

**TIKA TONU: YOUNG MĀORI MOTHERS' EXPERIENCES OF WELLBEING
SURROUNDING THE BIRTH OF THEIR FIRST TAMAITI**

By

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Abstract

The wellbeing experiences of young Māori mothers' (ngā māmā) surrounding the birth of their first tamaiti and the impact of those experiences, often determine outcomes for wāhine Māori, their tamariki and whānau. A greater understanding and nurturing of young Māori mothers has far reaching implications that encompass hapū, iwi, community, Aotearoa and the health experiences and outcomes of Indigenous and other subjugated people in the global community. However, there is little exploration and information about the wellbeing experiences of young Māori mothers, and therefore little is known about their stories, thoughts, and feelings from their experiences.

This thesis explores the experiences of young Māori mothers from their perspective, regarding pregnancy, birth and motherhood. Historical misrepresentation, western notions of gender and sexuality, negative statistics and reports have portrayed young Māori mothers as the least capable, least desired and deficient. Dominant western ideologies of motherhood and hegemonic perceptions fail to recognise the essence of wellbeing for young Māori mothers, and instead marginalise and render their aspirations invisible and irrelevant. This thesis brings to the fore the elements that ngā māmā signal as vital to their wellbeing.

By utilising a kaupapa Māori approach to methodology, and a theoretical framework of kaupapa Māori and mana wahine, this thesis explores what matters to ngā māmā and their wellbeing, and how te ao Māori is an intrinsic part of those experiences. An integrated kaupapa Māori analytical framework is presented, which was developed for the thesis as a legitimate and authentic approach to research method and design to help make sense of and assemble the codes, symbolism and themes of the data.

The findings of this thesis signify the power of the female to influence the wellbeing of ngā māmā through stability, guidance and empowerment. The thesis captures the tamaiti as 'tohu aroha', and explicates the journey of ngā māmā to greater rangatiratanga and identity. Furthermore, the vitality and balance of te ao Māori within the lives of ngā māmā contributes to what is significant to their experiences of wellbeing. The thesis emancipates ngā māmā from entrenched stereotypes by epitomising their experiences and thus denouncing deficit discourses, and advances the aspirations of ngā māmā and the lives of their tamariki and whānau. This thesis makes an original and complementary contribution to the growing knowledge around Māori maternal wellbeing, kaupapa Māori methodology and research.

Preface

The reverence of women and mothers

My great-great grandmother Winipere Rotohenga was captured atop Rongokako by rifle-bearing Waikato warriors and marched off to Maungatautari to be a slave. Before the women and children could be taken one of the women threw herself over the cliff while others grabbed mata, which is flint, and slashed themselves, their blood soaking into the ground. "Take my body but my blood will remain in this land forever" was the catch cry at the time, which pertains to all of us Ngāti Kahungunu descendants. Our blood is in the land just as it was for our tipuna (Ngahiwi Tomoana, 2017).

To precede my thesis, it is important from a Māori worldview that I position myself in regards to my identity and wellbeing as a Māori woman, as an individual and part of whānau, hapū (sub-tribe), iwi (tribe), Aotearoa, the Indigenous and global community.

Ko Waipatu tōku marae
Ko Ngaruroro tōku awa
Ko Kahurānaki tōku maunga
Ko Takitimu tōku waka
Ko Tamatea Arikinui te tangata
Ko Ngāti Hori, Ngāti Hāwea ōku hapū
Ko Ngāti Kahungunu tōku iwi
Ko Aria tōku ingoa
Nō Waipatu ahau, engari kei te noho mātou ko tōku whānau
i Te Aute ki te taha o te manga Ōkahupūpuni
Tihei Mauri ora!

In accordance with a Māori way of being, it is essential to a perception of identity to know, understand and claim who you are, where you are from, and how you come to be here. In doing so, you position yourself in a time and space that connects you to the past and present. Through my pepeha (tribal saying) above, I have claimed my whakapapa links and connection to the whenua. For Māori, a connection to tūrangawaewae (home land) is greatly important in terms of grounding oneself and belonging, although it would be fair to acknowledge that as a result

of colonisation and assimilatory politics not all Māori today know or relate to their tūrangawaewae as was once conceived (Snook, 1989; McCarthy, 1997; Tomlins-Jahnke, 1997b; Durie, 1998, 2003).

For me as the researcher, I know I come from a place called Waipatu on the East Coast of the North Island of Aotearoa, and that my iwi is Ngāti Kahungunu, and I connect to Ngāti Pōrou and Samoa. Waipatu is within the area of Te Matau-a-Māui – Māui’s fishhook/jawbone (Hawke’s Bay), given to Māui by his grandmother. I grew up in Waipatu with my whānau close by, which is a settlement where many families have lived in intergenerational homes. Waipatu provides kāinga (homes), wai (water), kai (food), a place to love and learn, to be well, to karakia (pray/prayer), to be sick, to die, be mourned and be buried. Babies were born there and the whenua of my cousins were returned to a special place under the plum tree. Tūpāpaku (deceased body) of our loved ones lie in our homes and on the marae (meeting place) at Waipatu, and our whanaunga (relatives) come here to say goodbye. This is home, our whenua, our tūrangawaewae.

Our affiliation to our tribe and tribal lands, by belonging to a whānau, and to hapū and iwi through whakapapa, gave us as Māori, tūrangawaewae (Graham, 2009). Tūrangawaewae is a place to stand, to stand tall, a place of identity and to confidently claim a place of belonging (Pere, 1991; Tauroa & Tauroa, 1993; Melbourne, 1995; Durie, A, 1997¹; Maloney-Moni, 2006; Smith, 2011). Tūrangawaewae links us to the whenua and from a Māori worldview, bonds us physically and spiritually to our ancestral earth mother (Papatūānuku). This personal account and preceding pepeha introduces tribal, whakapapa and whenua knowledge of belonging and sustenance premised on an Indigenous worldview. Acknowledging multifarious tribal variations, the worldview is distinctively Māori which has its origins in cultural knowledge and customs pertaining to the creation of the universe imparted through Māori narratives and oral histories.

¹ Both A. Durie and M. Durie have contributions published in 1997, which are used in this thesis. When appropriate, a distinction will be made by using their first initial in the citing

Heretaunga haukūnui, Heretaunga ararau
Heretaunga haaro te kaahu, Heretaunga takoto noa
Heretaunga the life-giving waters, Heretaunga the myriad of pathways
Heretaunga seen through the eyes of the hawk, Heretaunga that lays before me

This whakataukī (proverb) is one of many precious proverbs inherent and unique to my iwi Ngāti Kahungunu and stems from our tribal knowledge and connection to our whenua (land). For me as the researcher, I relate to its philosophical, spiritual, metaphorical and conceptual meaning as I consider, observe, understand and engage with the world. The mātauranga (knowledge) and tikanga of my iwi, instinctive and taught to me, speaks to me through the whakataukī, telling me about the environment and the eco-system that flourished and produced fresh water and kai. Reminding me of its expanse and indelible nature, the whakataukī connects me to our kaitiaki the kaahu (hawk) that soars the plains that are stretched out across the landscape. This whakataukī encompasses my values and beliefs about life, my children, grandparents, ancestors, whakapapa and about my tūrangawaewae; the whenua (land/placenta) that nurtures my people.

In finding out more about being a ‘māmā’, I thought about my own whānau, my mother, the mothers, my own women. Considering the women in my life, or ‘my women’, helps to expound the worldview I bring to this research, and explicates why women are important to the lives of other women, namely mothers. The following photographs of women (Figures 1-8) have been reproduced with the permission of the individuals involved where appropriate - Waiariki Davis and whānau, Elizabeth Graham, James Graham, Rena O’Connell, Anaia O’Connell, Calais Tomoana Paku, Maika Graham and Taamai Graham.

My Women



Figure 1: My mum²

Figure 2: Kūmara-Patch Kid³

Figure 3: Nanny June and my mum⁴

Figure 4: Kuini Ripeka (Ryland) Tomoana - Sick Nanny

My great-grandfather, Paraire Tomoana, called our mothers ‘mamia’ and our fathers ‘papia’, a sentiment written, sung and spoken⁵ with gentle and loving affection. Moved by the birth of his children where the survival of children had previously been through a precarious period, Papa Paraire composed a song that captured the overwhelming emotion experienced in becoming a parent, a father, a mother, a nurturer. The composition described feeling overawed with the birth of a baby: “Your heart galloping... running out of breath... from the womb, the watery space... to where your breath becomes one with your baby’s, your heart beats in time with your baby’s...” (Ngahiwi Tomoana, 2017).

My women are essential and vital to my wellbeing. My mother, Waiariki, is a very gentle and loving woman, who was there for me unconditionally during my pregnancies and experiences of early motherhood. How my mother ‘mothered’ and kept us connected to whānau, wairua (spirituality) and whenua, is an archetype to my own concept of being a mother. Her mother (my grandmother), who we as tamariki called ‘nanny’ or ‘nan’, was June Alieta (Southon) Tomoana, of Samoan and English parents. Nanny June also provided me with a strong archetype of mother and woman. When our Samoan cousins visited her, they celebrated her like a Queen such was their adoration for our nanny. They flamboyantly called her ‘Māmā!’ and ‘Aunty Chuu-nee!’, which was a beautiful ritual to observe. Nanny June was an amazing

² My mum Waiariki Amelia (Tomoana) Davis (aged 27 years) with me as a baby

³ Me, age 3 years; ‘Kūmara-Patch Kid’ – my tūrangawaewae, Waipatu

⁴ Nanny June (aged 23 years) and my mum, eldest of five tamariki

⁵ Copies of Papa Paraire Tomoana’s written documentation and the meaning of the song was provided by my Uncle Ngahiwi Tomoana

woman, whose own māmā died when she was very young. The older mokopuna (grandkids) of our whānau were fortunate to know and spend time with our great-grandmother Kuini Ripeka (Ryland) Tomoana from Ngāti Pōrou, who we lovingly (and curiously) called ‘Sick Nanny’. This quirky endearment was not a reference to Sick Nanny being ‘sick’ at all; she lived till 92 years. Sick Nanny was 15-16 years when she had her first of eight tamariki. My husband’s mother, Liz, who has her own whakapapa of mothering, has been an important model to me, and has shown me an abundance of knowledge, support and strength.



*Figure 5: Liz and James⁶
 Figure 6: Anaia and Rena⁷
 Figure 7: Calais and Maika⁸
 Figure 8: Maika and Taamai⁹*

My Pākehā nanny was ‘Nanna Davis’ a dear lady with her long tan coat and push-bike. My sons call their nannies, ‘Nan’ and ‘Nanny Banny’. My women include my beautiful sisters Rena (Figure 6), and our whāngai sister Calais (Figure 7), who we were honoured to have join our whānau when she was a little tamaiti (child). I have many cousins, aunties and friends, and it is from these women I have learned and shared how to be a mother, and who have also mothered my sons. I feel from my women, not only strong models of how to be a woman and mother but *why* it is important, and the responsibilities of being a woman and mother.

From a te ao Māori perspective, we are all connected. The tradition of calling older women in the whānau ‘aunty’ or ‘nanny’, who could otherwise be cousins or friends, is a common practice in te ao Māori, as is calling men of older generations ‘uncle’ or ‘matua’. The anecdote

⁶ My husband’s mother, Elizabeth Helen (Hutana) Graham (16 years), with my husband, James, as a baby
⁷ My sister Rena Harata (Davis) O’Connell and her daughter Anaia. Rena was 29 years with her first tamaiti
⁸ My whāngai sister, Calais Akenihi Awarere Paku Tomoana (now 20 years) and my oldest son Maika James Paraire Graham (as a baby)
⁹ My sons, Maika and Taamai Te Wehi Luca Graham. I was 27 years with my first tamaiti

that ‘all Māori are related’ is indeed true from a celestial and social perspective, as we as Māori have an origin founded on systems of nurture and whakapapa. That is, we were loved, cherished, cuddled, reprimanded, fed, clothed, washed, played with, travelled, socialised, sung to, put to moe (sleep), educated by, and the responsibility of mothers, fathers, grandmothers, grandfathers and the whānau collective (Moeke-Pickering, 1996; Durie, A., 1997; Pihama & Penehira, 2005; Ruwhiu, 2009; Vakalahi & Taiapa, 2013). Hence the honouring of our elders and the need for me to honour my women, which also grounds the inflections of the language I use.

Additionally, an impetus for my thesis has been my career, work and experience as a registered nurse, particularly through my interest and passion in the wellbeing of māmā Māori and tamariki. My professional background in Tamariki Ora, whānau ora, community wellbeing, care and protection, models of wellbeing and Māori nursing, has formed the basis of my nursing experience and motivation to learn and do more. It is striking for me as a Māori woman and health professional how significant it is that our cultural perspective and worldview is fused with our professional dexterity, which is a distinctive attribute that is necessary to make a difference within the context of health and wellbeing in Aotearoa New Zealand. By sharing my position, I present this thesis as an exploration of the wellbeing experienced by young Māori mothers in Aotearoa, surrounding the birth of their first tamaiti. The thesis reveals the most significant factors to influence the young Māori mothers that this research engaged with, including their perceptions of wellbeing, and their experiences as told through their stories.

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My strong, kind, loving, funny boys – ‘no more words to go’...this belongs to you.

James, Maika, Taamai. I love you.

For Aria and Rena.

Contents

Abstract.....	i
Preface	ii
My Women	v
Acknowledgements.....	viii
Contents.....	ix
Glossary of Terms.....	xiii
Glossary and Use of Words for Primary Entities.....	xiii
Glossary – General	xiv
List of Tables	xviii
List of Figures	xix
Chapter 1: Introduction	1
1.1 A Māori Worldview	2
1.2 Te Reo Māori and the Terms for Wāhine and Māmā in this Thesis.....	3
1.3 Overarching Question and Aims of the Research	6
1.4 An Overview of the Thesis Chapters	7
Chapter 2: Literature Review	11
2.1 Introduction	11
2.2 Wellbeing	12
2.3 Wellbeing and Te Ao Māori	19
2.3.1 Identity and Wellbeing.....	19
2.3.2 Isolation and Participation	19
2.3.3 Dimensions and Levels of Wellbeing Experience.....	20
2.3.4 Terms for Wellbeing from a Māori Worldview	22
2.3.5 Māori Framework of Wellbeing - Te Whetū	25
2.4 Young Mothers.....	26
2.5 Feminism and Motherhood	32
2.6 The Wellbeing of Young Indigenous Mothers.....	34
2.6.1 An Indigenous Experience.....	35
2.7 Young Māori Mothers	40
2.7.1 Wellbeing of Young Māori Mothers from a Māori Worldview	43
2.7.2 The Viewpoint of a Dominant Pākehā Society	45
2.8 Young Māori Mothers - Relationships and Interconnectedness	48
2.8.1 Wāhine Māori and Whakapapa	49
2.8.2 Whānau and Whakapapa.....	49
2.8.3 Health Professionals and Services	51

2.8.4 Wāhine of the Whānau	52
2.8.5 Tamariki.....	52
2.8.6 Wāhine and Tāne	53
2.9 Young fathers	54
2.9.1 Young Māori Fathers.....	58
2.10 The Essence of Māori Women’s Significance.....	60
2.11 Wairua.....	62
2.12 Mana Wahine.....	63
2.13 A Māori Worldview - The Origins of Mātauranga Māori	65
2.13.1 Creation.....	65
2.13.2 Mātauranga Māori	70
2.13.3 Whakapapa	72
2.14 Summary	74
Chapter 3: Kaupapa Māori Methodology	77
3.1 Introduction	77
3.2 Kaupapa Māori.....	77
3.2.1 A Bi-cultural Supervisory Team and Kaupapa Māori Approach to Research.....	80
3.2.2 Kaupapa Māori Theory.....	82
3.2.3 Kaupapa Māori Research and Methodology	84
3.2.4 Kaupapa Māori and Ontology	86
3.3 Māori Research	87
3.3.1 Early Māori and Indigenous as the Researched.....	87
3.3.2 Indigenous Knowledge.....	90
3.4 Summary	93
Chapter 4: Methods	95
4.1 Introduction	95
4.2 Researcher’s Assumptions	97
4.3 The Role of the Researcher.....	99
4.4 Sampling and Recruitment.....	101
4.4.1 Sampling and Kaupapa Māori	102
4.4.2 Recruitment Strategy.....	103
4.4.3 Participants	105
4.5 Data Collection.....	112
4.5.1 Interviewing	115
4.5.2 Koha	118
4.6 Data Analysis.....	120

4.6.1 Examples of Kaupapa Māori Analytical Frameworks.....	121
4.6.2 'Haaro te Kaahu' - a Kaupapa Māori Analytical Framework.....	123
4.6.3 Thematic Analysis	127
4.6.4 Saturation.....	134
4.7 Rigour and Trustworthiness.....	135
4.8 Ethical Considerations.....	137
4.8.1 Māori Ethical Considerations	138
4.8.2 Confidentiality.....	139
4.9 Summary	140
Chapter 5: Findings	143
5.1 Introduction	143
5.2 Te Piringa - Wellbeing	144
5.3 He Tohu Aroha - Presence of the Tamaiti.....	144
5.3.1 Pregnancy.....	144
5.3.2 Birth.....	146
5.3.3 Being Home.....	149
5.3.4 Naming.....	151
5.3.5 Whakapapa and the First Mokopuna	154
5.4 The Power of the Female – Significant Women.....	155
5.4.1 Te Koru	155
5.4.2 Tapatoru – Significant Entities	158
5.5 The Power of the Female - Waipatu, Waiariki, Waiora	161
5.5.1 Waipatu - Stability.....	162
5.5.2 Waiariki - Guidance.....	168
5.5.3 Waiora - Empowerment.....	172
5.6 Ngā Māmā, E Tipu E Rea - Grow and be Strong.....	176
5.6.1 Tāku Tamaiti Tuatahi – My Baby Comes First.....	180
5.6.2 Rangatiratanga - a Sense of Self.....	184
5.7 Wairua – Spiritual Wellbeing	190
5.7.1 Whenua.....	193
5.8 Summary	195
Chapter 6: Discussion and Conclusion	197
6.1 Introduction	197
6.2 An Explication of Te Koru	198
6.3 Power of the Female.....	201
6.3.1 Waipatu (stability).....	204

6.3.2 Waiariki (guidance)	207
6.3.3 Waiora (empowerment)	209
6.4 Tapatoru - Significant Entities	212
6.4.1 Tuatahi	213
6.4.2 Tuarua	215
6.4.3 Tuatoru.....	216
6.5 Ngā Māmā and the Power of the Female in the Context of Aotearoa New Zealand	219
6.6 Wellbeing	220
6.7 Wairua, Karakia, Whenua, Tikanga	222
6.8 Identity.....	223
6.9 He Tamaiti - He Tohu Aroha.....	225
6.10 Prospects for the Future	226
6.10.1 Implications and Recommendations for Nursing	227
6.11 Study Limitations	228
6.12 Summary of key messages and outcomes of my research as recommendations for service providers and government/policy makers.....	229
6.12.1 The Wellbeing of Wāhine Māori and Māmā Māori	229
6.12.2 The Power of Women	229
6.12.3 Research and Initiatives	230
6.12.4 Mātauranga Māori	230
6.12.5 Young Māori Fathers and Tāne Māori	231
6.12.6 Services and Policy	231
6.12.7 Hei Whakamārama i te Mauri me te Mana– Conscientising Essence and Meaning	232
6.12.8 Workforce Development	233
6.13 Final Reflections.....	233
6.14 Conclusion.....	233
Appendices.....	239
References	251

Glossary of Terms

Glossary and Use of Words for Primary Entities

Māmā	Mother, mum, participant of the research, mothers who feel represented
Ngā māmā	Mothers, mums, participants of the research, mothers who feel represented
Tamaiti	Child in all aspects, for instance, a-wairua (in spirit), a-whakaaro (in thought), in-utero, in the birthing process, infant Child of Aotearoa New Zealand
Tamariki	Children in all aspects, for instance, a-wairua (in spirit), a-whakaaro (in thought), in-utero, in the birthing process, infants Children of Aotearoa New Zealand
Dad	Father of the tamaiti
Mother	Mother / mothers of the māmā; grandmother of the new tamaiti; maternal grandmother, unless otherwise stated, that is, paternal grandmother, dad's mother
Father	Father / fathers of the māmā; grandfather of the new tamaiti; maternal grandfather, unless otherwise stated, that is, paternal grandfather, dad's father
Nanny	Grandmother of the māmā
Papa	Grandfather of the māmā
Mokopuna	Grandchild
Partner	The māmā's partner, not necessarily the dad but is clarified when context is required
Whānau	Family (in whatever form determined by māmā or context); families in Aotearoa New Zealand in general; or specifically Māori families
Wāhine Māori	Māori women

Glossary – General

Ahau	Me, I
Aotearoa	New Zealand
Ariki	Chief
Aroha	Affection, love
Aroha ki te tangata	Respect for people
Ātea	Space in front of marae
Atua	God, Goddess
Awa	River
Engari	But
Haka	Dance, perform
Hāngi	Earth oven
Hapū	Sub-tribe, clan; pregnant
Hawaiki	Spiritual home, ancient homeland
He Tohu Aroha	A sign or symbol of love; recognition of love
Hine	Girl, female, daughter
Hineahuone	Goddess; first human created, the wife of Tāne
Hinenuitēpō	Goddess of those passed
Hinateiwaiwa	Goddess of the moon, menstruation, childbirth
Hinetitama	Goddess; the daughter of Hineahuone and Tāne
Hononga	Bond, connection, union, relationship
Hura kōhatu	Unveiling
Ihi	Essential force, excitement, thrill, power
Ingoa	Name
Io Matua	Divine Parent
Ipu whenua	Clay vessel
Ira Atua	Divine essence (of life)
Ira Tangata	Human essence (of life)
Iwi	Tribe
Kaahu	Hawk
Kai	Food, source of life, sustenance
Kaiawhina	Support worker
Kaihana	Cousin
Kāinga	Home, dwelling, settlement
Kaitiaki	Protector, guide, carer
Kanohi kitea	Seen face
Kanohi ki te kanohi	Face to face
Karakia	Prayer, incantation
Karanga	Call
Kaua e takahia te mana	Don't trample people's mana
Kaumātua	Elder
Kaupapa	Purpose, strategy, theme
Kaupapa Māori	Māori ideology/approach
Kawa	Protocol
Kawe mate	Mourning ceremony
Kete	Basket, bag
Kia māhaki	Being humble
Kia tūpato	Being cautious
Kiwi	Native bird; colloquialism for a person from Aotearoa

Koa	Joyful, happy, elated
Koha	Gift, offering
Kope	Nappy
Kōpū	Core, centre, breast
Kōrerorero	Conversation
Koru	Fern, frond, spiral, loop
Kuia	Elder woman
Kūmara	Sweet potato
Kura	School, small precious, red, ochre
Kura Kaupapa Māori	Māori immersion school
Mana Atua	Higher realm of mana (force)
Mana tāne	Male essence of mana (force)
Mana wahine	Female essence of mana; theory of wāhine Māori; Māori feminine discourse
Mana whenua	Land essence of mana (force)
Manaaki	Care, hospitality, look after
Manaakitanga	(The act of) hospitality, care
Manaaki ki te tangata	Looking after people
Manga	Stream
Manu	Bird
Māori	Ordinary, fresh, native people, normal; Indigenous people of Aotearoa
Marae	Meeting area of whānau, hapū or iwi, settlement, village
Maramataka	Calendars and almanacs
Matariki	Set of stars, Pleiades
Mātauranga	Knowledge
Mātauranga-ā-iwi	Tribal knowledge
Mātauranga-ā-Kahungunu	Knowledge of the Ngāti Kahungunu tribe
Mate	Death, dead
Mātou	Us (them and me)
Matua/Mātua	Uncle or parent/parents
Maunga	Mountain
Mauri	Life force
Mauri ora	Wellness/wellbeing
Mihi/Mihimihi	Greeting
Moe	Sleep
Mōkehu	Main frond of a koru
Mōteatea	Chants and poems
Ngā	The – the plural of ‘te’
Ngākau	Heart, emotion
Ngāti Kahungunu	Iwi on the East Coast of the North Island of Aotearoa
Ngāti Pōrou	Iwi on the East Coast of the North Island of Aotearoa
Noa	Free from extensions of tapu, ordinary, unrestricted, void
Noho	Sit, place
Oku	Bowl
Ōku	My (plural)
Ōpunga	Hāngi stone
Ora	Life
Oriori	Lullabies
Pākehā	European New Zealander; descendants of colonial settlers

Pakeke	Adult
Pakiwaitara	Legend, story, fiction, narrative, yarn
Papakāinga	Home
Papatūānuku	Mother Earth, primal mother
Pepeha	Proverb, tribal saying, identifying saying
Pēpi	Baby
Piringa	Gathering
Pito	Umbilicus
Ponga	Fern plant/tree
Poroporoaki	To take leave of, farewell, eulogy
Puku	Tummy
Puna	Spring, well
Pūrākau	Story, narrative, myth, legend, ancient story
Purotu	Pleasant, handsome, beautiful, agreeable, clear
Rangatira	Chief/chiefly
Rangatiratanga	Independence, self-esteem, self-determination, autonomy
Rarohenga	World of night
Reo	Language
Rongoā	Māori medicinal cure
Taha	Side
Taha Māori	Māori side
Taiao	Environment
Tama	Boy, male, son
Tāne	Man, male; God of Man, God of the Forest and creatures; Husband of Hineahuone
Tangata	Person, people
Tangihanga	Funeral
Tapatoru	Triangle
Tapu	Sacred
Te	The (singular)
Te Ao Mārama	The world of light
Te Ao Māori	The Māori world
Te Kōhanga Reo	Māori Language Nest
Te Kore	The void, potential, chaos
Te Matau a Māui	Hawke's Bay area, North Island, Aotearoa
Te Pō	The darkness, development, form
Te Taiao	The environment, world, earth
Te Whetū	The Star – Māori model of wellbeing
Tiaki	Protect, care for
Tihei Mauri Ora	I am alive!
Tika	Right, correct
Tikanga	Custom, obligations, conditions
Tikanga-ā-iwi	Specific tribal customs
Tikanga-ā-Kahungunu	Kahungunu customs; customs of the Ngāti Kahungunu tribe
Tino rangatiratanga	Absolute self-determination/autonomy
Tīpuna	Ancestors, grandparents
Titiro whakarongo kōrero	Look listen speak
Tohu	Symbol
Toi Māori	Māori art and creativity
Tōku	My (singular)

