidance and for one of the participants, a sense of caution. Discourse around wairua was kept within the whānau or with other Māori as the participants felt there was a lack of understanding and acceptance of it. Distinctions were made between wairua and religion that challenged some of the participants with their cultural identity and their spiritual and religious beliefs. Some of the participants felt comfortable within both Māori spirituality and religion, emphasising the importance of believing in a higher power.

Notions of *oranga* reflected holistic understandings of the balance between the physical and spiritual dimensions and the *Te Whare Tapa Whā* model of health. *Taha tinana* was associated with physical wellbeing, including eating well and being physically fit. *Taha hinengaro* included discourse about the importance of emotional expression and meditation while *taha whānau* related to maintaining healthy relationships with the self and with others. *Taha wairua* was given precedence over the other three dimensions of wellbeing. Notably toward the end of life when all the other dimensions of wellbeing began to fall away, *taha wairua* was considered to become stronger. Nurturing and maintaining *taha wairua* involved *karakia* on a daily basis, acknowledging and nurturing one's own *tapu*, and trusting in intuitive feelings and the senses. Ignoring this dimension of wellbeing or disconnecting from your wairua could result in illness. Engaging with the wairua of a person is essential to healing processes and necessary for transformations to occur. Connecting to *taha wairua* can provide spiritual guidance, resilience, protection and strengthened cultural identity. *Matakite* was described as a protector factor for suicide through being able to connect with the strength, support and comfort from tūpuna. *Taha wairua* was the avenue to

connecting with tūpuna, whenua, whānau and Atua and considered essential for wellbeing.

Kōrero around mana wahine was also attributed to positive experiences such as strengthened cultural identity and reconnection to Te Ao Māori through the cosmology narratives. Tikanga practices such as raranga and karanga were recognised as pathways to reconnecting with tūpuna, Atua, tāngata, whenua and marae. Mana wahine was associated with mana and tapu, empowerment, leadership, kaha, self-respect and the ability of wāhine to enhance and restore their whānau. Therefore tikanga programmes like the Mana Wahine Programme are also avenues to connecting with Te Ao Māori.

CHAPTER FIVE: ANALYSIS

5.1 Introduction

In the previous chapter, descriptions and insights relating to the three main themes of wairua, wellbeing and mana wahine were drawn from the narratives of the participants. These narratives showed how wairua flowed through their lives and was very much part of who they were as wāhine. This chapter will now provide a more in-depth analysis of how these themes interconnect, and thereby explain wairua and wellbeing. In accordance with the Kaupapa Māori methodology that informs this research, the findings will now be discussed within the framework of Te Ao Māori, reflecting the interconnection between the physical and spiritual realms which is considered pertinent to wellbeing. Relevant to this study in particular is the interconnection of wairua, tāngata, whenua, tūpuna and Atua.

5.2 Connection to Wairua

Wairua is beautiful and nobody can survive without it...which is why you see a lot of people floundering in their lives; things are not going right because they are disconnected (Creartive)

Consistent with other research, descriptions and experiences of wairua by the wāhine are varied, demonstrating the depth and complexity of meaning (Valentine, 2009). Discourse from the wāhine in this research explained wairua as the interconnection between the spiritual and physical realms, and as a fundamental part of Te Ao Māori and wellbeing.

Connection to wairua was facilitated through tikanga such as karanga, waiata, karakia, chanting, rituals and raranga. Consistent with the literature, karakia and rituals can be used as powerful tools to heal our minds and bodies, and to motivate and encourage Māori to overcome challenges in life (Manchester, 2010). These

wāhine described wairua as the tapu or sacredness of themselves as wāhine Māori which required them to respect, nurture and value their own existence and potential for their ultimate wellbeing.

Wellbeing was regarded as a balance between the physical and spiritual domains of human existence where taha tinana, taha hinengaro, taha whānau and taha wairua all impacted on and interacted with one another. Consistent with the Māori model of health, *Te Whare Tapa Whā*, neglecting one area of health affects all the others (Durie, 2011), and diminishes your own tapu (Tate, 2010);

To address or develop one or two elements, or links, to the exclusion of the others, is to deny the wholeness of one's person and is thus a violation of the totality of one's tapu. (p. 74)

Tia illustrates how these dimensions affect each other:

the moment you don't have enough sleep, you stay up till midnight and you might be doing some naughty things like drinking and smoking all night. Now your wairua is going to be tired when you get up, it's going to have an impact on all the rest, on how you are going to interact the next day, on how you feel. You are going to start punishing yourself, "oh I shouldn't have done that, I'm not an addict I'm not an alcoholic", you see? And that's when the wairua starts to feel all of that because it's been affected by one little part of you. (Tia)

Tapu and mana are two important aspects relating to wairua as illustrated in the context of wellbeing. Tia talks about the importance of having boundaries and protecting what is tapu. According to Tate (2010), the goal in life is to enhance your own tapu so that you have the mana to enhance the tapu of other people. If a person realises their own sacredness then they should have boundaries to protect that.

Tia explained that boundaries are required with other people who may try to diminish your tapu in any way, such as through verbal or physical abuse. It is also important that you do not diminish your own tapu or mana through such things as

abusing yourself through drugs or alcohol, or not conducting yourself well with others:

You know when you look after yourself...I describe that circle and having that strong tapu restrictions to set the boundaries among us so that it can look after what's inside it....which was the mana and the self-esteem and all of that in there. And then because right in the centre is what we call the Tapu i, because you exist and that's the seed of potential. I think people call that the soul also, which it could be where the potentiality stems from. If we look after that soul, you know the wairua is pure. (Tia)

Tapu is a fundamental concept of whanaungatanga and according to Tate (2010) it involves restrictions that are placed upon that which is sacred and vulnerable to violation. Tate's (2010) explanation of tapu within the context of whanaungatanga is very complex and detailed and includes many other equally complex terms such as mana (see chapter 2 of this thesis). At the risk of over-simplifying these complexities, "*Te tapu i* (tapu as being in itself)" (Tate, 2010, p. 64) is internal and refers to the intrinsic value, sacredness, dignity and worth of tāngata, whenua and Atua. *Te tapu o* (tapu of being in relationship) (Tate, 2010, p. 49) is external and consists of the sacredness, dignity and worth of being in relationship with tāngata, whenua and Atua (Tate, 2010). Therefore, it is important to acknowledge, protect and respect the sacredness of the self and of the relationships with other people, the environment and God. It can therefore be applied to the connection with tāngata, whenua, tūpuna and Atua.

The wāhine spoke of the connection to and having faith in their wairua as an integral part of wellbeing, and disconnection as the potential for illness such as mental health problems. Two of the wāhine were able to make sense of their experiences of matakite and were no longer fearful of it once they had reconnected to Te Ao Māori. Communicating with deceased relatives or other experiences of wairua is not uncommon for Māori (Bush & NiaNia, 2012; Durie, 2001; Mark & Lyons, 2010; Moon, 2003). Creartive explained when she first spoke about seeing and hearing things, she believed herself to be mentally unwell; at that time she had

little knowledge of and connection to her wairua. This also illustrates the concept of lacking balance between the hinengaro and wairua dimensions of wellbeing:

I said to my sister "I'm hearing voices...from time to time I can see like the walls move, or sometimes there were like sparkly lights or sparkly shapes you know just moving". I didn't understand what it was at the time...and she said "that is actually the spiritual side of yourself" and I'm going, "whatever" and again I went back into my head....and so that's when I started thinking "well we are both fricken crazy"....I just kept thinking "no, I think it's just safer for me to think that I'm crazy".

(Creartive)

Most of the wāhine in this study expressed their reluctance in discussing wairua and matakite with other people, concerned others would either not understand or pathologise their experiences. This highlights a potential barrier to health services as rapport has been identified as a key facilitator for access to health care (Cram et al., 2003). Within mental health care services, it is the responsibility of the psychologist to ensure the cultural safety of their clients (Cram et al., 2003) and to actively seek knowledge and understanding of the Māori culture (Evans et al., 2007). However there is a paucity of written information available on wairua in the context of wellbeing or how it is actualised within people's lives. Further to the issue of cultural competency, the difficulties associated with discussions about wairua experiences is that many Māori are disconnected from Te Ao Māori and are unable to articulate their experiences because they do not comprehend it themselves. They too may benefit from the promotion of this knowledge and for access to Te Ao Māori to be available should they choose.

5.3 Connection to Tāngata

He aha te mea nui o te ao? He tāngata, He tāngata, He tāngata.

(What is the most important thing in the world? It is people, It is people, It is people).¹²

The importance of connection with tāngata is illustrated in the above whakatauki and in concepts such as whanaungatanga. In the previous section on *Connection to Wairua*, the importance of the relationship with oneself was discussed. This section will analyse how the wāhine viewed the importance of their relationships with other people and how that affected their wairua and sense of wellbeing. According to Tate (2010), once you have acknowledged your own self-worth and wellbeing you are then able to support and enhance the mana and tapu of others. Tahlia talks about trusting in your wairua and being able to act on that intuitive knowledge to enhance relationships with others while also assisting to better understand one's own potential:

it's [wairua] also about working with intuition as well...even in relationships...you are constantly connecting to another person, that type of wairua work, getting little hints along the way such as 'I might need to go and see this person because their face is coming into my mind too much', that's intuition. Which we have and it actually is real, it's so real. If people link up to that, you start finding your purpose in life a lot faster I reckon. (Tahlia)

Narratives from these wāhine on connection with tāngata naturally led to connection with whānau, which included feelings of support, strength and healing. This relates to the health initiative *Whānau Ora* which is a concept that underpins *Te Puāwaiwhero* (Ministry of Health, 2008). The understanding is that from both a traditional and contemporary perspective, whānau are considered vital to the wellbeing of Māori (Durie, 1994; Kara et al.; Mikaere, 2011; Ministry of Health, 2008, 2012). Stuart and Jose (2014) claim the quality of family relationships and a

¹² Hollis, 2007, p. 4

connection with cultural identity can be positive predictors for adjustment and higher levels of wellbeing for Māori youth. Similarly, Durie (2006) claims that best outcomes for Māori are where they have a strong sense of identity, care for their whānau members and have access to Te Ao Māori.

