

**Tihei Mauri Ora: a Maori retention programme supporting Maori nursing student achievement.**

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**Introduction**

Within New Zealand nursing there is an awareness of a need for relevant safe and accessible care for Maori. One approach has been to increase the number of registered nurses who identify as Maori. Recruiting Maori into nursing has increased and statistics in universities and polytechnics indicate that the most popular qualification for Maori at bachelor level is Bachelor of Nursing (Earle, 2008).

Strengthening education and achievement is crucial to Maori retention and success in nursing and has been identified as a priority by the District Health Boards of New Zealand and the New Zealand Nursing Council. Rather than focusing on Maori underachievement the Ministry of Education (2007) recommends educational institutions and teachers shift away from deficit to strengths based models, and consider alternative education and teaching approaches to raise Māori achievement in nursing education. Whilst progress has been made in recruiting Maori into the New Zealand health and disability workforce (Wilson, McKinney and Rapata-Haninng, 2011), retention and completion rates remain lower than non-Maori.

Whilst *Pakeha* (European) epistemology and ontology is accepted as mainstream or norm (Metge 1990) the Ministry of Education (2007) recommends that teachers consider the cultural needs of *tauiira* (Maori students) by implementing culturally appropriate learning and teaching methods. The Ministry suggests “effective pedagogy requires that teachers inquire into the impact of their teaching on their students” (pg 35). When culturally responsive teaching practices are used, transformation or a shift of power (decolonization) will typify Maori’s determination to assert cultural distinctiveness and identity. However the current heterogeneous approach fails to understand the cultural needs of Maori (Hemara 2000).

Barnhardt & Kawagley (2005) suggest that “Indigenous people traditionally acquire their knowledge through direct experience in the natural world. For them the particulars come to be understood in relation to the whole, and the laws are continually tested in the context of everyday survival” (p. 10) and so whanau responsibilities, finance and the possibility that they are the first member to enter a degree programme impact on the *tauiira*’s ability to progress. Therefore it is not surprising that results from the non-experimental cross-sectional survey conducted by (Wilson, et. al, 2011) is indicative of factors that contribute to Maori attrition. The results note that within the current Western curriculum, Maori worldviews and learning styles “lacks relevance to the reality of indigenous students” (pg.60).

One example that aligns with this philosophy is Greenwood and Brown's (2003) recommendation of implementing programmes that focus on 'relationships' and 'styles of delivery'. They conclude that the creation of a culturally supportive learning environment would best be achieved by separating Maori and Pakeha students (caucus) teaching and learning delivery.

### **History of Nursing Education in New Zealand 1980-1993.**

Throughout the 1980's Maori identity was revitalised, recovering from the effects of colonisation Maori began their journey of cultural revival (Walker, 1987). One of the most significant arenas that faced wholesale reform was the education system. Historically the national system of education since 1877 was based on the tenets that it should be universal, free and secular. Beeby (1986) described education in New Zealand as "simply not robust enough to cope with the impact of ethnic and social class difference on school performance."

In an attempt to overcome the excesses of Maori health statistics the Government endorsed their commitment to the Treaty of Waitangi (1840) by introducing biculturalism. Thus the journey of indigenous counter-culture was about to begin. Maori saw biculturalism primarily in terms of their status as *tangata whenua* (people of the land) and argued for partnership (Durie, 2001). With the principles of the Treaty woven into institutional policies and the prospect of greater participation, Maori could assert their mana Maori publicly and seriously (King, 1994, p27). The events that were to take place would alter historic understanding and definitions of 'being Maori' for both Maori and Pakeha. Maori identity was affirmed with the introduction of new initiatives in nursing and midwifery programmes.

Responding to the higher incidence of morbidity and mortality of Maori compared to non-Maori, the National Maori Nursing Council focused on recruiting Maori into the nursing profession. *Hui* (conference) hosted by the National Council of Maori Nurses (cited in Hill, 1991, p11) submitted recommendations pertaining to Maori in the nursing profession:

- to encourage the recruitment of Maori into the nursing profession
- to encourage Maori to complete nursing training
- to encourage qualified Maori nurses to return to the profession
- to ensure Maori nurses maintain optimum nursing standards

Hui Waimanawa (1988) would provide the catalyst for new developments in nursing education in New Zealand.

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In 1990 having been challenged by Maori and many non-Maori for nursing and midwifery education, the New Zealand Nursing Council incorporated cultural safety into the Standards for Registration. "The inclusion of cultural safety within such criteria signalled the Nursing Council's commitment to furthering New Zealand's

nursing education” (Wood & Schwass, 1993). These reforms would inevitably challenge existing practices for educators and students and required a critical evaluation of current knowledge regarding the needs of Maori students, pedagogical re-evaluation, teaching, management, and governance practices. What was more challenging would be the introduction of *kaupapa* (Maori ways of being) Maori theories that would be implemented into the teaching curriculum.