Tomoana Freezing Works	Former beef and lamb Freezing Works and prominent employer, especially of Māori in Hawke’s Bay
Tuakana-teina	Older sibling-younger sibling
Tuatahi	First
Tuarua	Second
Tuatoru	Third
Tūpāpaku	Body of deceased
Tūrangawaewae	Home, home land
Ūkaipō	Source of sustenance
Urupā	Cemetery
Wahine	Woman
Wāhine	Women
Wahinetanga	Māori womanhood
Wai	Water, source of life, sustenance
Waiariki	My middle name, chief; ‘Guidance’ in this thesis
Waiata	Song, sing
Waiora	Living waters, wellbeing’ ‘Empowerment’ in this thesis
Waipatu	My home, tūrangawaewae; ‘Stability’ in this thesis
Wairua/wairuatanga	Spirit, spirituality
Waka	Canoe, vessel
Wehi	Awe, response to ihi
Whaea	Mother, aunt, respected woman
Whaikōrero	Oratory/speechmaking
Whakamā	Embarrassment
Whakaaro	Idea, thought, perspective
Whakapapa	Genealogy, ancestry
Whakawhanaungatanga	(the act of) Building relationships
Whanaunga	Relation
Whanaungatanga	Building relationships
Whāngai	To feed, nourish, bring up, nurture, foster, raise, adopt
Whakataukī	Proverb, saying
Whakatū Freezing Works	Former beef and lamb Freezing Works and prominent employer, especially of Māori in Hawke’s Bay
Whare Tangata	House of humanity
Whare tupuna	Meeting house
Whenua	Land, placenta
Whakaoti	To complete, finish, conclude, solve

List of Tables

Table 1: Ngā Māmā	109
Table 2: Sequential stages of data analysis - Analysis process, Haaro te Kaahu and phases of thematic analysis.....	128
Table 3: Notions of wellbeing as described by ngā māmā.....	133

List of Figures

Figure 1: My mum	v
Figure 2: Kūmara-Patch Kid.....	v
Figure 3: Nanny June and my mum.....	v
Figure 4: Kuini Ripeka (Ryland) Tomoana - Sick Nanny	v
Figure 5: Liz and James	vi
Figure 6: Anaia and Rena	vi
Figure 7: Calais and Maika	vi
Figure 8: Maika and Taamai	vi
Figure 9: Terms used for women	3
Figure 10: Terms used for hierarchy of mothers.....	4
Figure 11: Intergenerational relationship between women in the whānau of ngā māmā (participants of the study).....	5
Figure 12: Email from a wahine pūrotu enquiring about being a participant	107
Figure 13: Koha - Ipu Whenua I made for ngā māmā	119
Figure 14: Haaro te Kaahu.....	123
Figure 15: Linear lenses of Haaro te Kaahu	124
Figure 16: Te Koru.....	156
Figure 17: Tapatoru - Significant Entities.....	158

Chapter 1: Introduction

This thesis explores and expounds the experiences of wellbeing of ngā māmā through their stories, surrounding the birth of their first tamaiti. The focus and approach, is anchored by important juxtaposing factors. On one hand is the knowledge and narratives from an ancient Māori worldview that impel the veneration of wāhine Māori. On the other, are the societal constructs that have portrayed young Māori mothers as an under-functioning subset of mothers, standardised against normalised, wider, dominant, Euro-centric ideological values and beliefs. That is, the lives and experiences of young Māori mothers have been commonly perceived, decided and problematised through the lens of the dominant society in Aotearoa New Zealand. Within dominant society and western research, portals that explore and celebrate the lived realities of young Māori mothers have been limited, and a dearth of explicit sources of knowledge restricts sufficient understanding and insight. Therefore, the chasm between comprehension and responsiveness is exacerbated, which continues to encumber the contemporary lives, aspirations and wellbeing of young Māori mothers.

The thesis employs and also explores the growing knowledge of kaupapa Māori (Māori ideology/approach) methodology, kaupapa Māori and mana wahine (Māori feminist discourse) theories and notions of wellbeing. Kaupapa Māori theory has developed from a foundation of tikanga Māori (Māori values) and mātauranga Māori (Māori knowledge) that holds kaupapa Māori theory as a distinctive framework (Pihama, 2001). Kaupapa Māori theory is knowledge that validates a Māori worldview and is not only Māori owned but also Māori controlled therefore essential in the struggle for autonomy over cultural wellbeing, Māori survival and vitality (Smith, 1990).

As a basis to this thesis, I explore ‘Māori Research’ by unfurling the layers that reveal the origins of te ao Māori (Māori world), which are fundamental to the knowledge and epistemologies that shape and inform a Māori worldview. Accordingly, elements of te ao Māori such as tūrangawaewae (homeland), tikanga (customs), whakapapa (genealogy), mauri (life force), mana (integrity) and kaupapa Māori are explored through cultural, historical and tribal contexts in building towards an explication of the methodological approach of this thesis. In doing so, kaupapa Māori methodology is revealed as valid and culturally authentic in its development to resist and transform conventional western research paradigms; and in its

application, to premise the lived experiences and cultural realities of *ngā māmā*, their tamariki (children) and *whānau* (family).

1.1 A Māori Worldview

From a Māori worldview, there are cosmological connections to what is happening in and around us as individuals, *whānau*, *hapū* and *iwi*. For instance, Matariki signifies an important time in *te ao Māori* and was an integral time for me as I worked on my thesis. Matariki (Pleiades) is a time for rejoicing the New Year, as Matariki rises with the sun in the dawn sky of June “In Māori star lore Matariki is one of the most ancient of goddesses” (Leather & Hall, 2004, p.63), and is also a time for lamentation and mourning. The changes correspond and emanate ancient *mātauranga* of dynamic movement around darkness and light, death and birth – *Te Kore* (void), *Te Pō* (darkness), *Te Ao Mārama* (world of light). My tribe, *Ngāti Kahungunu*, values that stars are the *ariki* (chiefs) of the months and that with every month there are stars to denote a time and space. I consider and draw on the stories, songs and experiences that connect me to a Māori worldview from which I interpret and interact with the universe.

Worldview derives from the German word *Weltanschauung*, and is related to the philosophical assumptions we make about the world, that is the ontology and epistemology of what, who and how the world comes together and works (Tolich & Davidson, 1999). Individual and collective interpretations and assumptions made about the world, encapsulates the many intricacies and complexities of our cultural and social perspective.

Culture is a broadly inclusive term used to describe the shared beliefs and behaviors of a group of people. It is often seen as constantly changing. Worldview, on the other hand, is the philosophical outlook that a person, knowingly or not, utilizes to organize his or her activities. (Thielman, 2004, p.157)

Our conception of the world, how we perceive and understand reality, the world and its entirety, our philosophy of life, all contribute to our worldview (Royal, 2002). The framework of our beliefs, values and customs informs our global understanding of how we regard the world and our place in it (Guba & Lincoln, 1994), and in an appreciation of worldview there must be value for the worldview of others (Harding, 1999). A Māori worldview is based on epistemologies and *mātauranga* inherent to *te ao Māori*, which are contextualized through our

realities and experiences, connecting Māori to our cosmological, spiritual and geographical identity. Understanding the importance of worldview, shapes the ontological, epistemological and methodological questions of research enquiry.

1.2 Te Reo Māori and the Terms for Wāhine and Māmā in this Thesis

In this thesis, the terms mothers, fathers, women and men need clarification to ensure readership is comprehensible as I integrate te reo Māori (Māori language) and English throughout the thesis (Simmonds, 2014). The first elicitation is when referring to women (Figure 9).

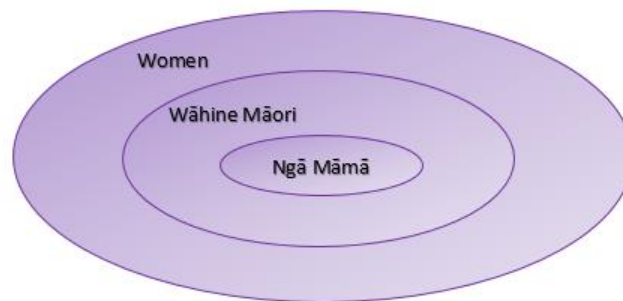


Figure 9: Terms used for women¹⁰

‘Women’ is expounded when referring to women in general, and then clarified with cultural annotations, such as ‘Pākehā (European) women’, ‘Indigenous women’. I use ‘wāhine Māori’ when referring to ‘Māori women’ and from here, I speak specifically of the various identities, such as māmā, nanny or kuia (elder woman). Additionally, ‘tāne Māori’ is the term I designate to all Māori men in general, and then refer specifically to subgroups or identities such as partner, dad or papa (see also Glossary and Use of Words for Primary Entities).

The term I use to encompass the young Māori mothers who were participants in this research is ‘māmā’ or ‘ngā māmā’ (Figure 10). Ngā māmā, is applied when discussing two or more

¹⁰ This figure explicates the participants of the research, ‘ngā māmā’ as a sub-group of ‘wāhine Māori’, which is the term used in this thesis for ‘Māori women’. ‘Wāhine Māori’, are then explicated in relation to ‘women’, in a general and all-encompassing sense.

mothers who were participants. Ngā, makes a word plural in te reo Māori, for example te manu (the bird) becomes ngā manu (birds).

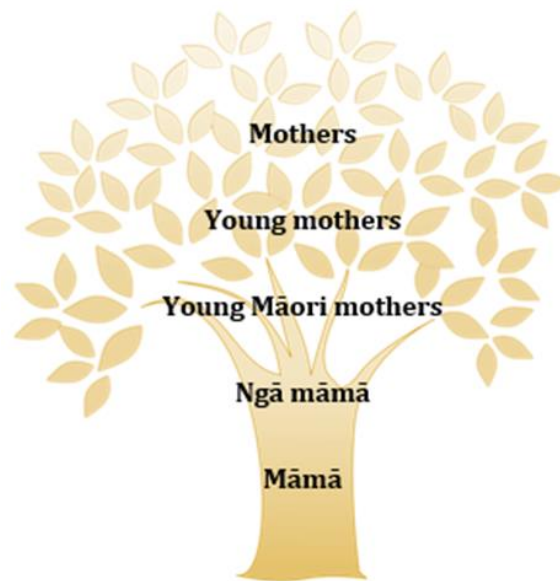


Figure 10: Terms used for hierarchy of mothers

‘Mothers’, is the most general term, which represents a common identity of mothers regardless of ethnicity, nationality, age or socio-economic status. When speaking more broadly of young Māori mothers in the general population, and *not specifically but inclusive of the participants*, I use ‘young Māori mothers’. I apply this method to signify other collectives of mothers in the general population. Firstly, I establish the cultural or ethnic background of the mothers to differentiate and speak for itself, for example, young, old, Pākehā or Indigenous. Distinguishing groups provides more specific descriptions, such as ‘Māori mothers’, ‘young Māori mothers’, ‘Aboriginal mothers’, ‘young Aboriginal mothers’, ‘Pākehā mothers’, ‘new mothers’, and/or ‘first-time mothers’. The significance of identifying groups of mothers is useful when drawing analogies between groups, for example, culture, ethnicity, socio-economic status, class, history and experiential variances or similarities.

Figure 11 illustrates the māmā in relation to the women in her whānau. When I refer to the mothers of ngā māmā, I use the term ‘the māmā’s mother’ or ‘mothers of ngā māmā’. I do not use ‘grandmother’ for a māmā’s mother, as many whānau Māori live multi-generationally with several women involved in the wellbeing of the whānau, and there may be several

‘grandmothers’. Furthermore, I maintain the primacy of ngā māmā in the thesis, as the focal point of the research is located with ngā māmā. Therefore, when referring to grandmothers in this thesis, I write in relation to the māmā; not the tamaiti. The position of the māmā, exemplifies her location in relation to her tamaiti, mother and nanny (grandmother).

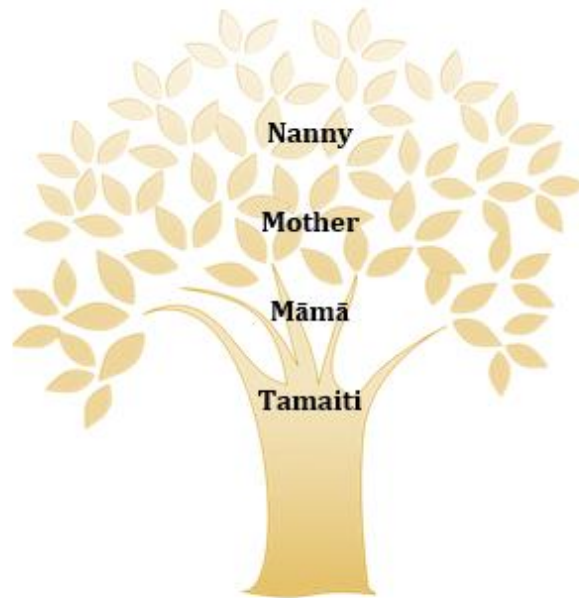


Figure 11: Intergenerational relationship between women in the whānau of ngā māmā (participants of the study)

The terminology for young mothers has often been loaded or deficit, but from a Māori worldview, particularly through a mana wahine perspective, wāhine Māori (Māori women) and mothers are deemed strong, powerful, autonomous and purposeful (Tomlins-Jahnke, 1997a). From a Māori worldview, identity is inherent to our identity in our whānau, such as mother, father, daughter, cousin and so forth.

Te reo Māori embellishes a Māori worldview of whānau, by embodying our sense of interconnectedness to each other and to our cosmological origins. For instance, tīpuna (ancestors) and mokopuna, infer that both identities derive from the same source of sustenance that is a ‘puna’, which is the term for a spring of water, or spring of life (Pere, 1988). There is also a connection to ‘wai’, which means water (Ryan, 1995). From a Māori worldview, ‘wai’ is another analogy for sustenance and life-giving qualities, for example, waiora – wai is water, ora is life; the sustenance of life, or another term for wellbeing (Ryan, 1995). Similarly, ‘kai’

in te reo Māori means food or source of sustenance. When preceding an action such as ‘tiaki’ (protect), we are inferring a source or provider of that action. That is, kaitiaki: a guardian, caretaker, protector: a source of protection.

The use of te reo Māori in kaupapa Māori research (research by Māori, with Māori and for Māori) is vital, as it conveys ideas and perspectives that could otherwise be overlooked (Tangaere, 1997; Walker, Eketone & Gibbs, 2006). A kaupapa Māori research paradigm encourages the use of te reo Māori in research, as it is part of the revitalisation of te reo Māori (Bevan-Brown 1993; Walker, et al., 2006), and to me it enriches the context and authenticates the research. The use of te reo Māori in this thesis is not to confuse or make cumbersome, rather, it is to differentiate, to maintain the integrity of the research, the participants and of kaupapa Māori and mana wahine approaches. Embedding te reo Māori is also a method I have espoused to emancipate ngā māmā and wāhine Māori from classifications that at times have debased and relegated their position in society, due to the dominant deficit constructs and associated negative narratives.

1.3 Overarching Question and Aims of the Research

The impetus of this thesis, derived from my nursing experience and discontent with current models of care; knowledge of traditional Māori society and contemporary society; my personal ethos; and a passion and concern for the wellbeing of young Māori mothers and their tamariki. Based on these foundations, the overarching questions were ‘What are the wellbeing experiences of young Māori mothers in becoming new māmā?’ and ‘What makes a difference to the experiences of young Māori mothers?’, and ‘What are we (as health professionals, health services, planners and nurses) missing or getting wrong?’ To address these questions, there were two central research aims. The first aim was to explore the experiences of wellbeing of Māori mothers aged between 18 and 24 years surrounding the birth of their first tamaiti. The second aim was to examine what wellbeing meant to ngā māmā, through their experiences and stories. To do so, I implemented a kaupapa Māori lens using validated Māori models of wellbeing to anchor, position, frame and guide the research approach. I remained open and cognisant to the developing nature of kaupapa Māori methodology, and through theorising kaupapa Māori and mana wahine epistemological and ontological perspectives I have made a contribution to the kaupapa Māori research academy. The thesis presents and explicates two

conceptualisations through an integration of a Māori worldview with a western research approach. One is ‘Haaro te Kaahu’ a kaupapa Māori analytical framework that was implemented sequentially with thematic analysis, and the other ‘Te Koru’ (spiral loop), which encompasses the significant features of this thesis and re-presents conceptually through kaupapa Māori.

The research objectives of this thesis are based on principles and ethics related to kaupapa Māori and tikanga Māori (Smith, G, 1997; Bishop, 1998; Smith, L, 2005, 2012; Mead, 2016). Foremost is being tika (correct), and exemplifying the values, beliefs and practices of te ao Māori that have been structured and outlined by kaupapa Māori academics to ensure the integrity of the research process. These objectives are each centralised to ngā māmā, who are the bearers of knowledge (Tomlins-Jahnke, 1997a; Ruwhiu, 2009) and impetus of the research. The approach includes kanohi ki te kanohi (face-to-face) engagement, maintaining the essence of the kaupapa (purpose/focus), listening to their voices and in doing so, understanding what enhances [their] wellbeing. Furthermore, this approach contributed to the wellbeing of young Māori mothers and tamariki, the Māori research academy, and the aspirations of whānau, hapū and iwi.

1.4 An Overview of the Thesis Chapters

Chapter One introduces the thesis, where I also position myself as a Māori researcher and registered nurse in relation to the thesis. In Chapter Two, I explicate a comprehensive critique of the literature relevant to the areas of the research aims and objectives. The first area is wellbeing and how wellbeing is connected to identity, and our experience. I examine how wellbeing is framed from a Māori worldview and explicate the components of Te Whetū (Mark & Lyons, 2010) as a wellbeing model. From this point, I explore the literature about young mothers and incorporate the place of feminism and Indigeneity. I then look at the literature regarding young Māori mothers, and critique the respective perspectives of a Māori worldview and dominant Pākehā society towards young Māori mothers. The exploration of wāhine Māori is expanded to relationships and interconnectedness, which includes te ao Māori, the health care system, tamariki and men. Finally, I explore the essence of wāhine Māori, in connection with wairua and mana wahine.

In Chapter Three, I expound kaupapa Māori methodology and examine kaupapa Māori and mana wahine perspectives that contribute to the theoretical framework of this research. I acknowledge the theories that are utilised to strengthen the research, and how pervading theories contribute to the discourse that prevails around young Māori mothers. To provide a broader lens, I expand on the history of Māori research and distinguishing features of Indigenous research.

Chapter Four is an explication of the methods I used in the research process, to ensure the research was robust, trustworthy, rigorous and authentic to kaupapa Māori methodology. The method of gathering data was imperative to ensuring the integrity of the research process whilst engaging with Māori participants. The historical mistreatment of Indigenous participants for research purposes has created an element of distrust and resistance (Smith, 2012), and thus maintaining kaupapa Māori ethical standards was important. To capture the importance of kaupapa Māori values and beliefs in research methodology, alongside the application of kaupapa Māori concepts in progressing research design, I conceptualised a kaupapa Māori analytical framework and explicate the integration with thematic analysis. This work contributes to the developing kaupapa Māori research academy. Throughout the chapter, I examine the binary of western and kaupapa Māori research and how and where there are tensions but also pragmatism towards the fundamental goal of this research, which is upholding the best interests of ngā māmā.

In Chapter Five I explicate the findings of my thesis. The findings firstly include the significance of the tamaiti's presence, which acts as a catalyst and recipient in relation to the wellbeing experiences of ngā māmā. Secondly is the power of the female, an indelible force that was acknowledged across the experiences of ngā māmā surrounding the birth of their first tamaiti. Significant women especially of the whānau such as mothers, were important to the wellbeing of ngā māmā, expounding the vital qualities ngā māmā identified in becoming a māmā: Waipatu (stability), Waiariki (guidance) and Waiora (empowerment). The involvement of significant women and the experiences of ngā māmā, transformed the self-awareness of ngā māmā. The findings encompass a greater sense of rangatiratanga (independence), and also explicate the value and importance of te ao Māori in experiences of wellbeing.

The findings of the thesis are critically examined and discussed in Chapter Six in the context of other research. I locate the most prominent discourses to derive from a critique of the literature and findings, which subsist in relation to the wellbeing of ngā māmā. I present recommendations for the exploration of further research and implications for nursing, and acknowledge the limitations of this research. In Chapter Six, I conclude with a summary of the thesis, relate the outcomes to the aims and objectives and in doing so, I explicate the meaning of the research outcomes. Through the research, the most important factor is ngā māmā, and the value that this thesis makes to experiences of wellbeing surrounding the birth of the first tamaiti for future young Māori mothers in Aotearoa.

Chapter 2: Literature Review

2.1 Introduction

The experiences of wellbeing of young Māori mothers around the birth of their first tamaiti is an area of sparse exploration although the event of early motherhood is a phenomenon of profound criticism and stigmatisation, demonstrated through societal attitude and barriers associated with the education, social and health systems of Aotearoa (Collins, 2005, 2010; Breheny, 2006; Rawiri, 2007; Makowharemahihi et al., 2014; Adcock, 2016; Stevenson, 2016). In this chapter, I examine notions of wellbeing and te ao Māori in encompassing the concepts and perceptions that derive from worldviews and epistemological understandings. In te ao Māori, the importance of identity is a primary feature of wellbeing, as it connects an individual to significant networks and also to the land (Durie, 2003; Mead, 2016). Identity in relation to whānau and whenua, provides Māori with a sense of belonging and security, which leads to an exploration of isolation, of how and the extent Māori participate in contemporary society and Māori society, and the impact such participation has on wellbeing (Durie, 2003).

To ensure a precise and focused search of the literature, a strategy that applied distinct parameters was decided upon and implemented. The search centred on keywords, which included Māori maternal wellbeing, young Māori mothers, young Indigenous mothers, young mothers in Aotearoa New Zealand, wellbeing, maternal wellbeing, first-time mothers, Māori and Indigenous first-time mothers, wāhine Māori contemporary and historical, young Māori fathers, young Indigenous fathers and wellbeing and identity of young Māori mothers. An extensive search surrounding the theoretical framework and underpinning theories was completed, and incorporated keywords such as Māori worldview, Māori perspective, te ao Māori, traditional and contemporary Māori experience in Aotearoa and kaupapa Māori, mana wahine and feminism. Explicating the methodology was paramount, and required an in-depth search to examine a research approach through kaupapa Māori, and the corresponding and complementary methods linked to Māori research such as methods and frameworks to analyse research data. In acknowledging the varied sources of knowledge in accordance with kaupapa Māori and oral history traditions of te ao Māori, I utilised a strategy that encompassed written and unwritten forms. Written sources included prominent and accepted databases of literature, google scholar, articles, journals, books, archives and theses. Non-written sources involved gathering oral history, stories, kōrerorero, waiata, oriori, haka and whakapapa. This approach

also required discussion with rangatira about information, and recognising the distinct and diversified tribal versions of mātauranga across hapū and iwi of Aotearoa.

Identity, security and participation of the individual and whānau are reviewed through the various dimensions and levels associated with wellbeing from a Māori perspective, which then explicates Māori terms that express or have been depicted or adopted to convey 'wellbeing'. I explore a Māori model of wellbeing derived from a study with Māori healers and their perspective of wellbeing, which represents a conceptualisation of holistic wellbeing based on mātauranga Māori. The review of literature includes an exploration of young mothers and then young Māori mothers covering their wellbeing from a Māori worldview and how they are perceived by a dominant Pākehā society. In accordance with the value placed on identity and wellbeing, I examined the sources for the meaning and significance of relationships and interconnectedness to young Māori mothers, that encompasses whānau and whakapapa, health professionals and services, women in the whānau and the connection between a young Māori mother and her tamaiti; and what this means regarding a young Māori mother's sense of self.

Although significantly diverse and autonomous, I explored the literature of other young Indigenous mothers specifically Canadian First Nations peoples', Australian Aboriginal peoples' and Native Americans' experiences of wellbeing to look for what is revealed in their experiences. Notably the effects of colonisation have impacted on their individual and collective wellbeing, similar to Māori. In recognising the concurrence of the role of women in the wellbeing of young Māori mothers and other young Indigenous mothers through the literature, I present a review that encompasses the significance of women in the wellbeing of young Māori mothers through the experience of pregnancy, birth and motherhood.

2.2 Wellbeing

There is a plethora of literature on wellbeing and for this thesis, I focused the review on contemporary theorising around wellbeing from a Māori worldview including the wellbeing of young Māori mothers, tamariki, and the wellbeing of young Indigenous mothers originating from similarly culturally-rich but marginalised backgrounds. A cultural worldview that views wellbeing as holistic and encompasses traditional discourses of women as empowered, reverent and equal, is antithesis to the prevalence of poor experiences and outcomes for young Māori

mothers and their tamariki. It was therefore pertinent to explore the definitions and notions around wellbeing in considering the notions of the greater population to the experiences of young Māori mothers.

A single definition of wellbeing is dependent on varying factors including worldview and philosophical approach. The language of wellbeing is diverse, as are the various meanings, constructions and even spellings to different people and groups (Ereaut & Whiting, 2008), and defining wellbeing has been and continues to be a challenge for researchers. The literature states that wellbeing is dynamic, multi-faceted, cultural and also paradoxical (Mauss et al., 2005), of being both complex and simple, objective and subjective, individual, collective and interrelated with social identity (Haslam et al., 2008; Tiessen et al., 2009; Kingi et al., 2014); hence the reason it is problematic in finding a single and inclusive definition that constitutes all aspects of wellbeing. Due to its diversity in meaning, wellbeing is often described and measured rather than defined and has incorporated ideas that include health, happiness, quality of life, equilibrium, wellness, being pain free, disease free, the absence of illness and so forth (Dodge et al., 2012; La Placa et al., 2013).