According to Huriwai, Robertson, Armstrong, Kingi and Huata (2001), whanaungatanga can be utilised to improve self-esteem, identity and support structures. After having spent a year isolated in her home in Auckland due to severe depression, and disconnecting from those around her, Anahera returned to her home town where she finds healing through reconnecting with her family. The visual imagery of opening up her windows is synonymous with her ability to open herself up to other people again:

I went home instead and it brought me and my family a lot closer together, and my wairua was whole again....Initially it was just opening up my windows and doors and letting some fresh air into my whare. (Anahera)

Close connection with whānau also proved to be a protective factor for suicide as Anahera talked about not wanting to leave the story of her suicide for her whānau to have to live with:

I probably could have chosen to take all my medicine and not wake up. But I have been gifted with children. I couldn't leave that behind for them, the stigma behind for my babies to have to live with, or my moko to be ashamed that their nanny couldn't cope. (Anahera)

Conversely, being disconnected from wairua and family members resulted in a sense of isolation and emptiness. Creartive described her experience of depression as not having that spiritual link with her whānau. This portrays how wairua impacts on the quality of relationships; it requires more than simply being in the physical presence of whānau, there also needs to be a connection with their wairua:

I didn't know at that time that I had really disconnected from my wairua, but it was to me [that] even though I was surrounded by

family, I, it just seemed unreal. I could hug them but I didn't feel anything and I was just this shell. And they noticed too that when I was so, like, I kept trying to hide myself away from them. (Creativity)

Wairua within a whānau can be connected through taonga such as pounamu (greenstone). During the interview with Hana, I noticed that she was holding her pounamu that was around her neck and asked her about it. Her reply was that she had been oblivious to what she was doing, but noticed that it had become very warm. She explained the spiritual significance of it and how it connected her to whānau, past, present and future:

The pounamu is a three way connection. That's how I linked it, by my Mum gifting it to me, then giving it to my Nan to carry, getting her wairua, her essence when carrying it. That gives me a strong link because of the three of us. In time to come it will be gifted to my daughter....I asked her [grandmother] to take it with her and travel with her so it could, I guess, grab all that energy and what she was carrying, so it's quite special to me because of her taking it with her. (Hana)

Whanaungatanga extends beyond the immediate whānau into extended whānau, hapū and iwi, and is concerned with relationships with all tāngata (Tate, 2010). There are responsibilities that come with those relationships and correct ways to behave (Tate, 2010). Tahlia and Mere both spoke about the benefits of sharing their stories with other wāhine in learning to trust others, increased self-worth, self-confidence and strengthened identity as wāhine Māori. Tia explains how interconnection with tāngata and collective wairua works by using the research process as an example:

You fellas get capacity because you do research. See because you get information and knowledge aye, and you get information to support your thinking, your kōrero, and where you are going, because you are not doing it on your own. You are doing it with a whole lot of other people and their energy and their wairua to support your kōrero. And

so that helps you drive because your wairua is being supported by others. And you get there. That's you know, that's how it works. (Tia)

Connection to tāngata illustrated the importance of whanaungatanga. Relationships; with the self and others are viewed as an important part of their wellbeing. It was the wairua that facilitated this deep sense of connection and belonging.

5.4 Connection to Whenua

Te toto o te tāngata, he kai; te oranga o te tāngata, he whenua.

(Food supplies the blood of man; his wellbeing depends on the land)

The spiritual connection with land and the natural environment was acknowledged by six of the wāhine as important to them. According to Durie (2004), the alienation of indigenous peoples from the natural environment and the fragmentation of their world views may be as detrimental to their wellbeing as the more common health risks associated with modern day living. The above whakatauki illustrates this appreciation for the sustenance of the land; Papa-tū-ā-nuku, the reliance that human beings have on her for their survival, and the interconnection of land and people.

Anahera talked about the spiritual connection she has with the whenua through the practice of karakia and living closely within the natural environment. Through karakia she asked for permission and gave thanks to the atua for planting and harvesting in the garden, taking food from the sea, and harvesting flax. This demonstrated gratitude and respect for her natural environment and an understanding of the link between herself, the environment and atua:

Our ngahere (forest)...that was another connection to my wairua. Same with the moana (sea); kaimoana (seafood) is something we were brought up to go out and get, feed ourselves. The garden, the family garden the plot it was, it's a lifestyle....There was a karakia for the day

just to be in the garden because we would be planting or turning over, we might be harvesting. But there were karakia for everything and including the harvesting of our harakeke. (Anahera)

Connection with whenua also involved connection to communities and provided a strong sense of identity. Whenua is a place that connects and draws together tāngata, whānau, hapū and iwi (Ahuriri-Driscoll et al., 2012). Tahlia described how her childhood was spent playing outdoors amongst the natural world, which brought all of the children in the community together. Her story is also reflected in the well-known whakataukī that speaks of the interconnection of tāngata whenua to their natural environment: *Ko au te awa. Ko te awa ko au (I am the river, the river is me)*. Tahlia sees herself and her people as interconnected with their river, which had taught her from an early age of the importance of the natural environment:

We were constantly wrapped around our environment because where we lived in an area where the lake meets the river. So we are river people, and there was still bush. So we had greenery around us which connected us, continues to connect us up to all the kids and that. So the older we got, um, it's already a foundation set for our environment.
(Tahlia)

For Māori there is a sense of belonging and identity that is derived from the land. This comes from generations of a hapū living in a particular area and in which their ancestors are now buried, strengthening those spiritual connections (Mikaere, 2011). Ancestral land is a place to stand or tūrangawaewae (Palmer, 2004) that gives a profound sense of belonging and empowerment. The urupā is a place of great tapu within Māori culture as it is a place where ancestors are buried. There is a sense of timelessness, spiritual connection, belonging and identity as Anahera described the wairua that flowed in her urupā from her ancestors to herself to her tamariki and to her mokopuna:

I think it was more a sense of also letting my babies know who they were, where they belonged. They know they never got to meet their nan or their koro....when I've taken them home they know where their nanny lays. So a part of their understanding of who they are on the

inside is who they belong to on the outside. On that physical connection to the whenua as well as these people they can connect to in a picture. It doesn't matter, but in the urupā they belong to that whenua; they belong and that's I think one of the only way I knew how to share my wairua...to pass it on to my babies. (Anahera)

Her narrative of connection and identity is also reflected in the following whakataukī where the land retains the memories and the wairua of those ancestors that are now buried within it: *Toitū he whenua, whatu ngarongaro he tāngata (The land still remains when the people have disappeared).*

Gina also experienced a spiritual connection with the land. It does not necessarily have to be ancestral land, for her it is about having an awareness of the natural environment and all things in it. It is about childhood memories that live within the land, of being with whānau:

I used to go sit up on the maunga next to where I lived. I didn't call it a maunga, I called it Mt Eden....as a child I'd go down the crater and sit right at the bottom and put my hand under the stones and feel like the warm earth...to me it was the maunga talking to me or having a relationship with me. Things like trees, I have trees I can remember from my childhood as well that were significant to me. There was one particular tree um that stands in the [Auckland] Domain. As a family we would sit near there and have lunch on a Saturday occasionally and play under that tree. It had big droopy leaves and you could sort of go under there and hide and pretend you were in a cave. And to me that's wairua, that connection with nature I guess, you know, connections to animals. You know feeling like that animal is a living being equal to me being a living being. That's wairua to me. (Gina)

Connection to whenua was also described as having healing qualities. According to Ahuriri-Driscoll (2014) and Durie (1999b) traditional Māori healers used karakia and the natural environment including water for healing purposes. Hana talked about the healing process she went through which helped her to let go of her grief through connecting to the natural world:

Mum and I going away and doing a ritual away on the beach type thing and then connecting with all those elements, and sending that away in the sea. 'Cause we went to the sea. The sea is connected to you, [to] all parts of the world. So all that wairua and spiritual being that's flowing through there....It's a healing tool. (Hana)

Connection to land was interlinked with concepts of belonging and cultural identity. It was not only the connection to ancestral land, but also with the natural world that was important to their wellbeing. Land provided sustenance, healing, a resting place for the ancestors and a communal space for the living.

5.5 Connection to Tūpuna

E kore e hekeheke he kākano rangatira.

(I will never be lost for I am the seed of chiefs) ¹³

The interconnection with tūpuna is also an important aspect of wairua and wellbeing (Durie, 1985). Again the participants described a strong sense of identity associated with this connection. This concept is reflected in the above whakataukī which asserts that our ancestors will never die for they live on in each of us. Tia explains that tūpuna are part of your physical being: *“they are in our DNA or our whakapapa genes”* (Tia). Linking the spiritual with the physical dimensions, connecting to and listening to them can guide a person through life. This could be referred to as a strong sense of intuitive knowing without understanding how or why, but having the faith to listen. Tia explained that this kind of knowledge is stored in the puku (stomach) rather than the brain or head. For example, feeling something in the pit of your stomach, or having a gut feeling about something may be considered as intuitive knowing or sensing. This illustrates the value Māori place on feeling and sensing their realities rather than cognitively processing them:

¹³ Hollis, 2007, p. 14

within your puna (well) within your puku and it just rose up aye, and you see that's our kōrero with our tūpuna that its way down in our puku....That's how I've been taught, that our knowledge is stored in our puku. Your experiences, your stories of your tūpuna that you may not understand when they are talking to you when they are telling you things....So when the time is right, it will start to surface....you may not get it straight away. It might take years for it to unfold in its own way, but the thing is what it is trying to do, I believe, is that it's strengthening, it's giving you pou along the way to hold onto. Otherwise...you haven't got a strong framework or foundation to really pull you through to the next stage you see....it gets stronger and stronger....When you get there you have to have, physically, something strong to hold onto. And say yep this pou spoke to me about this and so yea. This is who I am. This is where I've come from.
(Tia)

