

# **A Policy and Ethical Framework to Improve Maori Health Through Maori Traditional Healing<sup>1</sup>**

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## **1. Introduction**

The day before I left New Zealand to travel here to this Congress, it was announced that the New Zealand Health Funding Authority (HFA) had granted for the first time ever to five Maori health providers, funds to deliver Maori holistic healing services. This development has not occurred in a vacuum or by chance. As with other indigenous peoples, it comes after a long history of Maori endeavoring to re-assert their rights and expertise in taking care of their own and others, after emerging from the traumatic experience of colonization and active suppression of their knowledge, cultural values and sciences.

Researching and developing traditional healing is not just about finding ways to offer to the wider world what indigenous peoples have known and practiced for centuries. In the year 2000, traditional healing is about using traditional knowledge systems, sciences and practices that for the large part still remain outside of contemporary science, in the first instance to redress the poor health status that indigenous peoples worldwide have experienced post-colonization. Secondly, to promote traditional knowledge for future generations of indigenous peoples; and thirdly to share with the world their traditional knowledge in an environment of consent, participation, access protocols, and sharing of benefits.

This paper looks specifically at the situation of Maori, the indigenous peoples of New Zealand, and the efforts made by both Maori and government to improve Maori health and Maori development.

## **2. The Context**

### **2.1 Historical Context**

The historical experience of Maori is similar to that of indigenous peoples worldwide. We inhabited the land now known as New Zealand for over 2000 years before European settlers arrived. In 1840 a Treaty was signed with the British government, the Treaty of Waitangi and thus began a journey that is still in progress today – a journey of two Treaty partners acting honourably towards each other and in good faith. In 1840 when the Treaty was signed, the estimated Maori population was 410,000. 56 years later, the Maori population had been

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reduced to 42,000 – casualties of the diseases that settlers brought with them, casualties of wars with settlers, and casualties of war amongst Maori tribes after the introduction of the musket to Maori communities.

As with other colonized peoples, Maori culture was forced into the underground, as pressure to become civilized and assimilated bore down on the country like a plague. Tohunga (traditional healers) were forbidden to practice traditional healing in a Tohunga Suppression Act (1907)<sup>2</sup>. Maori were forbidden to speak the Maori language, in fact, even my parents generation was caned at school for speaking Maori. The rate of land alienation and destruction of native forests and fauna was alarming. Forests were destroyed not because the wood was needed, or even the land for that matter – but because many of the British immigrants who settled in New Zealand were, amongst other things, superstitious and considered forests as places of evil. [Today less than 20% of our native forests still remain. The majority of these are found on Maori land and in the Conservation estate.] The Maori population experienced rapid urbanization in the post-war years. According to Pool, it was the most accelerated move experienced by any population in the world.<sup>3</sup>

At various points in history, different ideologies have been used to describe the situation of Maori and the relationship with their Treaty of Waitangi partner, the New Zealand government. As a country we have gone through complete denial that Maori had/have special rights as the indigenous peoples of the land, or, that the Treaty of Waitangi created not just historical but also contemporary and future responsibilities for government to Maori people, over and above governance and citizenship.

I won't go into further detail of the past – suffice it say, the past exists and its effects are still felt today. The phrase '*post-colonization trauma syndrome*' has recently found its way into our policy makers' vocabulary. I would like to use the time available to look more at the situation today and the efforts both Maori and government are currently engaged in.

## **2.2 Who are Maori? Maori Demographics**

Maori are the indigenous peoples of Aotearoa Te Wai Pounamu, the country you know as New Zealand. Maori are a Polynesian Pacific peoples who share with other Polynesian peoples' a linguistic tradition, fundamental elements of cosmology and spiritual values and the knowledge, generational experience, and custom of utilizing culture and those natural resources that were available in the places they lived.

O/Head #1 - Maori/NZ population 1996 (last census)

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<sup>2</sup> The Tohunga Suppression Act was subsequently repealed in 1964 but even before this date, Maori traditional healers had re-emerged and had significant numbers of followers.

<sup>3</sup> Pool I. *Te Iwi Maori: NZ population, past, present and projected*, Auckland University Press, Auckland 1991

***Maori comprise 16% of the total New Zealand population. We are a youthful population and our birth rate is almost double that of non-Maori. Maori are also the third largest indigenous population in the South Pacific.***

O/Head #2 - Maori/NZ population 2051 (projection)

***Within 51 years the Maori population is predicted to reach almost 1 million people.***

There are just over 60 distinct Maori tribes, but all speak the same language, te reo Maori, are subject to the one Treaty and live alongside other New Zealanders in urban as well rural communities. Even though the majority of the Maori population lives in urban areas, we still remain tribal peoples with very strong tribal traditions. In fact the term 'Maori' was only created after the Europeans arrived.

**3. A Policy Framework: Socio-Economic Disparities between Maori and all other New Zealanders**

It is my contention that a government should not develop a framework for traditional health that stands alone or sits apart from a more comprehensive indigenous development strategy to redress past historical grievances, respond to the current situation and plan for the future. To do so would be to render traditional healing services vulnerable to exploitation and misappropriation, as there would not be sufficient additional legal and non-legal mechanisms to protect the relevant traditional knowledge and practices.

