

INTRODUCTION

Māori and resilience

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This special themed issue of *MAI* brings together a collection of articles written around the concept of resilience from a purely Māori perspective. The idea for this collection was born out of the realisation that “resilience” was becoming a popular theme around which research funders and government agencies were structuring calls for research. For example, two major funding organisations of health and social science research in New Zealand, the Health Research Council of New Zealand and Ngā Pae o te Māramatanga, along with partners such as the Accident Compensation Corporation and the Families Commission have invested significant funding into research around the general theme of resilience. At least two separate Requests for Proposals based on the theme of resilience have been released: one through the International Collaboration for Indigenous Health Research Partnership (ICIHRP) fund and a second through the Health Research Council Partnerships Programme.

In addition, of their own accord Māori

researchers were becoming interested in notions of resilience. Specifically there was interest in how the term was being used to understand collective approaches to resilience, as well as understanding how resilience was evident among sub-populations within Māori society (particularly young people, the vulnerable and the disenfranchised). Questions were also being asked as to whether the notion of resilience was useful as a means to initiate or support activities centred on decolonisation, harm reduction and self-determination.

The idea of drawing findings from the multitude of projects together in one cohesive publication was given further impetus following a meeting convened by researchers from the Mauri Tū Mauri Ora research project in November of 2010. This “virtual” meeting provided a forum in which Māori researchers could share their diverse understandings of resilience, provide information about how these understandings had been derived, and explore the relationship between methodologies and

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understandings of resilience. Attendees included Helen Moewaka Barnes, Belinda Borell, Carl Mika, Clive Aspin, Mera Penehira, Alison Green, Jarrod Haar, Leonie Pihama, Ngaropi Cameron, Amohia Boulton, Heather Gifford and Terryann Clark. Together this group represented a diverse range of institutions such as the University of Auckland, Waikato University, Massey University, the Western Institute of Technology, Whakauae Research for Māori Health and Development, Tū Tama Wahine o Taranaki and the University of Sydney. Many of those who attended this initial meeting have gone on to contribute to this journal; however, it is also important to acknowledge the scholarship of others whose work is not included here, such as Helen Moewaka Barnes' (2010) work on sexuality and rangatahi Māori; Pam Bennett and Jane McKendrick's (2010) ICIHRP study, *He Kokonga Ngākau—Mō Wai Te Mātauranga?*, examining Māori resilience in relation to mental health and wellbeing; Mere Balzer et al.'s (2013) community-based study on the rites of passage for Māori taiohi; and Terryann Clark et al.'s (2014) research as part of Youth'12, a national survey of youth health and wellbeing.

Consequently, a body of work on the concept of resilience in relation to Māori is beginning to be amassed that is unique in the world, and unique in the academy. Whereas in 2012 it was being argued that "the terms resilience/resilient are not easily found in New Zealand literature, nor are these terms commonly used to describe Māori" (Boulton, 2012, p. 6), the same could not be said of the peer-reviewed academic writing of today. The articles collected here by no means represent the full range of work that has been done, or continues to be done, by researchers across New Zealand universities and within community. Rather, this special issue presents a mere snapshot of that work. The contributors comprise social science researchers and academics from a range of disciplines including geography, psychology, health and Māori development. In early briefs for an

edited collection, authors were simply asked to write about resilience from the perspective of the work they were doing. As a result, the individual articles canvas topics as diverse as blood-borne viruses, end-of-life care, whānau wellbeing and the impact on the Māori community of the Christchurch earthquakes.