The link to the spiritual world can be illustrated in the grieving processes of tangihanga as mourners can feel the wairua of those deceased (Durie, 2005). Mere described such an experience at her grandfather's tangihanga where she was able to connect with his wairua:

So in terms of sighting and seeing things and wairua....I knew that there was something more than just this, more than just the physical realm. (Mere)

Most of the wāhine described experiences of matakite, the ability to see into the spiritual realm. Some of them were more comfortable with this ability after having been through the Mana Wahine Programme, as they were able to make sense of their experiences. Communicating with deceased relatives was not uncommon for Māori, and tohunga in particular would communicate with ancestors during healing rituals (Mark & Lyons, 2010). Creartive asserts that had she not heard her deceased grandmother talk to her, she would have taken her own life:

I planned my suicide you know....and I just told her [daughter] that I loved her with all my heart...and then I just sent it [email] off and then

once I did that I thought “ok I’m going to do this now, just get it over and done with”. And then bugger me days, it’s then when I heard my grandmother say to me that my time wasn’t up. That’s when she told me that I had so much to achieve yet and that it would be unfair because she said that I could help so many people, that I had still so much to say. (Creartive)

Hana’s experience of healing after her miscarriage was very much a wairua experience; she was able to connect to her tūpuna for support and comfort. The quote below was used as part of a presentation I made at WiPCE in Hawaii. Initially I was hesitant in using this quote due to the tapu nature of it. However, Hana believed that by sharing her grief and pain with others, it would lessen its impact on her and help her to let it go. After the presentation a young woman approached me in tears, asking me to thank Hana for her story. She felt a sense of healing as she related strongly to Hana’s experience:

Just recently miscarrying and then having to grab all my inner self, feeling wairua and sort of reaching out there for the wider whānau concept as well. So that would probably be me with my wairua; I try to connect with my tūpuna to try and understand why it happened and how it happened and just for a healing concept for me, and then for me to sort of move on. I think just going through the process with my husband and my children and then moving on....doing karakia and then doing a cleansing for myself with my mum. (Hana)

Connection to tūpuna provided much support and comfort for these wāhine. Their narratives demonstrate how this connection can be especially important in times of despair and isolation. The link to tūpuna was illustrated through the communication of intuitive knowledge that was believed to reside deep within the stomach.

5.6 Connection to Atua

We come from the source, he tapu te ingoa (the sacred name) Io Matua and then it starts through the long nights....to Papa-tū-ā-nuku and Rangi-nui....to Hine-ahu-one the first earthly wāhine. (Tahlia)

Wairua was understood as connecting a person to Atua, which was also acknowledged by Valentine (2009). The interconnection of all things through karakia was described at length by the wāhine. During a conversation with her grandfather, Mere was told about the importance of wairua and connection to Atua through karakia:

He used to karakia every morning just before the sun came up, karakia. "Karakia is everything" and I used to go "why?" and he goes, "because that's my relationship with Atua and that's my relationship with the world". I said "why?" He goes, "because everything in this world has a wairua". (Mere)

As noted in the previous chapter, some of the wāhine used the word "God" or "Atua", and sometimes both were used interchangeably throughout their narratives. This could be due to the influence of having beliefs in both Christianity and the Māori deities, and it could also simply be due to translating Māori concepts into English. This also reflected notions of biculturalism and the effects of colonisation. Some of the women were comfortable having beliefs in both Christianity and the Māori deities, however religion was also seen as being too restrictive and Māori spirituality resonated more strongly for them. Durie (2009) states in a discussion on healing processes that some of the contemporary Māori healers referred to God or Christ in their karakia rather than the Māori deities. What appeared more important for the wāhine in this study was that there was a spiritual connection with a power higher than them:

It's [wairua] the power and the energy that you have within and how you connect that to the higher person or higher being or the divine or your God or the Atua. (Tia)

Three of the wāhine also spoke about the Māori Atua, particularly the Atua wāhine, and how they gained strength from relating to these Atua in the cosmology narratives. Within these cosmology narratives, the first wahine was made in the image of Atua (Black & Black, 2011), and as Hinewirangi (in Hibbs, 2006) explains, once we acknowledge that sacredness within us, we realise that we do not stand alone. Hinewirangi speaks of the sacredness of wāhine and asserts, “I’m Atua given, therefore I must be Atua and I must walk with that Atua” (in Hibbs, 2006, p. 10). This emphasises that one must start with looking within oneself and respecting that sacredness that is linked with Atua, a concept that was reiterated by Tia, Mere and Tahlia, particularly in the process of healing and in finding strength in oneself. The understanding that wāhine as creators of humanity are sacred is reflected within the notions of whare tāngata (Mikaere, 2011). Tahlia talked specifically of how relating to the atua wāhine can strengthen wāhine:

Mana wahine is based on whakapapa. So if you need a bit of kaha to get you through in this situation, cosmology stories give you great strength. We are the creators. (Tahlia)

Connection to Atua was made through karakia. Within the cosmology narratives, all Māori whakapapa back to the Atua. The wāhine found the cosmology narratives empowering and related them to their own lives.

5.7 Conclusion

The third objective of this research was to explore how wairua and wellbeing manifested within the lives of the participants. This analysis found that wairua connected these wāhine to themselves, to tāngata, whenua, tūpuna and Atua. Connection to wairua involved being in relationship to a higher power, or spiritual essence that exists in and interconnects all things. Building onto the descriptions in the previous chapter, connection to wairua was described as a source of stability, motivation, empowerment, growth, resilience and self-efficacy. Access to wairua was facilitated through tikanga such as karanga, waiata, karakia and raranga.

Connection to tāngata reflected concepts of whanaungatanga where interdependence and the responsibilities and obligations in maintaining relationships are fundamental to Māori society (Pihama, 2001). Individuals belong to a whānau, hapū and iwi creating a strong sense of belonging and the importance of the collective is considered above the individual (Pihama, 2001). It is through whakapapa and our origins from the Atua that Māori are all connected. The spiritual connection to tāngata was illustrated through trusting in and listening to your wairua and acting on intuitive knowledge. Connection to whānau provided strength, a sense of completeness, and a protective factor against suicide. Connection to whānau could be made through pounamu, and connection to other wāhine could be made through the sharing of stories. Collective wairua was described as having the support of many people through sharing similar goals.

Spiritual connection to whenua was demonstrated through strong ties to the natural environment including ancestral land, rivers and the forest. The urupā was a place where tūpuna who had lived within those lands, could be felt. The interconnection of tāngata, the natural world and Atua was expressed through karakia during planting and harvesting in the garden. Whenua brought communities together through providing a space for children to connect to each other and their environment through their play.

Connection to tūpuna provided a strong sense of identity, comfort, support and healing, particularly in times of distress. Being able to communicate with tūpuna prevented one of the wahine from committing suicide. The spiritual connection with tūpuna was explained as the knowledge that is passed on from one generation to the next. Communication with tūpuna was through the puku. Stirring up the wairua that sits deep within the puku the stored knowledge is activated and it required the ability of sensing rather than cognitive processes to access that information.

Connection with Atua was made through karakia. Cosmology narratives of atua wāhine were a source of strength and a reminder to the wāhine of their own sacredness. As whare tāngata the wāhine were also creators of life and held the sacredness of that ability.

The interconnection of tāngata, whenua, tūpuna, and Atua is made through wairua. Its importance to the wellbeing of these wāhine was evident. Many of the traditional understandings of wairua and holistic understandings of wellbeing that have been described in Chapter Two of this thesis, are still very much present in the lives of wāhine today.

CHAPTER SIX: CONCLUDING THOUGHTS

6.1 Introduction

I was born in Auckland, Aotearoa New Zealand, and moved to Australia at the age of 10. At the age of 28, I recall having a vivid dream one night of a kuia (I did not recognise her). I was getting into a taxi with a group of friends, we had all finished our course in photography (which had actually just happened) and we were heading off to celebrate. The kuia called out to me, she was sitting in a bus stop, arms crossed and very calmly but assertively telling me that I would come home. At the time it seemed highly unlikely, but within a year of having that dream, I had come back to New Zealand. Within a year of being home, I began a journey to find my whakapapa. In the process I realised that there was something incredibly beautiful about our culture, particularly from the elders, a calmness, knowledge, and wisdom that I wanted to understand and preserve. So I began interviewing various elders from different tribes and taking their photographs. I learnt about tikanga and what not to do very quickly, and 15 years later I'm still learning, however now I'm writing a thesis on wairua, wāhine and wellbeing in an effort to help our people.

I recall the gentle chuckle from the kuia who assisted in guiding this research, as she told me I was about to go on a wairua journey. Indeed I have gone on an amazing journey and at times, an extremely challenging one. Jumping between two worlds brought me into confrontation with my previously held beliefs about many things. The more I learnt about Te Ao Māori, the further apart that gap became as I realised the depths of our fascinating and highly spiritual culture. I have painstakingly searched for understanding of the topics in this thesis that would enable me to write about it with the respect it deserves. Wairua is a complex topic and I feel I have only touched the tip of the iceberg. I realise also that there are many more ways to access Te Ao Māori that would provide an even deeper understanding of it, such as learning te reo Māori.

The results of this research have confirmed my previously held convictions, that wairua is intrinsically tied to the wellbeing of Māori and there is much healing and wisdom within Te Ao Māori that can help our people. The wāhine shared their experiences with much emotion, pride and conviction. They were blatantly honest, humorous and had incredible insight into their own experiences. Some of them began their kōrero explaining that wairua was a huge topic that was almost impossible to describe, yet they all spoke with great ease and comfort as their narratives flowed with beautiful imagery and intriguing life experiences.

As with most things in life, it is one thing to read about something, and another to actually experience it. The various transformations of these narratives from the interviews and being in the presence of the wāhine, to listening to a recording of it, to transcribing it in words, to analysing and then re-writing - so much is lost that simply cannot be transferred by the written word. When I read their stories, I can hear their voices, laughter and pain; I can see their faces and feel their mana and aroha. I am overwhelmed with pride and respect for all of them and the beauty that is within our culture and our people. I hope some of the wairua flows through these pages so it can be shared with those who seek to understand it.