Viewing the cultural context of Maori, and involving the community in consultation regarding nursing practice and nursing education, would inevitably perpetuate the contrasts between the dominant patterns of colonisation and the cultural distinctiveness of Maori values, beliefs and practices. Hook (2006) refers to the inclusion of *kaupapa* Maori in mainstream education as ‘tack-ons’ and noted if the focus was to ensure Maori succeeded in education then the gesture could not be merely an act of tokenism (p.9). He expostulates that meeting the educational ambitions of Maori would be too radical for mainstream institutions and it would be unlikely that *kaupapa* Maori philosophy would ever be adopted by mainstream institutions.

Nevertheless given Maori epistemology forms the basis for a culturally responsive pedagogy (Tiakiwai & Tiakiwai, 2010) that enhances the learning opportunities for Maori students the Waikato Institute of Technology implemented a cultural framework that would offer Maori student experiences that differed from mainstream education.

### **Whakapapa (Geneology) of Tihei Mauri Ora**

The early establishment of Tihei Mauri Ora (TMO) arose in 1989 when the late Becky Fox (Ngati Poroa, Ngati Kahungungu) joined the late Rewi Panapa (Ngati Maniapoto) as a Maori nursing educator at the Waikato Polytechnic. By 1990 Becky, Rewi and Pakeha colleague Rose McEldowney, the Head of Department of Nursing and Health Studies, were working together to establish a culturally safe learning environment for *tauiira* within the Waikato Polytechnic Diploma of Nursing programme. This parallel programme was established not only to address the retention and achievement rates of *tauiira* but also to create a safe environment that offered a unique body of knowledge explicitly Maori. “What Maori people desire is recognition of their identity and the right to create and maintain parallel institutions. The principle of ‘separate by choice’, but equal, should be recognised as valid” (Walker, 1987, p.156). Detailed discussion of the theoretical and philosophical background to this programme is beyond the scope of this paper. However, it must be emphasised that the programme was not about segregation, but only to ensure cultural safety for Maori students to attend the same classes as their Pakeha counterparts.

Given the name *Tihei Mauri Ora* ‘the breathe of life’ or ‘the sneeze of life’ by the late Dr Hare Puke (Ngati Wairere), Tihei Mauri Ora would become the first parallel programme in New Zealand nursing and midwifery programmes.

### **Kaupapa (Ways of Being) o Tihei Mauri Ora**

The symbol of the Tihei Mauri Ora programme signifies matauranga or knowledge and learning, at the top are two people sitting in cultural safety centred on the base of hauora or health. (Waikato Institute of Technology Prospectus 2014, pg.9).

Endeavouring to retain and support achievement of *tauirā*, Tihei Mauri Ora's *kaupapa* focuses primarily on *whanau* (family). A basic building block of our whole social system (Tairāoa, 2007) *whanau* provides care and sustenance not only in physical terms but culturally and emotionally as well. *Tikanga* (traditions or 'ways of doing') would not only be learnt in the classroom but also obtained from *whanau*, *hapu* (sub-tribe) and *iwi* (tribe) and Pakeha knowledge would arise in short block courses at school. By 1996 *tauirā* achievement rates were such that the programme was also imbedded into the Direct Entry Bachelor of Midwifery programme.

In shaping a vision for the future we must look to the past to provide a way forward (Jahnke, cited in Durie, 1998). By allowing *tauirā* to express themselves as Maori co-existing in a multi-cultural society the benefits are three-fold. First, is the opportunity for *tauirā* to resource Maori knowledge and ways of being from *whanau*, *hapu* and *iwi*, and in return impart health knowledge gained from their studies in midwifery and nursing. Second is the sense of belonging that *tauirā* gain as members of Tihei Mauri Ora, which in turn enhances cultural identity. Finally, *tauirā* and *kaiako* (teachers) are supported and sustained by a philosophy that endorses the concept of *whanau*. This bi-cultural partnership or *Ahu Kawenga* would be a validation of Maori desires; 'separate by choice', but equal (Walker, 1987).

### **Rangatiratanga (Empowerment)**

Wiremu Te Rangikaheke of Ngati Kereru and Himiona Tiktu two chiefs from the second half of the nineteenth century; claimed that the following four attributes were necessary to be an effective leader; political knowledge, social knowledge, economic knowledge and spiritual knowledge (Grove cited in Ka'ai et al., 2004). TMO have unwittingly incorporated these skills to deal with the changes that we are facing today.

Political leadership involves knowledge of Maori or Maori needs, and how best and with whom those needs are best met. Achieving desirable outcomes for *tauirā* now involves a strong consultation and collaborative process between Wintec and *iwi* providers.

Economics: To have knowledge and skills that ensures Maori have the appropriate resources available to them. One endeavour to maximise learning opportunities has been the recent re-introduction of *wananga* (indigenous learning environment) and the opening of Te Kopu Mania o Kirikiriroa Marae.

Spiritual: *Tauira* participate in *karakia*, (prayer) *waiata* (song) and *whakawhanaungatanga* (making connections) before the sharing of other knowledge begin, and for many the process of *manaakitanga*, the act of caring for each other (Tairāoa, 2007), and the responsibilities of hospitality is a new phenomenon. The progress of Maori education is a fundamental factor that arises from Tihei Mauri Ora's *kaupapa*.