The journal contains two articles drawing on research conducted under the ICIHRP, a three-country partnership which included research teams and study locations in New Zealand, Australia and Canada. As part of this partnership, a New Zealand based research team investigated the role of resilience in responding to blood-borne viral and sexually transmitted infections in Indigenous communities, in the Mauri Tū Mauri Ora study. In their article "Māori and Indigenous Views on R & R: Resistance and Resilience", **Mera Penehira, Alison Green, Linda Tuhiwai Smith and Clive Aspin** explore the resilience discourse tracing the development of Māori and Indigenous frameworks of resilience. The article opens with a series of questions which prompt the reader to critically consider the notion of resilience and whether the concept of resilience is simply the most current means by which the State encourages Māori to reframe the experience of colonisation as one of successful "adaptation" to adversity. Māori and the State, they argue, have been and continue to be involved in a complex relationship involving "Māori resistance, Māori resilience and State concessions, Māori reclamative actions and State responses". These opening remarks provide a platform from which the authors explore the meanings that underpin resilience according to the current Indigenous discourse. Their review of Indigenous literature finds that for Indigenous peoples, resilience as a concept fails to take into account the desire of Indigenous peoples to move beyond mere survival to a position of self-determination. Furthermore, the authors posit that it is possible to describe a continuum of strategies, behaviours and outcomes that could be used to construct a "resilience continuum framework";

a multi-layered framework comprising pairs of strategies at opposite ends of a continuum which, taken as a whole, can assist our understanding of the effort required by Indigenous peoples to achieve their goals of being self-determining and well. Strategies include Acceptance and Resistance; Reactive and Proactive; Survive and Flourish; and Individual and Collective; each of which is explored in detail. The article concludes by noting that for Indigenous peoples, acts of resilience are quite distinct from acts of resistance and while each has its place, each is the result of very different forces. Resilience occurs as a reaction (for example, to colonisation, to oppression), whereas resistance is a proactive and deliberate effort to live by our own terms.

Amohia Boulton and **Heather Gifford**, in their article entitled “Conceptualising the Link Between Resilience and Whānau Ora: Results From a Case Study”, explore whether the concept of resilience has resonance in the New Zealand Indigenous context by presenting selected results of a qualitative case study undertaken with a Māori health provider. In a similar manner to Penehira et al., the article begins by setting the context for the authors’ interest in the topic and provides the summarised results of a review of the international literature. Little was found in the way of Indigenous and/or Māori literature on the concept of resilience, but of the writing that did exist, critiques of the notion of resilience were evident: specifically, and in accordance with the findings of Penehira et al., that the concept of resilience fails to take into account the structural factors which shape disadvantage in the first instance. The authors then describe the two-year project in which they explored the links between the concept of resilience and that of whānau ora, a Māori concept which has come to be understood to mean maximum family health and wellbeing. The authors present a series of high level results around three key areas: participants’ understandings of resilience; the links between whānau ora and resilience; and the contribution this particular

health service makes to the resilience of whānau who are its consumers. In establishing the links between two seemingly disparate concepts—that of whānau ora and resilience—the authors contend that both resilience and whānau ora acknowledge that trauma, risk and adversity exist for certain groups within the population; both acknowledge that whānau, families, collectives and communities have the ability to resist and overcome adversity; and both recognise that it is up to whānau, families, communities, collectives and governments to provide the resources that will enable whānau to bolster their wellbeing in culturally appropriate and sustainable ways. The article concludes that Māori primary health providers play a vital role, not only in the achievement of whānau ora, but also in supporting whānau resilience.

The article by **Jordan Waiti** and **Te Kani Kingi** entitled “Whakaoranga Whānau: Whānau Resilience” also looks at the notion of resilience from the perspective of whānau, as it explores “resilience strategies” and the multiple ways in which whānau contribute to the development of their members and the various mechanisms employed to foster growth and security. This article presents some key findings from Waiti’s PhD research, a qualitative study which investigated the resilience strategies employed by 15 Māori whānau who had experienced significant adverse life events that affected their day to day living; events such as redundancy, marriage breakdown, chronic illness and incarceration. The authors note that for some participants they were dealing with more than one such adverse event at any one time. Waiti and Kingi note that the overall study upon which this article is based employed a strengths-based approach, so while the authors describe a range of constraints to whānau wellbeing such as external factors, internal dynamics and financial pressures, they also demonstrate the innate ability of whānau to respond to these challenges, to make use of limited resources, and to react in positive and innovative ways. A series of whānau interviews and expert responses to

those interviews were thematically analysed, resulting in the emergence of four organising themes: Whanaungatanga factors (networks and relationships), Pūkenga factors (abilities and skills), Tikanga factors (meanings, values and beliefs), and Tuakiri-ā-iwi factors (secure cultural identity). The authors note that these four themes form the basis of a Whānau Resilience Framework, to be published at a later date. Of particular interest is the notion that while Māori share similar resilience strategies to those of non-Indigenous families described in the literature, there are unique cultural differences particular to a Māori worldview and Māori family dynamics which are also evident. As such, cultural identity was found within a cluster of resilience factors; factors which are expressions of cultural identity, and which have been used to promote resilience amongst these Māori families.