6.2 Limitations

This is not an exhaustive account of wairua, wellbeing or mana wahine. It is a window into how these three concepts have been experienced by eight wāhine Māori. This sample of participants was drawn from a particular Mana Wahine Programme so their understandings of these concepts could be biased to a particular view taught within the programme. However, they were all able to relate very different experiences from each other, and the variety of the descriptions and understandings of the main themes would suggest that knowledge gained from the programme was not simply reiterated, but rather assisted them in being able to express those experiences of wairua and gain meaning from them. Additionally some of the women had completed the course over ten years ago and others already had a deep understanding of what wairua and wellbeing meant to them

before they started the programme. The variety of their understandings also came from their own whānau and tūpuna, hapū and iwi.

6.3 Implications

The findings of this research illustrate the importance of wairua to Māori wellbeing and the great potential for healing and empowerment that is inherent within Te Ao Māori. It therefore advocates (re)connection to Te Ao Māori and the integration of both traditional and medical knowledge for tāngata whaiora. Through the inclusion of tikanga programmes such as the Mana Wahine Programme or the use of kaumātua and cultural advisors, mental health services could be more culturally appropriate and accommodate for this dimension of wellbeing. Additionally, through promoting wairua and wellbeing and providing more information for psychologists on how it is actualised, the therapeutic relationship may be enhanced. It may also assist psychologists to recognise the cultural nuances of tāngata whaiora. While recognising that not all Māori subscribe to a Māori world view, the choice to engage should still be made available.

6.4 Conclusion

This study was not intended to be an exhaustive description or definition of wairua or wellbeing, but rather a window into how these concepts can be experienced. The research question asked: *What are the conceptualisations and experiences of wairua and oranga from the perspectives of wāhine living in contemporary Aotearoa?* Consistent with traditional Māori understandings, the wāhine considered oranga from a holistic perspective where the balancing of the physical and spiritual dimensions of human existence was crucial to wellbeing. Wairua was deeply encapsulated and intertwined within these understandings of wellbeing and their sense of being in the world.

Connection to wairua had numerous positive outcomes for the wāhine and entailed the realisation of the tapu within the self. Respecting that inner sacredness required having faith in a higher power and listening to intuitive

knowledge. Through realising one's own self-worth, it was then possible to enhance the tapu of others. The enhancement of tapu can be understood within the relationships with tāngata, whenua, Atua and tūpuna. If the goal is to enhance tapu then it recognises the responsibilities of our own thoughts and actions toward ourselves, each other, the environment and the Divine. This reflects the interconnection with the physical and spiritual realms and a holistic view of health.

The connection to wairua, tāngata, whenua, tūpuna and Atua is made through the various tikanga practices within Māori culture. Tia explained how access to Te Ao Māori can provide this sense of connection:

You get into Te Ao Māori, wairua just sparks all over the place, and you pick it up. You don't even have to track it because it's just present. And when people talk you feel it, you hear it - you can almost eat it. (Tia)

Wairua is entrenched within Te Ao Māori and is a pathway to healing, empowerment, cultural identity and the many other positive outcomes that have been described within these narratives. Wairua remains a highly valued and integral dimension of existence for wāhine living in contemporary Aotearoa.

Kia tau ki a tātou katoa

Te atawhai o tō tātou Ariki

a Ihu Karaiti

Me te aroha o te Atua

Me te whiwhingātahitanga

Ki te wairua tapu

Amine¹⁴

¹⁴ A karakia to close this research.

REFERENCES

- Ahuriri-Driscoll, A. (2014). He kōrero wairua. *MAI Journal*, 3(1), 33-44.
- Ahuriri-Driscoll, A., Hudson, M., Bishara, I., Milne, M., & Stewart, M. (2012). *Ngā Tohu o te Ora: Traditional Māori healing and wellness outcomes*. Porirua, New Zealand: Institute of Environmental Science and Research.
- Armstrong, M., & Armstrong, R.W. (1991). New Zealand Māori women's health: Status and self-help action in the 1980s. *Women & Health*, 17(2), 45-64.
- August, W. (2005). Māori women: Bodies, spaces, sacredness and mana. *New Zealand Geographer*, 61(2), 117-123.
- Baxter, J. (2008). *Māori mental health needs profile: A review of the evidence*. Palmerston North, New Zealand: Te Rau Matatini.
- Baxter, J., King, T.K., Tapsell, R., & Durie, M. (2006). Māori. In M. A. Oakley-Brown, J.E. Wells & K.M. Scott (Eds.), *Te rau hinengaro: The New Zealand mental health survey* (pp. 139-178). Wellington, New Zealand: Ministry of Health.
- Best Practice Journal. (2008). Māori mental health. *Best Practice Journal*, 14, 31-35. Retrieved from <http://www.bpac.org.nz/BPJ/2008/June/maori.aspx>
- Best Practice Journal. (2010). Recognising and managing mental health problems in Māori. *Best Practice Journal*, 28, 8-17. Retrieved from <http://www.bpac.org.nz/BPJ/2010/June/mentalhealth.aspx>
- Bishop, R. (1999). Kaupapa Māori Research: An indigenous approach to creating knowledge. In N. Robertson (Ed.), *Māori and psychology: Research and Practice*. Hamilton, New Zealand: University of Waikato.
- Bishop, R., Berryman, M., Cavanagh, T., & Teddy, L. (2009). Te Kotahitanga: Addressing educational disparities facing Māori students in New Zealand. *Teaching and Teacher Education*, 25(5), 734-742.

- Bishop, R., & Glynn, T. (1999). Researching in Māori contexts: An interpretation of participatory consciousness. *Journal of Intercultural Studies*, 20(2), 167-182.
- Black, M. (Writer), & Black, N. (Director). (2010). Ghosts [Television series episode 9]. In E. Morgan (Executive Producer), *Wairua*. Auckland, New Zealand: Māori Television. Retrieved from <http://www.maoritelevision.com/tv/shows/wairua>
- Black, M. (Writer), & Black, N. (Director). (2011). The holy spirit [Television series episode 16]. In E. Morgan (Executive Producer), *Wairua*. Auckland, New Zealand: Māori Television. Retrieved from <http://www.maoritelevision.com/tv/shows/wairua>
- Boyatzis, R.E. (1998). *Transforming qualitative information: Thematic analysis and code development*. Thousand Oaks, CA: Sage Publications.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101.
- Brougham, D., & Haar, J.M. (2013). Collectivism, cultural identity and employee mental health: A study of New Zealand Māori. *Social Indicators Research*, 114(3), 1143-1160.
- Buck, P. (1950). *The coming of the Māori* (2nd ed.). Wellington, New Zealand: Whitcombe and Tombs.
- Bush, A., & NiaNia, W. (2012). Voice hearing and pseudoseizures in a Māori teenager: An example of mate Māori and Māori traditional healing. *Australasian Psychiatry*, 20(4), 348-351.
- Caine, V., Estefan, A., & Clandinin, D.J. (2013). A return to methodological commitment: Reflections on narrative inquiry. *Scandinavian Journal of Educational Research*, 57(6), 574-586.
- Clandinin, D.J. (2007). *Handbook of narrative inquiry: Mapping a methodology*. Thousand Oaks, CA: Sage Publications.

- Clandinin, D.J., & Connelly, F.M. (2000). *Narrative inquiry: Experience and story in qualitative research*. San Francisco, CA: Jossey-Bass Inc.
- Commission on Social Determinants of Health. (2007). *Social determinants and indigenous health: The international experience and its policy implications*. Report on specially prepared documents, presentations and discussion at the International Symposium on the Social Determinants of Indigenous Health Adelaide, 29-30 April 2007 for the Commission on Social Determinants of Health. Retrieved from http://www.who.int/social_determinants/resources/indigenous_health_adelaide_report_07.pdf
- Cram, F. (2001). Rangahau Māori: Tona tika, tona pono – The validity and integrity of Māori research. In M Tolich (Eds.), *Research ethics in Aotearoa New Zealand* (pp. 35-52). Auckland, New Zealand: Pearson Education New Zealand.
- Cram, F., Smith, L., & Johnstone, W. (2003). Mapping the themes of Māori talk about health. *The New Zealand Medical Journal*, 116(1170), 1-7. Retrieved from <http://www.nzma.org.nz/journal/116-1170/350/>
- Crampton, P., Salmond, C., Blakely, T., & Howden-Chapman, P. (2000). Socioeconomic inequalities in health: How big is the problem and what can be done? *Pacific Health Dialog*, 7(1), 94-98.
- Creswell, J.W. (2013). *Qualitative inquiry & research design: Choosing among five approaches* (3rd ed.). Thousand Oaks, CA: Sage Publications.
- Davies, L., & Jackson, N. (1994). One hundred years of women's labour force participation: Some comments. *Social Policy Journal of New Zealand* (3), 1-19. Retrieved from <http://www.msd.govt.nz/about-msd-and-our-work/publications-resources/journals-and-magazines/social-policy-journal/spj03/03-labour-force-participation.html>
- Department of Corrections. (2014). *Prison facts and statistics: June 2014*. Retrieved from

http://www.corrections.govt.nz/resources/quarterly_prison_statistics/CPDecember_2014.html#ethnicity

Department of the Prime Minister and Cabinet. (2015). New Year honours 2015: Citations for Dame Companions of the New Zealand order of merit.

Retrieved from <http://www.dPMC.govt.nz/honours/lists/ny2015-dnzm>

Durie, M. (1984). *Te taha hinengaro: An integrated approach to mental health*.

Wellington, New Zealand: Department of Health. Retrieved from

[http://www.moh.govt.nz/notebook/nbbooks.nsf/0/199037C1AB3E7B724C2565D700185DBD/\\$file/Hui%20Whakaoranga%20Maori%20Health.pdf](http://www.moh.govt.nz/notebook/nbbooks.nsf/0/199037C1AB3E7B724C2565D700185DBD/$file/Hui%20Whakaoranga%20Maori%20Health.pdf)

Durie, M. (1985). A Māori perspective of health. *Social Science and Medicine*, 20(5), 483-486.

