

# ‘HANGA I TE TŪ O TE HURINGA’

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MAKING A STAND FOR CHANGE



**TE RAU ORA**

*We gotta get out da struggle  
Of being stuck in da system  
So working hard should be our duty  
Instead of robbing riches  
We getting more sicker  
From overdoses of drugs and liquor  
Getter better should be a movement  
So we're moving together*

***La Major Riki***

Te Rau Matatini Level 4, 191 Thorndon Quay, Pipitea,  
Wellington Central 6011, Wellington

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## BACKGROUND

E ngā reo, e ngā mana, tēnā koutou katoa. He mihi whanui tēnei ki a koutou ngā whānau whaiora e awahi nei i tēnei kaupapa. Nō reira, e rau Rangatira mā tēnā koutou, tēnā koutou, tēnā koutou katoa.

Te Rau Matatini acknowledges and appreciates the participation of those who attended the Making a Stand for Change Hui at Waikato Tainui College for Research and Development at Ngaruawahia.

A special thank you to Terri Cassidy for your facilitation and guidance in the wānanga, and to participants for the kōrero (discussion), wisdom and insights contributed throughout the Hui which are represented in this report.

### *Ngā mihi mahana ki a koutou katoa*

Millie Berryman, Kerri Butler, Cam Collier, Beth Cotton, Jolie Davis, Nicola Gilmoure Tai Haitana, Lou Halbert, May Hart, Joe Henry, Karen Himiona, Wi Huata, Moko Kairua, Janet Kokaua, Asa Komene, Taipari Keepa, Delft Klootwyk, Sue McGee, Makiroa Maropai, Linda Martin, Witiariana Mita, Maraea Ogle, Penehuia Patterson, Bertram Paul, John Paul, Johnnie Potiki, Herewini Rangi, Shirley Rangi, Okeroa Rapana, LaMajor Riki, Sharron Rolston Rongotaua, Blossom Stewart, Tui Taurua, Trudy Tapsell, Katea Tuhakaraina, Henry Waru, Maxine Whakaruru- Rereti, Darryn Williamson.

## EXECUTIVE SUMMARY

Te Rau Matatini the National Māori Health Workforce Development Organisation brought together Māori with lived personal and whānau experiences of mental illness and mental health services to explore strategies to overcome the restrictive practices of Māori within mental health services.

The term restrictive practice is used here to describe a range of actions used in mental health services with Māori who use secondary mental health services such as seclusion, restraint and the mental health act.

40 participants attended a two day hui held at Waikato Tainui College for Research and Development, Ngaruawahia. There were a number of aspirations and issues raised with features contributory to Māori recovery consistently discussed during the wānanga style of delivery.

Participants identified the need for mental health services to improve the engagement with Māori by utilising a holistic approach, there were aspirations for more Māori centred services, also the importance of deepening ones cultural identity and belonging, and Māori values and principles threaded throughout their kōrero. Participants with whānau experience of supporting their loved ones expressed specific needs and interests too.

A call for change in how mental health services are treating Māori was raised by participants. They felt there was little to no coordinated national voice for Māori and that by having a national Māori body that could provide a voice for Māori with lived experiences of mental illness and health services could improve advocacy, influence policy and decision making processes, increase Māori representation and accountability of mental health services.

A contribution by participant Wi Huata raised the importance of tangata whaiora Māori and previous contributions completed with Te Rau Matatini. Terms of Tangata Whaiora (seeking wellness), Tangata Motuhake (making decisions to maintain wellness and independence) and Tangata Hiwaora (motivating and inspiring others to wellness) were shared, demonstrating the journey through stages of whānau in seeking wellness.

*"The change from turoro to tangata whaiora meaning people seeking wellness is about claiming and changing the language to better reflect that we, tangata whaiora do seek wellness. Tangata Motuhake and Tangata Hiwaora are about self-determination. Collectively Tangata Whaiora, Tangata Motuhake, Tangata Hiwaora signify recovery, discovery, mentoring and leadership (Adapted from Puna Rangatira Conference Proceedings, 2007).*

Participants explored the notion of a proposed national Māori body by developing emerging considerations of its vision, membership and composition, role and purpose. For this kaupapa to continue, the participants asked for more time to process this development. The recommendation is to hold another hui to consolidate these early developments of a national Māori voice. Participants were asked to return home and to further consider the vision and mission of a national Māori voice.

