

MĀORI CHILD ABUSE SUMMIT



The Māori child abuse summit was held on 25-28 November 2007 in Auckland. "We were elated with the outcomes of the Summit. There is a huge resource of Māori expertise out there and we now look forward to getting on with the work and partnering with Māori providers to eliminate Māori Child Abuse," says Anton Blank, Project Manager Ngā Mana Ririki.

All New Zealanders are deeply concerned about child abuse.

We know Māori feature prominently in our child abuse statistics and we need to address this issue.

Here's a snapshot of the Māori situation:

- Māori children are twice as likely to be abused as children from other groups
- New Zealand has the third highest rate of infanticide in the OECD, with around a third of those deaths being Māori children
- There are statistically significant differences in the rate of homicide of Māori and non-Māori children and the differences have widened over the past 25 years
- The child most at risk of fatal violence in New Zealand between 1991 and 2000 was less than one year of age, male, and Māori. He was most likely to die from battering, sustaining head and other fatal bodily injuries inflicted by one of his parents.

A high profile Māori death this year resulted in a massive outpouring of public grief over the amount of child abuse in this country and highlighted once again that Māori children are the group most at risk of abuse.

Nga Mana Ririki was a three day summit convened by Dr Hone Kaa. The purpose of the hui was to provide a forum for Māori who work in the sectors that support child abuse prevention to meet and share the expertise. It was also about action. So, the overall goal of the hui was to develop a plan to reduce Māori child abuse rates.

At the same time as this summit was being planned, another group of Māori were meeting to talk about the same issues. This group – Te Kahui Manaaki Tamariki – was convened by television producer Paora Maxwell, and members of the

group participated in and helped facilitate Nga Mana Ririki.

Over 114 Māori and others from Waikato to Northland attended the hui. They represented iwi health and social services, other Māori providers, non government organisations, and government agencies.

The Hui heard from a range of Māori and non-Māori child protection experts, and then developed a plan that focused on four areas:

- Advocacy
- Research
- Education
- Communications

THEMES

There were a number of themes that clearly emerged from the discussions.

The place of tradition

Historical accounts indicate that Māori were kind and nurturing caregivers. This new profile of violence and abuse resonates with the experience of indigenous peoples elsewhere – it is the direct result of colonisation and cultural alienation. Answers lie in reclaiming traditions and re-constructing a violence-free culture.

Reframing the Māori experience

The hui felt that a combination of unbalanced media coverage, and continual exposure to negative statistics has been unhelpful for Māori. They perpetuate negative stereotypes. New strategies need to challenge these stereotypes, frame the Māori experience positively, and motivate behaviour change.

Tino rangatiratanga

Māori who gathered wanted to take the lead and develop solutions for the problem (disproportionately high rates of Māori child abuse). Over the last 20 years Māori expertise in child protection has increased exponentially. These practitioners are now blending generic child protection expertise with Māori models of practice. They believe that any solutions that are developed must come from a Māori base – and that research bears out the success of these approaches.

Networking and collaboration

Māori services and workers are located in a whole range of Māori and mainstream agencies. Any strategy that is developed needs to tap into this expertise and plug any gaps that exist.

The role of men

Everyone agreed that Māori men play a pivotal role in addressing the issue of Māori child abuse. They may be the primary perpetrators of violence and abuse but they are also an integral part of the solution. The strategy needs to have heavy emphasis on the role of fathers and build up services that support fathering.

Education and communications

These are the two main areas of activity required to achieve the changes required. Audiences are:

- Politicians and decision makers
- Child protection, health and education sectors
- Māori whānau
- The general public.

GOAL

Eliminate Māori child abuse.

KEY MESSAGES

- Māori child abuse rates are disproportionately and unacceptably high. Our experience mirrors that of indigenous people all over the world.

- We need to stop blaming our history for the problem. It's time for us to take responsibility and heal.
- Only we can solve the problem and research shows how successful by Māori for Māori approaches are. We have highly qualified experts in all the areas that contribute to child safety.
- Solutions must be inclusive – of wahine, tane, tamariki and rangatahi.

Actions were developed around key themes of:

- Establish National Māori Advocacy Body immediately
- Commence communications campaign immediately.

This body will include two organizations Nga Mana Ririki and Te Kahui Manaaki Tamariki.

The role of the organisation will be to advocate around issues of Māori child abuse at all levels. The organisation will establish a small secretariat with research and communications functions.

The hui provided a number of excellent recommendations for ensuring the trust is equitable, and accountable – including a transparent selection process.