Durie, M. (1999a). Transcultural psychiatry: Mental health and Māori

development. *Australian and New Zealand Journal of Psychiatry*, 33(1), 5-12.

Durie, M. (1999b). *Whaiora: Māori health development* (2nd ed.). Auckland, New Zealand: Oxford University Press.

Durie, M. (2000). Māori health: Key determinants for the next twenty-five years. *Pacific Health Dialog*, 7(1), 6-11.

Durie, M. (2001). *Mauri ora: The dynamics of Māori health*. Auckland, New Zealand: Oxford University Press.

Durie, M. (2004). Understanding health and illness: Research at the interface between science and indigenous knowledge. *International Journal of Epidemiology*, 33(5), 1138-1143.

Durie, M. (2005). *Mauri Ora: The dynamics of Māori health*. Melbourne, Australia: Oxford University Press.

Durie, M. (2009). Māori knowledge and medical science: The interface between psychiatry and traditional healing in New Zealand. In M. Incayawar, R. Wintrob, L. Bouchard, & G Bartocci (Eds.), *Psychiatrists and traditional healers* (pp. 237-249). West Sussex, United Kingdom: John Wiley & Sons.

- Durie, M. (2011). Indigenizing mental health services: New Zealand experience. *Transcultural Psychiatry*, 48(1-2), 24-36. DOI: 10.1177/1363461510383182
- Durie, M. (2012). Interview: Kaupapa Māori - Shifting the social. *New Zealand Journal of Educational Studies*, 47(2), 21-29.
- Durie, M. (2014). *He Korowai Oranga: Māori Health Strategy launch*. Transcript of speech at Parliament for the launch of He Korowai Oranga: Māori Health Strategy – June 20 2014. Retrieved from <http://www.health.govt.nz/our-work/populations/Māori-health/he-korowai-oranga/pae-ora-healthy-futures/transcript-he-korowai-oranga-maori-health-strategy-launch-sir-mason-durie>
- Evans, I. (2008). Steering by Matariki and the Southern Cross: Plotting clinical psychology's course in New Zealand. *New Zealand Journal of Psychology*, 37(3), 5-14.
- Evans, I., Rucklidge, J.J., & O'Driscoll, M. (2007). *Professional practice of psychology in Aotearoa New Zealand*. Wellington, New Zealand: New Zealand Psychological Society.
- George, L. (2010). The interweaving of people, time, and place: Whakapapa as context and method. *Pacific Studies*, 33(2/3), 241-258.
- George, L. (2012). Expressions of Māori multiplicity in (re)connection to ngā taonga tuku iho. *Social Identities*, 18(4), 435-450.
- Guest, G., Bunce, A., & Johnson, L. (2006). How many interviews are enough? An experience with data saturation and variability. *Field Methods*, 18(1), 59-82.
- Herd, R. (2006). Mana wahine me te tino rangatiratanga: Māori women's dignity and self-determination. *Social Work Review*, 18(2), 14-21.
- Hibbs, S. (2006). Mana wahine: What does it mean to you? *Social Work Review*, 18(2), 9-13.
- Hollis, R. (2007). *Kia maumahara ki ngā whakatauki: Remember Māori proverbs*. Nelson, New Zealand: Renee Hollis.

- Houkamau, C.A., & Sibley, C.G. (2010). The Multi-Dimensional Model of Māori identity and cultural engagement. *New Zealand Journal of Psychology*, 39(1), 8-28.
- Hudson, M., Milne, M., Reynolds, P., Russell, K., & Smith, B. (2008). *Te Ara Tika: Guidelines for Māori research ethics - A framework for researchers and ethics committee members*. Auckland, New Zealand: Health Research Council of New Zealand. Retrieved from <http://www.hrc.govt.nz/sites/default/files/Te%20Ara%20Tika%20Guidelines%20for%20Maori%20Research%20Ethics.pdf>
- Huriwai, T., Robertson, P.J., Armstrong, D., Kingi, T.P., & Huata, P. (2001). Whanaungatanga: A process in the treatment of Māori with alcohol and drug use related problems. *Substance Use & Misuse*, 36(8), 1033-1051.
- Ihimaera, L.V. (2004). *He ara ki te ao mārama: A pathway to understanding the facilitation of taha wairua in mental health services*. (Unpublished Master's thesis). Massey University, Palmerston North, New Zealand. Retrieved from <http://muir.massey.ac.nz/bitstream/handle/10179/990/02whole.pdf?sequence=1>
- Jahnke, H., & Taiapa, J. (2003). Māori research. In C. Davidson & M. Tolich (Eds.), *Social Science in New Zealand* (2nd ed.), (pp. 39-50). Auckland, New Zealand: Pearson Education New Zealand.
- Jones, R. (2000). Diagnosis in traditional Māori healing: A contemporary urban clinic. *Pacific Health Dialog*, 7(1), 17-24. Retrieved from <http://pacifichealthdialog.org.fj/Volume207/No120Maori20Health20in20New20Zealand/Original20Papers/Diagnosis20in20traditional20Maori20healing20a20contemporary20urban20clinic.pdf>
- Kara, E., Gibbons, V., Kidd, J., Blundell, R., Turner, K., & Johnstone, W. (2011). Developing a kaupapa Māori framework for whānau ora. *AlterNative: An International Journal of Indigenous Peoples*, 7(2), 100-110.
- Kelsey, J. (1993). *Rolling back the state: Privatisation of power in Aotearoa/New Zealand*. Wellington, New Zealand: Bridge Williams Books.

- Kim, S., Roth, W.T., & Wollburg, E. (2015). Effects of therapeutic relationship, expectancy, and credibility in breathing therapies for anxiety. *Bulletin of the Menninger Clinic*, 79(2), 116-130
- King, M. (1983). *Whina*. Auckland, New Zealand: Hodder and Stoughton.
- King, M. (2003). *Te Puea*. Auckland, New Zealand: Reed Books.
- Kingi, T.K.R. (2002). *Hua oranga: Best health outcomes for Māori*. (Unpublished doctoral dissertation) Massey University, Wellington, New Zealand. Retrieved from <http://mro.massey.ac.nz/handle/10179/2079>.
- Kupenga, V., Rata, R., & Nepe, T. (1990). Whaia te iti kahurangi: Māori women reclaiming autonomy. In NZ Planning Council (Ed.), *Puna Wairere: Essays by Māori*. Wellington, New Zealand: New Zealand Planning Council.
- Law Commission. (1999). *Justice: The experiences of Māori women* (Report No. 53). Wellington, New Zealand: Law Commission/ Ta aka matua o te ture. Retrieved from http://www.lawcom.govt.nz/sites/default/files/publications/1999/04/Publication_52_123_R53.pdf
- Limb, G.E., & Hodge, D.R. (2008). Developing spiritual competency with Native Americans: Promoting wellness through balance and harmony. *Families in Society: The Journal of Contemporary Social Services*, 89(4), 615-622. DOI: 10.1606/1044-3894.3816
- Lowenberg, J.S., & Davis, F. (1994). Beyond medicalisation-demedicalisation: The case of holistic health. *Sociology of Health & Illness*, 16(5), 579-599
- Macfarlane, A.H., Blampied, N.M., & Macfarlane, S.H. (2011). Blending the clinical and the cultural: A framework for conducting formal psychological assessment in bicultural settings. *New Zealand Journal of Psychology*, 40(2), 5-15.
- Manchester, A. (2010). Tikanga Māori provides vision for health and healing. *Kai Tiaki Nursing New Zealand*, 16(8), 28-29.

- Marie, D., Fergusson, D.M., & Boden, J.M. (2008). Ethnic identification, social disadvantage, and mental health in adolescence/young adulthood: Results of a 25 year longitudinal study. *Australian & New Zealand Journal of Psychiatry*, 42(4), 293-300.
- Mark, G., & Chamberlain, K. (2012). Māori healers' perspectives on cooperation with biomedicine. *The Australian Community Psychologist*, 24(1), 97-105. Retrieved from [https://groups.psychology.org.au/Assets/Files/Mark%20et%20al%20ACP%2024\(1\)97-105.pdf](https://groups.psychology.org.au/Assets/Files/Mark%20et%20al%20ACP%2024(1)97-105.pdf)
- Mark, G.T., & Lyons, A.C. (2010). Māori healer's views on wellbeing: The importance of mind, body, spirit, family and land. *Social Science and Medicine*, 70(11), 1756-1764.
- Marsden, M., & Henare T.A. (1992). *Kaitiakitanga: A definitive introduction to the holistic world view of the Māori*. Wellington, New Zealand: Ministry for the Environment.
- Massey University. (2015). *Code of ethical conduct for research, teaching and evaluations involving human participants*. Palmerston North, New Zealand: Massey University. Retrieved from <http://www.massey.ac.nz/massey/fms/Human%20Ethics/Documents/MUHEC%20Code%202015.pdf?497309B983F78ECC2490A4A377F5CBAD>
- Mathieson, F., Mihaere, K., Collings, S, Dowell, A., & Stanley, J. (2012) Māori cultural adaptation of a brief mental health intervention in primary care. *Journal of Primary Health Care*, 4(3), 231-238.
- McIntosh, D.N., Poulin, M.J., Cohen Silver, R., & Holman, E.A. (2011). The distinct roles of spirituality and religiosity in physical and mental health after collective trauma: A national longitudinal study of responses to the 9/11 attacks. *Journal of Behavioural Medicine*, 34(6), 497-507.
- McNeill, H. (2009). Māori models of mental wellness. *Te Kaharoa*, 2, 96-115.