## INTRODUCTION

The purpose of this report is to present the discussion and aspirations of Māori with lived personal and whānau experiences of mental illness and mental health services who met at Waikato Tainui College for Research and Development, Ngaruawahia in September 2015.

### Background

The Making a Stand for Change Hui was the second hui hosted by Te Rau Matatini, a followup to a hui held in June 2015 that was facilitated by Kerri Butler (Take Notice Ltd) and Te Rau Matatini with Māori with lived experiences of mental illness and mental health services. That hui resulted in the report He Kai I te Rangatira, He Kōrero and identified essential areas requiring further attention, such as the need for:

1. A National Māori voice
2. Strategies to eliminate restrictive practice of Māori in mental health services
3. An agreed and sustainable action plan to inspire change in mental health services with and for Māori

The aim of the second hui was to explore, discuss and determine these features to address the identified needs of Māori mental health service users who are disproportionately affected by restrictive practices in comparison to non-Māori.

### Design

Te Rau Matatini provided an opportunity for Māori with lived personal and whānau experiences of mental illness and mental health services to continue the kōrero from the June 2015 hui held by Kerri Butler (Take Notice Ltd) and Te Rau Matatini. Te Rau Matatini organised the venue to ensure the environment provided Māori wānanga style of delivery and was nurturing for the participants.

A pānui was developed following a conversation with Tui Taurua, Darryn Williamson and Kerri Butler, this is where the title: "Making a Stand for Change" was formed. The pānui was then distributed amongst networks of Māori with lived personal and whānau experience of mental illness and via mental health providers.

### Methods

The hui commenced with a pōwhiri, and a facilitated process was undertaken for whānaungatanga, taking participants through the kaupapa of the hui. Wānanga style of delivery included group activities and workshops used to explore the issues, highlight strengths and actions which encouraged whakawhitiwhiti kōrero and sharing of aspirations.

### Participants

40 people attended the hui and represented lived personal and whānau experiences of mental illness and mental health services. Some were employed as a peer support workforce, and health professionals. The participants came from Northland, Auckland, Waikato, Rotorua, Gisborne, Taranaki, Nelson, Christchurch, Dunedin and Wellington.

## FINDINGS SECTION

This section summarises the core themes raised by participants during the two day hui, these include solutions and strategies to improve the mental health service experience and recovery of Māori. These include the engagement with Māori, aspirations for Māori centred services, deepening of cultural identity and belonging, Māori values and principles and whānau perspectives. In the conclusion of this section, there is a call for change in mental health services in the way Māori are treated. With an identification of little to no national Māori voice raised. Suggestions of what the national Māori voice could provide are highlighted with emerging considerations of its vision, membership and composition, role and purpose.

### Engagement with Māori

Mental health professionals that engage with Māori who are considerate of the holistic nature and connectedness of being Māori, of Māori heritage, their experiences and spiritual, whānau, physical and mental aspects are success factors in engaging with Māori.

One participant articulated this further by stating that engagement was about himself, his whānau and friends to understand the whole person. Through his culture he is complete, and when all parts of the whare (in regard to te whare tapa wha) all sides of the whare are together and upright. Not just one side (e.g. mental health) as when one side of the whare falls down, the whole whare is affected. He continues to say:

*Where I was is not where I am today to do that I needed a voice*

*Who I am is not who I was back then*

*My river flows that's my strength*

*When I'm unwell I use my river as my way of getting well*

*Medication is part of it but it's not the whole of it for me*

*I need to be who I am as me.*

*I'm not a bad person when I am unwell, it's just who I am when I am unwell*

## ASPIRATIONS FOR MĀORI CENTRED MENTAL HEALTH SERVICES

A strong theme represented in the aspirations of all participants was the need for more Māori centric mental health services. This included a change in ethos of mental health services in providing more wellness focused facilities with noho Marae, with te reo me ōna tikanga, waiata, kaimahi Māori and especially the attention to wairua to aid the recovery of Māori. Participants went further to state such facilities needed to be in natural environments to assist in their healing and recovery such as having ngahere and moana around them. Te Whare Oranga was one example described by a group of participants as being more beneficial to Māori recovery than what was being made available in most government funded mental health services.

