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**KAUPAPA MAORI AND
RESPONSIVENESS**

**MANAGEMENT
RESPONSIVENESS TO MAORI
HEALTH ISSUES IN THE
REFORMED HEALTH SERVICE
OF THE 1990's**

A thesis presented in partial fulfilment of the requirements for the degree of
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HE TAONGA TE REO

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A CELEBRATION OF MAORI LANGUAGE

ABSTRACT

This thesis is about the responsiveness of the health system and health services to Maori needs. It examines the relationship of the Treaty of Waitangi to health and the commitment of organisations to biculturalism in health care provision. It focuses on the poor health status of Maori people and explores the issues of racialism, racism and exclusion as factors in the health and wellbeing of Maori people by drawing on literature, day to day observations and recordings as well as the responses of ten health service managers to the idea of biculturalism and the low status of Maori health.

It takes the position that Maori people have been and continue to be disadvantaged by monocultural attitudes, beliefs and practices in the health system and that managers have the power to change that. The time it was written in was a time of major restructuring in health and encompassed the change from Area Health Boards through the funder provider split to Regional Health Authorities as purchasers and Crown Health Enterprises as providers of services. Change was everywhere, yet the major inequality between Maori and non Maori health status in Aotearoa remained stable. The thesis begins and ends with the Treaty of Waitangi, thus the past becomes the present and the future, for as the Royal Commission on Social Policy notes:

The Treaty is always speaking. It has relevance to all economic and social policies. Not only must the past be reviewed in the light of its principles, but the Treaty's promise must also be seen as fundamental to those principles, which underlie social well being in years to come. (Royal Commission on Social Policy. Vol. 2.3.-151.)

DEDICATION

This thesis is for the people of the Bay of Plenty

from

Mai Nga kuri a wharei ki Otamarakau

Ka kohi te toi, ka wahi te maramatanga.

If knowledge is gathered, enlightenment will follow.

ACKNOWLEDGEMENTS

Firstly I wish to acknowledge the support I have received from Maori friends and colleagues; especially those in Social Work, Manatu Maori, Te Mana Hauora and Te Puna Hauora. Others too, who were not formally included in the health service. Allowing Pakehas into your lives so that they may learn, is not easy, nor is it without risk. Thank you for staying alongside and for helping me learn where to go and where not to go.

Tena Koutou. Tena Koutou. Tena Koutou.

My supervisors too have been brave and consistent with their friendship, their time and their ideas as I struggled to maintain my pace and direction on the bicultural pathway and when some of what I wished to write did not fit easily within the constraints of an existing university discipline.

Tena Korua Celia Briar and Sarah Calvert.

Te kupenga hao parapara ka kitea

Te Matau aho hohonu

He mana he ihi

E kore e ara te hinga nui

Te kore e whakamatau

The net that skims the surface

gathers what is already seen

The hook line that fishes deep

Grasps the hidden strength and knowledge

But a great catch will not arise

Without a challenge of will and perserverance

This proverb symbolises for Te Tatau Pounamu joint venture Board the challenges that Iwi and the Crown face in attempt to improve the poor health status of Maori.

PREFACE

I am a Pakeha New Zealander. What this means, as Spoonley (1988:4.) has acknowledged, is that, my cultural values and behaviour have been primarily formed from the experience of being a member of the dominant group of New Zealand. The culture I have is my English protestant heritage plus additions from many other sources as I have lived my life here in this country. Michael King (1985) describes some of this process in his book, *Being Pakeha*:

to be a citizen of Aotearoa in the 1980's and 1990's (my addition), even a Pakeha one, is to be inevitably affected by the enlarging Maori presence and the renaissance of Maori rituals and values . . . something my European ancestors have never experienced. For some, that effect may be limited to fear or rejection of those elements in New Zealand life. For most of us, they will penetrate our consciousness to some extent.

For myself, through the 1980's and earlier, Maori colleagues, friends and guides have provided opportunities for continuing to learn about their culture and mine and for speeding up a change in my beliefs, values and perceptions of the world. This has occurred to the extent, that for some, "the person they're looking for isn't there any more." (Ten Bears in the movie *Dances with Wolves*. 1991.)

I thank them for their patience in helping with the trials and enjoyments of those changes, for the enrichment and for the confidence to engage with others ethnicities about the way society should be structured and for the conviction that New Zealand can become a functioning bicultural society. (Spoonley.1988:67.) With their support I continue to learn and share my perception of a fairer society which supports the right of Maori to be different and where diversity is part of the richness of our development and in the hope that others of my background will become Pakeha.

Broadly, my area of work, interest and action is health. Specifically it is the improvement of Maori health. I work with a Maori health team. I support the kaupapa and my vision is a shared one with Maori people, that we should have as one long term

aim, the elimination of the current disparities between Maori and non Maori health.
(Murchie, 1984:85)

As a person and a social worker, I have always felt that living and working and doing are not separate things and that one should try to change things not only, out there in society but in oneself, in the place where one works, and in ones everyday life. Accordingly, I have sought to have a close and competent relationship with myself and with Tangata Whenua.

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