- Mead, H.M. (2003). *Tikanga Māori: Living by Māori values*. Wellington, New Zealand: Huia Publishers
- Mehl-Madrona, L. (2009). What traditional indigenous elders say about cross-cultural mental health training. *Explore*, 5(1), 20-29.
- Mehl-Madrona, L. (2013). Mixed methodology approaches to exploring spiritual transformation. *The Qualitative Report*, 18(5), 1-11.
- Mikaere, A. (1994). Māori women: Caught in the contradictions of a colonised reality. *Waikato Law Review*, 2(7).
- Mikaere, A. (2003). *The balance destroyed: Consequences for Māori women of the colonisation of tikanga Māori*. Auckland, New Zealand: The International Research Institute for Māori and Indigenous Education.
- Mikaere, A. (2011). *Colonising myths, Māori realities*. Wellington, New Zealand: Huia Publishers & Te Tākupu, Te Wānanga o Raukawa.
- Milne, M. (2005). *Māori perspectives on kaupapa Māori and psychology*. Retrieved from http://www.pbanz.org.nz/docs/KAUPAPA%20MAORI%20AND%20PSYCHOLOGY1%20Moe%20Milnes%20Report_doc1.pdf
- Ministry of Business, Innovation & Employment (2013). *Māori Labour Market Factsheet: March 2013*. Retrieved from <http://www.dol.govt.nz/publications/lmr/pdfs/lmr-fs/lmr-fs-maori-mar13.pdf>
- Ministry of Culture and Heritage: Manatū Taonga (2014a). Story: Cooper, Whina. *Te Ara: The encyclopaedia of New Zealand*. Retrieved from <http://www.teara.govt.nz/en/biographies/5c32/cooper-whina>
- Ministry for Culture and Heritage: Manatū Taonga. (2014b). Story: Ngā whakataunga tiriti – Treaty of Waitangi settlement process. *Te Ara: The encyclopaedia of New Zealand*. Retrieved from <http://www.teara.govt.nz/en/nga-whakataunga-tiriti-treaty-of-waitangi-settlement-process/page-3>

- Ministry of Culture and Heritage: Manatū Taonga (2014c). Whina Cooper leads land march to Parliament. *New Zealand History*. Retrieved from <http://www.nzhistory.net.nz/whina-cooper-led-land-march-te-ropu-o-te-matakite-reaches-parliament>
- Ministry of Health: Manatū Hauora. (2006). *Tatau kahukura: Māori health chart book*. Wellington, New Zealand: Ministry of Health.
- Ministry of Health: Manatū Hauora. (2008). *Te Puāwaiwhero: The second Māori mental health and addiction national strategic framework 2008-2015*. Wellington, New Zealand: Ministry of Health.
- Ministry of Health: Manatū Hauora. (2010). *Tatau kahukura: Māori health chart book* (2nd ed.). Wellington, New Zealand: Ministry of Health.
- Ministry of Health: Manatū Hauora. (2013). *The health of Māori adults and children*. Retrieved from <http://www.health.govt.nz/system/files/documents/publications/health-maori-adults-children-summary.pdf>
- Ministry of Health: Manatū Hauora. (2014). *He korowai oranga: Māori health strategy 2014*. Wellington, New Zealand: Ministry of Health.
- Moeke-Maxwell, T. (2014). What whānau need at the end of life. *Kai Tiaki Nursing New Zealand*, 20(4), 12-14.
- Moewaka Barnes, H. (2000). Kaupapa Māori: Explaining the ordinary. *Pacific Health Dialog*, 7(1), 13-16.
- Moon, P. (2003). *Tohunga: Hohepa Kereopa*. Auckland, New Zealand: David Ling Publishing.
- Moorfield, J.C. (2003). *Te aka online Māori dictionary*. Retrieved from <http://www.maoridictionary.co.nz>
- Mutu, M. (2004). Māori issues. *The Contemporary Pacific*, 16(1), 158-163.
- Oakley Browne, M.A., Wells, J.E., & Scott, K.M. (2006). *Te Rau Hinengaro: the New Zealand Mental Health Survey*. Wellington, New Zealand: Ministry of Health,

- New Zealand government. Retrieved from
<http://www.spinz.org.nz/file/FAQs/PDFs/mental-health-survey.pdf>
- O'Hagan, M., Reynolds, P., & Smith. (2012). Recovery in New Zealand: An evolving concept? *International Review of Psychiatry*, 24(1), 56-63.
- Orange, C. (2013). *The story of a treaty*. Wellington, New Zealand: Bridget Williams Books.
- Palmer, S. (2004). Hōmai te waiora ki ahau: A tool for the measurement of wellbeing among Māori - The evidence of construct validity. *New Zealand Journal of Psychology*, 33(2), 50-58.
- Papa, R., & Meredith, P. (2012). Kingitanga - The Māori King Movement: Te Rata, 1912-1933, and Te Puea. *Te Ara: The encyclopaedia of New Zealand*. Manatū Taonga: Ministry for Culture and Heritage. Retrieved from
<http://www.teara.govt.nz/en/kingitanga-the-maori-king-movement/page-5>
- Penehira, M., Smith, L.T., Green, A., & Aspin, C. (2011). Mouri matters. *AlterNative: An International Journal of Indigenous Peoples*, 7(2), 177-187.
- Pere, R. (1984). Te Oranga o te whānau: The health of the family. *Hui Whakaoranga Māori health planning workshop*. Wellington, New Zealand: Department of Health. Retrieved from
[http://www.moh.govt.nz/notebook/nbbooks.nsf/0/199037C1AB3E7B724C2565D700185DBD/\\$file/Hui%20Whakaoranga%20Maori%20Health.pdf](http://www.moh.govt.nz/notebook/nbbooks.nsf/0/199037C1AB3E7B724C2565D700185DBD/$file/Hui%20Whakaoranga%20Maori%20Health.pdf)
- Pere, R.T. (1990). Tangata whenua. In New Zealand Planning Council (Eds.), *Puna Wairere: Essays by Māori* (pp. 1-6). Wellington, New Zealand: New Zealand Planning Council.
- Pere, R.T. (1997). *Te wheke: A celebration of infinite wisdom* (2nd ed.). Gisborne, New Zealand: Ako Ako Global Learning.
- Pihama, L.E. (2001). *Mana wahine as a kaupapa Māori theoretical framework* (Unpublished doctoral dissertation). University of Auckland, Auckland, New Zealand.

Zealand. Retrieved from

<http://kaupapamaori.com/assets/tiheimaori.pdf>

- Pihama, L. (2010). Kaupapa Māori theory: Transforming theory in Aotearoa. *He Pukenga Kōrero*, 9(2), 5-14.
- Polkinghorne, D. (1988). *Narrative knowing and the human sciences*. Albany, NY: State University of New York Press.
- Pool, I. (1991). *Te Iwi Māori: A New Zealand population past, present and projected*. Auckland, New Zealand: Auckland University Press.
- Priest, N., Mackean, T., Davis, E., Briggs, L., & Waters, E. (2012). Aboriginal perspectives of child health and wellbeing in an urban setting: Developing a conceptual framework. *Health Sociology Review*, 21(2), 180-195.
- Reid, P., & Robson, B. (2006). The state of Māori health. In M. Mulholland (Ed.), *State of the Māori Nation twenty-first-century issues in Aotearoa* (pp. 17-31). Auckland, New Zealand: Reed Publishing Ltd.
- Riessman, C.K. (2008). *Narrative methods for the human sciences*. Los Angeles, C.A: Sage Publications.
- Riessman, C.K. (2013). Concluding comments. In M. Andrews, C. Squire & M. Tamboukou (Eds.), *Doing narrative research* (2nd ed., pp. 255-260). London, England: Sage Publications.
- Rollo, Te Manaaroha Pirihiira. (2013). Mā te wai ka piki ake te Hauora. *New Zealand Journal of Music Therapy*, 11, 51-80.
- Royal, T.A.C. (2003). *The woven universe: Selected writings of Rev. Māori Marsden*. Otaki, New Zealand: The estate of Rev. Māori Marsden.
- Royal, T. C. (2012). Politics and knowledge: Kaupapa Māori and Mātauranga Māori. *New Zealand Journal of Educational Studies*, 47(2), 30-37.
- Ryan, P.M. (2008). *The Raupo dictionary of modern Māori* (2nd ed.). North Shore, New Zealand: Penguin Group (NZ).

- Shirres, M. (1997). *Te tangata: The human person*. Auckland, New Zealand: Accent Publications
- Simmonds, N. (2011). Mana wahine: Decolonising politics. *Women's Studies Journal*, 25(2), 11-25.
- Smith, C.W. (2000). Straying beyond the boundaries of belief: Māori epistemologies inside the curriculum. *Educational Philosophy and Theory*, 32(1), 43-51.
- Smith, L.T. (1999). *Decolonising methodologies: Research and indigenous peoples*. London, England: Zed Books.
- Squire, C. (2013). From experience-centred to socioculturally-oriented approaches to narrative. In M. Andrews, C. Squire & M. Tamboukou (Eds.), *Doing narrative research* (2nd ed., pp. 47-71). London, England: Sage Publications.
- Statistics New Zealand: Tatauranga Aotearoa. (2013). *2013 Quick stats about Māori*. Retrieved from <http://www.stats.govt.nz/Census/2013-census/profile-and-summary-reports/quickstats-about-maori-english.aspx?gclid=CImk0Y-QpMMCFVeXvQodpAIAdQ>
- Stuart, J., & Jose, P.E. (2014). The protective influence of family connectedness, ethnic identity, ethnic engagement for New Zealand Māori adolescents. *Developmental Psychology*, 50(6), 1817-1826.
- Tate, H.A. (2010). *Towards some foundations of a systematic Māori theology: He tirohanga anganui ki ētahi kaupapa hōhonu mō te whakapono Māori*. (Unpublished doctoral dissertation). Melbourne College of Divinity, Melbourne, Australia. Retrieved from http://repository.divinity.edu.au/530/1/2010PhD_Tate,H_Towards_Some_Foundations_of_a_Sustematic_Māori_Theology.pdf
- Te Awēkotuku, N. (1991). *Mana wahine Māori: Selected writings on Māori women's art, culture and politics*. Auckland, New Zealand: New Women's Press.
- Thompson, R.W., Arnkoff, D.B., & Glass, C.R. (2011). Conceptualizing mindfulness and acceptance as components of psychological resilience to trauma. *Trauma, Violence, & Abuse*, 12(4), 220-235.