### *Te Whare Oranga*

*“Our vision is for a facility purpose built in the country surrounded by nature, inside it support is available for whānau, we have two nurses and eight peer support workers who we believe will ease pressure in the system as peer support workers understand what people are going through. There we have tikanga Māori, yet the recognition of multi cultures. It ensures all is on the same kaupapa toward the whare oranga”.*

*“Can you imagine if there was a whare that had all of these elements that contributed to the wellbeing of Māori whānau – the possibilities”*

## DEEPENING CULTURAL IDENTITY & BELONGING

The depth and influence of Māori mental health services to ones sense of identity was shared by one participant who highlighted the importance of being Māori and knowing who you are. An insight significantly influenced when she started work as a peer support worker for a Kaupapa Māori mental health service.

*"I never looked at why being Māori was so important until I started working for a Kaupapa Māori organisation. I can understand the kōrero and can manage it, but I realised that I was not ok. The whole time I did not know who I was, now I know who I am, I have my pepeha, my whakapapa, I know tikanga. I realise now, that knowing my foundation is important, I have rediscovered myself, which is more than just saying I am Māori, now I know who I am. Before when I was asked about no hea koe, I'd say you'd have to ask my Mum, now I'm hungry for that info. It's not ok not to know who you are and how you connect, this has got to better you as a person. Te whare tapa wha is not enough anymore, knowing who I am as a Māori will make me a better person"*

## MĀORI VALUES & PRINCIPLES

Participants consistently raised the importance of Māori values and principles as important benchmarks and features to improve mental health care and services for Māori. The following table represents their core values and principles.

Wairuatanga	Mental health services lack approaches necessary to attend to wairua needs of Māori. Wairua of tangata whaiora and whānau has to be addressed at all times if tangata whaiora are going to achieve their goals and aspirations.
Mōhiotanga	It is important tangata whaiora acquire knowledge to motivate change. To assist tangata whaiora, they also need access to 'taonga tuku iho' which is not present in mental health services.
Whakapapa	Access to whakapapa is important to the recovery of tangata whaiora. There are times tangata whaiora may not be ready or may know little about their whakapapa, but by continually facilitating access to whakapapa opportunities and kōrero, in time it shows it can help heal and strengthen Māori. It is important to start the whakapapa kōrero and journey especially when Māori enter into an acute mental health unit or rehabilitation ward.
Manaakitanga	Being welcomed and cared for are important features. To enhance care, orientation to the system is helpful, and so is the journey in mental health services. e.g. receiving information in a clear way, participating in events, having whānau nearby.
Kaitiakitanga	Ensuring tangata whaiora understand their rights, and that they receive the support required to recover and be able to voice ones concerns and self-advocate.
Kotahitanga	Ensuring the support of each other, tangata whaiora will lead their own recovery with the support of health workers together with whānau.
Te Reo me ōna Tikanga	When there is te reo me ona tikanga, kōrero, hui, wānanga and mirimiri Māori identity and wellbeing are enhanced. Having these elements within mental health services makes a difference to one's service experience and overall recovery.
Ūkaipōtanga	With a focus on building ones resilience, strengths and personal responsibilities, being surrounded by whenua, moana and reminders of being Māori are healing, and conducive to tangata whaiora leading their own destinies and meeting their aspirations.

## WHĀNAU PERSPECTIVES

Whānau members with experience in supporting their loved ones with mental illness contributed their views at the hui which also focused on enhancing their abilities and understanding to best support their whānau members.

The impact whānau support can have on one's recovery is influential, especially when whānau are confident with knowing their loved ones preferences and have access to options to support them during their recovery. One participant shared how her whānau knew what was best for her and the significant impact this had on her recovery and life journey.