It is the policy of the current government to recognize that there are gross socio-economic disparities between Maori and non-Maori and that these disparities are worsening over time. Government has developed a framework, called 'Closing the Gaps' which represents the first significant and high-level effort to halt the socio-economic decline of Maori and to take more proactive steps to assist Maori to achieve self-determination of their whanau (families), hapu (sub-tribes) and Iwi (tribes).

In order to ascertain how best to 'close the gaps', it was first necessary to identify precisely where the gaps exist. The Ministry of Maori Development undertook a comprehensive statistical analysis and published their findings in a document called 'Closing the Gaps'. These findings have set the *disparity indicators* that are now being used to gauge improvement.

Overhead #3 – Closing the Gaps

***This figure provides a representation of the differences between Maori and non-Maori on a scale of 1 to 100. Parity is achieved when both Maori and non-Maori meet at the outer circle.***

Overhead #4 – Causes of death

***Maori live less than other New Zealanders living in the same communities as they do. They have disproportionately higher mortality rates than their non-Maori neighbors in conditions that for all intents and purposes are preventable or curable. What is causing and widening these disparities?***

In all sectors – education, labour, criminal justice, housing, income and health, it was clear that the status quo was simply not delivering outcomes for Maori. It had to be acknowledged that the notion that one policy for all is fair and just and effective was simply not backed up by the statistics. Perhaps, the recommendations that Maori had made to various governments over the years, was in fact the answer, “*Maori leading Maori development.*”

In the case of addressing poor Maori health, there are ways in which the general delivery of health services must be improved – but there is also wisdom in widening the accessibility of traditional healing practices for Maori, as the outcomes are not solely limited to improved health. Durie refers to *medical pluralism* [recognizing that multiple approaches to healing]<sup>4</sup>. There are also benefits in terms of language promotion, cultural preservation, replenishment of the natural environment as well as self-esteem, which can positively, impact on all the other areas.<sup>5</sup> The policy framework for government therefore is at one level ‘closing the socio-economic disparities between Maori and non-Maori’ and at another level, addressing and settling Treaty of Waitangi grievances (which I’ll discuss soon).

#### 4. Maori Traditional Healing

I was asked to give a brief descriptive on the nature of Maori traditional health services. It should be made clear that the primary focus for traditional healers is that of the overall well being, physical, spiritual and emotional of a person. It is considered important to remedy all of these areas simultaneously or in close proximity, as neglecting one area, can cause ineffectiveness in the others. Often, it is also necessary to heal not only the person, but their family and immediate home and work surroundings.

Traditional healing comprises a number of components, each one of them requiring specialist knowledge, these being:

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|-----------------|--|
| <i>Mirimiri</i> | massage, physiotherapist, chiropractor   |
| <i>Rongoa</i>   | ethnobotany - medicines derived from native flora and fauna                            |
| <i>Karakia</i>  | spiritual well-being of the person, their family and immediate environment, protection |

It can often take several specialist healers to deal with a situation. Note that I am using the term ‘situation’ rather than ‘condition’ to reinforce the concept of healing the person and their surroundings, and not just a tangible condition. There are also specialists for women, childbirth and children. Maori traditional healing can be and is applied to any situation and any condition known by medical practitioners, but it also plays a very important and unique role in

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<sup>4</sup>, MH Durie, A Framework for Purchasing Traditional Healing Services, 1996, page 2

<sup>5</sup> Closing the Gaps is the language of the government of the day, but the aspirations of Maori extend beyond this ideology. They do not wish to be exactly like non-Maori, but as citizens they are entitled to good health, proper housing, a job, and to be tribally and culturally distinct.

healing a condition we call *Mate Maori* (Maori sickness) which afflicts some Maori and is untreatable by medical practitioners.

There is a national body of traditional Maori healers.<sup>6</sup> Traditional healing has recently re-emerged as either the preferred choice for many Maori seeking care or as a complimentary service to medical care. There are a number of reasons for this. One of them is that Maori have very different perceptions of illness and wellness. For instance in a recent study that examined Maori concepts of disability, one informant commented:

Overhead # 5 - Maori concepts of disability<sup>7</sup>

In other words, policies that prioritize installing ramps for disabled people into buildings might go some way towards making places more accessible, but it won't even touch this particular perception.

Redressing land alienation is the most important issue for Maori. When the Treaty of Waitangi was signed in 1840, Maori 'owned' all of the land.

Overhead #6 - Land alienation<sup>8</sup>

Now, Maori own only 6% of the total New Zealand land mass. 12.5% in the North Island and 0.5% in the South Island. There are over 800 outstanding Treaty claims against government. In all honesty, I would not be able to stand before you today and talk to you about Traditional Healing, if there was no progress being made on Treaty grievances and settlements. Over the next 50 years, this map will change significantly as more Treaty settlements are achieved and land and natural resources returned to Maori tribes. Traditional healing also offers to Maori one of the few spaces available to them to grieve for their loss of heritage at a very personal individual level.