In the article entitled “End-of-Life Care and Māori Whānau Resilience”, **Tess Moeke-Maxwell, Linda Nikora and Ngahua Te Awekotuku** draw on data from the Kia Ngāwari study undertaken between 2010 and 2012 to discuss the cultural resources which they found assisted Māori whānau to be resilient when caring for a family member at the end of life. This qualitative study employed various methods, such as face-to-face interviews with whānau, journaling, case study, photo-essays and autoethnography to elicit the views of 27 Māori on their experience of caring for a whānau member at the end of life. After a brief introduction to the literature around resilience and end-of-life care practices, the authors offer a definition of whānau resilience for this study; namely, the processes which support whānau to care for a member following news of a life-limiting illness. They further note that in a whānau-centred resilience framework, family is viewed as a fluid entity with members entering and being included throughout the life course. Each family member brings his or her own coping abilities and capabilities that contribute to the resilience of the family as a whole. It is these

abilities and coping strategies which whānau must draw upon when caring for whānau who are ill and dying. Six strengths or approaches are identified which positively contributed to increasing whānau carer resilience during this time, each of which is discussed in detail in the article. They include rangatiratanga; whānau kotahitanga; aroha and manaakitanga; making meaning from illness and death; tangihanga; and spiritual and religious beliefs. The authors found that having a strong cultural web of support greatly assisted the carers and the whānau members themselves to face the adversity of illness, dying, death and bereavement. Further, the authors contend that New Zealand’s health care system has a role to play in better supporting and strengthening whānau carer resilience, concluding that whānau resilience would be helped “exponentially” were whānau to have equitable access to palliative health care services.

In the second of the two articles from the Mauri Tū, Mauri Ora study, **Clive Aspin, Mera Penehira, Alison Green and Linda Tuhiwai Smith** explore how community-based initiatives play a vital role in overcoming the challenges Indigenous people face in dealing with HIV and other chronic conditions. In their paper “Resilient Communities: Community-Based Responses to High Rates of HIV Among Indigenous Peoples”, the authors argue that HIV is the latest in a series of health-related crises with the potential to decimate Indigenous communities. The authors provide a background to the HIV/AIDS epidemic and discuss the impact of HIV on Indigenous communities, noting the crucial need for the collection of high-quality ethnicity data if we are to gain a true picture of the impact of HIV/AIDS on Indigenous communities and Indigenous populations. A brief summary of the statistics for Indigenous peoples in Australia, New Zealand and Canada indicates that while the rates of diagnosis may differ across the three countries, differing in both magnitude and by gender, *how* each country responds to the needs of its Indigenous populations is critical. The authors argue that in the

past, initiatives driven by mainstream organisations have failed to address the disparities between Indigenous and non-Indigenous rates of infection. As a consequence, and in response to the high rates of HIV among Indigenous peoples, Indigenous communities themselves have mobilised and commenced their own innovative initiatives to combat the spread of the disease. The authors observe that effective leadership is a key component of these initiatives. However, to be effective, leadership must be dynamic, multi-dimensional and include the multiplicity of stakeholders. Three examples of such initiatives are discussed: the Toronto Charter; the International Working Group on HIV and AIDS; and INA, the Māori, Indigenous and Pacific Island HIV/AIDS Foundation. Aspin et al. argue that all of these initiatives may be regarded as tangible evidence of Indigenous community resilience in the face of ongoing adversity, concluding that we need to understand and acknowledge the role that community resilience plays in assisting Indigenous peoples to overcome not just historical adversity, but also contemporary challenges and risks, such as those posed by the HIV/AIDS epidemic.