- Tinirau, R., Gilles., & Tinirau, R. (2011). Homai to hono: Connecting customary, conventional and spiritual healing practices with a rural-based Māori community. *AlterNative: An International Journal of Indigenous Peoples*, 7(2), 163-176.
- Tovar-Murray, D. (2011). The multiple determinants of religious behaviour and spiritual beliefs on well-being. *Journal of Spirituality in Mental Health*, 13(3), 182-192.
- Tuffin, K. (2008). Racist discourse in New Zealand and Australia: Reviewing the last 20 years. *Social and Personality Psychology Compass*, 2(2), 591-607.
- Unterrainer, H.F., Lewis, A.J., & Fink, A. (2014). Religious/spiritual well-being, personality and mental health: A review of results and conceptual issues. *Journal of Religion and Health*, 53(2), 382-92.
- Valentine, H. (2009). *Kia ngāwari ki te awatea: The relationship between wairua and Māori well-being: A psychological perspective*. (Unpublished doctoral dissertation). Massey University, Palmerston North, New Zealand. Retrieved from <http://mro.massey.ac.nz/handle/10179/1224>
- Waitangi Tribunal. (n.d.). *The meaning of the Treaty*. Retrieved from <http://www.justice.govt.nz/tribunals/waitangi-tribunal/treaty-of-waitangi/the-meaning-of-the-treaty>
- Waitangi Tribunal (2011). WAI 262: *Ko Aotearoa tēnei: A Report into claims concerning New Zealand law and policy affecting Māori culture and identity*. Volume 2 (pp. 387-771). Retrieved from https://forms.justice.govt.nz/search/Documents/WT/wt_DOC_68356606/KoAotearoaTeneiTT2Vol2W.pdf
- Waitere, H. & Johston, P. (2009). Echoed silences: In absentia - Mana wahine in institutional contexts. *Women's Studies Journal*, 23(2), 14-31.
- Waldon, J. (2010). Cher bro': A thought that may cross your mind. *New Zealand Journal of Medical Laboratory Science*, 64(1), 6-10.

- Walker, R. (2004). *Ka whawhai tonu mātou: Struggle without end* (Rev. ed.). Auckland, New Zealand: Penguin Group.
- Walker, S., Eketone, A., & Gibbs, A. (2006). An exploration of Kaupapa Māori research, its principles, processes and applications. *International Journal of Social Research Methodology*, 9(4), 331-344.
- Watt, D. (2007). On becoming a qualitative researcher: The value of reflexivity. *The Qualitative Report*, 12(1), 82-101.
- Wertz, F.J., Charmaz, K., McMullen, L.M., Josselson, R., Anderson, R., & McSpadden, E. (2011). *Five ways of doing qualitative analysis*. New York, NY: The Guilford Press.
- Williams, H.W. (1957). *A dictionary of the Māori language*. Retrieved from <http://nzetc.victoria.ac.nz/tm/scholarly/tei-WillDict.html>
- Willig, C. (2008). *Introducing qualitative research in psychology* (2nd ed.). Berkshire, England: McGraw-Hill.
- Wilson, K., Rosenberg, M.W., & Abonyi, S. (2011). Aboriginal peoples, health and healing approaches: The effects of age and place on health. *Social Sciences & Medicines*, 72, 355-364.
- Woodard, W. (2014). Politics, psychotherapy, and the 1907 Tohunga Suppression Act. *Psychotherapy and Politics International*, 12(1), 39-48.
- World Health Organisation. (2003). *WHO definition of Health*. Retrieved from <http://www.who.int/about/definition/en/print.html>
- World Health Organisation. (2007). *Social determinants and indigenous health: The international experience and its policy implications*. Report on specially prepared documents, presentations and discussion at the International symposium on the Social Determinants of Indigenous health Adelaide, 29-30 April 2007 for the Commission on Social Determinants of Health (CSDH). Retrieved from http://www.who.int/social_determinants/resources/indigenous_health_adelaide_report_07.pdf

World Health Organisation. (2008). *Closing the gap in a generation: Health equity through action on the social determinants of health*. Final Report of the Commission on Social Determinants of Health. Geneva: World Health Organization.

APPENDICES

Appendix A: Massey University ethics approval



4 September 2013

Paulette Ripikoi
c/- Dr H Valentine
School of Psychology
Massey University
Albany

Dear Paulette

HUMAN ETHICS APPROVAL APPLICATION – MUHECN 13/036
Wairua, Wahine and Wellbeing: Exploratory perspectives from Wahine Maori

Thank you for your application. It has been fully considered, and approved by the Massey University Human Ethics Committee: Northern.

Approval is for three years. If this project has not been completed within three years from the date of this letter, a 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

A handwritten signature in blue ink that reads "Mark Henrickson".

Associate Professor Mark Henrickson
Acting Chair
Human Ethics Committee: Northern

cc Dr H Valentine
School of Psychology

cc Dr L George
Research Centre for Maori Health and Development

Te Kōwhiri
ki Pūrehuroa

Research Ethics Office
Private Bag 102 904, Auckland, 0745, New Zealand Telephone +64 9 414 0800 ex 43279 humanehicsnorth@massey.ac.nz

Appendix B: Information Sheet



MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA HIKIANGA TANGATA

Wairua, Wahine and Wellbeing: Exploratory perspectives from Wahine Maori.

INFORMATION SHEET

Ko Panguru te maunga
Ko Hokianga te tai tapu
Ko Te Rarawa me Ngati Paoa nga iwi
Ko Ngati Manawa te hapu
Ko Tamatea te marae
Ko Paulette Ripkoi taku ingoa.

Tena koe,
I am a Massey University student completing a Master's Degree in Psychology and I am interested in finding out from you what wairua means to you and how that might impact on your wellbeing, and if and how your understandings have changed from being involved in the Manawahine Taumatatanga Trust's Mana wahine programmes. Hearing your stories and your understandings will help me better understand the relationship between wairua and wellbeing, which could help improve services for Māori women. There will be around ten wahine sharing their stories for this project.

Because your perspective is important to this project, I invite you to participate in it.

If you agree to participate, I will come to interview you at the Trust offices on Akoranga Drive in Northcote. Or if you prefer, I could meet you elsewhere where you would feel more comfortable or that is more convenient for you. The interview will take between 60 and 90 minutes. The interview will be confidential and can be held in private; however if you wish to have a friend or whanau member there to support you, that will be fine. The interview will be tape-recorded, with your permission.

Please note that I will be using some of your stories in the writing of my thesis. Your personal details and identity will be kept as confidential as possible however. To protect your identity in my writing, you can give me another name to use.

After the interview, the tape-recording will be written up by me. We will meet again and I can then give this back to you to read over and see if you are still okay for me to use the information. If you wish to add anything more, we can talk about this at this time also. I will then require you to sign a form that says you release the information for me to use in my thesis.

In appreciation of your time, a small koha of a petrol or food voucher will be given to you at each meeting.

When my thesis has been finished and marked, you will be given a copy of the project findings if you would like one.

Your 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;
- Ask for the recorder to be turned off at any time during the interview;
- Withdraw from the study at any time up until the thesis has been finished;
- Ask any questions about the study at any time during participation;
- Provide information on the understanding that your name will not be used;
- Be given access to a summary of the project findings when it is concluded.

Te Kōwhiri
ki Pākehanga

School of Psychology – Te Kura Hikianga Tangata
Private Bag 102904, North Shore Mail Centre, Auckland 0745, New Zealand. T: +64 9 414 0800 extn 41244. F: +64 9 414 0821
www.massey.ac.nz



MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA PUKENGA TANGATA

Project Contacts

Please do not hesitate to contact myself or my supervisors if you have any questions about this project.

- Paulette Ripikoi can be contacted on 021 1363516 and via email at paulette.ripikoi.1@uni.massey.ac.nz
- Dr Hukarere Valentine can be contacted on 0800 627 739 or 06 350 5180 extension 81795 and via email at h.valentine@massey.ac.nz
- Dr Lily George can be contacted on 027 278 7405 and via email at l.george@massey.ac.nz

Committee Approval Statement

This project has been reviewed and approved by the Massey University Human Ethics Committee: Northern, Application ___/___ (*insert application number*). If you have any concerns about the conduct of this research, please contact Dr Ralph Bathurst, Chair, Massey University Human Ethics Committee: Northern, telephone 09 414 0800 x 9570, email humanethicsnorth@massey.ac.nz.

Appendix C: Interview Schedule



MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA PŪRENGA TANGATA

Wairua, Wahine and Wellbeing: Exploratory perspectives from Wahine Maori.

Interview Schedule

- Mihi and introduction to project
- Name – nom de plume preferred
- Signed consent form
- Do you have any worries before we start?
- Koha
- Request permission to commence recording.

Topics:

1. Meanings of wellbeing
2. Meanings of wairua
3. Meanings of manawahine
4. Learning from the Mana wahine programmes
5. Challenges in life
6. Experience of wairua
7. Self-identity since completing the programme

Te Kōwhiri
ki Pūwhiri

School of Psychology – Te Kura Hīnengaro Tangata
Private Bag 10290, North Shore Mail Centre, Auckland 1045, New Zealand T +64 9 414 1800 ext 61284 F +64 9 414 0801
www.massey.ac.nz

Appendix D: Participant Consent Form



MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA PŪKENGĀ TANGATA

Wairua, Wahine and Wellbeing: Exploratory perspectives from Wahine Maori.

PARTICIPANT 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, can withdraw from the study at any time and my participation is voluntary and I can choose to answer or not answer questions.

I agree/do not agree to the interview being sound recorded.

I wish/do not wish to have my recordings returned to me.

I agree to participate in this study under the conditions set out in the Information Sheet.

Signature: _____ Date: _____

Full Name - printed _____

Te Kōwhiri
ki Pōrehuroa

School of Psychology – Te Kura Hīnengaro Tangata
Private Bag 102304, North Shore Mail Centre, Auckland 0745, New Zealand. T +64 9 414 0800 extn 81244. F +64 9 414 0811
www.massey.ac.nz

Appendix E: Authority for the release of transcripts



MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA PŪKENGĀ TANGATA

Wairua, Wahine and Wellbeing: Exploratory perspectives from Wahine Maori.