The commercialisation and commodification of wellbeing through the 'wellbeing' industry has had a substantial effect on the quest for wellbeing, based on an underlying notion that achieving a desired level of wellness can be gained through purchase and consumption (Ereaut & Whiting, 2008). From reviewing the literature, this needs to be a consideration when exploring the experiences of young mothers whereby the role of consumption has been related to the experiences of happiness of young Māori of the millennial generation (De Thierry, 2012). In De Thierry's (2012) study, the term happiness was chosen in relation to the notion of wellbeing and explored through a phenomenology methodological approach that encompassed a kaupapa Māori perspective.

De Thierry's (2012) study provides a view to the experiences of happiness of thirteen young Māori participants, some of whom were parents and half were women. Interestingly, for a generation that partakes in high consumerism - a phenomenon that associates happiness with materialism, the outcomes of the study showed happiness was connected to values, beliefs and practices considered relational to those of traditional philosophies, such as a sense of belonging,

connection to land and whānau, and relationships. Commodification of wellbeing or in this case happiness, relates back to Ereaut and Whiting's (2008) study on wellbeing, and the multifarious layers and meanings that are generated, albeit for Māori in a contemporary context, that culture remains significant (Panelli & Tipa, 2007). These outcomes clearly denote the value of a sense of identity that is connected with happiness. This value may also demonstrate that traditionally Māori prioritised giving and reciprocity over materialistic gain, and explicate socio-economic variance in the practice of consumerism.

Other international studies on mothers and consumption, have implied that consumerism is part of, but not wholly attributed to compensation (Miller, 1997; Pugh, 2002). From a maternal context, consumerism relates to a mother's care for and connection with her children, and even low-income mothers who lack financial resources maintain deep connections with the consumption culture often self-sacrificing their own needs and desires to protect their children from the stigma of poverty (Power, 2005; Ponsford, 2011). In Ponsford's (2011) study in the United Kingdom, young mothers' interactions with consumerism was seen as enabling and valuable as young mothers managed on small amounts of financial resource under the glare of public surveillance, belying the notion that young mothers' consumption is flawed.

Dodge et al. (2012) explored the challenges of defining wellbeing where the growing interest in measuring wellbeing activated the need to clarify what was being measured and two approaches emerged – hedonic tradition and eudemonic tradition. Hedonic tradition involves constructs such as happiness and satisfaction with life while eudemonic tradition highlights positive psychological functioning and human development. Dodge et al. (2012) argue that most definitions of wellbeing are merely descriptions, and they offer a definition based on a see-saw balancing effect, which they claim is universally applicable and simple. The key to their argument is that wellbeing is not static, but is dynamic even when wellbeing is stable, "The balance point between an individual's resource pool and challenges faced" (Dodge et al., 2012, p.230).

Although universally applicable and diversely relational, the definition and dimensions do not encompass tenets of spirituality, cultural worldview, the impact of historical events and the ongoing implications that include inequity and poverty. Other studies have postured wellbeing

as generalisable, to states such as ‘normal equilibrium’ (Headey & Wearing, 1991), which I argue is problematic based on what is normal, and what is the benchmark for normal in regards to wellbeing from a cultural viewpoint, where culture is heterogenous itself. The other issue is the language used, such as ‘equilibrium’, that I contend is not a commonly used phrase amongst many whānau albeit Māori communities. Therefore, it would be difficult to engage a collective of Māori in a conversation around equilibrium, let alone distinguish a shared definition based on unfamiliar terminology.

Mauss et al. (2011) highlighted in their study that being happy is crucial to human wellbeing however, their study showed a paradoxical effect. That is, greater focus and expectation on one’s happiness led to one becoming less happy. This paradox is evident in Wilkinson and Pickett’s (2010), *The Spirit Level*, who report that happiness levels-off as nations experience growth in health and economy. They claim this is probably due to cultural attitudes towards the reporting of wellbeing, but that growth for richer countries suffices need and therefore reports of happiness lowers. For poorer countries, growth is inherently important whereby the impact on wellbeing is evidenced through objective measures such as mortality rates, and subjective measures like happiness (Wilkinson & Pickett, 2010).

This notion of happiness being linked to material gain is relative to populations and communities who have and earn more but become less satisfied as they amass material wealth in contrast to those least wealthy who value incremental gains that affects more than just physical wellbeing, but spiritual, emotional and collective. Countries that spread wealth more equitably are happier and more prosperous, and their children experience far greater wellbeing (Conti & Heckman, 2012). Another example, is the pursuit of a tertiary degree which may be a huge financial investment for some families and thus an infrequent achievement. Achievement then is indeed cause for great happiness and celebration for the individual and whānau. In comparison, such an accomplishment may be perceived as a standard milestone and rite of passage for someone from a wealthier background.

Additionally, some cultures would not regard a flux in wellbeing as paradoxical, but rather accept ‘being well’ or wellbeing from a heterogenous, dynamic and holistic perspective, which is discussed later when exploring literature on wellbeing from a te ao Māori and Indigenous

viewpoint. What is of concern, are the pitfalls of poor wellbeing for mothers and their children that maintain those most disadvantaged, well below the line of health and prosperity:

It is much more cost effective to help disadvantaged children earlier on than to remediate later on. Yet despite this evidence, society underinvests in disadvantaged young children. Less-educated women tend to be single parents. They work in low wage jobs and do not invest much in their children. More educated women, even if single mothers, are not only working more, but also investing more in their children – effectively increasing the gap between the advantaged and disadvantaged. As a result, inequality is perpetuated – and even increased – across generations. The solution to this problem is to invest in the promotion of child capabilities beginning at conception. (Conti & Heckman, 2012, p.42)

To add to notions of opposing, complementary and dual states of wellbeing, Barwais (2011 p.1) asserted two perspectives, that “The clinical perspective defines well-being as the absence of negative conditions and the psychological perspective defines well-being as the prevalence of positive attributes”. In contemporary society where fragmentation of the ‘whole’ within general health is normalised, I argue that not only is a vast amount of disease and ill-health (e.g. cardiovascular disease and diabetes) directly related to lifestyle factors, but also a symptom of one’s holistic wellbeing, which encompasses historical and contemporary realities (Durie, 2003; Ellison-Loschmann & Pearce, 2006). From a holistic perspective, the overwhelming prevalence of those suffering from mental illness and committing suicide in Aotearoa particularly young Māori (Ministry of Health, 2017; Mental Health Foundation, 2017), could likewise indicate symptoms of people impacted by historical and contextual realities.

The clinical biomedical model has a definite place as there is no denying the need for scientific intervention in health (Durie, 2003). However, the consensus must be that wellbeing is a manifestation from experience and certainly about the many interconnected components of one’s state of being (McGregor et al., 2003; Mark & Lyons, 2010). Our perception and response to the notions of negative conditions and positive attributes are culturally and socially constructed and contextualised (Diener, Oishi & Lucas, 2003; Diener, 2009; Ellison-

Loschmann & Pearce, 2006; Boehm et al., 2011). A diagnosis, for example, of type II diabetes could well be the turning point for an individual or family who is perceived as marginalised and disadvantaged, but otherwise sees themselves as happy and connected. A conscientisation to the ill-effects borne out of intergenerational acculturation to the dominant culture, may well enhance wellbeing through promoting an adoption of better eating habits, more exercise and new skills to better manage persistent stress. Set within the reality of the whānau culture, a transformation may transpire and raise wellbeing because inevitably, how do we know what we do not know, and how do we activate resources that we do not have? A significant example of this has been the success of IronMāori started in Ngāti Kahungunu, which was created from the vision of Māori women and has been a triumph in the conscientisation and transformation of negative Māori health realities (Pohatu, 2015).¹¹

Similarly, there is the perception and contextualisation of poverty (Wilkinson & Pickett, 2010; Houkamau, 2016). Financial hardship may be impervious to a whānau who value themselves as well-loved, supported, fed, clothed, warm, going to school and playing sport. In contrast, an increase in salary and status may bring more comfort and better security, lifting the stress of contemporary pressures, but it may also mean bigger demands, greater expenses and stress with less time to enjoy family and pleasurable activities. Needless to say, the literature purports wellbeing as multi-dimensional, and culturally and socially bound, and thus often confusing and contradictory whereby researchers have focused on dimensions and descriptions, rather than provide definitions.

Ryff (1989) identified that theoretically-derived constructs of wellbeing have had little impact as the measures have not been considered empirically credible. She designed an instrument that factored dimensions important to wellbeing, which included autonomy, environmental mastery, positive relationships with others, purpose in life, realisation of potential and self-acceptance. Ryff's (1989) instrument has been purported as straightforward, and received endorsement for instance with students, in regards to a search for meaning and true potential (see Seifert, 2005). More recent research regarding wellbeing, has included ideas of fulfilment,

¹¹ IronMāori is a half-Ironman event comprising of a 2km swim, 90km cycle and 21km run. This is held annually in Ngāti Kahungunu. Other areas of Aotearoa and internationally have encompassed the kaupapa of IronMāori, which was conceptualised by wāhine Māori of Ngāti Kahungunu and become a tremendous regional, national and international success.

attaining goals, freedom, geographical awareness and living as a fully functional person (Durie, 2003; Panelli & Tipa, 2007; Keyes, 2007, 2009; Ryff & Singer, 2008). From a te ao Māori viewpoint, these dimensions fit well with cultural values, beliefs and principles for instance, tino rangatiratanga, the concept of self-determination, autonomy and self-management (Mead, 2016).

From a mental health perspective, notions around developing and flourishing have also been linked with ways of defining wellbeing (Keyes, 2002; Keyes & Waterman, 2003; Angner, 2008; Dodge et al. 2012) although a broader application of flourishing is demonstrated through the literature of Māori scholars (Kingi, et al., 2014). The inference is that a Māori worldview of wellbeing is seen as encompassing and holistic, and seldom fragmented into ‘parts’ without considering the interconnected whole.

The meaning of wellbeing can be captured quite simply as ‘a life going well’ (Angner, 2008). Other research has proposed that the individual determines their own criteria for wellbeing (Shin & Johnson, 1978; Zikmund, 2003; Stratham & Chase, 2010), which is endorsed by the World Health Organisation’s (1997) definition of quality of life. Further literature has incorporated more emphasis on the effects of negative and positive dimensions of wellbeing where the optimum is to be in a position of equilibrium, balance, homeostasis or harmony. In achieving stable wellbeing, one must constantly negotiate a type of dance as wellbeing is not static but requires constant moderation (Dodge et al., 2012). Young Māori mothers are undoubtedly women and individuals who are part of collectives such as whānau, hapū, iwi, social entities and socio-politically constructed often stereotyped groups. The diversity in their relationships and situations, and individual characteristics, will reflect the potential dynamism in their experiences of wellbeing. Dodge et al. (2012) contend that stable wellbeing is dependent on an individual’s resources to meet challenges, however, I would add that often we are challenged by our resources and that those challenges further create, strengthen and uncover new resources and potential. Therefore, from another perspective, challenges may well be the opportunities we encounter to enhance wellbeing.

2.3 Wellbeing and Te Ao Māori

There is a growing source of literature, which encompasses determinations of wellbeing from a Māori perspective incorporating a Māori worldview, Māori realities and encompassing the holistic and collective nature of wellbeing and progress. Literature about Māori wellbeing goes beyond merely describing wellbeing but makes strong statements about what can be measured, and how it can be interpreted, to validly understand and assess from a Māori perspective (Durie, 1998, 2003, 2006; Mark & Lyons, 2010; Whakatere & Pohatu, 2011; Moewaka Barnes et al., 2013; Boulton & Gifford, 2014; Kingi et al, 2014).

2.3.1 Identity and Wellbeing

From a Māori worldview, wellbeing is fundamentally connected to a secure identity and a sense of belonging, signifying the importance of being tangata whenua (people of the land), having an enduring relationship with the land and a claim to tūrangawaewae (Moeke-Pickering, 1996; Durie, A, 1997; Durie, 2001, 2003, 2006; Gifford, 2003; De Thierry, 2012; Macfarlane et al., 2015; Mead, 2016). Identity is intrinsically connected to tribal structures such as whakapapa, reo, whānau, hapū and waka (tribal canoe) (Walker, 1989; Durie, 2003; Pihama, 2011) and it is within these structures that Māori unite, learn and flourish. Identity, a sense of belonging and strong collective principles stood out when exploring values integral to Māori wellbeing. This notion is supported by the following statements where, “The kinship whānau plays a major role in bringing about a sense of security, wellbeing and belongingness” (Moeke-Pickering, 1996, p.12), and “engagement with the whole family is important because of the central role that whānau (family) have in Māori culture and in health decision-making” (Jones et al., 2013, p.2). Wellbeing of the mind and spirit is imperative and interconnected (Durie, A., 1997; Mark & Lyons, 2010) and is not fragmented as is often conveyed. Arohia Durie (1997) states that from a Māori worldview, the early development of the mind and spirit is infused and takes place before birth, preparing tamariki for the world in which they will flourish. “Identities continue to be made and remade as life circumstances change, so that even the submerged can recover a Māori identity given sufficient confidence and opportunity” (Durie, A., 1997, p.157).

2.3.2 Isolation and Participation

Isolation or disconnect from institutions where Māori receive nurturing and strength, disrupts identity and creates an imbalance of the individual and whānau wellbeing (Moeke-Pickering,

1996; Durie, A, 1997; Durie, 2006). There is a significant range of literature that expounds the changes Māori have undergone through colonisation, imperialism and marginalisation, which is discussed in Chapter Three, Kaupapa Māori Methodology. Contemporary issues to impact Māori wellbeing are outlined in various sources, which contend that to protect the perpetuity of taha Māori (Māori side) and sustain Māori identity and wellbeing, it is necessary to rethink and reform Māori participation within te ao Māori and contemporary society; alongside the growth of the Māori economy and resources (Durie, 1998, 2001, 2003, 2006; Henare, 2013; Boulton & Gifford, 2014; Kingi et al., 2014; Macfarlane et al., 2015).

Many writers have analysed the impact that various dimensions have upon the experiences of wellbeing for Māori. Durie (2006, p.8) claims that “Participation *of* a Māori is different from participation *as* a Māori” and although both impact wellbeing, identity has an important role in Māori being involved in society and te ao Māori. This complexity translates across the dimensions to a vibrant population where wellbeing includes being Māori, doing Māori, knowing Māori, and thinking Māori. Participation is fundamental to the wellbeing of young Māori mothers as they navigate the needs of their tamariki, whānau and their own needs, which includes health, social and education. Māori perspectives of wellbeing are at the core of the experiences of young Māori mothers as they encapsulate the cultural, social, economic and political contexts in which they engage. Isolation is a risk factor to the wellbeing of young Māori mothers and their tamariki within modern society (Goodwin, 1996). Young Māori mothers are entering a world of adulthood, and in alignment with Moeke-Pickering’s (1996) assertion, a sense of belonging and connection is indelible to young Māori whereby wellbeing is innately linked to connecting with others, cultural identity and self-concept (Webber et al., 2014; Webber, 2015).

2.3.3 Dimensions and Levels of Wellbeing Experience

From a Māori worldview, wellbeing is dependent on various interrelated dimensions and occurs on many levels where Māori engage and function. Although the common view is that universally, everyone shares similar notions of what wellbeing or being well is, Māori have unique characteristics that when measuring Māori wellbeing, would require Māori-specific measurement (Durie, 2006).

Moewaka Barnes et al. (2013) synergised approaches with concepts intrinsic to te ao Māori, to present a framework specifically focused on the wellbeing of tamariki and young Māori mothers at the early stages of life. These approaches encompassed the influence of national and state systems at the macro level, community influences at the mezzo level, Māori mothers and babies at the micro level and exosystems representing health services. These writers also discussed the impact of each of these levels, which incorporated issues from environmental pollution, poverty, maternal mental health, to the wellbeing of tamariki, young Māori mothers and whānau. Despite pregnancy being an important time to support wāhine Māori in the early stages of a baby's development, the project showed inequalities to accessing care through maternity services from wāhine Māori, and reports of lower satisfaction. These outcomes correlate with the findings from a longitudinal study (Makowharemahihi et al., 2014) involving participants who have faced similar barriers to accessing maternity health care (discussed later in this chapter).

Durie (2006) also presents levels of wellbeing, which incorporate individual, collective and wider Māori-specific measures. The first level looks at the individual using a calibrated scale, Te Whare Tapa Whā, as a four-dimensional model of health introduced by Durie (1985) based on Māori holistic concepts of wellbeing encompassing wairua, tinana (physical), whānau and hinengaro (mind and emotion). The second level measures the wellbeing of groups such as whānau and iwi, and specifically details the need for differing approaches when assessing collective capacity. Whānau capacities incorporate the aptitude of whānau functionality and focus towards collective prosperity (Durie, A., 1997), which includes caring for whānau members, guardianship and empowerment. Level three is a global measure of wellbeing for the Māori population, which focuses on human capacity and resource capacity. Four outcome classes are proffered inclusive of identity, community, cultural resource and securing Māori estates for the future.

The dimensions and criteria of wellbeing explicated in Durie's (2006) levels of wellbeing parallel with western studies and frameworks that are inclusive of autonomy, environmental factors, relationships and self-realisation. The dimensions could be proffered as similar to the aforementioned non-Indigenous descriptions and measurements of wellbeing that translate to a more 'global' application. However, approaches to measuring Māori wellbeing such as

Durie's (2006) three levels and Moewaka Barnes et al.'s (2013) framework, are underpinned by a Māori worldview and epistemology such as a connection with whakapapa, whenua and Indigeneity that explicate a Māori approach to understanding, quantifying and monitoring Māori resource and capacity. Māori wellbeing has been typically aggregated to be defined by and measured against non-Māori populations including Pākehā, Pacific and Asian, which is a practice that fails to recognise the importance of diverse Māori worldviews and realities (Durie 2006). Durie (2006) argues it is more relevant to compare groups who have similar worldviews, historical and contemporary experiences when observing change and progress, such as, relating Māori with other Indigenous peoples or between cohorts of Māori. The reference point of Durie's theory and other similar literature, denounces a negative position, rather it explores Māori wellbeing from a positive standpoint that "emphasises progressive development rather than the management of adversity" (2006, p.5-6), which I argue is a frame for 'resilience'. The constant need for resilience is a response to perpetual and high levels of stress and hardship, which is fundamentally abnormal if one is equipped with the resources and skills to experience day to day life. Literature from a negative position disempowers progress by focusing on deficit features and indexes of wellbeing (Durie, 2003). The positive approach is in line with the emancipatory approach I have adopted for this thesis.

Further to the literature that supports progressive development to enhancing Māori wellbeing is Kingi et al.'s (2014) work that presents *Six Markers of Flourishing Whānau*, which expands on western and Māori indexes used to measure wellbeing, and includes examples of models, frameworks and dimensions encompassing Māori notions of wellbeing. The work not only describes what flourishing means in terms of Māori wellbeing, growth and development, but also where and how it can be applied. 'Flourishing' and 'languishing' have been terms used in the studies of western research (Keyes, 2007, 2009; Seligman, 2011; Dodge et al., 2012) around wellbeing, and have been adapted through a Māori lens of wellbeing, based on the concept of 'mauri'.

2.3.4 Terms for Wellbeing from a Māori Worldview

The notion of flourishing has been likened to the Māori concept of 'mauri' or 'mauri ora' that in a wellbeing context, implies state(s) of wellbeing, access to te ao Māori and secure cultural identity (Pere, 1991; Durie, 2003, 2012; Whakaatere & Pohatu, 2011). Dobbs and Eruera

(2014, p.15) discuss the Mauri Ora Framework as part of whānau violence intervention and prevention, where the developers of the framework define ‘mauri ora’ as “One of a number of Māori terms for wellbeing/wellness of both the collective and individual. It is regarded as the maintenance of balance between wairua (spiritual), hinengaro (intellectual wellbeing), ngākau (emotional wellbeing) and tinana physical wellbeing”.

In the study by Te Rōpū Rangahau Hauora a Eru Pomare (2000) on the closures of Whakatū and Tomoana Freezing Works in Hawke’s Bay, kaumātua Tama Tomoana (my grandfather) gave the whakataukī *Mauri Mahi*, *Mauri Ora*, *Mauri Noho*, *Mauri Mate* to signify the importance of the freezing works to the region and the devastating impact of the closures on the wellbeing of the people. The whakataukī implies that with work there is flourishing, life and wellbeing, and without work there is stagnation, demise and death. Art by Mahea Tomoana, Tama’s son, accompanied the study and encompassed principles of te ao Māori, mātauranga-a-Kahungunu (Kahungunu knowledge) and toi Māori (art) to signify ‘mauri’ in relation to the wellbeing of the local people. The explanation given by Mahea of the artwork includes reference to the whakataukī that expounds a flourishing and life-giving geography. The whakataukī and distinctive excerpt, ‘Heretaunga Haaro te Kaahu’, conveyed as ‘Heretaunga, (as) seen through the eyes of the hawk’, are further discussed in Chapter Three, Kaupapa Māori Methodology and Chapter Four, Methods of the thesis.

Personal wellbeing for Māori is valued throughout the literature, described by Miller (2012) as ‘waiora’, and is a holistic notion dependent on the sum of its parts, such as those identified in Te Whare Tapa Whā and Te Whetū (Mark & Lyons, 2010). Whānau is an integral component to an individual’s wellbeing, and the wellbeing of the individual impacts on the collective. Studies have demonstrated that personal wellbeing from a Māori worldview is connected to a broader collective notion of wellness, where tamariki and future generations have inspired their efforts to attain a “state of whānau ora” (Boulton & Gifford, 2014, p.5). ‘Whānau ora’ is a philosophy inherently linked to wellbeing and has been described as wellbeing of the extended family (Ryan & Wilson, 2010; Boulton et al., 2014), an aspiration to experience a better life, stability and security, and preserving and passing on values to tamariki and mokopuna. Māori concepts and systems of wellbeing such as whānau ora, have also been identified as relevant and essential to the wellbeing of non-Māori, such as young mothers and those alienated by

mainstream practices (Miller, 2012). A study that examined 10 young mothers who were part of a teen parent school in Aotearoa (Miller, 2012), demonstrated that success in education as well as in other aspects of young mothers' lives was attainable, despite the social stigma surrounding their early motherhood. Māori pedagogical theories that encompassed whānau and identity were examined to interpret the culture of the teen parent school, which affirmed the notion that 'whānau ora' is an encompassing and inclusive concept of te ao Māori, contextually relevant in Aotearoa New Zealand and also accessible to other cultures striving for enhanced support and wellbeing.

From the 1990s, 'whānau ora' has been a model of practice that Māori providers have worked from and a mode or specialty of nursing practice I have observed as well as used myself. More recently, 'whānau ora' has become politicalised and adapted into policy and service delivery with the initiation of the 'Whānau Ora Approach to Social Service Delivery' (Taskforce on Whānau-Centred Initiatives, 2010). However, the politicisation and adaption has created a disconnect not only confusing health professionals, but often leaving whānau mystified about the meaning of programmes when defined or imparted from western governmental and contractual frameworks (Gabel, 2013; Gifford & Boulton, 2014). The adaptation and politicisation of Māori terms intrinsic to concepts of Māori wellbeing is common, such as Kia Piki te Ora ('raising wellbeing'), which is the national Māori Suicide Prevention Programme (Ministry of Health, 2017), Tamariki Ora ('child wellbeing') is the national child health programme based on Plunket's framework (Gabel, 2013; Ministry of Health, 2017) and more recently the reformed branding and 'Māorification' of Child Youth and Family to the Ministry of Vulnerable Children Te Oranga Tamariki (Ministry of Vulnerable Children, 2017).

The need for an understanding of a Māori worldview, when considering and addressing wellbeing from a Māori perspective, is reiterated in the literature. Māori scholars have embraced Māori terms for Māori concepts as valid and taken for granted, where Māori appellations not only capture the essence of a concept, but for those knowledgeable in te ao Māori, a name instantly conceptualises the mātauranga, meaning and kaupapa. Important aspects of Māori wellbeing such as whānau and wairua are commonly overlooked by western biomedicine models of health, but are intrinsic to wellbeing conceptualised through te ao Māori. To see the binary further, De Thierry (2012) explores happiness and wellbeing of Māori,

and what this means for Māori as a consumer and several sources look at the experience of Māori as consumers or patients within the health care system (Durie, 2003, 2004; Gifford, 2003; Bolitho & Huntington, 2006; Gray, 2006; McClintock et al., 2011; Raerino et al., 2013; Makowharemahihi et al., 2014; Wepa, 2016). Disregard for and the lack of acknowledgment of cultural perspectives of wellbeing has contributed to the mistrust and reluctance Māori have to engaging with the mainstream system of care (McGavok et al., 2012) and the perpetuity of institutional racism (Came, 2014).

2.3.5 Māori Framework of Wellbeing - Te Whetū

Māori expound wellbeing as holistic and sustained by the integrity of interconnected multi-dimensional elements. Durie (1998) fostered the portrayal of this vital concept presenting the wellbeing model Te Whare Tapa Whā. Durie's model and those of his contemporaries made way for the development of further thought, discussion and conceptualising around wellbeing. Mark and Lyons' (2010) study on Indigenous and holistic perspectives of wellbeing, explored the views of Māori spiritual healers in looking beyond the dominant but limiting biomedical model of health and illness. Te Whetū comprises five interconnected dimensions that are fundamental to wellbeing – hinengaro, tinana, wairua and additionally whānau/whakapapa and whenua.