##### **5. An Ethical Framework: The Mataatua Declaration on the Cultural & Intellectual Property Rights of Indigenous Peoples**

The Mataatua Declaration was developed in 1993 by indigenous peoples from 14 countries. It has since been signed by over 500 indigenous nations indicating a widespread agreement with the principles and recommendations for action that it contains. The Declaration articulates indigenous concerns about the inadequate protection of their traditional knowledge and cultural and intellectual property at local national and international levels. It also outlines many ethical principles which are highly relevant to the issue of traditional

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<sup>6</sup> Nga Ringa Whakahaere o te Iwi Maori: The National Body of Traditional Maori Healers was established in 1992. The Board advocates on behalf of healers and has participated in a number of government policy initiatives relevant to the preservation and promotion of traditional healing (e.g. the review of the Patents Act, consultations on a framework for purchasing traditional healing practices.)

<sup>7</sup> Maori Concepts of Disability, Donald Beasley Institute, Dunedin, pages 8 & 9

<sup>8</sup> Maori Land Today, Part 2 – Settlement Framework, Building a Better Future, Office of Treaty Settlements, Figure 2.1 and 2.2, pages 13 & 14.

healing, including the necessity to protect biological diversity and to prioritize the establishment of indigenous education and research institutions.

The Mataatua Declaration is routinely quoted by Maori tribes, and over time, government has come to accept many of its ethical principles.

O/Head # 7 Mataatua Declaration: Traditional Knowledge Is:

**Traditional knowledge is** a) local, site-specific, b) an essential aspect of self-determination of whanau, hapu, Iwi and indigenous peoples worldwide, c) there for indigenous descendants **first**, d) collective but can be held by individuals in trust, e) is collective and intergenerational but, individuals can innovate and individuals can be guardians.

The essential point is that acknowledgement of the local and site specific nature of traditional knowledge, guides policy makers to develop mechanisms and capacity building at the local level rather than solely at the national level.

O/Head # 8 Mataatua Declaration: TK can be shared:

**Traditional knowledge can be shared** a) alongside and/or after its promotion amongst indigenous descendants, which is to say, not BEFORE its promotion amongst indigenous descendants, b) requires access protocols, informed consent, cultural and intellectual property rights, contracts at a local level, regulation of the observance of contracts at a national levels, c) requires agreements on any sharing of benefits which is not only about financial benefits, but reciprocity, ensuring that the local community derives some benefit, capacity building, equipment, training, and when appropriate financial benefits.

## 6. A Framework for Implementation of Traditional Healing Services

With a historical context acknowledged, a comprehensive and strategic government policy framework established, and an agreement on basic ethical principles for both Maori and government to observe, the issue of implementation becomes more achievable. Given that the Mataatua Declaration prioritizes indigenous people asserting greater control over the research impacting on their lives, then, it is clear that a framework for implementation of traditional healing services requires Maori in the first instance to define for themselves an appropriate implementation framework and to use it to negotiate with government.

In 1996, a Maori research unit identified ten criteria representing minimal conditions that might be expected from a traditional healing service taking into account the realities of the contemporary health system:<sup>9</sup>

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<sup>9</sup> A Framework for Purchasing Traditional Healing Services, Te Pumanawa Hauora Research Report TPH 96/1, June 1996, 24-29.

- **Traditional** basis for healing activity - there should be evidence that a healing activity does in fact have a traditional basis.
- **Relevant for today** – not all traditional practices were sound or desirable
- **Accessible** – few healers have fixed fees, in economic terms they are therefore more accessible than mainstream services.
- **Demand** – the value of any service is that it responds to a clear need
- **Integrated body of knowledge to rationalize treatments**
- **Training for practitioners** – knowledge of healing is not static, it require ongoing training
- **Internal arrangements for maintaining excellence** – excellence is something highly valued in Maori society
- **Open to other approaches** – medical pluralism, reciprocal respect for other systems of healing
- **Not harmful**
- **Accountability** – traditional healing providers have to be accountable to the people they care for, to their funders
- **Liaison** – no longer acceptable for workers to work in isolation of each other

## 7. Conclusion

In conclusion, returning to the point I started this presentation with – my observation that the announcement of the first Maori traditional healing service being funded by the NZ Health Funding Authority, has occurred **after**;

- the country as a whole has learned to acknowledge the historical context and continuing impact upon Maori of colonization;
- developing a policy framework for government to redress historical grievances as well as deal with contemporary inequities including but not limited to Maori health;
- developing an ethical framework for government and Maori;
- Maori themselves have developed an appropriate framework for the offering and purchasing of traditional healing services;
- **and after** government has made corresponding commitments to protect traditional healing from misappropriation and to assist Maori to promote the on going learning of traditional knowledge in their own institutions, kohanga reo (Maori language pre-school nests), kura kaupapa (Maori primary schools), and Whare Wananga (tribal universities).

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## **Criteria for A Framework of Implementation Of Traditional Healing Services**

- Traditional basis for healing activity
- Relevant for today
- Accessible
- Demand
- Integrated body of knowledge to rationalize treatments
- Training for practitioners
- Internal arrangements for maintaining excellence
- Open to other approaches
- Not harmful
- Accountability
- Liaison