INDIGENOUS KNOWLEDGE EXCHANGE



Peter Thomas, Stan & Bess Seschillie and Awhitia Mihaere visiting the Auckland Regional Womens Corrections facility.

During October 2007, Hapai Te Hauora Tapui hosted a number of Indigenous Peoples from Canada and America. Manuhiri who came participated in the International Network of Health Knowledge and Development Conference that held in Rotorua.

For some of us living in some of the major cities in Aotearoa you wonder 'what you want to show Manuhiri' apart from our everyday Maori public health. Some of us have limited knowledge about the local Iwi because we are not from the rohe, and I am sure that

our Manuhiri get tired of looking at shops.

We-Iwi Maori play an important role in showing our manaaki and giving Manuhiri a contemporary authentic Maori view of everyday life outside of power point presentations and papers. We are all used to discussing and analysing Maori values and principles and everyone has a perspective about Maori worldview, but when hosting Manuhiri you are left to your own devices, and the challenge is to live Maori culture and share

2008 CONFERENCE

The 2008 Public Health Association conference will be hosted by the Tai Tokerau (Northland) branch at the Copthorne Hotel, Waitangi from 1-4th July 2008. The conference theme is "Tapu and Noa - physical, environmental or both".

These finely balanced concepts have been used by Māori for generations as a 'health code or system' - we think that they have practical application for public health. Tapu is linked to health risks, environmental hazards and protection, and noa is equated with safety and respect.

Another significant element of the 2008 conference is its location at Waitangi. Te Tiriti o Waitangi is the founding document of Aotearoa and also a living document for public health practice. Holding the 2008 conference at Waitangi challenges us all to reflect upon the importance of Te Tiriti in our mahi and, we hope, encourages us all to embrace the spirit and intention of Te Tiriti.



Te Rihia Manning and Bess Seschillie at the International Network of Indigenous Health and Knowledge Conference.

Maori knowledge in your own kainga.

If we are to be good Maori Public Health Practitioners, the things we talk about and fight for need to be present and alive and well in the office and in our kainga. I have here two recollections of our Manuhiri who we hosted in October.

FINDING A SENSE OF "HOME" IN SHARED CULTURAL VALUES.

Maori hosts make it easy for a visitor of an Indigenous Canadian culture to feel welcomed! When they visited Auckland in October of 2007, Bill Mussell and his daughter, Willow, felt that a "place and a space" were made for them by their hosts Peter Thomas and Eriata.

Bill visited Hapai Te Hauora Tapui offices where he spent time with Megan Tunks (Kairangahau/Kairautaki) to discuss research addressing depression and Maori males. He was keenly interested in this research because he does work with First Nations males, mostly healing from personal losses and development of skills for "learning how to learn" so as to build personal empowerment. In his homeland, he serves as the chairman/president of the Native Mental Health Association of Canada, a voluntary role he has filled for 14 years. In this role and others, he provides leadership nationally in dealing with a variety of mental health and wellness challenges.

Male depression was the topic the next day when members of the board of directors assembled to review research and other topics, and welcomed input

from Bill. The experience reminded him of many similar meetings at home when like-minded leaders join together to pool their best thinking in the best interests of the communities they are serving.

During his second visit to the regional mental health offices, he joined Winston Maniapoto for lunch. They shared their life experiences as pioneers in the Western professional world, Winston in psychiatric nursing and Bill in corrections, first as a probation officer and Senior Member of the National Parole Board. Both ended up specializing in mental health work that contributes to the health and wellness of their brothers and sisters, other Indigenous people, and their friends of the Western world. They shared similar early life experiences in their families, as students in the formal education system and as young professionals. They enjoyed reminiscing now that they are both beyond retirement age, and continue to be engaged in their chosen profession.

Before the visit ended, Bill and Willow were invited to share a seafood dinner with Katherine Clarke's family and friends. The Clarke's, Peter and Eriata, and their friends, relate as a large, dynamic, and healthy family who welcomed and valued us as family. What a wonderful gathering! Our togetherness celebrated life, our respective cultures, health as an asset, and quality living! Thanks to you all for making it pleasurable "to find a place and make a space": so far from home, we felt "at home". –Bill Mussell

CROWNPOINT DINÉ COUPLE VACATIONS WITH THE BEAUTY OF MAORI IN NEW ZEALAND

As I remember our travels in the land of the Maori my memory bank encompasses so many things; the beauty of the Maori

country—the carpet of greenery as far as our eyes could see, the animals grazing off the land, the beautiful ocean shore with its zillion shells, the Thermal Village in Rotorua where we visited and meeting beautiful Maori People who were curious of us (my husband and I) as we were of them. With our visit ending in Rotorua's Thermal Village we packed up our rented automobile and headed for Auckland.