The dimensions are explicated as firstly, hinengaro, which “is about knowledge, information, and control of behaviour” (Durie, 2003, p.51). A healer who participated in Mark and Lyons' study, described ‘the mind body soul’ as a colonisational concept and that for Māori, the ‘mental’ aspect did not exist as it does contemporarily. The healer described the idea of the mind, as “just a bridge” (Mark & Lyons, 2010, p.1758) that linked the physical with the wairua; that the mind consists of essentially spiritual essence. Pere (1988) states hinengaro as ‘the hidden lady’ which encapsulates intellectual activities such as thinking, knowing perceiving, recognising and abstracting, and emotional activities of feeling, sensing, intuit, responding and reacting. Hinengaro has also been described in balance with tamangaro, a dualism between the female and male principalities (Ngahiwi Tomoana, 2017, personal communication, 25 April). The second dimension is tinana, which “calls for attention to physical health” (Durie, 2003, p.51). The physical body supports and shelters us from the environment and allows us to grow and develop. Tinana is one aspect of an individual's health and wellbeing that cannot be

separated from mind, spirit, family and land. Third is wairua, the spiritual side which concerns the “soul, spirit” (Mead, 2003, p.370). Wairua is a force that transcends time and space (Durie, 2003) that is essential, dynamic, has stability but potential for growth and change (Sherwin-Shields, 1998). “Spirituality is a central feature of the Māori worldview, and is held with an almost tangible sense of reverence within the healing session and in daily life” (Mark & Lyons, 2010, p.1759). Fourth is whānau/whakapapa, which portrays the social dynamics of human relationships. In Mark and Lyons’ study (2010) whānau and whakapapa are explored as transference through bloodlines or across whānau or hapū and are described collectively as the organism that accepts and actions responsibility of their members’ wellbeing. Whanaungatanaga (relationship) is described as “family connection maintained through ancestral, historical, traditional and spiritual ties” (Pere, 2010, p.1760). Lastly is whenua, which is centrally and intrinsically relevant in the holistic view of wellbeing and a fundamental component to existence and identity (Mark & Lyons, 2010). Māori identify with and are referred to by their maunga (mountain), papakāinga (home) and iwi affiliation; all in reference to land. Māori view themselves as part of and bonded to the land (Durie, 2010).

Kaupapa Māori frameworks and Māori models of wellbeing are both acceptable and appropriate for exploring and defining wellbeing from a Māori worldview, and are growing from strength to strength from the early paradigms to more contemporary examples. Concepts based on mātauranga Māori and epistemological understandings are becoming more sophisticated and accessible as Māori scholars apply and advance the integrity of the models, particularly through research and engagement with whānau and communities. Māori models of wellbeing are recognisable and relatable to Māori and non-Māori as they allow adaptation and ownership, and are becoming more contextually relevant and accepted with greater utilisation and theorising. Te Whetū appealed as appropriate to incorporate in my thesis as it is a kaupapa Māori framework based on mātauranga Māori and tikanga Māori, is diverse, and was open to interpretation and reflection.

2.4 Young Mothers

A wealth of literature exists that conveys early motherhood as a negative phenomenon, which is undesirable and problematic. This literature includes national, international, Indigenous and mainstream research. The perception and normalising of what ideal motherhood is, has

marginalised and stigmatised young mothers (Wilson & Huntington, 2005). According to the deficit discourse researchers have unveiled, unless there is adequate intervention, young mothers and their children will be disadvantaged and their outlook unfavourable and grim (Quint et al., 1997; Wilson & Huntington, 2005; Strikett & Moewaka Barnes, 2012; Ware, 2014). Indigenous mothers, such as Māori, are reported as already at a disadvantage, due to the negative stereotypes associated with ethnicity (Strikett & Moewaka Barnes, 2012).

Early motherhood has been pathologised and denigrated widely through studies, the media, and medical and nursing articles that have problematised young mothers at a localised level, which has also perpetuated through international concern and interest (Woodward et al., 2001; Wilson and Huntington, 2005; Breheny, 2006; Breheny & Stephens, 2008; Pihama, 2011). Through an analysis of medical and nursing articles encompassing teenage motherhood between 1997 and 2002 using a social constructionist approach, a study in Aotearoa identified a description that constructed early motherhood as negative, deviant, indicative of failure, poor health and economic disadvantage around four main discourses of public health, economics, ethnicity and eugenics (Breheny & Stephens, 2009). Amongst the analysed articles and through the pervading discourses, European motherhood that valued older, middle-class, educated and career-minded women was typically set as the ‘unreflexive’ benchmark. The ways in which young mothers were constructed were very powerful with an overall depiction of being the least suitable and least desired mothers. Young mothers were portrayed as having ‘off-spring’ and ‘rearing offspring’ in reference to their biological function, and young Māori mothers were criticised for not using teenage motherhood preventative measures like European teenagers such as abortion, and that essentially, any barriers to Māori accessing abortion should be remedied.

A study from the United Kingdom (Seamark & Lings, 2004) identified that young mothers of poorer socioeconomic and deprived situations were most likely to ‘carry on with pregnancies’. However, the study was a qualitative approach that sought to examine the experiences of young mothers and explicated that young mothers felt enhanced, responsible, inspired to change direction and consider aspirations for the future. Both studies queried whether early motherhood was less about age and more about disadvantage and deprivation, shifting the focus of blaming the individual to a societal failure to support young mothers and emphasise their

attributes that is part of a wider issue of maintaining the most vulnerable as the most stigmatised and marginalised. Such literature is vital in examining and highlighting the pervading negative discourse that maintains young mothers in a deficit and marginalised stereotype. Qualitative research on young mothers is providing beneficial knowledge concerning the experiences and lived realities of young mothers that are challenging the persistent hegemonic notions around young, teenage, adolescent mothers.

Young mothers are identified in various ways such as adolescent mothers, teenage mothers, sole-parents, in relationships with their baby's father or in a new relationship, living with family or on their own with their baby, first-time mothers or a mother of several children. Regardless, public and societal concern of this phenomenon is intense, and has been further legitimised and compounded by social science and health research, which describes early motherhood as a deficiency that has serious implications to the fabric of Aotearoa by impacting on the economic, social, education and health of society (Goodwin, 1996; Breheny, 2006; Miller, 2012; Adcock, 2016). However, there are competing thoughts around the vilification of young mothers. One argument is that early motherhood is not problematic but in fact brings a sense of identity and fulfilment that can enrich and enhance the lives of young mothers (SmithBattle¹², 2000; Seamark & Lings, 2004; Collins, 2005) and was once favourable (Wilson & Huntington, 2005). Another is based around prevalent discourses that caution about the negative outcomes for young mothers and their children, and that the antipathy and derision, is more about the resistance of young mothers who do not conform to the dominant society's ideologies of preferred mothers (Wilson & Huntington, 2005):

Pākehā culture constructs young mothers as problematic because they challenge the 'traditional' family dominant in Pākehā culture. By having children prior to, rather than after, workforce participation and achieving economic independence, young mothers challenge the prescribed life trajectory for Pākehā women. (Banks, 2008, p.iii).

Furthermore, Breheny (2006) describes how research has inferred that young mothers born of dysfunctional families are viewed to be propagating disadvantage because very few opt for abortion or relinquish their babies for adoption. Therefore, the notion that disadvantage breeds

¹² SmithBattle – the author's name is written and published this way

disadvantage, whereby children born to young mothers will likely become young parents themselves (Ministry of Social Development, 2010), is justified by society, which then validates the need for the public surveillance of young parents (Seamark & Lings, 2004; Breheny, 2006; Collins, 2010; Strikett & Moewaka Barnes, 2012; Adcock, 2016). Outcomes of such scrutiny have warranted the development and implementation of strategies for the prevention and intervention of early motherhood based on the construct that young mothers breed poor quality offspring (Breheny, 2006). Overall, a persistent perception is that young mothers embody the prevailing concerns of society which involve matters to do with youth, women, reproduction, poverty, race and sexuality which fuels public and political anxiety and debate. For example, the persisting notion raised in studies such as Breheny (2006) and Collins (2010), is that early motherhood not only compromises the future of young women and their unsuspecting children, but impacts negatively on society as a whole.

Early motherhood framed as a social problem that needs prevention has been linked with various negative factors that include child neglect and abuse, drug and alcohol abuse, low socio-economic status and welfare dependency, and low educational attainment for themselves and their children (Goodwin, 1996; SmithBattle, 2000; Ministry of Social Development, 2010; Conti & Heckman, 2012; Adcock 2016). The disparaging portrayal of young mothers particularly through social science and health research emphasises negative attributes, which questions the young mother's psychological functioning, competence, stability and decision-making abilities; and stigmatises young mothers as self-indulged, stupid, confused, vulnerable, anxious, unprepared and unmotivated to lead their families (Banks 2008; Strikett & Moewaka Barnes, 2012). Young mothers have also been criticised for naively attempting to re-create an ideal reality they did not experience, they romanticise motherhood and are trying to achieve milestones inappropriate to their childhood development (SmithBattle, 1995).

Dominant authoritative voices shape social attitudes towards young mothers and influence policies, information and services, which impact on the experiences of young mothers (SmithBattle & Leonard, 1998; Collins, 2010; Strikett & Moewaka Barnes, 2012). 'Positive' research relies on assessing young mothers' abilities to parent effectively against the mainstream view of what is acceptable and appropriate (Strikett & Moewaka Barnes, 2012). The research that negates early motherhood as a positive experience overlooks successful

young mothers and their children by comparing young mothers to young women who are not mothers, and to other mothers who are not young (Breheny, 2006; Strikett & Moewaka Barnes, 2012). Success in early motherhood is not viewed as the norm so fails to capture the stories of fortitude and resilience that overcome limitations by only looking at poor outcomes (Collins, 2004). Recent research insists refocussing on the positive outcomes and experiences of young mothers that discuss motherhood as a catalyst for change and a life-changing event by exploring the positive outcomes of early motherhood (Breheny, 2006, Green & Kafetsios, 1997; Collins, 2010; Miller, 2012).

It has been shown that young mothers are often wanting a joyous experience like any other mother excited about this impending and significant transition (Wilson & Huntington, 2005; Banks, 2008; Adcock, 2016), but are denied this through the prevailing stigmatisation (Banks, 2008) and often, socio-economic constraints. In a feminist qualitative research study, Banks (2008) interviewed 12 Pākehā mothers: 6 young mothers (aged 21 years and under) and 6 former young mothers (over 21 years) through individual interviews and focus groups. The study depicted the challenges the mothers had faced through stigmatisation, financial constraints, limited support and reduced time for themselves, however, showed agency as they demonstrated that early motherhood changed their lives in positive ways. The ideology of motherhood in accordance with Pākehā ideals showed through the stories of young mothers that they were placed outside of the normal or preferred mother (Banks, 2008), representing the entrenched stereotypes of a dominant societal culture. Consequently, although the young mothers belonged to the dominant ethnic and culture of contemporary society in Aotearoa, the denunciation indicates what 'young mothers' represent in regards to social status: disadvantage and a blight on society. Motherhood in the early years of womanhood was once heralded as physiologically optimal, and pregnancy in later years was advised against. The pragmatism and reverence of it all is now reversed where older mothers are now normalised but face a multitude of fertility issues (Wilson & Huntington, 2005).

In another recent study, a follow on from a larger longitudinal study, the lived realities of 15 young Māori mothers (age 14-19 years) and the perspectives of their whānau were collected through repeated interviews (Adcock, 2016). The research examined the role of the state in their lives and the potential for service improvements concentrated through 'gaze' which

signified the impact of regulation and disengagement of services towards young Māori mothers. Again, the young mothers resisted the disempowering effects of hegemonic viewpoints whereby the support of whānau and peers was important.

Although motherhood is a desired experience for many women, for many mothers it can be distressing throughout the perinatal period suffering disordered wellbeing from ‘baby blues’ to postpartum psychosis (Darrah, 2011). Disordered wellbeing in mothers can affect health, bonding with the baby and relationships (Webster et al., 1994). Midwives have conveyed the relationships they have experienced with childbearing women who are deeply anxious, stating the partnership is often intense, stressful and boundaries are often fraught (Hammond, 2005). The four midwives interviewed in Hammond’s (2005) feminist study regarding midwives’ experiences, shared the demands imposed on them by childbearing women wanting time and reassurance. Midwives said even though they knew the women they were caring for had many friends and family, women would consistently seek out the midwife for support. “The midwives felt quite drained by these intense relationships” (Hammond, 2005, p.48). One midwife described the early morning intrusion of phone calls from “Youngish unsupported women, who don’t know their bodies, who can’t recognise the signs of what’s right and wrong and don’t read books and talk to other people, they rely on us heavily” (Hammond, 2005, p.49). This sad and disturbing discourse reveals many variables including unpreparedness, the lack of familial, professional and service support, and the effects of societal marginalisation. Hammond (2005) goes on to reiterate that she felt concerned for both the women and the midwives due to the stress and anxiety surrounding the women needing care.

The literature examined, concludes that young mothers demonstrate courage and resilience amidst adversity; acknowledge and seek the support from family, whānau, friends and partners when they can; focus on their children in resolving conflict in relationships, particularly with their child’s birth father; desire participation with their communities and society; have goals, aspirations; and take insights from the past to affirm a sense of identity. Accordingly, these relational dynamics are important to explore in my research to whether they resonate with young Māori mothers in context to their diverse perspectives and worldviews.

2.5 Feminism and Motherhood

The influence of feminism and motherhood is demonstrated in many studies. However, feminism has a completely different literature and it is only briefly covered here. Albeit that feminism is elusive to many (Beasley, 1999) with a wide range of views and some conflicting (Olesen, 1994), feminism and feminist research recognises the diversity and complexity of human beings (Cannella & Manuelito, 2008). Notions of feminism have been integral to challenging and resisting the disenfranchisement of women by a dominant patriarchal society, led by activists of women's rights, sexuality, gender issues and equality. These endeavours have extended to social class, employment and race, which have framed the feminist discourse and approaches to how the experiences of women may be perceived and understood (Beasley, 1999).

For many women including Aotearoa women, feminism offered a critical perspective on the inequalities between women and men and in doing so, created a unity amongst women through shared experiences, beliefs, relationships and values that has generated a cultural identity and common political interest (Novitz, 1989; Simpkin, 1994; Mohanram, 1996; Beasley, 1999; Ashton, 2014). Historically, in examining women's lives to better define shared interests and experiences, women have found that there was little information available and the information that was available was distorted through male scholarship (Novitz, 1989; Bowell, 2015; Longhurst & Johnston, 2015), which further motivated a women's movement that premised women's experience "to see themselves culturally through their own eyes" (Novitz, 1989, p.56). Feminism has advanced exponentially through feminist theory and distinction within the western research academy and has drawn attention to reforming the ontological, epistemological and methodological approaches of studies conducted on the oppressed (Babbie, 2001; Smith, 2012). That is, "Oppressed groups are frequently placed in the situation of being listened to only if we frame our ideas in a language that is familiar to and comfortable for the dominant group" (Collins, 2000, p.xii).

Wāhine Māori and mana wahine scholars have intersected, aligned with and critiqued western feminism (Smith, 2012) as have non-Māori feminists (Simpkin, 1994; Mohanram, 1996; Longhurst & Johnston, 2015), based on the diversity and distinctions of women's experiences being historically, culturally, socially, politically, ethnically, geographically and contextually

bound (Harding, 1999). Minority or other/ed women, Indigenous women, so-called 'Third World' women and women of colour have challenged the inference that to understand being a woman and women's oppression, one must (simply/just) be a woman (Olesen, 1994; Smith, 2012). With respect to the advances and contribution made for women by feminism, for example Māori women's scholarship, mana wahine "expresses what counts as feminism for Māori women" (Tomlins-Jahnke, 1997a, p.35), and contends that a Māori woman's view and interests are distinct and our own (Mikaere, 1994). In rebuffing the notion of a generic women's experience of a select small group of women to represent the experience of all women, women scholars and 'other/ed' women have deliberated on the historical and contemporary differences, for instance, those experienced by native, coloured and Māori women (Collins, 1991; Olesen, 1994; Harding, 1999; Simmonds, 2011; Smith, 2012) or other women within minority groups homogenised by the theorising of leading scholars (Collins, 2000; Canella & Manuelito, 2008).

Another point of contention which was raised by bell hooks¹³ (1992) is the investing of a dominant group in the notion of 'we are all just people' and 'sameness' that will make racism disappear and the disbelief and amazement that coloured people critique (talk) back (hooks, 2015) "Many of them are shocked that black people think critically about whiteness because racist thinking perpetuates the fantasy that the Other who is subjugated, is subhuman, lacks the ability to comprehend, to understand, to see the working of the powerful" (hooks, 1992, p.339). Simmonds (2011) picks up on resistance to the inferior positioning of having to 'talk back' in regards to mana wahine and diverse Māori realities.

In traditional te ao Māori although not utopic, power was related more to whakapapa than gender (Mikaere, 2003) whereby Māori women lived far more liberated and autonomous lives, which was in antithesis to the viewpoint and common historical experience of western women brought to Aotearoa with colonisation and Christianity that posited women as chattels and possessions of men (Mikaere, 1994; Smith, 2012). The impact of colonisation and Christianity on the lives and experiences of Māori women and mothers, has distorted the position of Māori women within te ao Māori and in claiming space within contemporary society (Smith, 2012).

¹³ The author chose to pen her changed name in lower case, which is derived from her mother and grandmother, accentuating the substance of her work

Within the feminist research academy itself, there is significant diversity as demonstrated by a study related to the theorising around maternal experience. Feminists have encompassed a series of opposing perceptions around motherhood, which have included rejection and celebration, pessimism and optimism, being entrapped and liberated (de Cunha, 2012). A viewpoint regarded as pessimistic, is that patriarchal systems have imposed the discourse of motherhood upon women's lives and thus women have suffered from the "psychological, physical and professional effects" (de Cunha, 2012, p.223). Feminists argue that motherhood has been based on patriarchal ideologies, however, women are more than 'maternal bodies' merely for reproduction. The juxtapose is the viewpoint of modern feminists, who have reconceptualised the maternal to a discourse of liberation and empowerment, positing motherhood as gratifying, ethical and political practice (Cosslett, 1994; Walker, 1995; Meyers, 2002; de Cunha, 2012).

In regard to the intersection between young mothers' experiences and the feminist perspectives, I argue that the viewpoints represent women but not all women due to the diverse cultural and socio-economic contexts, which includes the implication that young mothers, such as young Māori mothers and Māori in general, are more likely to come from more disadvantaged and deprived backgrounds. Therefore, feminist studies and viewpoints that encapsulate women pursuing careers and battling with the juncture of maternal and professional responsibilities, may not be standpoints that encompass the lived and contextual realities of young mothers, albeit young Māori mothers. Also, the perspectives of feminists who reject motherhood as an oppressive institution that is controlled by men may likely come across as extreme for young mothers who are otherwise caught between the contradictions of embracing motherhood and resisting exclusion.

2.6 The Wellbeing of Young Indigenous Mothers

A beautiful tepee is like a good mother. She hugs
her children to her and protects from the heat
and cold, storm and rain.

(Sioux proverb in Crow Dog & Erdoes, 1991, p.170)

Indigenous peoples are distinctly diverse and autonomous from each other but commonly aggregated to make comparisons to non-Indigenous people. However, there are pervading experiences shared between Indigenous peoples that brings an alliance through various commonalities. Common values, beliefs and practices are identified such as an innate and spiritual bond with the land and environment and associated ceremonies that tie the people with mother-earth (Kame'eleihiwa, 1992; Durie, 2003; Graham, 2010). Durie (2003, p.298) for instance, refers to a connection where "people are the land and the land is the people and the tradition is reflected in song, custom, subsistence, work, approaches to healing and birthing, and the rituals associated with death". Other important commonalities are associated with colonisation, and the violations and incessant consequences of being marginalised upon the land of which Indigenous peoples are connected to. Through a review of the literature, the wellbeing experiences of young Indigenous mothers, are now explored.

2.6.1 An Indigenous Experience

The experiences of several prominent Indigenous peoples provides an insight into their respective growing populations that were once flourishing under autonomous governance, to being colonised and thus diminished by thousands if not millions of peoples, to a present time of regeneration. These experiences also highlight the heterogeneity of Indigenous peoples who are primarily clan-based with distinct languages intrinsically bound to the land and to spirituality. The multifarious layers and contextual realities of Indigenous peoples are complex, and the origins they belong to and descend from, must be considered when exploring wellbeing. As there is a dearth of literature directly aligned to my thesis title, I have explored literature around the social supports, identity and wellbeing of young Indigenous first time mothers within their contextual realities, whilst at the same time acknowledging the dual effects of traditional cultural beliefs, values and practices, and colonisation. Indigenous scholars have also noted a dearth in Indigenous sources of literature around early pregnancy and parenthood, and furthermore, little understanding about the meaning of early pregnancy and motherhood to young mothers and their families (Eni & Phillips-Beck, 2013; Fonda et al., 2013; Ussher et al., 2016).

Essentially, the literature points to young mothers across Indigenous peoples who have experienced similar backgrounds of poverty and marginalisation as consequences of the

colonising of their tribal lands, ways of being and doing. Similar to young Māori mothers, early Indigenous motherhood has been socially constructed and declared a problem, societal concern, health crisis and a health matter that increases the vulnerability and debilitation of already socioeconomically disadvantaged individuals, groups and communities (Prettyman, 2005; Dalla et al., 2013; Eni & Phillips-Beck, 2013; Fonda et al., 2013).

Locating and contextualising early pregnancy and motherhood of Indigenous women from the literature is significant because critical spaces determined experience, identity and wellbeing. For the young Indigenous mothers explored in the international research, these spaces were identified predominantly as settlements or ‘on-reserve’, and ‘off-reserve’. For some Indigenous peoples like the First Nations of Canada, there is more concentration on reservations. However, for peoples such as Māori, Aboriginals and Torres Strait peoples from Australia, there is more integration with the greater population of their countries (Cunningham & Stanley, 2003). Although reservations signify the lands of the original peoples, the prevalence of poverty, lack of employment and alcoholism were among the significant social and economic issues within the communities (Dalla et al., 2013; Quinless, 2013).

In the book, titled *Lakota Woman* (Crow Dog & Erdoes, 1991), Crow Dog describes her upbringing and that the death of her father caused her mother to leave her and her siblings, so as she could work hundreds of miles away caring for white patients. Crow Dog counted herself and her siblings fortunate to end up with her grandparents like other ‘reservation kids’. However, many other children were placed in foster homes even if they had parents or grandparents to care for them “A flush toilet to a white social worker is more important than a good grandmother. So the kids are given to wasicun¹⁴ strangers to be ‘acculturated in a sanitary environment’” (Crow Dog & Erdoes, 1991, pp.16-17). Crow Dog recalls traumatic events that tell of the violence and subjugation of Native American women and families, painful and tragic births, the unexplained deaths of women who had once birthed American Indian babies found with their hands cut off, women beaten to death, her sister sterilised at birth without her consent, only to have her baby die, the violence from alcohol and the demoralisation of Native American men.

¹⁴ Wasicun is the Sioux word for ‘White man’ or ‘non-Indian’

Historical and intergenerational trauma has impacted significantly on Indigenous peoples world-wide (Fast & Collin-Vezina, 2010; Dudgeon et al., 2017). Such traumas have included forced relocation of peoples, destruction of traditional livelihood, the enforced residential school system that subjected many Indigenous children to physical, emotional and sexual abuse, the banning of tamariki Māori from speaking te reo Māori, the pervading welfare systems that separated children from their families and culture (Cunningham & Stanley, 2003; Ka'ai-Mahuta, 2011; Allan & Smylie, 2015), and the forcible removal of children in historical events. The latter examples include the 'sixties scoop' of First Nations' children (Fast & Collin-Vezina, 2010) and the 'stolen generations' of Aboriginal children in Australia (Gibson, 2013; Ussher et al., 2016) where "A common practice was simply to remove the child forcibly, often in the absence of the parent but sometimes even by taking the child from the mother's arms" (Commonwealth of Australia, 1997, p.5).

The extraction of Aboriginal and First Nations children from their homes is part of a historical legacy extended from state-sponsored exercises, such as First Nations children who were removed from their families as part of colonial assimilative and acculturation objectives, perpetuated by the state welfare system (Milloy, 1999; Alfred, 2009; Sinha, 2013). The premise was to remove children from the 'bad' influence of their parents and civilise them to a Christian society, however, the conditions the children went to were extremely poor and children were appallingly violated (Milloy, 1999; Alfred, 2009; Sinha, 2013).

In Canada, recent estimates confer that Aboriginal peoples represent slightly over four percent of the general Canadian population but account for nearly half of the children in state care (Allan & Smythie, 2015). Children who were victims of forced removal through government policies and welfare systems, are now plausibly acknowledged to be parents of young Indigenous mothers or young Indigenous mothers themselves, whereby research has shown that such traumatic events have disenabled these parents from bonding with their children (Allan & Smythie, 2015; Dudgeon et al, 2017).

In Canada, the proportion of young First Nations mothers far out-weighs young non-Aboriginal mothers and is described as an issue for social policy because young First Nations mothers are already at a socio-economic and educational disadvantage, and more likely to become sole-

parents (Guimond & Robitaille, 2008; Luong, 2008; Quinless, 2013). However, notions of total fallibility have been sullied as researchers who have explored young First Nations mothers have highlighted distinctive features, which include a higher than perceived level of commitment to motherhood, a tenacity to rise from adversity and the significance of social systems to augment outcomes. In Quinless' (2013) article about female First Nations teenaged lone parents aged 15 to 19 years in Canada, she reports on an examination of data from the 2006 Census Population and the formal and informal support systems available to multi and single family households. Primarily the paper examines the differences between living on-reserve and off-reserve, whereby many young First Nations mothers were found to be very committed to the wellbeing of their child and if necessary, transformed their situation to avert negative influences. This commitment included censuring alcohol particularly as most young mothers had been exposed to alcoholism and its effects through their upbringing; ending adverse relationships including partners especially if domestic violence was a factor, and seeking better opportunities through education and work for themselves in response to becoming a mother. Quinless' (2013) demonstrated that although there was significant adversity experienced by young First Nations mothers, which included social, educational and economic deprivation, young mothers have tenacity, particularly when they have supportive social networks.