*"I was lucky, my whānau knew what kind of person I was – I yearned for a place that had wairuatanga, and all of these things. I was very blessed to have a whānau that recognised these other things would make me happy and well".*

Participants raised the need for more whānau centred resources and approaches so that whānau are orientated to mental health services, including being aware of their rights as whānau whilst their loved ones were being supported in services. Whānau raised the need to be well equipped with essential knowledge and tools to awhi their whānaunga, especially when they are discharged from an acute mental health unit.

*"We need to be part of the orientation with our loved one and not just left at the reception to pick up and drop off"*

Information and education in understandable language about medications and potential side effects their whānaunga might be experiencing are also viewed as important. Whānau members suggested tools so that they can also be aware of their own personal strengths and areas they could improve on.

*"If my whānaunga is coming home to me I want to know everything, I want to be able to have the tools to look after them and to look after myself".*

Further whānau aspirations included more Māori health professionals and whānau centric facilities, with resources to foster the learning and development of tangata whaiora and their whānau. Places or initiatives that whānau could easily access to develop their interpersonal and communication skills and knowledge to provide crucial support to their loved ones.

*"I would like to see Marae, and a whānau room nearby but separate from the acute mental health unit, with a whare kai and a library available to offer resources and books for whānau".*

*Hui and wānanga were viewed as important methods by all participants as constructs to gather Māori whānau, to kōrero and to gain support from each other whilst fostering the empowerment of whānau to have their voices heard and to be involved in opportunities that make change.*

*"Our total recovery involves being in the community with our whānau....also knowing all resources and leading by example with the ability to have facilitated wānanga*

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## A CALL FOR CHANGE IN HOW MĀORI ARE TREATED IN MENTAL HEALTH SERVICES

### ***Little to No Voice***

Māori with lived and whānau experiences of mental illness and mental health services do not believe they have choice nor a voice when it comes to expressing matters of concern, nor for raising areas requiring improved care of Māori in mental health services.

Feelings of oppression and being disproportionately treated by mental health services is of great concern to Māori. Participants want to overturn the barriers impacting on them for more and better resources and methods that are helpful to and empowering of Māori.

*“We want to pull down the walls, there is a tokenism in the mental health and addiction system in regard to Māori, there is oppression and segregation happening, and in the communities we want to build bridges to take us to an area where there are more resources that will help us to get well, and empower Māori, to have access to tools and resources”.*

### ***Having a National Māori Voice***

Participants felt strongly there needed to be a national Māori body or voice that would bring together Māori to represent the voices of Māori with lived experience of mental illness and mental health services. A national body that would have the ability to hold the kōrero of Māori to influence policy, to hold and foster accountability where it resided especially in mental health services to ensure Māori concerns were expressed, and solutions effectively identified and actioned.

*“It is about positioning ourselves is important, so that we can speak our message clearly...at a place where decisions are made”*

It was acknowledged that the political climate had changed somewhat and so too had mental health service delivery models of care, thus requiring the reiteration of the rights of Māori, as treaty partners and more importantly as users of mental health services where health gains were less than ideal.

The national voice would also guide and assist Māori in communities to utilise the impetus of the national Māori voice to question the presence or absence of Māori representation in mental health services, to challenge for a Māori voice and to lobby for funding to enable robust Māori representation. The national Māori voice could extend local support to Māori so that Māori could offer one voice and one message.

## EMERGING ASPIRATIONS FOR A NATIONAL MĀORI VOICE

Participants spent time exploring the need for a National Māori voice, its possible vision, membership and composition, role and purpose. Each of the participants enjoyed the wānanga process and the opportunity to discuss this, and have requested another hui for more time to consolidate this work. The following section provides a summary of their emerging thoughts.

### EARLY VISION OF NATIONAL MĀORI VOICE

Some of the emerging thoughts considered the potential vision of a national Māori voice, this included:

- Fostering a movement that would be led by example (role model) and would start a movement of success for Māori.
- Providing advocacy for Māori going through mental health services.
- Reflecting the experience and understanding of people with experience of mental illness and the strategies to support Māori.
- Being supportive of whanau of loved ones with mental illness.
- Being succession oriented, by promoting solutions now so that “young ones who come through the system with issues can be supported by the actions that have sealed the cracks in the system”.