We traveled onto Auckland with only one mission—to locate the office of Shi tsi'lii, Peter Thomas and Shi dei' zhee', Te Rhia Manning. Carrying the information and directions given me by Shi De'zhee' Te Rihia, we proceeded our journey in finding Peter and Te Rhia—after all aren't First Nations People great navigators who never get lost and never need the use of the "bilaagaanas" (whiteman) GPS units? After a few missed turns we arrived at Peter and Te Rhia's office—Peter's expression was worth a million turquoise stones when he saw Stan and I walking in!! He had figured that we had departed New Zealand already and were probably flying over the ocean returning to Diné t'ah—well, how could we depart New Zealand without a formal ah he'hee (thank you) and ah goh e' ne' (so long for a little while as Diné have no word for good-bye) to our lovely ke' (family) we've met?

Shi tsi' lii Peter and shi dei' zhee' Te Rhia introduced us to other members of their staff at Hapai Te Hauora Tapui and as we sat around the table Stan and I felt so welcomed-- at home with ke'. I cannot express in words alone our feelings as we talked with shi tsi' lii's co-workers—they shared with us their individual job tasks and what each were focused in their work among their people. As each shared their work with us we could sense their interest and valid pride along with their sense of responsibility to address the needs of the Maori. How wonderful we both thought as we listened because the issues shared with us are parallel issues being experienced by our own people—the Diné People of the southwestern United States.

- By Bess Kei'laa hee' (Many Shoes) Seschillie. Diné Nation, Crownpoint, New Mexico



PUBLIC HEALTH BILL

The new Public Health Bill is currently being debated in parliament. This is a really important piece of legislation, it will be the main piece of health legislation for NZ for the near future. It's really important that PHA have a say in particular Māori. At present there is a good overall vision and goal but nothing actually in the Bill for Māori. The proposed Public Health Bill will update New Zealand's fragmented and outdated legislation for public health, and become the primary public health statute. It will replace the Health Act 1956 and the Tuberculosis Act 1948.

The Bill will:

- continue the traditional public health focus on communicable disease control (such as tuberculosis and HIV/AIDs) and environmental health (such as sewerage and insanitary dwellings)
- expand health emergency provisions, which currently deal only with epidemics of communicable diseases, to all actual or potential public health emergencies irrespective of cause

- take account of changes in international travel patterns, and threats such as SARS and pandemic influenza, to enable the range of risks to public health, to be managed at our borders
- include new guideline provisions aimed at reducing risks of non-communicable disease (risk factors such as those that can lead to diabetes).

The Health Act is over 50 years old, and reflects society's values at the time it was drafted. The Public Health Bill is based on the Health Act, but modernises and updates approaches and terminology to reflect life in the 21st century.

For more information visit the Ministry of Health website: www.moh.govt.nz

NEW MEMBERS WELCOMED AT HUI



Right to left Melanie Dalziel, Manaia Paki-King, Gabrielle Baker, Lisa McNab and Kay Berryman, Peter Thomas (absent).

Māori caucus met in November for Executive Council hui. The hui went very well and new members were welcomed by Richard Egan (PHA President).

TOKO I TE ORA TE ORANGA BRANCH, HAMILTON

Te Oranga Branch Māori Women's welfare group was established in October, 2005 at Hui Te Rangiora Marae in Hamilton. The group is part of the National Māori Welfare Women's league that strongly advocate on all issues facing Māori in Aotearoa society. The 55th national conference was held at Waitangi in October this year. All branches gathered in a mass powhiri onto Waitangi. In attendance were the hosts Te Taitokerau region, ngā rangatira o te motu Kiingi Tuheitia, his wife Te Atawhai Paki, Te Kahui Ariki whānau, Prime Minister Helen Clark, and invited guests.



Te Oranga Maori women's welfare (clockwise from top left) Tepene Clark, Tuahana Clark, Tapeka Tanirau, Tawhiri Tanirau, Maree Chelsey-Taiapa, Hannah Nelson, Terehia Desai.

Hei Kōrero whakamutunga! Kua tata, anō, ki te wā whakanuia te whānautanga o Ihu Karaiti me te whakapiringa o ngā whānau ki ā ratou anō, no reira, Meri Kirihimete me ngā harikoa maha mo te tau hou. Pai Marire!



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