Quinless' (2013) reported more on-reserve mothers lived with family than those who lived off-reserve, although about half of those who lived off-reserve were in shared households pointing to the significance of social support for young mothers. Quinless (2013) calls this 'networks of care', and argues that on-reserve informal networks provide significant support for young mothers, although off-reserve young mothers may have more access to employment, education, formal childcare and support. 'Networks of care' have traditionally been overlooked in Indigenous research (Quinless, 2013) and require more consideration when exploring early Indigenous motherhood. This is especially so, as other scholars have pointed out in terms of young Māori mothers that young Indigenous mothers may be incorrectly perceived and stigmatised as 'alone', 'lone' or 'solo' through a western lens but are in essence, co-parenting with family and social networks (Moeke-Pickering, 1996; Pool et al., 1998; Pihama, 2010; Cooke, 2013; Neill-Watson, 2013; Quinless, 2013). In some cases, where the focus has been on formal support and systems, research may fail to capture the actual extent of social support and co-parenting available to young mothers (Cooke, 2013). The involvement and presence of

the father is another important factor and more is needed to support and develop fathers to become good fathers (Ball & George, 2006). Furthermore, literature purports that the phenomenon of being a young Indigenous mother, is more a part of the life course of young Indigenous youth (Cooke, 2013), than a debate of social inconvenience. What is recurring as significant throughout the literature is the presence, availability and quality of social support throughout the various contexts.

There have been few studies in Australia of Aboriginal mothers' subjective experiences and perspectives of programmes that support mother-child attachment given the impact of historical trauma and pervading marginalisation (Ussher et al., 2016). Nonetheless, Ussher et al. (2016) have described from some Aboriginal mothers' accounts, their 'constructions of motherhood' that included the resilient mother, the good mother, perspectives and intervention, to 'I know I'm a good mum', which incorporated connections, skills and time for self. Although the 10 mothers were slightly older, an average age of 28 years, the findings are similar to other Indigenous mothers including younger and Māori, whereby trauma and adversity were overcome when becoming a mother, which demonstrated tenacious motivation and led to greater self-awareness (Dalla et al., 2009; Adcock, 2016). Ussher et al.'s (2016) research also looked at the implications of what is described as 'tight-rope talk' (McKenzie-Mohr & Lafrance, 2011) where participants in the research can reject the binary of both 'the resilient' and 'the traumatised' to better articulate the complexities of their experiences, acknowledging both difficulties and personal strength. For Aboriginal women who have been impacted by the effects of historical and pervading trauma, better understanding is vital, as stated, "reproductive health and subjective wellbeing of Aboriginal mothers has implications for the next generation" (Ussher et al., 2016, p.20).

Domestic violence, drug abuse, unemployment, loneliness, isolation, fear and exclusion has greatly affected the wellbeing of young Indigenous maternal wellbeing. Furthermore, the role of health care workers to support at a culturally safe and competent level has been identified as significant (Brown et al., 2016; Ussher et al, 2016) where scholars have taken examples from Māori about how this has been explored and framed (Brown et al., 2016). The inclusion of Aboriginal peoples in health care roles and support roles such as 'Aunties' and "Aboriginal Liaison Officers' has proven critical to positively affecting the health outcomes of young

Indigenous mothers particularly as white health care professionals still lack the cultural understanding to improve the experiences of Indigenous mothers (Brown et al., 2016).

Furstenberg (1991, 2007), SmithBattle (1995), Dixon and Baragwanath (1998), Rich-Edwards (2002), Seamark and Ling (2004), Breheny and Stephens (2007), Cooke (2013), Eni (2013), Eni and Phillips-Beck (2013), Neill-Watson (2013) and Quinless (2013) all argue that the age of the mother does not necessarily determine negative outcomes of mother or child or make young mothers the most ill-fit mothers. Rich-Edwards (2002, p.555) found that “After adjusting for family background, race/ethnicity, socioeconomic position, educational success, and future prospects, many US studies show that teen mothers are as likely as older mothers to bear and raise healthy, successful children”. Mantell et al. (2004, p.538) support this position stating “Teenage pregnancy is not a risk factor for adverse outcomes for Māori women once socioeconomic status has been taken into account”. The issue is the disadvantage that a mother is subjected to, rather than her age; older mothers have faced a lengthier exposure to the socio-economic difficulties associated to the contextual realities of many women (Pinker, 2011).

2.7 Young Māori Mothers

Little qualitative research has been conducted into the experiences of young Māori mothers and their tamariki, or of their own stories of wellbeing around pregnancy, birth and motherhood. Scholars have commented that studies, which have involved insights into the status of young Māori mothers’ wellbeing have been quantitative designs (Wilson & Huntington, 2005; Collins, 2010) comparing and measuring young Māori mothers against European rates (Geronimus, 2003; Ware, 2014), set as the benchmark and index population for Māori (and Pacific) (Dickson et al., 2000; Woodward et al., 2001; Durie, 2006; Breheny & Stephens, 2010; Strickett & Moewaka-Barnes, 2012; Gabel, 2013). Other studies have looked at the systematic flaws and incapacity of historical and current health care to address and optimise the health of young Māori mothers.

In a phenomenological study of 10 first time mothers aged 24 to 38 years, researchers examined how personal responsibility of wellbeing raised the birth satisfaction of first time mothers (Howarth et al., 2011). The study included three first time Māori mothers as participants. A neo-liberal ideal of accountability, of being prepared, well informed, confident and therefore

in control was a primary theme. This is an interesting outcome given that Māori are more likely to lack the resources, face inequities, be disengaged from services and socio-economically disadvantaged (Durie, 2003), hence the perspective of Māori mothers is an appealing research feature. However, the experiences of the Māori mothers were undetectable as distinctive to others in the cohort, as there was no real exploration of their experiences from a Māori worldview. Their contribution was not signposted or set apart, which could have been significant in exploring important areas of peri-natal wellbeing. Ethnic diversity was clearly not a distinguishing feature of this study. Having earlier highlighted the common practice of setting Pākehā as the benchmark for Māori wellbeing, signifying the experiences of Māori mothers in this instance could have been a valuable opportunity to examine the experiences of first time Māori mothers. The value would be in relation to neo-liberalism and less about comparison, giving important insight into rarely explored areas of wellbeing.

In another example, a study of young mothers and the culture of a teenage parents' school utilised a qualitative narrative methodology to examine the experiences of 10 mothers plus family and school community members through interviews, and then a further six mothers were engaged for their life stories (Miller, 2012). The study called for young mothers' participation, and some young mothers who were Māori responded. Through the study, the inclusion of kaupapa Māori principles and concepts were observed as well as there being cultural guidance from those in the Māori research academy. However, despite these cultural inclusions and stated commitment to the inclusion of Māori, the data of some of the Māori participants was subsequently excluded due to the cultural implications that the researcher felt they could not address as a Pākehā researcher. The rationale is not clear, and in terms of cultural safety, the measures non-Māori researchers must consider and apply when researching with Māori are understandable. However, researchers must have a clear understanding of the ethical process and what it means to engage with Māori participants, gather their mātauranga and the decisions around what happens to that mātauranga. The literature that recognises the value of a kaupapa Māori approach and applying a Māori lens when researching with Māori is developing steadily, and thus providing important insight to the lived experiences of Māori (Smith, 1997; Walker et al., 2006; Bishop, 1999; Henry & Pene, 2001; Pihama et al., 2002; Smith, 2012).

The literature that encompasses young Māori mothers can be categorised according to the reference points of the research aims, which reveal either a deficit or emancipatory (otherwise strengths based) agenda through the approach. For example, an ethnicity discourse positions young Māori mothers as deficient, whose pregnancies and tamariki are depicted as less desirable and something to be feared or curbed rather than celebrated (Breheny, 2006). Research that uses European or white rates as a standard, constructs minority populations as inadequate, requiring an effort of modification and change to compensate for perceived cultural weaknesses. Constructs and discourses of young Māori mothers presented in literature with a deficit lens concentrate on the flawed defective aspects attributed to this group with minimal exploration and understanding into young Māori mothers' perception and consequent experience of wellbeing. There is literature that discusses the wellbeing of Māori youth, tamariki Māori and Māori in general, however, research is lacking in the area of young Māori mothers, who come under on-going public and political scrutiny and interpretation.

Research that explores wellbeing in relation to young Māori mothers is indeed a necessary endeavour in determining the actual experiences of a misinterpreted but well-represented and criticised group. The earlier perceptions of a lack of adequacy in capability and background already places young wāhine Māori at a disadvantage and impacts on the entitlement of young Māori mothers to parent effectively, take pleasure in the progression of being a woman, of being Māori, and leading whānau as naturally as it would be possible, thus nurturing and promoting wellbeing. Within the literature on attachment, the wellbeing of young Māori mothers around the birth of her first tamaiti is imperative to her health as well as that of her tamaiti (Moewaka Barnes et al., 2013).

Evidence points to the availability of family support and access to resources as highly important towards the positive experience of a new mother where “The transition from non-mother to new mother requires significant resources and coping” (Darrah, 2011, p.7). As there is such a small but developing pool of literature detailing the experiences of wellbeing of young Māori mothers, and at least thus far no one study the same, I have approached the literature review for this section by focusing on the aims of my thesis, and exploring those tenets through the available literature. Accordingly, the next section of the literature review explores what is known about the experiences of wellbeing of young Māori mothers from a Māori worldview

and mana wahine standpoint. It encompasses the viewpoint of the dominant Pākehā society and the impact of that perception on the wellbeing of young Māori mothers, and looks at the role of relationships and interconnectedness in the wellbeing of young Māori mothers.

2.7.1 Wellbeing of Young Māori Mothers from a Māori Worldview

The stories and archetypes that guide and empower us as wāhine Māori and young Māori mothers, are within our midst, our gatherings, our babies and nannies, as are mine within the embodiment of my significant women and men. For the purposes of research within the western research academy, the stories that expound the significance of wāhine Māori and young Māori mothers are being captured within scholarly research.

There is plentiful literature that expounds the creation story from a Māori worldview, and fortunately, it captures the sacredness of those origins rather than the previous accounts that reduced Māori whakapapa to tales of westernised versions of heroics and fantastical mythology. The accounts from a traditional Māori lens portray the important elements, deities and roles, of which I have explored in balance, and discuss further in Chapter Three, Kaupapa Māori Methodology. However, in focusing on young Māori mothers, I found there was literary richness pertaining to a Māori worldview, within the scholarship of wāhine Māori, Māori women academics and rangatiratanga. Wāhine Māori not only captured the imperative aspects intrinsic to te ao Māori, but elevated the essence, function, thought and behaviour of Māori women and mothers from invisibility and subservience into view. In exploring and comparing the literature, the invisibility of wāhine Māori and young Māori mothers was even noted within ‘Māori’ versions of creation.

The essence of wāhine Māori has been written about through the traditions and narratives of te ao Māori for at least 30 years. Writers include Wikitoria August (2004, 2005), Arohia Durie (1997, 2002), Mihipeka Edwards (2002), Ripeka Evans (1994), Kirsten Gabel (2013), Monique Gemmell (2013), Katarina Gray (2006), Jessica Hutchings (2002), Kathy Irwin (1992), Reena Kainamu (2013), Huia Tomlins-Jahnke (1997a, 2002, 2013), Ani Mikaere (1994), Ngahuia Murphy (2014), Makereti Maggie Papakura (1938), Rose Pere (1988, 1991, 1994) Leonie Pihama (2011), Paule Ruwhiu, (2009), Naomi Simmonds (2011, 2014), Linda Smith (2012, 2015), Ngahuia Te Awekotuku (1991) and Aroha Yates-Smith (2003). Wāhine Māori writers

give important insight to the origin and vitality of wāhine Māori and motherhood from the time of creation, and trace the progress of wāhine Māori to the present day. Many of the above wāhine Māori, are scholars within the mana wahine paradigm who seek to position, privilege, challenge, resist, conscientise and transform wāhine Māori within the socio-economic, political and cultural contextual realities of today.

Wāhine Māori have explored and analysed wāhine Māori and motherhood from a lens based on te ao Māori and mana wahine epistemologies, beginning with cosmogonic and cosmology origins, and followed by the creation stages of which Papatūānuku emerged. From this reference point, wāhine Māori locate wāhine Māori and motherhood in a divine and esteemed domain from which understanding wāhine Māori and young Māori mothers' wellbeing can be privileged and theorised. However, in doing so, not all mātauranga can be given away (Papakura, 1938; Pere, 1991; Edwards, 2002) but instead remains protected taonga in the safe-keeping of selected custodians. Smith (2012) argues that not all knowledge is open to commodification and distribution, and from a kaupapa Māori perspective, knowledge is power and therefore must be safeguarded, unlike a colonial or traditional western research approach to systematically collect, analyse, interpret and disseminate.

From a traditional Māori worldview, becoming a young mother is not an indictment, but was indeed celebrated by whānau, hapū and iwi (Papakura, 1986; Rimene et al., 1998; Pihama, 2010; Gabel, 2013). The phases of womanhood, were characterised by experiences and progressive states within a cultural discourse of femininity, not by prescribed chronological age-related stages such as western imperial ideology (Gabel, 2013).

There is substantial literature that discusses the discourses of wāhine Māori and mothers' wellbeing within accounts of creation, ancestral gods and goddesses, traditional Māori life and roles, tikanga, identity, whānau, whakapapa, whenua, men, sexuality, menstruation, pregnancy, birth, motherhood, power, self-determination and colonisation. From the depth and breadth of literature, the histories of wāhine Māori and young Māori mothers are clearly articulated and developing. Wāhine Māori researchers have explicated the interweaving dimensions of identity and wellbeing of Māori women and young Māori mothers, as inter-relational and holistic. Historical and contemporary experience cannot be fragmented but are part of the lived

experiences. Although there was a diversity in the subject topics of the literature, the theoretical framework was consistent and became more sophisticated as literature developed upon each other and further knowledge was explored, enhanced and created.

2.7.2 The Viewpoint of a Dominant Pākehā Society

The literature shows that from early confrontation with the west, colonisation and Christianity brought with it patriarchal male-dominated ideology of ‘good women’ and ‘good mothers’ which flouted a traditional Māori way of life that venerated wāhine Māori (Simmonds, 2011; Gabel, 2013). The deficit perceptions of young Māori mothers and the problematisation of early Māori motherhood continues to be prevalent (Dickson et al., 2000; Strickett & Moewaka Barnes, 2012; Ware, 2014). It is also important to point out that the literature does not exonerate Pākehā women from the enforcing of these ideologies, as they too had a hand in the contraventions that subjugated wāhine Māori and young Māori mothers; analysed later in this chapter.

Through oral history and the literature of wāhine Māori and mana wahine scholars, the experiences and histories of wāhine Māori and young Māori mothers is brought to focus and privileged, providing better insight, understanding and appreciation. Wāhine Māori and mana wahine scholars explored the former freedoms and liberties of wāhine Māori who participated in a bipartisan society, who were respected and autonomous (Mikaere, 1994; Tomlins-Jahnke, 1997a, 1997b; Gemmell, 2013), and were pivotal to the wellbeing and future trajectory of whānau, hapū, iwi and the environment. The literature highlights the condemnation and renunciation of the power of wāhine Māori and young Māori mothers by the patriarchal and paternalistic rule of British colonialists, who worked co-operatively with missionaries, charged with civilising natives by overhauling Indigenous spiritual beliefs and practices (Mikaere, 1994; Durie, 2003; Kamira, 2010; Gemmell, 2013). According to the literature, such offences were aimed to impact and destabilise the values, beliefs and practices at the root of te ao Māori, through misappropriating and disconnecting Māori from their ancestral lands (Tomlins-Jahnke, 1997b; Durie, 2003). In doing so, Māori historical narratives based on mātauranga Māori have been: relegated to fanciful tales and myths (Durie, A., 1997; Lee, 2009), assaulted with attempts to eradicate te reo Māori (Simon & Smith, 1998, 2001), subjugated by enforced legislation to prohibit the spiritual beliefs and practices of Māori knowledge and healing such as the Tohunga

Suppression Act 1907, and subjected to imposing legislative policies to assimilate and nullify Māori autonomy and rights to sovereign rule and equal participation (Durie, 1998).

Through the literary sources, it is evident that the assaults on te ao Māori struck at the wellbeing of wāhine Māori and young Māori mothers, who were further debased by transgressions aimed to directly diminish wāhine Māori and motherhood. These transgressions included disrupting their influence and expertise in family and society by denouncing their role in decision-making that affected whānau, hapū and iwi (Tomlins-Jahnke, 1997b), discarding their contribution as providers and within politics, making invisible their leadership and wisdom, and refuting their knowledge and practical expertise in health as healers, midwives, mothers and consultants (Simmonds, 2011; Gabel, 2013). There was no love lost or hope for atonement from white settler women and missionaries' wives who were entrenched within the fabric of colonial rule as protagonists of imperialism being teachers mainly in religion, and benefactors who disregarded wāhine Māori as unequal, to roles of housecleaners and servants (Fry, 1985; Tomlins-Jahnke, 1997b).

It was considered best for young Māori women to become domesticated to a colonial construct and be sent to boarding schools to assimilate to Pākehā way of life and thinking, thus becoming subservient and learning to become good wives and mothers. As examples, Māori girls were placed in the schoolmaster's house under the supervision of the master's wife to learn domestic skills with an emphasis on health and nutrition, and later sent to Māori boarding schools (Tomlins-Jahnke, 1997b; Jenkins & Morris Matthews, 1998). Boarding schools were intended to curb moral degeneracy in Māori communities through the ignorance and inactivity of Māori girls, and to educate Māori mothers in response to a high infant mortality rate. The subjugation of Māori is captured in the excerpt from an Inspector of Native Schools, James Pope, when in 1894 he was quoted as saying that "When two different races of men have to live together, the race that through any cause, is more ignorant, weaker in numbers, and poorer than the other must learn the good customs of the stronger people or else surely die out" (as cited in Fry, 1985, p.39).

Early images of young Māori women in material such as photography, depicted Māori women as harlots and seductresses for white male colonialists and settlers, further denigrating Māori

women and at the same time justifying further aversion by Pākehā women (King, 1996; Tomlins-Jahnke, 1997b; Gabel, 2013). As birthing women, Māori were forced to seek cultural support covertly and then further action was taken to compel Māori women into Pākehā institutions and rebuff cultural practices and experts in childbirth (Mikaere, 2003; Simmonds, 2014). When the mortality rates of Māori babies increased, the spotlight glared upon Māori women as unable to be good mothers. Reforms were imposed on Māori women that required further institutionalisation and medicalisation of pregnancy, birth and motherhood (Fry 1985; Gabel, 2013). The impact of introduced western disease, illness and interference, alongside a disruption of Māori ways of being were immaterial to the imposed doctrines. Despite the damaging effects of colonisation and deterioration of the Māori people, wāhine Māori were not given equal nor equitable access to health care assistance, but afforded a muted version to that received by Pākehā such as Plunket's specific exclusion of Māori mothers (Bryder 2001; Gabel, 2013).

From the literature and experiential evidence from the stories of wāhine Māori and young Māori mothers through a developing scholarship of young Māori mothers' experiences, negative perceptions of wāhine Māori and young Māori mothers have remained entrenched in the dominant Pākehā society's psyche where:

- Young Māori mothers continue to be stereotyped and marginalised through health, social and education policy such as a concentrated focus on the sexual health and activity of young Māori mothers and contraception;
- 'Māori teenage pregnancy' is seen as a deficit and the labelling of young Māori mothers as 'vulnerable' women occurs;
- Young Māori mothers are disproportionately represented in poor health outcomes such as birthing, intervention and rates of Sudden Infant Death Syndrome (cot death);
- Half of wāhine Māori who are pregnant smoke cigarettes;
- Young Māori mothers have low rates of ante-natal engagement in the western health system;
- Young Māori mothers have a prolonged wait for uptake with mainstream health services, when they are seeking support early;
- Young Māori mothers are and continue to be victims and perpetrators of violence;
- Young Māori mothers feature significantly in the growing rates of incarceration;

- Young Māori mothers are implicated in state care interventions that includes uplifting and removing their tamariki from birth;
- Young Māori mothers continue to be ostensibly supported by prevailing poor models of health based on western ideologies; and,
- A significant portion of young Māori mothers today have no or very little cultural epistemological understanding of mātauranga Māori and tikanga Māori.

Young Māori mothers remain defiled by contemporary society through historical transgressions and patronisingly, the success of young Māori mothers is often attributed to compliance rather than an acknowledgement of systems that work based on better understandings around contextual realities.

2.8 Young Māori Mothers - Relationships and Interconnectedness

It is evident within the literature that the relationships and the interconnectedness young Māori mothers have with whānau and other social support is valuable to their experiences. Relationships with whānau and friends, and interconnectedness socially and culturally are shown to be important to the wellbeing of young Māori mothers too.

“Whakapapa is the generational descent of all living things from the gods to the present time” (Barlow, 1993, p.173). Whakapapa includes inter-relationships between generations, Māori societal structures, and is at the heart of Māori worldviews outlining the roles and accountabilities between whānau, hapū and iwi (Moewaka Barnes et al., 2013). The survival and vitality of Indigenous cultures is attributed to the intergenerational living patterns of whānau, and how grandparents preserve and impart cultural values, beliefs and practices critical to whānau wellbeing through emotional connection with children and grandchildren (Vakalahi & Taiapa, 2013). Intergenerational unity, support networks and family responsibility are critical to whānau ora (Boulton & Gifford, 2014). These relationships are mechanisms for wellbeing offering a shared responsibility and space for living and development, and “For Pacific people, the codes of conduct such as respect for elders and women, rules of social interactions such as reciprocity and collectivity, spirituality” (Vakalahi & Taiapa, 2013, p.333), are passed on creating a strong cultural platform to build lives.

2.8.1 Wāhine Māori and Whakapapa

Whakapapa is indelibly linked to the importance of women. Through whakapapa, Māori identity traces back many generations and even further to the genesis of the creation of the universe seen in the tradition of Te Kore, Te Pō and Te Ao Mārama (Novitz & Willmott, 1989; Moewaka-Barnes et al., 2013). The genealogy of these realms continues on to Ranginui (the sky father) and Papatūānuku “who materialised in Te Kore to become the cause of Te Pō, the second state of existence” (Walker, 1989, p.36). Papatūānuku is extremely significant as the fundamental female entity, the mother of the gods and origin of humankind.

Through colonisation and subsequent marginalisation, wāhine Māori as primary beings in Māori society, were subjugated or even made invisible in the retelling of te ao Māori through a colonial lens (Pihama, 2001; Simmonds, 2011), which are depicted through well-known sources of ‘Māori legends and mythology’ such as Grey (1956), Alpers (1977) and Reed (1999). However, through oral history, song, art and performance, varying dynamics of traditional Māori society have been preserved and transferred through generations, and scholars are further exploring the repositioning of wāhine Māori in te ao Māori and modern society, recovering wāhine Māori from erroneous reports that have permeated the accuracy of Māori history and reality.

2.8.2 Whānau and Whakapapa

Whānau, hapū and iwi are described by Moewaka-Barnes et al. (2013, p.21) as key structures “within te ao Māori that are enabling and set a foundation for wellbeing”. Identity is a significant part of wellbeing in te ao Māori (Durie, 2003) and part of defining identity is understanding and sharing the values, beliefs and behaviours (Whakamana Tangata, 1992) of important social structures. From the position of a Māori worldview, wellbeing flourished through the connectivity of whakapapa, which underpinned the essential cultural ethos that collective wellbeing has vitality through whānau, hapū and iwi (Anderson et al., 2012). The challenge for Māori has been to sustain this vitality within a western values-based system that emphasises the individual rather than the collective.

A sense of belonging and identity manifests through knowing whānau, hapū, iwi and tūrangawaewae, which also has dual meanings that relate to reproduction and

interconnectedness. For example, whānau means a family unit and also to give birth; hapū is the wider family unit or clan and also means to be pregnant; iwi is the tribal group and is linked with ‘kōiwi’ – the bone/bones. Additionally, whenua, the term for land is also the placenta – both being sustenance for life; tūrangawaewae are the links to land and also denotes ‘a place to stand’. Te ao Māori notions related to whānau, connect to and preserve the mauri and mana of individuals, and it is by these structures that Māori identify themselves (Te Rangi Hiroa, 1982; Papakura, 1938; Novitz & Willmott, 1989; Walker, 1989; Barlow, 1993; Gibbons et al., 1994).

According to wāhine Māori, mana wahine scholars and rangatira (chief/chiefly), whānau and whakapapa are vital to the identity of young Māori mothers, and young Māori mothers provide the future for whānau, hapū and iwi and therefore should be cared for and revered (Pere, 1988; Jenkins, 2011). Young Māori mothers are intrinsically connected to significant relationships particularly within whānau, where “whānau is the fabric of Māori society” (Ryan et al., 2010, p.25) and “Māori women are recognised as kaitiaki (guardians) of their whānau wellbeing” (Ryan et al., 2010, p.25). Wāhine Māori are critical as transmitters of mātauranga Māori (Gray, 2006; Ruwhiu, 2009) orally, physically, and spiritually, and it is important to ensure the integrity of wāhine Māori as mediums of whakapapa to the past and towards the future.

The significance and prominence of wāhine Māori in the wellbeing of whānau, hapū and iwi is developing through the literature but yet to be fully recognised as vital to whānau health outcomes. An examination of whānau wellbeing is presented by Boulton and Gifford (2014) that analyses self-determination and whānau definitions of whānau ora. However, the significance of the female is not specifically discussed. In the document *Te Pūāwaitanga o ngā Whānau*, Māori wellbeing is re-examined across various studies and models with six markers of ‘flourishing whānau’ being identified from the critique (Kingi et al., 2014). The document concurs that the whānau unit requires strengthening in multidimensional areas in order to develop and thrive, and that whānau is the basis for Māori aspiring to greater potential wellbeing. Women are not mentioned specifically as significant to ensuring this although their strength and capabilities are clearly recognised. Although the marker ‘Whānau resilience’ emphasises the need for ‘strong whānau leadership’, there is no acknowledgment or

recommendation to fortify the role of the female to provide that leadership and support for the wellbeing of whānau.