In keeping with the *kaupapa* the principle of *rangatiratanga* supports the unique knowledge that TMO possesses, and it is this knowledge that binds the group together (Taiaroa, 2007). Maturanga (knowledge) obtained not only in the classroom but also from *whanau*, *hapu* and *iwi* provides *tauirā* with options and choices that support retention and achievement, which in turn provides greater numbers of Maori graduates working to reduce adverse Maori health statistics.

### Whanau

As a foundation of traditional Maori society, *whanau* contributes to the enrichment of Maori identity and commitment, and acknowledges the values to which the *whanau* aspire. In more recent times *whanau* has been broadened to include a number of non-traditional situations when Maori with similar interests, but not direct blood relationships form a cohesive group (Durie, 1994). Given there are rarely kinship bonds between *tauirā*, *whanau* enables the *roopu* (group) to be embraced, sustained and strengthened by shared traditional values, and provides support for managing relationships within the Pakeha environment. What this means is that each member of Tihei Mauri Ora *roopu* has a responsibility to *awhi* (support) each other and in doing so the *mana* of Tihei Mauri Ora, *whanau*, *hapu* and *iwi* will be sustained (Taiaroa, 2007).

Mason Durie's Maori health model *Te Whare Tapa Wha* (1995), proposes that one of the four dimensions includes *taha whanau* which acknowledges the relevance of the extended family. Two significant considerations enable translation of this dimension:

1. The family is the prime support system for Maori, providing care and nurturance, not only in physical terms but culturally and emotionally.
2. Relates to identity and sense of self (Durie, 1994).

*Tauira* are rarely connected by kinship and come together for a common purpose; that being Tihei Mauri Ora *whanau*. The process of *whanaungatanga* a phenomenon that occurs quite naturally provides *tauirā* with the opportunity to interrelate and connect, if not through ancestors, the connection will be made by *iwi* and geographical location. Each week the *roopu* (group) participate in *karakia* (prayer), *waiata* (song) and *whakawhanaungatanga* (making connections) in order to support a sense of wellbeing and belonging that not only encompasses our kinsfolk but also acknowledges the interconnectedness of the spiritual world, with the world in which we live.

*Rangatiratanga* is not about being led or having a leader (Taiaroa, 2007), and since 2009 Tihei Mauri Ora have rejected the Pakeha notion of one leader 'their way' and have returned to our original *kaupapa* of '*whanau*.' consultation and collaboration. Knowing the relevance of challenges this would bring in relation to the well-being of Tihei Mauri Ora, the general consensus is that challenges should be viewed positively as opportunities rather than obstacles. Monthly meetings between *kaiako*, caucused *tauirā* forums and a Tihei Mauri Ora Facebook site have ensured that leadership is a collective process whereby no one person holds higher status than the other, no one person makes all the decisions but the business of binding is facilitated by the *roopu* as a whole (Taiaroa, 2007).

## Role of the Kaiawhina

Pivotal to Tihei Mauri Ora is the role our *Kaiawhina* holds. Well guided by the role of the Tihei Mauri Ora roopu and focused on Maori culture, Maori knowledge and contemporary realities, the Kaiawhina's role embraces the Maori concept of whanau.

Embracing the concept of *whanau*, the Kaiawhina and *kaiako* work closely with first year *tauirā*, and just as one would with *tamariki*, *tauirā* are guided, nurtured and protected. By year two and three, *tauirā* have developed their own sense of *rangatiratanga* (empowerment) and turned to *whanau* for cultural nourishment and support. *Manaakitia* or the capacity to care is encouraged amongst the *roopu* and this is demonstrated by incorporating *tuakana/teina* (oldest/youngest) relationships with each other. Durie (1998) suggests that through the capacity to share and meet the needs of others *tohatahatia* or the values of interdependence and generosity will also contribute to the well-being of the *whanau*.

By developing networks between Tihei Mauri Ora, iwi and iwi providers, the kaiawhina role has produced growth in the number of students applying for the programme. Accompanied by whanau and friends applicants attend marae based whanau interview. For some applicants the whanau interview may be their first encounter with Maori tradition. Commitment, whanau support, academic and study skills are all discussed in an open and transparent forum.

Originating from iwi throughout Aotearoa the desire to graduate as Maori nurses separates students from whanau and hapu. Common goals and whanaungatanga unite *tauirā*, whanau for the next three years being Tihei Mauri Ora. Throughout their studies the kaiawhina is available to support Maori students academically and pastorally.

## Conclusions

Tihei Mauri Ora's principles are culturally intrinsic and closely based on the family values that form a 'care hub' for individuals. The programme starts with interviewing prospective students not only as their academic suitability but to identify other parameters that may improve the chances of success, and parameters that may hinder and become barriers to success and lead to dropping out. Using this knowledge the Kaiawhina and team develop a strategy and plan a programme to support students. Tihei Mauri Ora is not about giving Maori students an unfair advantage over other students – it is about levelling the playing field so they have the same chance of participating and succeeding.

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