In the final paper, “Māori and the Christchurch Earthquakes: The Interplay Between Indigenous Endurance and Resilience Through Urban Disaster”, **Simon Lambert** explores Māori responses to the disastrous earthquakes that struck Christchurch in 2010 and 2011 to review the notion of resilience. The research conducted by Lambert employed various research methods including interviews conducted immediately after the earthquake and a survey undertaken 18 months later. Lambert argues that examining how Māori have endured and (some) have rebounded under extreme conditions will give us a better understanding of how resilience is enabled within the cultures of Indigenous peoples in the complex and dynamic environments of the world’s cities. Using a set-theoretic approach, pathways to Māori resilience are identified, emphasising the combination of whānau connectivity with

high incomes in those who have maintained or increased their wellbeing post-disaster. While resilience was a constant theme in Christchurch and New Zealand’s political and media arenas in the aftermath of the February 2011 event, this article presents a more ambivalent interpretation of the experiences of Māori residents. For example, despite a growing discourse on the role of Indigenous knowledge in disaster risk reduction, Lambert found that mātauranga Māori, as a resource Māori could draw upon to weather adversity, barely featured in his study of the Christchurch earthquakes. This is not surprising, he argues, given that many of the Māori who were residing in Christchurch prior to the quakes were already living away from their traditional lands and thus their traditional knowledge bases. Based on the findings of his study, Lambert concludes that Māori resilience to urban disaster will only arise from better strategies of reduction and readiness, activities that must take place before a disaster occurs. An important component of this resilience requires Māori to be empowered to access options and opportunities, outcomes that primarily originate with higher incomes but also from bigger networks. A key lesson for us as Māori is that in a post disaster setting, economic security and strong social networks built around a core of family are fundamental to our resilience as a people.

Despite the apparent diversity of individual papers, several common themes can be found across the articles. Collective resilience is one such theme. Far from being simply a personal quality or attribute, resilience for Māori as described by the contributors to this journal necessarily comprises social connectedness, whakapapa, whānau relationships and the strength that arises from these shared bonds. Access to strong networks—particularly, but not exclusively, whakapapa-based networks—are seen as contributing to Māori whānau being able to “bounce” back from a range of adverse events, from personal bereavement, to epidemics, to natural disasters. Access to

resources is also a recurrent theme throughout the papers, and while in Lambert's case these resources were not necessarily cultural in origin (economic stability being a key resource in the post-disaster period), for other writers (Boulton & Gifford; Moeke-Maxwell et al.) cultural resources including values, traditions and institutions of culture have an important role to play in supporting whānau resilience. All of the papers depict Māori from a strengths-based perspective, highlighting the range of mechanisms, practices and constructs used by whānau and communities to achieve or enhance resilience. These papers should not be considered as only being of relevance or use to academics, as many of the authors have highlighted the implications of their findings for policy-makers, service providers and social service practitioners alike.

The papers presented here and the common themes that emerge from this special edition will resonate with readers in New Zealand and beyond who are interested in the concept of resilience, particularly from an Indigenous perspective. As a people, Māori have demonstrated great resilience in surviving the effects of land confiscation, language loss, disease, and population decline, all of which are attributable to our colonial past and, consequently, it could be argued in this time of increasingly borderless societies, no longer of relevance today. However, as the writers here contend, our collective resilience and indeed activities of collective resistance are necessary now more than ever if we are to deal with contemporary racism, economic marginalisation, the despoiling of land and sea, the breakdown of family

and community structures, and continued loss of important rites, rituals and institutions of culture. By harnessing the abilities and resources we have as Indigenous peoples, amply demonstrated in these writings, and driving our own agenda for the future through strategies of resistance, our people will continue to flourish for years to come.

Glossary

aroha	love, care, concern, compassion
kotahitanga	unity through consensus
manaakitanga	love, care, concern, compassion
mātauranga Māori	Māori knowledge
pūkenga	skill, expertise
rangatahi	younger generation, youth
rangatiratanga	autonomy and self-determination, ownership, dominion
taiohi	a youth, adolescent, young person
tangihanga	funerary customs
tikanga	customs, protocols
tuakiri-ā-iwi	in this context the term refers to secure cultural identity
whakapapa	genealogical descent lines
whānau	family, usually referring to extended rather than nuclear family
whanaungatanga	relationship, kinship, sense of family connection

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