AUTHORITY FOR THE RELEASE OF TRANSCRIPTS

I confirm that I have had the opportunity to read and amend the transcript of the interview(s) conducted with me.

I agree that the edited transcript and extracts from this may be used in reports and publications arising from the research.

Signature: _____ Date: _____

Full Name - printed _____

Appendix F: Glossary

Aroha	Love, affection, compassion
Atua	God, deities
Atua wāhine	Female deities
Aotearoa	New Zealand
Awhi	Support
Hā a koro ma, a kui ma	Breath of life from forbears; one of the dimensions of Rose Pere's "Te Wheke" model.
Haka	Traditional dance/challenge
Hapū	Sub-tribe, pregnant
Harakeke	Flax
Hīkoi	March, walk
Hine	Female essence, girl, younger woman
Hinengaro	Mind, intellect, consciousness, awareness, thoughts, feelings
Hine-ahu-one	First earthly woman, formed by clay at Kurawaka (the pubic region of Papa-tū-ā-nuku) by Tāne-mahuta
Hine-nui-te-pō	Goddess of the underworld. Hine-tītama was the eldest daughter of Tāne-mahuta and Hine-ahu-one. On hearing that her husband was her father she fled to Te Pō (the underworld) where she receives the souls of the dead and is known as Hine-nui-te-pō.

Hine-te-iwaiwa	Female goddess of childbirth, weaving and female arts. Regarded as the exemplary figure of a wife and mother
Hine-tītama	Eldest daughter of Tāne-mahuta and Hine-ahu-one, who became known as Hine-nui-te-pō
Hōhā	Impatient with, wearisome, fed up with
Hui	Gathering, meeting
Ingoa	Name
Io/Io Matua	Recognised by some Māori as the Supreme Being
Iotanga	Faith in Io as the Supreme Being
Iwi	Tribe
Kaha	Strong, courageous
Kai	Food
Kaikaranga	Ritual caller
Kaimoana	Seafood
Kāinga	Home
Kaitiaki	Guardian
Kanohi ki te kanohi	Face to face
Karakia	Prayer, chant, incantations
Karanga	Ceremonial call
Kaupapa	Theme, purpose, plan
Kaupapa Māori	Māori approach, principles, ideology

Kaupapa Māori Research	Research undertaken by Māori, for Māori, with Māori. Seeks to understand and represent Māori as Māori; takes for granted the legitimacy of mātauranga Māori (Māori knowledge).
Kēhua	Ghosts, spirits
Kīngitanga	Māori King Movement; a movement developed in the 1850s to stop the loss of land to the colonists, maintain law and order and promote traditional values and culture, supported mainly by the Tainui tribes.
Koha	Gift, present, contribution, offering
Kōrero	Tell, speak, say, talk, discourse
Koro	Grandfather, elderly man (short for koroua)
Koroua	Grandfather, elderly man, granduncle
Kōtiro	Girl
Kuia	Elderly woman, grandmother, female elder
Kupu	Word
Mahi	Work
Mahuika	Ancestress of Māui who gave him knowledge of fire
Mākutu	Curse
Mana	Prestige, authority, control, spiritual power, charisma
Manaaki	Show respect, generosity, care for others
Manaakitanga	Sharing and caring, hospitality, kindness, generosity, support

Mana ake	Unique identity of individuals and family
Mana atua	Power and authority of celestial realm, sacred spiritual power from the atua
Mana tane	Authority, influence, power of men
Mana tangata	Power and status of the people
Mana whenua	Territorial rights, power from the land, authority over the land
Mana wahine	Māori feminist discourse, intersection of being both Māori and female, authority, influence, power of women
Manuhiri	Visitor, guest
Māori	Indigenous people of New Zealand
Māoritanga	Māori culture, practices and beliefs, way of life
Marae	A complex of building that form the traditional communal gathering places for Māori
Marae ātea	Courtyard in front of the whareniui where formal greetings and discussion take place
Matakite	Visionary, psychic, see into the future
Mātauranga Māori	Māori knowledge, wisdom, understanding
Mate Māori	Māori sickness, psychosomatic illnesses due to transgressions of tapu or mākutu
Māui-tikitiki-a-Taranga	Also known as Māui; demi-god in Māori cosmology
Mauri	Life force, essence of a person or thing
Mirimiri	Form of massage

Moana	Sea
Moko	Traditional Māori tattoo
Mokopuna	Grandchild
Mouri	Dialectical variation of mauri – life force, essence of a person or thing
Muri-ranga-whenua	Ancestress of Māui who gave him her jawbone (i.e. access to knowledge) which he used to slow the sun and fish up the North Island
Ngahere	Forest
Noa	Free from the constraints of tapu, unrestricted
Oranga	Wellbeing, welfare, health
Pākehā	New Zealander of European descent
Papa-tū-ā-nuku	Earth Mother
Pono	Truth, integrity, honest, sincere
Pou	Post, support, pole
Pounamu	Greenstone
Puku	Stomach
Puna	Well
Puna roimata	Well of tears
Pūrākau	Ancient legend, story
Pure	Incantations to remove tapu
Rāhui	To put a temporary ritual restriction in place
Rākau rongoā	Herbal remedies
Rangi-nui	Sky Father

Raranga	Weaving
Rongoā	Treatment, cure, medicines
Rua	Two
Taha	Side, part, portion, section
Taha hinengaro	Mental and emotional health/dimension; a 'wall' of Te Whare Tapa Whā
Taha tinana	Physical health/dimension; a 'wall' of Te Whare Tapa Whā
Taha wairua	Spiritual health/dimension; a 'wall' of Te Whare Tapa Whā
Taha whānau	Family and social health/dimension; a 'wall' of Te Whare Tapa Whā
Tamariki	Children
Tāmoko	Māori tattooing
Tāne	Men, males
Tāne-mahuta	Atua of the forests and birds, one of the children of Rangi-nui and Papa-tū-ā-nuku
Tāngata	People, human beings
Tāngata whaiora	Māori mental health service users
Tāngata whenua	Hosts, local people
Tangihanga	Process of grieving, funeral
Taonga	Treasure, anything considered to be of value
Taonga katoa	All treasures; tangible and intangible
Taonga puoro	Traditional Māori musical instruments

Tapu	Sacred, forbidden, restrictions, no longer to be put to common use, untouchable
Te Ao Māori	The Māori world, Māori world view
Te Ao Mārama	The world of light, knowledge
Te Ao Tawhito	The ancient Māori World
Te Hapua	Settlement in the North Island of New Zealand
Te Ika-a-Māui	North Island of Aotearoa New Zealand
Te kāwanatanga katoa	Total governance
Te Kore	Realm of Potential Being, the void
Te mana i	Power in potentiality (Henare, 2010)
Te mana o	Power in operation (Henare, 2010)
Te mana o te wāhine	Power, authority of women
Te Pō	The unknown, darkness, ignorance, the underworld
Te reo Māori	The Māori language
Te tapu i	The tapu as being in itself (Tate, 2010)
Te tapu o	The tapu of being in relationship (Tate, 2010)
Te tino rangatiratanga	The complete exercise of chieftainship, self-determination, sovereignty
Te Tiriti o Waitangi	The Treaty of Waitangi 1840; Treaty signed between British Crown and various Māori tribes in 1840, founding document of New Zealand
Te Whare Tapa Whā	Māori health model devised originally by Sir Mason Durie in 1984, represented as a house

and the four walls supporting it are the four cornerstones of Māori health

Te Wheke	Māori health model devised by Rangimarie Rose Pere in the 1980s, represented as an octopus
Te Whetū	Māori health model devised by Glenis Mark and Antonia Lyons, represented as the five points of a star (Mark & Lyons, 2010)
Teina	Younger sister of a female, younger brother of a male
Tika	Right order, right response
Tikanga	Correct procedure, custom, customary system of values and practices developed over time and deeply embedded in the social context
Tohu	Sign, symbol, guidance
Tohunga	Healer, skilled person, expert, priest. There were many types of tohunga, they were chosen by the gods for various roles, or skills. This research project focuses on tohunga ahurewa (high priest) (Royal, 2003) who were experts in healing
Tohungatanga	Priestly knowledge, expertise, competence
Tokotoko	Traditionally carved ceremonial walking stick
Tuakana	Elder sister of a female, elder brother of a male
Tūpuna	Ancestors

tūrangawaewae	Place where one has the right to stand, rights of residence and belonging through kinship and whakapapa
Tūrangawaewae	Central Kīngitanga Marae at Ngāruawāhia, North Island
Urupā	Burial ground, cemetery, graveyard
Wā	Time, space, period of time
Wahine	Woman
Wāhine	Women
Wai	Water
Waiata	Song, to sing
Waiora	Total wellbeing
Wairua	Spirit, spiritual, soul
Wairuatanga	Spirituality
Whaea	Mother, aunt, respected woman of your mother's generation
Whakapapa	Genealogy, descent lines
Whakairo	Carving
Whakamā	To be ashamed, shy, embarrassed
Whakanoa	Make things noa, free from tapu restrictions
Whakataukī	Proverb
Whakawhanaungatanga	Establishing and maintaining relationships, relating well with others
Whāngai	Adopt, foster, to feed, nourish, nurture

Whānau	Family, to be born, give birth
Whānau Ora	Health initiative in New Zealand that is driven by Māori values, healthy families
Whanaungatanga	Relationship, kinship, sense of family connection, extended family
Whare	House
Whare mate	House of mourning
Whare ora	House of life
Whare tangata	Womb, house of humanity
Wharenuī	Meeting house, main building of a marae where guests are accommodated
Whāriki	Mat, floor covering
Whatumanawa	Seat of emotions, heart, mind
Whenua	Land, placenta ¹⁵

¹⁵ Most of these definitions have been sourced from *Te Aka online Māori dictionary* (Moorfield, 2003)