Literature has validated the role of social connection to the wellbeing of young Māori mothers and in modern Aotearoa society where there has been major disruption and transformation of traditional Māori social units, whānau and friends still play a leading role (Goodwin, 1996; Adcock, 2016). The configurations have changed in some instances from tight whānau units who provided the majority of needs around wellbeing, to more diverse configurations of ‘whānau’ inclusive of friends and community who support the needs of young Māori mothers and their tamariki (Cram & Pitama, 1998; Durie, 2006; Kennedy & Cram, 2010).

2.8.3 Health Professionals and Services

In terms of the needs of young Māori mothers, much of the present literature has explored the role of health professionals and health services, the access, appropriateness and availability or lack of by such entities, to facilitate the needs of young Māori mothers (Makowharemahihi et al., 2014; Adcock, 2016). Makowharemahihi et al. (2014) have shown that systems in place to support the needs of young Māori mothers have in fact reported false perceptions about young Māori mothers wanting to engage and be supported, that young Māori mothers have sought help early but have often not received it. Although historically and presently young Māori mothers have been compelled and obliged to turn to mainstream systems for support (Gabel, 2013), young Māori mothers have been failed in varying degrees by health professionals, services and models of care. In turn, I argue that the literature that has examined the role and engagement of health services (or lack of) with young Māori mothers, encompasses key messages and codes that recognise, in the absence of care from imposed mainstream systems, that whānau remain the implicit and absolute connection to the wellbeing of young Māori mothers. Acknowledging the role of whānau and systems of support for young Māori mothers is critical in terms of nursing and the health care sector in Aotearoa, particularly in the models of wellbeing that are applied. Nursing in Aotearoa incorporates competencies that encompass cultural responsiveness to enhance practice and health outcomes, as is understanding the community’s historical background, to their contemporary needs and resources.

2.8.4 Wāhine of the Whānau

The role of mothers and other women as significant to the wellbeing of young Māori mothers, has been identified in literature such as Goodwin (1996), who states that although many of the whānau are involved with young Māori mothers, mothers, mothers in law, nannies and sisters were of most significance. However, the research gives a greater overview of social support and does not explicitly focus on the role of mothers, grandmothers and other women to the wellbeing of young Māori mothers as was common in traditional te ao Māori. The research is also metered by the perceived shortcomings of mothers of young Māori mothers to support their daughters, particularly through pregnancy. However, in this instance, the research was undertaken 20 years ago, and through a socio-cultural context where pregnancy of young women was perceived as highly undesirable and heavily stereotyped. Due to this context, the six participants in the study, described that they were afraid to tell their parents that they were pregnant as this was disapproved of, but subsequently they added, mothers and parents were supportive and involved at the birth and into motherhood (Goodwin, 1996).

2.8.5 Tamariki

At the centre of young Māori mother's relationships, is the relationship with her tamaiti with whom she is innately interconnected and shares whakapapa. Pere (1991) expounds that within te ao Māori, tamariki embody mauri, whakapapa and a connection to the whenua. Tikanga are associated with the birth of a tamaiti, particularly the values, beliefs and practices of returning the pito and whenua to the earth, karakia and the significance of a tamaiti's name/whakapapa (Steeds, 1999; Jenkins, 2011; Simmonds, 2014). Many whakataukī are premised on the birth of a tamaiti and the importance of tamariki to te ao Māori and how a tamaiti is mothered not only by her or his mother, but by their father, grandparents and whānau (Ware, 2014). The life and love of a tamaiti is shared by the whānau within the embracing unit, by the hapū and extended whānau and by the iwi whether the tamaiti was of a younger or older mother, or of a mother who was partnered or not. Whāngai (foster) is a common practice within te ao Māori and although has been translated as 'Māori adoption' or surrogacy, is far from any concept involving legal rights or constitutional laws. Whāngai is premised on the cultural understandings related to sharing the love and care of a tamaiti for the future of the tamaiti, whānau, hapū and iwi, whereby many tamariki-whāngai maintain relationships with both whānau and is a custom still practised today (Mead, 1997; McRae & Nikora, 2006).

The literature also purports the violence and neglect suffered by tamariki that is connected to cycles of abuse stemming from dysfunction of marginalised whānau within the contextual realities of historical and contemporary society (Cooper & Wharewera-Mika, 2009). Traditionally tamariki were not victims of violence but were treated with respect and love and according to reports by early explorers and colonisers, were involved in most tribal activities including meetings about political matters, were vigorous and socially active, were carried around by their fathers and well beyond the developmental stages of Pākehā children (Heuer, 1969; Jenkins, 2011). Contemporarily many tamariki are lacking the strength and protective factors of mothers and whānau as domestic violence of mothers and tamariki is endemic with a growing number displaced into refuges or beaten and dying at the hands of their partners and family (Dobbs & Eruera, 2014). Additionally, a small proportion of mothers have been identified as abusers of their tamariki, and are being abused by their tamariki (Ryan & Wilson, 2010). There needs to be more research and exploration to thwart the mistreatment and death of tamariki and Māori mothers.

The tamaiti is integral to the wellbeing of young Māori mothers and through research that is designed to provide an insight to the experiences of wellbeing, there can be better understanding of how the wellbeing of young Māori mothers and thus their tamariki can flourish, be preserved and sustained.

2.8.6 Wāhine and Tāne

It is purported that traditional Māori concepts of female and male entities are distinctive and synchronistic contributors to the wellbeing of [Māori] society, whānau and tamariki. Pere (1991) attributes both genders as essential to the vitality of each other and Barlow (1993, p.148) states that “The roles of man and woman should be complementary” where the physical and spiritual elements develop through nourishment from each other. The distinct qualities of the genders are discussed in Barlow (1993), Pere (1991) and Rimene et al. (2002) who expound emphasis on defining the differences. In doing so, the separate male and female roles are valued as exclusive and specific and through that fusion, ensure regulation and harmony. These five writers explicate that knowledge of and compliance with fulfilling the roles and rituals associated with female and male, is imperative for holistic wellbeing.

In contemporary society, the roles and importance of partners, fathers and grandfathers to the wellbeing of young Māori mothers are particularly valued and highlight the importance of positive relationships with the fathers of the tamaiti (Goodwin, 1996). Although there is a dearth of literature capturing the relationships of young Māori mothers and the father of their tamaiti, the relationships are significant to young Māori mothers who are shown to benefit from their support and care.

2.9 Young fathers

Little research had been concentrated on the role and experience of fathers and fatherhood until a dramatic increase in the 1960s and 1970s (Pattnaik, 2013), and since then literature on parenting has included the influence of both mothers and fathers in the lives of children. Occurring almost simultaneously, was the ‘epidemic’ of adolescent pregnancy, which became a visible social problem alongside increasing rates of sexual activity among teenagers and a fall in rates of teen marriage (Furstenberg et al., 1989). Much of the research regarding young fatherhood, has primarily looked at fathers of European descent, and less so on Indigenous fathers (Ball, 2009). In terms of Indigenous fathers and fatherhood, some work has been completed in Canada and Australia (Edwards & Ratima, 2014). There has been caution around the utilisation of western methodology in exploring Indigenous fathers and fatherhood, due to the overgeneralisation of fatherhood and early pregnancy for that matter, utilising a dominant and homogenous western discourse as a basis for understanding (Pihama, 2011; Edwards & Ratima, 2014).

Research has shown that the worldview, orientation and behaviour of men who are more engaged as fathers, perpetuates to their care for others outside family and into their communities; that is, men are positively influenced by their fathering experience (Snarey, 1993; Strug & Wilmore-Schaeffer 2003; World Health Organisation, 2007; Marsiglio, 2008; Daly et al., 2012). The experience of father involvement and children’s influence on fathers, was examined through 215 fathers in a Canadian participatory action research study (Daly et al., 2012). Fathers were acknowledged as belonging to subpopulations and therefore a collaborative approach was undertaken to capture the diversity. The strength of using several researchers was implemented in interviewing clusters of fathers. The clusters of fathers were identified as new, Indigenous, young, immigrant, gay, separated, divorced fathers, and fathers

of children with special needs. The results revealed that a reorientation of values and priorities, a reflection on masculinity, the fathers' relationships with others and the redefining of time, were predominantly significant. A sense of identity was a significant concomitant to these themes, similar to a New Zealand study with 12 adolescent fathers, which explored their transition to parenthood (Frewin et al., 2007). Indigenous and young fathers felt enriched, important, responsible and greater self-esteem through their fathering experience, which impacted not only family, but work and their connection to community.

A study based in Christchurch of 24 young fathers, encompassed 17 fathers who were 21 or under, where the only criterion was that a participant was to have had his first child at age 21 or earlier (Breiding-Buss et al., 2003). Demographic data was not collected as the aim was not a representative study of views and needs of young fathers, and to maintain brevity multiple-choice was used instead of open-ended questions. The questionnaire encompassed three parts, including the young man as a father, his support and background. Support and someone to talk to, getting to know men of a similar age with children and a job revealed as important, as did seeking out their fathers and the support of mothers "Mothers were often highly praised: either their own mother or the mother of the partner ("She's been brilliant")" (Breiding-Buss et al., 2003). The study surmises that there is a lost opportunity for young fathers who are highly motivated but are impeded by various obstacles. A key feature is that young fathers' experiences as a father is related to their identity and mental health, observed through their feelings of usefulness, unwantedness, and lack of encouragement, with an alarming link to suicide. Researchers proffer that to improve outcomes for young fathers, mothers and children, there must be greater emotional support, structural support, networking and education of service providers (Breiding-Buss et al., 2003).

Primarily, studies related to early childbearing have focused on young women rather than young men (Tuffin et al., 2010), as young women were perceived as more willing to participate in studies (Furstenberg et al., 1989) and had preferential knowledge. The difference in knowledge between parents derived from inferences such as a mother's non-disclosure of pregnancy to a father therefore him not knowing or experiencing being a father; the father had denied paternity; or a young woman had been discouraged in seeking paternal support by her family (Furstenberg, 1991). Another perception is that young fathers are less adversely affected

by early parenthood than young mothers (Card & Wise, 1978). Thus, the involvement and interest of a father has been potentially miscalculated, and much less is known about a young man's journey to fatherhood. Studies have varied between research either *with* young fathers (Frewin et al., 2007; Wilkes et al., 2011), or *about* young fathers collated through young mothers (Kalil et al., 2005; Futris & Schoppe-Sullivan, 2007).

An Australian study (Hammond et al., 2004) proffered two questions to 10 young Indigenous fathers aged between 16 and 19 years, and 13 personnel from Indigenous services about service provision for young Aboriginal fathers, and how young Aboriginal fathers perceive their needs and access to services. A draft report was then shared with the local Indigenous community interested in the project to facilitate discussion towards providing the best support. Foremost, young Aboriginal men of this study, wanted to be good fathers despite the huge challenge of becoming a new father, amid financial hardship and the struggle for cultural identity as an Aboriginal father. Fathers wanted to be recognised, supported and valued and non-Indigenous services faced barriers to engaging young Aboriginal fathers. An Indigenous community worker raised that there exists a dual struggle of being at once a young Indigenous man in today's society, as well as a young Indigenous father. An association is drawn between the prevailing discourse of young Māori parents in Aotearoa and other young Indigenous parents, who have been constructed as 'bad parents', neglectful and violent (Strickett & Moewaka-Barnes, 2012), that 'good parenting' is related to the natural ability of older white people (Geronimus, 2003), and that young people are made to feel inadequate as parents due to their age (Ware, 2014).

An American study about absent fathers and the ethnic differences in support for young mothers, was conducted through interviews with 719 adolescent mothers: 286 Mexican Americans, 217 African-American and 216 Caucasian in a post-partum ward within 48 hours of delivery (Wiemann et al., 2009). Reports had shown that strong emotional support from parents and partners enhanced parenting, increased self-esteem and decreased maternal stress. According to maternal reporting for the study, 75 percent of partner support was considered moderate to high, whereby low support was associated with an amalgam of: fathers' gang membership, alcohol intake, illegal activity, drug use, financial circumstances and being young. Examining race and ethnicity in accordance with adolescent mother-father relationships

highlighted differentiations in support, however, the level of support emerged through the mother's perception rather than a misdemeanour founded on the father's race, and also revealed that young fathers were much more eager to be involved than commonly considered. The variance showed that couples were sometimes of mixed ethnicity themselves, thus clarification was required to gauge whether the race-issue was related to the mother being white or the father being Mexican, or the intersection of both, for example. The length of a relationship between a mother and father prior to delivery of a baby, was a predictor of a father's level of support for adolescent mothers across all ethnicities. That is, a short relationship between parents prior to the birth of a baby commonly resulted in a limited relationship following the birth. However, the study revealed that fathers who were not part of a committed relationship with the mother prior to birth, continued to be interested and involved. The impact of the mother's family was important, and in this study Caucasian mothers' families were more likely to inhibit the involvement of the father. Communication between young fathers and mothers, as well as the mother's family and involvement of the maternal grandmother, was a key feature (Bunting & McAuley, 2004; Kalil et al., 2005; Weimann et al., 2006).

In view of the lack of recognition given to young fathers and pervasive deficit focus on young mothers, albeit most prevalent for minority and Indigenous peoples, an evolution of the dichotomised stigmatisation of young parents is of value. In the past, the dominant perception was that mothers were more naturally adept to raise children and fathers took a secondary parenting role to mothers, where strong and aggressive religious and societal prohibition kept premarital sexual activity low and marriage was the solution to unplanned pregnancy (Crawford & Furstenberg, 1985; Vinovskis, 1988; Luker, 1996); "The colonies punished bastardy with great harshness when it was discovered" (Luker, 1996, p.17). From a Eurocentric western perspective, the colonial father's role was catechism and disciplinarian, which is in contrast to the pre-colonial Māori worldview of nurturing roles, procreation and sex, and the collective responsibility of tamariki discussed in Chapter Three, Kaupapa Māori Methodology, is also evident through the observations and recordings of early settlers, and Māori oral mātauranga (Edwards & Ratima, 2011; Jenkins, Harte & Ririki, 2011; Taonui, 2011).

Over time in colonial society, religious education transferred from fathers, as more of a mother's task who became increasingly involved with not only the physical care, but the spiritual and socialisation of children (Vinovskis, 1988). Premarital sex remained sinful, shameful and rebuked in the early 19th century with a decrease in pregnancies and increase in abortion (Vinovskis, 1988). Through the second half of the 19th century, adolescence became a distinct stage of life (Vinovskis, 1988; Wilson & Huntington, 2005), and adolescents were treated differently by society reinforced by the development of juvenile institutions and homes for unwed adolescent mothers (Brumberg, 1985). Thus, the state and government became more involved in the wellbeing of the poor, fathers took less of a role in raising children, and mothers became the primary carer. Tolerance for adolescent mothers was low, illegal abortions ensued, adoption was encouraged and the negative perception towards welfare support enhanced the stigma associated with young single mothers. In time, premarital sex became more prevalent (Crawford & Furstenberg, 1985), and by the 1970s, the 'epidemic' of teenage pregnancy worried many in society, and the main concentration if not exclusive focus, glared upon young mothers (Vinovskis, 1988).

2.9.1 Young Māori Fathers

In Aotearoa prior to colonisation, tamariki were raised within whānau structures that premised collective parenting, that is, uncles, aunties and grandparents had an important role in raising tamariki, and older siblings and cousins were minders of younger tamariki (Jenkins, Harte & Ririki, 2011; Edwards & Ratima, 2014). Various early settler accounts have been collated by researchers and have demonstrated the attentive and nurturing care and involvement of early Māori fathers (Jenkins, Harte & Ririki, 2011). Taonui (2011) provides insight to a Māori worldview of tamariki and whakapapa through whakataukī as exemplars of philosophy and conduct. Within Ngāti Kahungunu, exemplary compositions are the oriori (lullabies) *Pinepine te kura* and *E tama*, and the haka (dance) *Tika Tonu*, which express the insight, challenges and vision of the future for tamariki. Espousing tamariki is embedded within the prose and gesticulation, embodied in the mātauranga of whakapapa, wairuatanga, geographical signposts, celestial and terrestrial environment, cosmology and cosmogony. Such teachings are an integral component of te ao Māori.

In a contemporary context, due to the primary focus on young women, little information, programmes or services have been designed and aimed at supporting, guiding and empowering young fathers who have been described as marginalised (Jia, 2000; Ball, 2009; Edwards & Ratima, 2011). Among men in Aotearoa, tāne Māori in general remain in a position of disadvantage (Edwards & Ratima, 2011). Although there is a small but developing pool of research regarding young fathers in Aotearoa, with a greater dearth in literature pertaining to young Māori fathers, a small insight to their experience and involvement can be considered through studies of young Māori mothers, which are Master's theses (Goodwin, 1996; Rawiri 2007; Adcock, 2016). Additionally, a literature review on Māori father involvement that encompassed relevant literature, a review of services contextualised to Aotearoa, offers historical and contemporary deliberations of young Māori fatherhood (Edwards & Ratima, 2011). Although I was unable to locate any qualitative studies specific to young Māori fathers and their involvement, experiences and wellbeing regarding early parenthood, there has been a statistical study in Christchurch New Zealand (Marie et al., 2011). The study examined the associations between ethnic identity and parenthood by age 20 among a longitudinal cohort of 1265 children born in 1977, 635 males and 630 females. The sample for the early parenthood study numbered 992 from which the results were obtained. Through a series of statistical data collation and complex testing of the data, the results linked higher rates of early parenthood among Māori, to cultural identity. The study implicated a greater cultural identity as Māori, as a risk factor of early pregnancy and parenthood, which can be linked to higher levels of perpetual inter-generational disadvantage. Cultural identity and early parenthood was then intimated to effect child health outcomes, thus supporting evidence to delay childbearing to produce healthy children and more self-sufficient adults. The study purported as being the first to report on Māori male contribution to childbearing, claimed to be contextualised to contemporary Māori revitalisation.

The literature indicates that to better appreciate and understand the experience and status of young Māori fathers, a greater research contribution must be progressed that encompasses an approach by Māori, for Māori and about Māori; that is kaupapa Māori. By kaupapa Māori, the implications of historical and contemporary realities of young Māori fathers can be appropriately and authentically considered. From my assessment of the literature young Māori fathers are in need of representation, in that their experiences have not been fairly, clearly or contextually articulated to date, whose thoughts and feelings of their experience are valuable

and important. Studies must be transparent and cautious when professing the experiences of ‘teenage pregnancy’ or ‘adolescent parents’ as inclusive of young fathers, when in fact they are representations of one story, that of mothers within the respective context and socio-political lens. Mana wahine and kaupapa Māori as a theoretical framework asserts the mana of the female and male, as discussed in Chapter Three, Kaupapa Māori Methodology, which champions a Māori worldview that values both entities in harmony, not as one subsidiary to the other. Feminism, both theory and movement as a western derivative, has strengths in its power to promote, advocate, give voice and make visible the redress of women’s rights. An understanding of young Māori fathers’ experience requires the appropriate cultural lens to be inclusive, embracing and nurturing. The current wellbeing status of young Māori men and fathers needs focus and attention as does the wellbeing of young Māori women and mothers, for their future and the future of te ao Māori. More exploration of their experiences is indicated through this review, as imperative.

2.10 The Essence of Māori Women’s Significance

The vitality of Māori women has been explicated in contemporary literature such as Tomlins-Jahnke (1997a), Hutchings (2002), Mikaere (1994), Simmonds (2011, 2014), Murphy (2011, 2012, 2014) and Gabel (2013), who take great measures to impart the reverence of wāhine Māori through critical elements of childbearing, motherhood, womanhood and whakapapa. A key component of the reverence and reclamation of power of wāhine Māori, has been the exploration of menstruation and the interconnection with whakapapa, that being creation of life and observance of death. Colonisation impacted adversely on the brilliance and mysticism of wāhine Māori through the denigration of menstruation to something loathed and unclean, that women should be ashamed of and conceal (Lauver, 2000; August, 2005). Ideas of uncleanness behind the belief that menstruation would foul certain areas were greatly misconstrued (August, 2005; Murphy 2014), and took away the true meaning behind “cultural codes of conduct” (Murphy, 2011, p.89) that were based on sacredness where menstrual blood was seen as a conduit of ancestors and descendants (Murphy, 2014). Through this uniquely female event, scholars have proffered important insights into vital concepts of female power according to a Māori worldview.

Traditionally, Māori greeted and acknowledged menstruation as a treasure symbolising the link between birth and death, perpetually life. A powerful example of female capability and influence in whakapapa is explored through Murphy's (2014) writings that discuss the separation of Ranginui and Papatūānuku. Separating the Sky Father from the Earth Mother was an extraordinary and almost insurmountable task that did not manifest of its own accord nor by a lone male force as popularly retold. The event was made possible for Tāne, son of Ranginui and Papatūānuku, through the medium of his mother's menstrual tide (Murphy, 2014).

Papatūānuku is hailed as an Atua (God) in her own right and not just the inferior appendage to a male entity of creation. In Murphy's (2011) research, Papatūānuku is celebrated as the impetus for humanity reflecting the tremendous power of women. In the past, menstruation was referred to by Māori in auspicious terms such as 'Atua' or 'kura' (red medium signifying power or force), a symbol to demonstrate a higher celestial connection. However, today it has more generic western connotations or in Māori terms is sometimes referred to as 'mate' meaning death, sickness or illness and occasionally rearticulated as 'I have my mate' (English term), conveying the notion one has a companion. Other significant female entities discussed throughout literature include Hineahuone, Hinetitama, Hinenuitepō and Hinateiwaiwa who all possessed their own power and influence over life.

In recognition of the vitality in female power, wāhine Māori are portrayed as a medium between two worlds that span whakapapa and connect humanity to the divine. Menstruation once regarded as a potent symbol of female power was reduced to something vile and loathsome through cultural redefinition (Murphy, 2011, 2012, 2014). Defiling the power of Māori women has been caused in part by colonialism and Christian indoctrination by placing women in an inferior and reticent position to their male and non-Māori counterparts, which denounces the power and significance of Māori women's reproductive bodies as the sacred house of humanity (Murphy, 2011). Therefore, through examining whakapapa, the female entity is both honoured and noted for its traditional and current status. Menstruation or the powerful medium derived from sacred origins, is an important part of the essence and power of wāhine Māori, and through the developing literature of wāhine Māori, is being restored as vital to the wellbeing wāhine Māori.

2.11 Wairua

Māori health experiences in mainstream are explored through several studies, which argue that the predominant focus on the biomedical model and lack of holistic approach, fails to maximise the wellbeing of Māori (Durie, 2004a, 2004b). At a primary level, Māori do not see themselves or their beliefs reflected in these approaches. In a study that looked at barriers to positive breastfeeding outcomes experienced by Māori women and their whānau, the participants identified that resources that reflected their own belief systems principally “Māori philosophies of well-being, particularly including a spiritual dimension” (Glover et al., 2009, p.314) were missing.

Although vital to wellbeing, wairuatanga can be difficult to define in a western sense. Māori spirituality has been commonly described through literature as symbolic and not real therefore requiring verification, while scientific knowledge is bestowed credibility (Simmonds, 2011). Wairua is described as the energy needed for growth, development and maturity (Barlow, 1993) and the balance of positive and negative, that influences one’s relationships with others and the environment (Pere, 1991). Wairua reinforces the connections and relationships, and as Pere (1991) asserts, exists as a balance and integration of elements. Wairua is described as the flow that runs through one’s being, to and from inconceivable depths (Ngahiwi Tomoana, 2017).

Wairua connects women to the past, present and future and is recognised as a dual force (Barlow, 1993; Pere, 2003; Simmonds, 2011) where “The spiritual reality of Māori women cannot be separated from physical reality” (Hutchings, 2002, p.51). Therefore, wairuatanga is an important part of the vitality of mana wahine that regulates with other essential components in life to attain equalisation. In ways dissimilar to a feminist discourse, mana wahine is vitally linked to other power - mana tāne (male force), mana whenua (land force) and mana atua (higher force) where “Mana wahine is not anti-Māori or anti-Māori men” (Simmonds, 2011, p.13) nor is it exploration for an oppressive matriarchal alternative. Through a spiritual connectedness, mana wahine interplays to maintain harmony and balance; a greater good where wairua is an aspect identified as important to the wellbeing of whānau, hapū and iwi (McGavok et al., 2012).

2.12 Mana Wahine

Māori researchers have utilised mana wahine as theory and a methodology for their studies and in the last 30 years, there have been key contributors to the discourse and literature that expounds the significance of mana wahine, such as Rose Pere (1988, 1991), Ngahuia Te Awekotuku (1989, 1991, 1992), Kathie Irwin (1990, 1992), Linda Tuhiwai Smith (1992, 1998, 1999), Ripeka Evans (1994), Ani Mikaere (1994), Leonie Pihama (2001), Wikitoria August (2004, 2005), Katarina Gray (2006) and Naomi Simmonds (2011, 2014).

Mana wahine can be interpreted as “Māori women’s mana” (Gray, 2006, p.26) inferring Māori women have an innate strength that encompasses authority, dignity and power (Johnston & Waitere, 2009). Gray (2006, p.27) states that all wāhine Māori including young Māori women have an “innate power” inherited through whakapapa and strengthened by action (Kupenga, Rata & Nepe, 1993); a key principle of Māori society. Throughout history, Māori have had strong powerful female leaders (Gray 2006; Moewaka-Barnes et al., 2013) demonstrating that as well as being a key factor in a united collective, wāhine Māori were able to act independently of men. Mana wahine is about the power, autonomy and independence of wāhine Māori (Tomlins-Jahnke, 1997a) to resist, challenge and transform isolating spaces within systems of domination that “enables the exploration of diverse Māori realities from a position of power rather than having to talk or write ‘back’” (Simmonds, 2011, p.11).