### POTENTIAL MEMBERSHIP & COMPOSITION

Some of the emerging thoughts considered the potential membership and composition of a national Māori voice, this included

- Tangata Motuhake - Māori with lived experiences of mental illness (who have maintained their wellbeing) with their whanau
- Kaumātua with lived experiences to offer governance in cultural safety
- Regional network of tangata whaiora who would be linked into the national body. They would contribute to a range of steering groups, be active within regional groups or areas and feed into the national body
- Being supported by community, whānau, hapū, iwi.

### POTENTIAL ROLE & PURPOSE

Some of the emerging thoughts considered the potential role and purpose of a national Māori voice, this included

- Holding mental health services and mental health professionals accountable
- Having its own mana and tino rangatiratanga to make or contribute to key decisions
- Having the ability to influence politically, in policy, in and to services
- Ensuring representation of Māori with lived experience
- Being mandated by Māori with lived experiences.

## CONCLUSION

The need for a safe and protected space for people with lived experience to share their experiences with others, to support each other and provide constructive feedback about recovery and mental health services was raised by participants. Taking the time to share stories, experiences and to identify solutions enabled and reinforced participants' determination to 'Make a stand for change and to make a difference' in order to change the mental health system and improve the experiences of tangata whaiora.

*"Get up Stand up  
Stand up for your rights  
Get up Stand up  
Don't give up the fight  
Get up Stand up  
Freedom and hope is our right  
Pull down the walls  
Oppression, seclusion, ignorance, segregation is rife  
Build a bridge – whakarongo, titiro, aroha, tika, pono  
Empower the whānau, hapū, iwi – healthy life"*

Although, there was a sense of frustration that those with lived experiences had tried to have a voice to make a difference before, conditions still had not changed in regard to the experience of Māori.

"It's feels like we have done this before and it still hasn't changed"

Participants were clear on how mental health services could be improved with more authority given to the inclusion of tikanga Māori, Te Reo, Māori values, beliefs and practices from entry to exit. With more of a focus on 'knowing who we are' with access to whakapapa and whānaungatanga, access to kaumātua, kuia and the ability to assert ones rangatiratanga.

Participants were also clear of the needs of whānau, and the specific strategies they needed to build their capabilities with to support their loved ones with mental illness.

Discussion on the need for a National Māori Voice, its potential vision, membership and composition, role and purpose was robust and varied amongst the group.

"Given an opportunity to hear our voices and to see what it can create, is what will also contribute to the wellness and recovery for Māori"

All participants agreed it was important to have a recognised National Māori Voice to improve the mental health system, to influence policy and the way the system works. The participants suggested members of the proposed national Māori body would have lived experience of mental illness and would be in a place of managing one's own mental wellness. Kaumātua and kuia would be part of this roopū to provide cultural support, guidance and direction. To conclude, it was decided by the participants more time was needed to process the kōrero shared at the hui before finalising the vision, structure and identifying members for the national Māori body. Te Rau Matatini committed to a third hui in 2015 and looks forward to the next stage of kōrero.

INSPIRATIONS

"O mātou moemoea"

"He Korowai o ngā Rangatira "

*"Whakarongo ki te reo Māori e karanga nei"*

"tutira mai ngā iwi"

LEAN ON ME!

"He aha te mea nui o tēnei ao ...he tangata he tangata he tangata"  
(what is the most important thing in this world, it is people, it is people, it is people)

Are you a human being having a spiritual experience or are you a spiritual being having a human experience?

*Being Māori is about being inclusive not being exclusive.*

GO MY SON!

TOTARA Tree stands tall....it's about Māori going back to their whenua, turanga-waewae, talking about pepeha and whakapapa, this is what makes us different and who we are.

Get up stand up for your rights, don't give up the fight!

SILENT - LISTEN- The word silent has the same letters as Listen

United we stand, divided we fall...we will be able to do more if we are together

Te amorangi ki mua, Te hapai o ki muri

*(The leader at the front and the workers behind the scenes)*

He tao huata e taea te karo, He tao na Aitua, ekore."

("The thrust of a spear shaft may be parried, That of Death never.")

TANGATA WHAIORA = TANGATA MOTUHAKE =  
TANGATA HIWAORA



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