Māori epistemologies that encompass the mana of the female entity in relation to the greater Māori worldview of whakapapa and whenua provides rationale that the power of wāhine Māori transcends the disruptions of wāhine Māori discourse. The significance of the female principle is reinforced by the narratives that underpin a Māori worldview of creation, sustainability and endurance. From creation, the female aspect of te ao Māori has embodied venerable attributes of power, prestige, leadership, sacrifice, diplomacy, selflessness, knowledge, resource, fierceness, beauty and benevolence as a mother, grandmother, daughter, sister, nurturer, healer, leader, warrior, seer, strategist, politician, partner and lover. These archetypes are reflected in Māori allegories, epistemologies and narratives of critical female entities who are among the many significant and influential female deities of te ao Māori, such as Papatūānuku, Hineahuone, Hinetitama, Hinenuitepo, Mahuika (Morgan-Kohu & Rakuraku, 2003; Murphy, 2014) and Murirangawhenua (Morgan-Kohu & Rakuraku, 2003).

Through a Māori worldview of tribal epistemologies, cosmological and whakapapa narratives, symbolism, the interrelationship of female and male principality, the cohesion and interdependence of complementary forces is described. Traditionally, the role and value of wāhine Māori was not diminished to the role and value of tāne Māori, but had a complementary and autonomous place, space and honour inherent to the mana weaved through the fabric of te ao Māori. A mana wahine discourse revitalises the power and prestige of wāhine Māori to assert and express their freedom domestically, tribally, politically, nationally, Indigenously and beyond, over their minds, bodies, emotions, spirits, lands, preferences and aspirations. Deities were archetypes for women and men whereby their mana and dominion, influenced all people; not carved up, categorised or fragmented by gender, sexuality or social status. Wāhine Māori have personified astute politicians and fierce warriors, as tāne Māori also personified gentle nurturers and prolific healers.

Tribalism and not feminism has been premised as the right pathway for native women to proceed and to resist an inference that native women should move ‘beyond’ their culture to be ‘liberated’ like white middle-class feminists when native women assert “What we need to be is more, not less Indian” (Jaimes, 1992, p.332). African American women have also resisted feminism where women’s privilege and women’s rights excludes, ignores, downplays or dismisses race in its analyses (Moraga, 1979; hooks, 1984); signifying a greater consciousness by oppressed women such as women of indigeneity and colour, of gender and ethnic marginalisation. Customarily and historically, Indigenous, Māori, Aboriginal, Native American and Pueblo societies share analogous notions around the complementary roles of women and men, procreation and autonomous but intertwining bodies of knowledge (Te Awekotuku, 1991; Tomlins-Jahnke, 1997a; Smith, 2006, 2012).

Mana wahine provides a framework for wāhine Māori to make sense of and interpret the many realities of wāhine Māori today underpinned by the elemental and customary understandings and mātauranga of te ao Māori. Kaupapa Māori has paved the way in creating the space and directive for ways of being, doing and thinking Māori to be framed and ‘normal’ in critically considering the experiences and realities of whānau, hapū and iwi. It is vital that in its intent or in defining parameters, mana wahine does not further marginalise or exclude those it wishes to represent (Simmonds, 2011) whereby the realities of wāhine Māori are acknowledged and

considered as complex, diverse and distinct. Wāhine Māori have conventionally been framed or considered as the ‘other’ in relation to Pākehā and Pākehā women, and not other wāhine Māori, so care with power relations produced by privileging and silencing ‘voice’ is critical (Simmonds, 2011). Mana wahine allows wāhine Māori to assume control and recognition over their understanding of themselves within and outside of te ao Māori including whānau, hapū, iwi, marae and other contexts. Kaupapa Māori and mana wahine theoretical developments create space for Māori endeavours, and thus opportunities for wāhine Māori to reconceptualise the realities and articulations of their lived experiences. Such distinctive spaces are significant in that they embrace the meaning of mātauranga surrounding cosmological narratives and customary society, with understanding contemporary realities.

2.13 A Māori Worldview - The Origins of Mātauranga Māori

According to a Māori worldview each tamaiti enters this world imbued with wairua and a birth right to be supported and realise their potential (Williams et al., 2015). The notion that a tamaiti encapsulates the essential elements to inspire the prospects of the future is embedded in the epistemological tenets of Māori cultural values, beliefs and practices (Pere, 1997; Edwards, 2003; Mead, 2003; Williams et al., 2015). Mātauranga Māori derives from cosmogonological and cosmological origins tied in with the Māori worldview of creation (Henare, 2001; Royal, 2009, 2012; Graham, 2010). For Māori, the genesis of the world and humanity began with the creation of the universe and thus ensued the stages through to the present day. A whakapapa of evolution to the present can be traced and the transmission of this particular mātauranga was both sacred and essential to the existence of whānau, hapū and iwi. Linear and overlapping stages within whakapapa connected to vital narratives that aided as marker posts to critical developments in the progression of Māori (Graham, 2009; Royal, 2009, 2012).

2.13.1 Creation

In accordance with a Māori worldview whilst acknowledging diverse tribal histories, Io Matua is the supreme-being with whom the universe was conceived. Stages perceived as nothingness, darkness and enlightenment pervaded “‘i te kore, ki te pō, ki te ao mārama’ translated as ‘out of the nothingness, into the night, into the world of light’” (Henare in Grim, 2001, p.198). It is from these creative activities that the origin of Māori thought activated, being the foundation of knowledge and cultural customs (Graham, 2009) and from “Io the parentless one, Io the

infinite one, Io the pinnacle of heaven” (Royal, 1992, p.10), Papatūānuku and Ranginui originated. These elemental phases of life and creation are vital to the shaping and forming of te ao Māori and posits that the interconnected mātauranga supports and nourishes a Māori sense of being, knowing and doing.

Papatūānuku and Ranginui lived in an interlocked existence whereby their tight embrace cultivated their love for each other but constricted and precluded their tamariki from a world of light and increase “the close embrace of this primeval pair, shut out the light. During the darkness, they begat many children, known as the departmental gods of nature” (Williams et al., 2015, p.65). The task to separate the pair fell to their son Tāne who placed his shoulders upon his mother and with his feet pushed his father upwards severing the connecting sinews that bound Papatūānuku and Ranginui. Light and air filled the space and transformed the environment and the relationships between the parents and siblings. Where some siblings rejoiced the new world, others lamented and were angered.

From the realm of nothing where potential was concealed, into the darkness, a concept was conceived to procreate life through human kind. It was Tāne again who led this task being advised by Papatūānuku to take the uha – femininity, or kurawaka - birth place of humanity in relation to menstruation (Murphy, 2011) of his mother to give essence to the first human formed; a woman (Durie, A., 1997; Gabel, 2013; Murphy, 2014). Papatūānuku conveyed to Tāne and his siblings where to seek the kurawaka, and it was here that “(He) discovered the elusive material capable of materialising his procreative longing, ushering in humanity” (Murphy, 2011, p.72).

Tāne’s siblings contributed to the inanimate physical nature of the woman entity who by Tāne was imparted the breath of life. These activities, including the implanting of thoughts and the living spirit, were done so by Atua or rather Ira Atua (divine essence); and thus, a union between the divine and the human aspect was achieved “For the first time, the two principals combine, te ira atua with te ira tangata” (Durie, A., 1997, p.146). This formed the basis that from a Māori perspective, the spiritual is not separate from the material and natural, and that “A balanced state enhances individual wellbeing” (Durie, A., 1997, p.146).

The female entity Hineahuone or Hinehauone was created and with Tāne procreated, and Hinetitama was born. Tāne also procreated with Hinetitama to further progress whakapapa and the development of te ao Māori, and following this Hinetitama transformed to Hine-nui-te-pō, the powerful goddess of the underworld, “When Hinetitama realised that her father was also her husband she withdrew from Te Ao Marama to the underworld of Rarohenga (world of night) and became Hine-nui-te-pō guardian and protector of the spiritual welfare of the deceased” (Tomlins-Jahnke, 1997a, p.31). The message of this narrative through the consequent transformation of Hinetitama demonstrates a woman being dually powerless and powerful (Jenkins, 1992; Tomlins-Jahnke, 1997a; Mikaere, 2003; Murphy, 2014) relating to the violation and her “autonomy, strength and courage to determine her perpetual and irrevocable self-exile and inevitably to gain the most powerful position of all, that over the mortality of mankind” (Tomlins-Jahnke, 1997a, p.31). It also speaks of the love and capacity of Hinetitama to bring life to the world and then await the return of her children in death. From a Māori worldview, encrypted in these narratives are the constructs to validate and guide a Māori way of being, knowing and doing with inference to the balance of physical and spiritual matters.

Within te ao Māori, no significant development occurred without legitimate purpose or connectivity to a greater determination which can be further understood through exploring the codes of the creation narratives. Messages implanted in mythology and cosmological narratives provided cultural templates that are reflected and valid in present and past practices and beliefs (Walker, 1978). From these primary phases of origin and creation, the lores and laws, customs and protocols of which Māori abided to were handed down through whakapapa and a connection to whenua. Notions around tapu (sacred, restricted) and noa (free from the extensions of tapu, unrestricted) and the related incantations, guided sanctioned and restricted conduct to protect the integrity of te ao Māori. The protective jurisdiction of tikanga as distinctive Māori ways of doing and of Māori cultural behaviour (Gallagher, 2008; Royal, 2012; Gemmell, 2013) gave effect to and impacted every facet of Māori life from community functionality, to bugs, birds and creatures, to river beds, ocean tides, seasonal changes, forest fauna and flora, planting and harvesting. Tikanga was essential and regulated thought, behaviour and the environment with the fundamental purpose of ensuring procreation (Mead, 2003; Royal 2012; Smith, 2015; Williams, Carroll-Lind & Smith, 2015). In Barlow’s (1993) ‘Tikanga Whakaaro’, Pā Henare Tate precluded the work by imparting that tikanga is “the sacred

customs of our people regarding important social functions like tangihanga, hura kōhatu and kawē mate...our cultural heritage and the meanings of the karanga and poroporoaki, the meanings of tapu, mana, mauri, ihi and wehi; and above all the sacred value and purpose of the individual person in the scheme of life” (p.xi).

Each creation whether animate or inanimate had mauri, and through a balance of sanctifying and neutralising rituals the integrity of all substance was maintained (Personal communication Smith, 2015). Mauri is described by Barlow (1993, p.83) as a power possessed by Io providing the conditions and limits to existence and “When a person is born, the gods bind the two parts of the body and spirit of his being together. Only the mauri or power of Io can join them together”. Pere (1991) asserts mauri as an abstract and important concept afforded to everything instilling respect and appreciation. A stone for example, although not ‘moving and breathing’ came from Papatūānuku and had mauri. Through form, shape, matter and thus essence, a pebble stone or rock had value within te ao Māori contributing to the make-up of the environment. A hāngi (earth oven) stone was not just a stone, it was form and shape that could be heated to high temperatures and not break, providing sustenance and kai that can be reused and carried around to feed families. “A rock...like the human gene, is very much a living entity, a holder, a vessel and guardian of mauri...Māori refer to the ‘mauri factor’, the life force, the spiritual connection between heritage and a place, site or object” (Mead, 1997, p.129).

Tamariki were intrinsic to the interplay of physical and metaphysical forces that influenced progress and life. The importance of their existence is encapsulated in Pere’s (1993) assertion of tamariki being divine and of chiefly status and Barlow’s (1993, p.147) “the child is imbued with power from the gods in the form of a mauri which gives him or her the power of life and determines his or her unique characteristics”. Whānau cherished tamariki (Edwards, 2003; Jenkins, Harte & Ririki, 2011) whereby special ceremonies marked the birth and initial life events, babies were sung oriori alluding to their tribal history and destiny, physical punishment was dissuaded and tamariki were primed for particular roles (Heuer, 1969; Jenkins, Harte & Ririki, 2011). “Affection shown towards children was commented upon by many observers, although the evidence for this was distorted, particularly by missionaries, to suggest over-indulgence and a lack of discipline” (Heuer, 1969, p.11) where doting was common from both women and men; mother and father or otherwise. Childbirth was deemed dangerous and life-

threatening for baby and mother and rituals were in place to move mother, baby and participants between tapu and noa states (Heuer, 1969; Edwards, 2003; Jenkins, Harte & Ririki, 2011). Life for Māori pre-European contact was fragile relative to an epidemiology of diseases connected with old age and lifestyle, with a life expectancy of about 28 to 30 years old (Pool, 2017). However, life expectancy further declined and the Māori population drastically reduced post-European contact with the introduction of foreign communicable diseases, muskets and the loss of land. Critically, the morbidity and mortality of tamariki Māori was greatly compromised whereby “significantly fewer Māori girls survived to childbearing age, limiting future population growth” (Pool, 2017), thus threatening the fundamental impetus of a Māori worldview; to procreate.

An equilibrium of life forces maintained wellbeing within the balance of male and female roles and positions, the spiritual and physical, tikanga, tapu and noa beliefs and practices (Metge, 1976; Ruwhiu, 2009). Women were seen as quintessential to wellbeing and life being encapsulated by the term ‘whare tangata’ (house of humanity) (Pere, 1982, 1990; Barlow, 1993; Tomlins-Jahnke, 1997a; Ruwhiu, 2009, Mikaere, 2011; Gemmell, 2013; Murphy, 2014). The transmission of whakapapa and whenua was not lost on women’s lines of succession whereby women in union with men, maintained their status, their names and their lands (Pere, 1988; Kupenga, Rata & Nepe, 1993). Men contributed to the ‘mothering’ of tamariki and grandparents had a great influence (Heuer, 1969; Te Awekotuku, 1991; Jenkins, Harte & Ririki, 2011; Gemmell, 2013).

Narratives of creation, which derived from a Māori worldview of inception, were integral to forming the templates of socialisation and regeneration as part of a body of knowledge unique and familial to Māori. Mātauranga, that had its origins in Polynesia (Royal, 2012), was a knowledge perceived, constructed and transmitted from within and according to a māori/Māori worldview. Pan-tribally, common fundamental epistemological understandings were shared about origin and creation (Edwards, 2011) while encompassing notable similarities and differences (Graham, 2009). For instance, Māori shared a mutual whakapapa that is then distinctively tribal and also an Indigenous language that diversified iwi to iwi through dialectal differences.

Māori as a collective of tribes were not homogenous but enjoyed and flourished through stratifications of familial mātauranga, cognisance and diversity “A rich and complex diversity of tribal traditions emerged to form a fabric across the country” (Royal, 1992, p.13). Tribal particularities encapsulated mātauranga-a-iwi (tribal knowledge) and tikanga-a-iwi (tribal customs) signifying the mana and rangatiratanga of iwi to determine their kawa (protocols), policies, positions and aspirations based on their whakapapa and geographical localities “There is no Māoridom without the tribes” (Parata, 1995, p.38). Hence the transfer of mātauranga Māori, of mātauranga-a-iwi, of Māori ways of being, of knowing and of doing were intrinsic to the survival and wellbeing of te ao Māori. Tribal diversity represented strength and unity.

Commonalities and diversity are observed through pūrākau (stories) and te reo Māori where oral traditions and language is variable or shared from iwi to iwi. Stories are related or differ; dialect or sound is consistent or varied. Therefore, a collective Māori ontological, epistemological or methodological perspective cannot be assumed, expected or referenced as sourced from a mono-tribal base, but is indeed a collection of cultural values, beliefs and practices based on fundamental elemental cultural notions. From a distinctively cultural and tribal perspective, these notions are unique to a Māori worldview but there are similarities evidenced by the many congruent creation narratives across the Pacific and to other Indigenous and ancient cultures with shared philosophies of creation mythology (Durie, A., 1997).

2.13.2 Mātauranga Māori

“Mātauranga Māori is a modern phrase used to refer to a body or a continuum of knowledge with Polynesian origins” (Royal, 2012, p.33) that has grown within Aotearoa to embody further knowledge generated up and into the present day. Mātauranga Māori is the most commonly utilised phrase to communicate Māori knowledge (Mead, 2003), which includes comprehension, understanding and perception of everything that is tangible, intangible, visible and non-visible in the universe, wisdom, the transfer and storage of knowledge, the present, historical, local and traditional knowledge from an Indigenous perspective. It encompasses the unique way in which Māori view the world, what is perceived as reality and what is considered “actual, probable, possible and impossible” (Marsden, 2003, p.6).

Mātauranga on its own broadly infers ‘knowledge’ without implying particular types of knowledge, however, in today’s use, mātauranga is commonly assumed to mean ‘mātauranga Māori’ as it takes on a more prominent presence particularly in education and research paradigms. Royal (2012) purports that the term ‘Māori’ is a modern term to label the original inhabitants, be it aboriginal or Indigenous, of Aotearoa whereby ‘māori’ in its formative use had a deeper, richer meaning which expounded ideas of normal, natural, transparent and providing clarity. Therefore, ‘Māori’ as a frame for mātauranga may not always suggest an ethnic basis. Mātauranga has allusions to a biblical knowledge from the facilitation and initiation stages of literacy and education on Māori around the 19th and early 20th centuries (Royal, 2012). The meaning of mātauranga is also captured by tribal renditions, such as pūrākau, relating to a powerful and implicit cultural quality associated with the origins of te ao Māori and work of atua.

Mātauranga Māori incorporates the knowledge of Māori ancestors, traditional and present Māori understandings and perspectives, informed by a Māori worldview of creation. Māori ancestors developed ways of understanding and capturing the knowledge obtained from Te Taiao (environment) whereby oral delivery and transference was the primary mode of sharing and sustaining knowledge. These were often codified or encrypted within systems such as pūrākau, mōteatea (chants/poems), waiata (songs), whaikōrero (oratory/speechmaking), maramataka (calendars/almanacs), whakataukī, pepeha, whakapapa (Lee, 2005, 2009), karakia, pakiwaitara (stories) (Royal, 1992), oriori (Durie, A., 1997), haka, and then through whare tupuna (meeting houses) (Smith, 2011) and the arts. Each method had styles, techniques and complexities that characterised its form.

A Māori way of being, knowing and doing comes from and enriches in reciprocity a Māori worldview founded on fundamental, cosmological and traditional notions, keeping te ao Māori alive. The transmission of mātauranga underwent major disruption and change over time particularly with the arrival of missionaries, traders and settlers. Despite the major social incursion of colonisation for Māori which wrought to alter Māori society through “religion, warfare, legislation and education policy and in doing so alienated Māori from whenua (land) and te reo (language)” (Cram & Pitama, 1998, p.130), a Māori worldview has endured. Whilst the inevitability of colonisation was not a matter of if, but of when (Durie, 2003), mātauranga

had become endangered by the impact of European arrival in the 18th, 19th and 20th centuries (Royal, 2009) and the effects disrupted Māori knowledge. The antithesis however, is mātauranga Māori has not only withstood the assault, but opposed its demise and through advancement and reclamation has been enhanced by the experience of the creation of the nation New Zealand (Royal, 2009).

Mā te whakaatu, ka mōhio
Mā te mōhio, ka marama
Mā te marama, ka mātau
Mā te mātau, ka ora.
By discussion cometh understanding
By understanding cometh light
By light cometh wisdom
By wisdom cometh life everlasting.
(Pā Henare Tate in Barlow, 1993, p.ix-xi)

2.13.3 Whakapapa

“Whakapapa is the basis for the organisation of knowledge” (Barlow, 1993, p.173) in regards to creation and development, and everything has whakapapa including birds, trees, mountains, soil, water and people. Mātauranga Māori is perpetuated by generational dissemination and transmission through genealogical layers (Barlow, 1993) revered by Māori as whakapapa.

Whakapapa is about identity – knowing who you are, where you are from and where you belong. People’s ancestral connections are however, part of a much broader scheme of relationships. In the Māori world view, all things are related – people, the natural environment and animate and inanimate objects – and whakapapa is a genealogical reference system for this interconnectedness. (Smith, 2011, p.46)

From a Māori worldview, “Whakapapa is the generational descent of all living things from the gods to the present time” (Barlow, 1993, p.173). Tracing a connection to ancestors is a spiritual journey as it is a genealogical path from Io Matua the supreme being (Royal, 1992) of a cosmogonic genesis, who created two primal parents being Papatūānuku and Ranginui from which everything stems; therefore, Māori and all things are connected (Roberts, 2013). Barlow (1993, p.173) alludes to the creation sequence through “the genealogy of Māori” and adds to this a fourth, the genealogy of canoes, which arrived at Aotearoa from Hawaiki.

Whakapapa speaks to whānau, hapū and iwi that with every generation and era there is a historical portrayal through time, place, events and space. Within these layers the tribal dynamics born from tribal understandings, experiences, lore, spiritual beliefs and protocols (Cram & Pitama, 1998) posit that whakapapa is a prized form and transmitter of knowledge and great effort is taken to preserve it (Barlow, 1993). Royal (1992, p.9) asserts “There is no such thing as Māori history, only tribal history. Tribes are complexes of families. Therefore, tribal history is family history” hence the intimate connection of whānau to their whenua and tribal narratives.

Despite the essential value of whakapapa to identity, wellbeing and belonging, Māori have been depleted of their resources spiritually, culturally and fiscally and thus disconnected from te ao Māori on varying levels. Durie (1998, 2003) proclaimed that results from the study Te Hoe Nuku Roa demonstrated access to such resources of te ao Māori as key to wellbeing, identity and cultural confidence. However, alongside a lack or loss of access to land, to language and to marae, only about a quarter of whānau / participants held even “minimal knowledge about whakapapa or tribal history” (Durie, 2003, p.69). Fortunately, the study showed many had high aspirations to connect with te ao Māori and placed high importance to being Māori. To counter the effects of alienation and disenfranchisement to a secure identity, there have been many initiatives and research to support whānau, hapū and iwi aspirations including enterprises such as Te Haupapa by Royal (1992), which seeks to support whānau to re-engage with their tribal history and valuable whakapapa connections.

Through a broader application, whakapapa is organisation and structure, which scaffolds the progression of te ao Māori. Graham (2009) utilises whakapapa as a methodology to explicate a Māori way of ‘doing’ research based on Māori epistemology, a Māori worldview, mātauranga Māori, a Māori lens and Māori ways of knowing and being. The impetus for propositioning and developing this approach was inherently related to the fact that the subject of the study had a rich and profound whakapapa. In designing a methodological approach that was of best fit and also expanding and contributing to the Māori research scholarship, a whakapapa methodological approach was proffered. The application of an Indigenous and distinctively Māori concept to explicate meaningful outcomes ‘by Māori, about Māori, for Māori’ from

within a traditional western research academy, legitimises and evidences the growing attribution of a Māori approach to research.

With respect to and acknowledgment of the important tribal distinctions, it would be optimal and imperative to conduct tribally distinct research. However, for this thesis and in making a significant contribution to the failing of health in the greater Māori population, a more inclusive approach was made. 'Māori' as a term to apply to the collective tribes is useful in that it represents the Indigenous people and their descendants of Aotearoa (Durie, 1998). It does not disregard in any way the unique tribal characteristics, histories or perspectives, but gathers those shared relational notions to be drawn upon of the original people of Aotearoa, and explored in a way to advance collective Māori aspirations.

2.14 Summary

In this chapter I have examined literature that encompassed subtexts involving young Māori mothers, such as, wāhine Māori and wellbeing from a Māori worldview, and a broader exploration encompassing other young mothers, particularly Indigenous mothers and mothers of other minority groups.

In terms of wellbeing, there is a wealth of information from a western perspective and the various streams as research advances to new areas. Wellbeing was posited as being generally indefinable although attempts have been made to describe or measure wellbeing. Wellbeing is an individual concept, experience and interpretation based on the many contemporary and historical factors that impact on an individual's or group's collective lives. The wellbeing of people is better understood from their own perspective through their own experiences and cannot be homogenised to a given social or cultural context.

In other literature, Māori were often featured as a comparative group experiencing less good health and wellbeing and propagating intergenerational societal problems of teenage pregnancy and early motherhood. Young Māori mothers were viewed as problematic and deficient, and stereotyped into categories of disfavoured mothers. A negative perception of young Māori mothers and early Māori motherhood has been shown as misplaced due to the persistent

disadvantages already faced by young Māori women, including disparities experienced due to ethnic background. The historical demise of wāhine Māori and mothers has continued through the psyche of contemporary society and maintained the deficit theorising of young Māori mothers and early Māori motherhood. Colonisation and patriarchal authority has placed young Māori mothers in a deficit position in a society that values compliance to social norms and expects conformance to mainstream beliefs. Young Māori mothers are faced with many disadvantages and barriers to quality care, and public perception compounds their experience.

The literature that includes young Indigenous mothers, shares commonalities where identity has been damaged and in some cases wiped out, and many young mothers face great adversity. Through both Māori and Indigenous literature, young mothers have shown tenacity and perseverance and although not all outcomes have been positive, young mothers show a high level of commitment to motherhood and the wellbeing of their tamariki.

The basis of mātauranga Māori is located in a Māori worldview of creation, and the literature clearly explicates the foundations of epistemological understandings that impact on how Māori perceive the world. It is from mātauranga Māori that notions of the world and how we fit within it are expounded, and the underlying tenets from which kaupapa Māori methodology derives.

Chapter 3: Kaupapa Māori Methodology

3.1 Introduction

There is a diverse and complex array of methodology that is used to undertake qualitative research, in that it is imperative that the methodology aligns with the questions and aims of the research. Qualitative research has a long history and many Māori scholars have engaged with various qualitative methodologies to achieve and address the requirements of research with Māori, particularly in light of historical injustices of research ‘done to’ Māori and that of Indigenous people (Kovach, 2012; Smith, 2012). Methodologies of choice for Māori scholars have included phenomenology, critical theory, and grounded theory, whereby it is from these ways of ‘doing’ research that Māori scholars have explored, theorised, developed and enhanced Māori approaches to undertaking research. What has been signified as critical to determining methodology, are the underlying language and knowledge systems that are bound to whom the research is done for, by and about. Qualitative research offers space for Indigenous ways of undertaking research, whereby the knowledge, customs, values and beliefs that underpin a Māori worldview for instance, have been harnessed and further developed within a kaupapa Māori methodological approach, that has grown from the auspices of the qualitative research paradigm.

3.2 Kaupapa Māori

A seamless definition of what ‘kaupapa Māori’ is, can be difficult to construct in that it has been used to describe theory, praxis, methodology and research ethics (Mahuika, 2008) and used throughout various contexts with differing purpose. The fear is also about diminishing a distinctively Indigenous notion and all the significant variables by assigning a prescribed meaning to what is ‘kaupapa Māori’ that has derived from Māori concepts, views and values. Pihama (2010) states that kaupapa Māori is based on mātauranga Māori; that of Māori knowledge and experience, and emerges out of Māori ways of thinking, being and doing.

Intention, aspiration, purpose, values, principles and ‘a plan of action’ is encapsulated by the notion of kaupapa Māori, and although overlapping with mātauranga Māori is not synonymous (Smith, 2003; Royal, 2012). As discussed, mātauranga is a body of knowledge not originally conceptualised as a specifically ‘Māori’ knowledge, but in claiming and distinguishing a knowledge base inherent to Māori is referred to as such today. Kaupapa Māori is a term that is

used broadly in education, health, on the marae and other settings that have political connotations. The action is by and large created by Māori reflecting Māori beliefs, values and perspectives such as the phrase ‘by Māori, about Māori, for Māori’. Tikanga Māori as distinctive and unique Māori customs and behaviours gives expression to kaupapa Māori and makes it tangible distinguishing a ‘Māori way’ from a ‘non-Māori way’.

Kaupapa Māori is also about whose values, plans and knowledge is privileged in the undertaking, elucidated by the notion to “make space for activities and enterprises initiated and controlled by Māori” (Royal, 2012, p.31). By kaupapa Māori, the values and principles that stem from mātauranga Māori emerge and create opportunity and mandate of a Māori approach, centring Māori epistemological understandings of the world within the realm of research (Lee, 2005). This is both challenging and empowering in terms of impelling space for Māori liberty and authority against the privileging of western knowledge as dominant, solely legitimate and by which all ‘other’ knowledge is arbitrated.

For Māori, it is contentious yet invigorating territory as Smith (2003) describes, is a battle to be won on two fronts, one with colonisers and one with Māori as the oppressed. On one front, there is the reproach of colonising ideologies that maintain Māori marginalised and oppressed, and on the other front are the distractions and self-abuse by Māori themselves that perpetuates subjugation through subscription to colonising hegemonic ideologies. Hegemony is described (Smith, 2003, p.3) as the acceding of a dominant group’s thinking and ideas uncritically and as common-sense, which contributes to a colonised group’s oppression where “It is the ultimate way to colonise a people; you have the colonised colonising themselves!” Asserting voice, knowledge and space are fundamental to tino rangatiratanga, which is recognised as a premise for kaupapa Māori.

Tino rangatiratanga as the self-determining, autonomous factor to identity assertion is additionally the contemporary political catch-cry for many Māori seeking absolution towards greater authority and control. Māori academics have posited that in achieving tino rangatiratanga, Indigenous peoples must “critically conscientize” (Smith, 2003, p.3) themselves about determining their needs and aspirations and what is a preferred state, to countering the dominant hegemonic stronghold. Further to this is the shift of uncritically

adopting and applying hegemonic ideas and thinking, to the facility of imagining a reality free of the oppressor (Smith, 2003). Decolonisation has been pivotal to the thinking, rebuffing and pushing back of colonising effects (Smith, 2012) to a notion of conscientisation that takes the coloniser out of the equation and promotes the rise of the oppressed.

Thus, kaupapa Māori is also about the Treaty of Waitangi signed in 1840 by representatives of Queen Victoria (the crown) and over 500 Māori leaders representing their respective tribes. Māori as the Indigenous people, arrived from Polynesia to Aotearoa over 1000 years before, and the first European had arrived in the late 1700s. For Māori, the treaty was expected to bring partnership in the new colony however, the intentions are still disputed whereby a British government was firmly established (Walker et al., 2006) and little mutual collaboration has been evident in regards to Māori loss of land, language, cultural connection and social, economic, education and health status. In the undertakings to paternalise and civilise Māori through Christianity, patriarchy, assimilation and oppression much has been destroyed and lost. “Today, in spite of political and public policy rhetoric that Māori have equal political, cultural and linguistic rights, they have remained disproportionately poor, sick and disadvantaged in all areas of New Zealand society” (Walker et al., 2006, p.332). Thereby kaupapa Māori emerged, amongst other influences but in terms of research, through a greater commitment to the intentions of the Treaty of Waitangi by greater collaboration with Māori in development and decision-making, greater protection of Māori interests and outcomes and increased inclusion and control by participants (Graham, 2009).

In terms of research and the research academy, kaupapa Māori has gained great footing and momentum particularly since the 1980s and 1990s with many rangatira and academics, women and men, contributing to the kaupapa Māori movement and scholarship advancing a ‘Māori voice’ within the research paradigm. The emancipatory and liberating progress of kaupapa Māori within the academy has gained from and contributed to the Indigenous scholarship whereby synergies of Indigenous worldview and aspiration but also oppression and experience of colonisation, is analogous. However, caution is erred that the blueprints for progress of one culture against struggle must be critically examined through cultural and societal context whereby relevant components may be adapted by another as appropriate, and other components precluded (Smith, 2003).

Therefore, kaupapa Māori is transformative whereby it acknowledges, incentivises and utilises mātauranga Māori to enhance and guide processes in thought and practice towards knowledge-creating and knowledge-redefining. Smith (2003) captures the transformative praxis of kaupapa Māori through a cyclic model of conscientisation, resistance and transformative whereby all Māori are in some part of this paradigm, either active or standing still, but somewhere all the same. For whānau, hapū and iwi and likewise Māori researchers to remain contemporary, kaupapa Māori expressions are critical in an evolving and transformative climate to realising Māori aspirations, preferences and needs. Kaupapa Māori empowers by repealing Māori from a cultural or ethnic position of ‘other’ or the ‘researched’, to a landscape of expression through a richer meaning of ‘māori’, being ‘natural’, ‘clarity’, ‘transparency’ and ‘cleansing’ (Royal, 2012); indeed, an optimal research foundation and position whereby knowledge and new knowledge can be gathered, tested and imparted. In doing so, a higher conscientisation is achieved particularly through an impetus of advancing wellbeing “Kaupapa Māori is concerned with overcoming negative statistics and factors of Māori educational underachievement, poor health status and more, through research and theory making” (Royal, 2012, p.31). Ways of being Māori, thinking Māori, doing Māori, a Māori purpose, worldview, perspective or approach are articulated as ‘kaupapa Māori’ in accordance with this thesis and pertaining to the methodology utilised.

3.2.1 A Bi-cultural Supervisory Team and Kaupapa Māori Approach to Research

A significant part of my thesis, was ensuring rangatiratanga towards the research approach whilst being cognisant and transformative within the cultural context of contemporary Aotearoa. Central to the integrity of a kaupapa Māori approach to research, is the surety that research is by Māori, for Māori, about Māori and led by Māori (Moewaka Barnes, 2000; Foster, 2003; Walker, et al., 2006; Mahuika, 2008; Smith, 2012), and that research is premised on fundamental principles such as tika. Therefore, I had several strategies to ensure the approach I undertook remained tika, particularly given that I had a bi-cultural supervisory team with diverse backgrounds and research expertise.

In the first instance, my own knowledge, confidence, competence and circle of support I brought to and invested throughout the entire thesis was imperative. My commitment compelled me to constantly consider and take guidance when necessary, around ‘being, doing,

thinking and understanding, as a Māori'. In accordance with a Māori approach to research, I maintained regular and open communication and guidance from rangatira, kaumātua and the Māori community. I met with rangatira to discuss aspects of te ao Māori, and spoke at length with wise Māori women about their thoughts and understanding on related matters. Engaging in robust conversations and having time to step away and consider all implications, was pivotal whilst working within a diverse team. In all, the team remained respectful and guided about 'things Māori', by either myself, my Māori supervisory support and or my cultural circle of support.

Whanaungatanga with the supervisors and being conscious of their respective backgrounds was critical, as this formed a basis of knowledge and respect for each other's whakapapa and whānau, and also an appreciation of our respective understanding and experience of 'things Māori' and with research. The encompassing approach also inspired members to explore and unearth their own personal connections to te ao Māori. The qualities of my supervisors ensured a responsiveness and appreciation of what a kaupapa Māori methodological approach entailed, and they were absolute and demonstrative of support for my thesis. The input from experienced researchers in my supervisory team, enhanced the approach. Of vital importance, were aspects I unintentionally took for granted from a Māori perspective, which may have been overlooked if not underscored by the team who encouraged and challenged me to identify, research and capture important cultural indices. An example of this, is the development of a kaupapa Māori analytical framework explicated in Chapter Four Methods. I felt supported and confident to be queried on issues, but also to speak my mind about matters from a Māori perspective. Therefore, I felt endorsed to challenge and encourage the team to consider a Māori approach to conventional aspects of western thinking around research. The supervisory team recognised and acknowledged the importance of a kaupapa Māori approach throughout.

Although I am aware that limitations could have arisen, these would have been punctuated by mitigating factors: my passion and commitment to ngā māmā, the kaupapa of the thesis, my cultural supports, my bi-cultural supervisory team and my dedication to te ao Māori. Had I not the strong personal and familial cultural background, support and passion, there may have been greater challenges around ensuring the integrity of a kaupapa Māori approach with a bi-cultural research team. In all, the strengths and humility of the individual team members, ensured the

strength of the collective: *'Ehara taku toa he toa takitahi, engari he toa takitini'* – strength is shared by many.

3.2.2 Kaupapa Māori Theory

Kaupapa Māori theory is unique to Māori, which is shaped by our knowledge and experiences (Pihama, 2010). Māori have continually engaged in a range of sciences and theorising about the world in which we live and experience, to gain understanding, adapt, progress and transform. Within the context of being a colonised people, kaupapa Māori is strongly connected with a Māori undertaking of struggle, emancipation and change. Thus, as kaupapa Māori continues to develop through theory and research, valuable space is afforded to expressions of tino rangatiratanga, identity and self-determination, within lived realities and contemporary contexts. “Kaupapa Māori theory.... provides a platform from which Māori are striving to articulate their own reality and experience, their own personal truth as an alternative to the homogenisation and silence that is required of them within mainstream New Zealand society” (Mahuika, 2008, p.4).

Smith (1997) emphasised the strategic reinvestment in theoretical tools to assist Māori transformation based on the notion of kaupapa Māori theory. Six principles of kaupapa Māori theory were initially developed by Smith (1997) as a means to identify the forms of education intervention occurring in Te Kōhanga Reo (Māori Language Nests) and Kura Kaupapa Māori (Māori Immersion Schools). In relating kaupapa Māori as literally ‘a Māori way’, Smith describes kaupapa Māori as “related to ‘being Māori’, connected to Māori philosophy and principles, taking for granted the validity and legitimacy of Māori, taking for granted the importance of Māori language and culture, and concerned with the struggle for autonomy over our own cultural well-being” (Katoa Ltd, 2017). In essence kaupapa Māori asserts Māori as being ‘the norm’. “As an analytical approach Kaupapa Māori is about thinking critically, including developing a critique of Pākehā (non-Māori) constructions and definitions of Māori and affirming the importance of Māori self-definitions and self-valuations” (Katoa Ltd, 2017).

From these principles, kaupapa Māori principles for research have been developed and defined by a number of Māori theorists including Te Awekotuku (1991) and Smith (1999). Te Awekotuku (1991) for example, developed a set of responsibilities for researchers who conduct

research in Māori communities based upon tikanga Māori. These research responsibilities reflect a kaupapa Māori ethical code of conduct: firstly, aroha ki te tangata is defined as a respect for people that within research is about allowing people to define the research context (e.g., where and when to meet). It is also about maintaining this respect when dealing with research data (e.g., quantitative research), and extends to the physical sciences when research involves, for example, the examination of human tissue samples. Second is he kanohi kitea, which is being a face that is seen and known to those who are participating in research. For example, researchers should be engaged with and familiar to communities so that trust and communication is developed. Third is titiro, whakarongo...kōrero that is to look, listen and then, later, speak. Researchers need to take time to understand people's day-to-day realities, priorities and aspirations. In this way, the questions asked by a researcher will be relevant. The fourth responsibility is manaaki ki te tangata, which is premised on looking after people. This is about sharing, hosting and being generous with time, expertise and relationships. Kia tūpatō is the fifth and fundamentally encompasses being cautious. Researchers need to be politically astute, culturally safe, and reflexive practitioners. Staying safe may mean collaborating with elders and others who can guide research processes, as well as the researchers themselves within communities. The sixth, kua e takahia te mana o te tangata, purports do not trample on the mana (dignity) of people. People are often the experts on their own lives, including their challenges, needs and aspirations. Look for ways to collaborate on research reports, as well as research agendas. Lastly, kia māhaki is the responsibility of being humble. Researchers should find ways of sharing their knowledge while remaining humble. The sharing of expertise between researchers and participants leads to shared understanding that will make research more trustworthy. To me, these principles expound a framework that kaupapa Māori is invariably related to one's relationships and conduct, connected to a respect of the world, environment and people in which we belong and engage.

Bevan-Brown (1998, p.231) enhances the notion of qualification to Māori research by stating that it “must stem from a Māori worldview, be based on Māori epistemology and incorporate Māori concepts, knowledge, skills, experiences, attitudes, processes, customs, reo, values and beliefs”. Accordingly, Māori principles of knowledge and the process of collecting that knowledge are based on shared, reciprocal actions. For example, within the context of this research where the research participants are Māori, reciprocity requires the researcher to be responsible and accountable to the research community. The notion of reciprocity is a

phenomenon that is intrinsic among contemporary Māori researchers who employ a kaupapa Māori or other Māori approach progressive towards Māori research. However, in the past, [positive] reciprocity was never considered by non-Māori researchers who engaged in research among Māori communities thus, these respective Māori communities did not receive the positive benefits that they would have been entitled to under ethical and research methodological considerations that are paramount today.

The strengthening and maintenance of a Māori research methodological approach is both legitimate and *bona fide* across a number of contexts including health, education, justice and employment. It is also paramount that the refinement of Māori based research methodologies is on-going because criticism from within and outside of this approach to research continually needs to be challenged and proven erroneous. Thus, according to Maitira (2003, p.11), there is encouragement “in the knowledge that an informed Māori community takes much cognisance in the message (evaluation findings) as they do the integrity of the messenger (who the evaluation researchers are)”. Again, the importance of the reciprocal nature of research in Māori contexts is validated not only by the theoretical approach and the researcher but also by the ‘researched’ [Māori] community themselves. For this research, one of the overriding considerations that is innately woven into the research methodology, is in the way the researcher will give back [reciprocate] the information gathered.

3.2.3 Kaupapa Māori Research and Methodology

Although there is no single understanding or definition of ‘kaupapa Māori’ being a culturally broad and diverse concept, kaupapa Māori is the term most commonly referred to when describing a Māori research paradigm. A range of Māori researchers explicate the nature of kaupapa Māori as a research paradigm with a general consensus that the emergence of kaupapa Māori research ‘by, with, about and for Māori’ is advancing and centring Māori needs, aspirations and preferences. Kaupapa Māori is linked inherently to a notion of struggle and emancipation through tino rangatiratanga, from which “comes a desire to critique and transform” (Pihama et al., 2004, p.50). From this approach, which is central to decolonisation, kaupapa Māori motivates and enables the Māori researcher through tino rangatiratanga and heightened critical awareness and analysis, to challenge dominant ideologies that continue to marginalise Māori if not confronted, contested and conscientised.

Māori scholars have also examined external criticism of kaupapa Māori due to the nature of kaupapa Māori research, based on the misconceptions that research done in a Māori or Indigenous framework is perceived as lacking a legitimate or methodological approach of traditional academic research (Stokes, 1985; Durie, 1997a; Te Momo, 2002; Graham, 2009; Kovach, 2012). Additionally, research motivated out of a specific community need, is seemingly perceived as less valid than research undertaken in a more magnanimous mainstream-centric environment (Kovach, 2012; Smith, 2012). Stokes (1985) addressed pertinent points related to the perceived lack of credibility of such criticisms as being separatist tendencies and measures of validity. Stokes' analysis maintained the topic as valid and thus concentrated on the validity of the methodology asserting that:

(T)he same high standards of meticulous attention to accuracy, impartial investigation of all relevant aspects of the topic, clear presentation of issues and conclusions...apply as much in Māori research as in any other. Perhaps more so, because if there is any suggestion of bias in motivation, or inadequate understanding of cultural framework or methodology, the resulting research is likely to come under even closer scrutiny. (1985, p.5)

Therefore, while this research focused on a specific community, namely young Māori mothers of a specific region, and on the surface, could be perceived to be insignificant to a number of western research fields, a kaupapa Māori approach to the discourse validates this ever-evolving research paradigm and legitimised the research project at local, regional, national and Indigenous levels.

Māori researchers have challenged the legitimacy of western paradigms as the broader framework for research among Indigenous people (Walker, 1990; Tomlins-Jahnke, 1997b; Bishop & Glynn, 1999; Graham, 2010). For instance, research as its own goal, merely scientific and absent in its appreciation of its significance in the study and interpretation of others' lives and realities is groundless within social sciences, which are sciences dependent on how society is perceived and the knowledge that validates that interpretation (Smith, 2012). In essence, the western paradigm has developed from within a positivist tradition, however, research with Indigenous peoples brings with it cultural concepts and understandings, values and beliefs, theories of knowledge, contextualisation, language and a range of variations that may be greatly specialised around what counts as real. The paradigm from which a research approach is based and its impact on those researched such as those colonised, has many implications. Kaupapa Māori:

does set out a field of study which enables a process of selection to occur, and which defines what needs to be studied and what questions ought to be asked. It also has a set of assumptions and taken for granted values and knowledge, upon which it builds. In this sense it can be fitted into some of the ways in which a paradigm is defined. It is also, however, more than a sum of those parts. Kaupapa Māori research is a social project; it weaves in and out of Māori cultural beliefs and values, Western ways of knowing, Māori histories and experiences under colonialism, Western forms of education, Māori aspirations and socio-economic needs, and Western economics and politics. (Smith, 1990, p.90)

3.2.4 Kaupapa Māori and Ontology

“Ontology is concerned with the nature of being and reality” (Kovach, 2012, p.21). According to a Māori research paradigm the reality in which one perceives the world is shaped and determined by cultural worldview, values and beliefs. Research and the elected research paradigm in which research is conducted, should reflect and be congruous to those values, beliefs and cultural customs. Kaupapa Māori research encompasses notions of creation, connection to land, tribal histories to the contemporary social systems, structures and interconnectedness and organisations between people, atmosphere and environment; therefore, a notion of holism. Wilson and Neville (2009, p.69) write “Some vulnerable populations, especially Indigenous groups, have epistemologies based on holism and eco-connectiveness, which acknowledges the ecological relationships and ties they may have with the environment and other living beings in order to facilitate their wellbeing and sense of balance”. The notion of holism is intrinsic to a Māori worldview and thus wellbeing as it centres on interdependence and interconnectedness on an individual and collective level, on relationships involving human life, the environment, the material and the spiritual (Cunningham, 1998).

Conceptualisations of holism according to a Māori worldview are evident in prominent models of wellbeing “Each of the components is interconnected and designed to contribute to the holistic manner in which Māori health is perceived” (McClintock et al., 2010, p.129) that include but are not limited to, Te Whare Tapa Whā (Durie, 1994), Te Wheke (Pere, 1991) that depicts wellbeing through the tamaiti and symbolism of the octopus in relation to physical and spiritual life, and Te Whetū (Mark & Lyons, 2010). The tribal affiliation of the model creators who are rangatira in their own right, is diverse and the self-determining development of the models varied in space, context and time. Each component is succinctly explained in its meaning and interrelationships, which further reinforces the validity of the fundamental Māori

epistemological understandings of which the models are founded and the cultural assertion of wellbeing encompassing the whole.

Although colonialism and assimilation have undermined many traditional ways of being for Māori and thus the notion of holism from a Māori worldview, te ao Māori is dynamic and has adapted to the contemporary issues and settings that have affected cultural values and beliefs (Durie, 2001). The struggle for the health system to acknowledge kaupapa Māori and engage with whānau regarding their wellbeing in relation to their worldview and therefore reality, has been ongoing. A Māori cultural worldview in contemporary times is important to exploring and understanding the modern Māori reality and experience. Māori models of wellbeing encapsulate those traditional notions that are as relevant and valid in today's reality and provide a framework when utilising a kaupapa Māori paradigm in undertaking research by Māori, about Māori, for Māori.

3.3 Māori Research

3.3.1 Early Māori and Indigenous as the Researched

Māori and Māori communities have been the subject of research since contact with the west, whereby Bishop and Glynn (1999, p.17) allude to the notion that “colonisation has simplified and commodified Māori knowledge for ‘consumption’ by people other than those whose culture generated the knowledge”. Consequently, Māori conventions relating to ‘what counts’ to Māori across the socio-economic sphere including health, have been traditionally deprived and constrained by western conventions that have been strongly supported by notions of epistemological racism.

According to Durie (2005), Māori overcame two major threats to their survival following their arrival to Aotearoa; firstly, adapting to a new environment and secondly, confrontation with the west. The journey of Māori to Aotearoa was by no means an easy feat nor an accident substantiated by several factors. In fact, DNA evidence of at least “fifty women being at the same place at the same time” (Durie, 2005, p.14) purports that an event such as the epic journey, would have been unlikely to have eventuated unless it was planned. Time and toil to adapt and establish themselves would have occurred, with the growth of hapū and iwi that would have developed into powerful entities premised on politics and territory. Learning about the

environment then becoming one with the environment, modifying language and embedding rules to ensure survival would have been paramount in establishing a sustainable life. Everything may have remained well and tribes flourished had western contact and colonisation not ensued.

Consequently, a foreign and European imperialistic people brought disruption and havoc upon the Indigenous people of Aotearoa and in doing so made it their right to observe, study and report through a coloniser's lens, the nature of the tribal people they encountered. In the opening address of her book *'Decolonizing Methodologies'*, Smith (2012, p.1) states point-blank "'Research', is probably one of the dirtiest words in the indigenous world's vocabulary" a powerful sentiment to the ill-effects of imposed research on Indigenous peoples. In her decrying of western researchers' and intellectuals' impudence towards Indigenous people, their culture, knowledge and forms of knowledge, the remains of their dead and exploitation of the living, their resources, imagery, their land and right to self-determination, Smith (2012) speaks to the ethicalities of those researchers Indigenous or not, producing scholarship with those who wish to identify themselves as Indigenous peoples and communities according to the interests, aspirations and parameters that those groups determine.

The purging and syphoning of knowledge of Indigenous peoples conflated many abuses surrounding the gathering, classifying and representation back to the west and then back to the colonised by the west, compounding the destructive sentiments held about imperialism (Smith, 2012). The more dangerous consequences of such research were the policies informed by the research that served the ideologies imputed with marginalising Indigenous peoples. Negating the value of Indigenous humanity to 'primitive' or 'savage', dehumanised Indigenous people and devalued Indigenous women further to that. For instance, European or more specifically British would only deal with Indigenous men on trade and treaties excluding Indigenous women from those critical engagements. Colonialists regarded Indigenous women according to their own imperialist western cultural, religious, class and race lens and even less so as Indigenous men were classed 'native men' but Indigenous women were relegated to 'female native' like that of a 'female horse' through some zoological classification (Smith, 2012).

The first researchers being mostly travellers and adventurers not formally trained in research, took tales and stories of adventure back to the west as depictions constructed by white men concocted around their own cultural views including gender and sexuality. Such tales included descriptions of wāhine Māori being compared to unbroken and frisky ‘fillies’ (Johnston & Pihama, 1994) and accounts of Aboriginal women being hunted, raped and killed like animals (Smith, 2012). The images portrayed of Indigenous women were dehumanising, and as a people of savages and primitivism who could not create, invent, use intellect, were unable to use their resources or land and were not fully human (Smith, 2012). In a struggle for humanity, Indigenous peoples have been compelled to discern what it entails to be human based on injustices that included being hunted and put to work.

The expeditions of voyagers such as British explorer James Cook who travelled about the South Pacific, were clearly based on scientific purpose where first encounters were thoroughly recorded, and from such initial encounters, European developed more sophisticated ‘rules of practice’ when returning to Indigenous lands. Travellers’ tales had wide coverage and dissemination including the press, the pulpit, travel brochures enticing would-be immigrants, and oral discourse (Smith, 2012). King (1996) depicts an overview of Māori life and relations in Aotearoa additional to previous socially contextual insights, through text and imagery largely by photography “Photographs and text investigate Māori appearance, dress, settlements, dwellings, domestic activities, gatherings and ceremonial. They also highlight features of continuity and change” (King, 1996, author’s note) expounded by “Photography’s central role of recording focused on two aspects of colonial New Zealand: progress and portraiture” (Ireland, 2014, p.1).

Photography reached New Zealand in the late 1840s and exposed Māori from around the late 1850s whose attitudes towards it ranged from ambivalence to respect, that generated anxiety, awe and fear whereby some regarded it as injurious and sinister (King, 1996). Although some Māori appeared confident and even defiant in the encounter with portraiture through their steely poses, the capturing of someone’s image and mauri or life force, that existed as an image long after they were dead, often evoked distress. In one example of degrading imagery, King (1996, p.2) describes how Māori images through photography were used as ‘coon’ subjects to arouse humour at the expense of Māori defamatorily portrayed as “simple foolish folk, unable to cope

with complexities of Western civilisation”. Representations of wāhine Māori in particular held wide appeal (Beets, 2000) where wāhine Māori were photographed in Madonna-like poses and alluring calculatedly erotic images set as ‘innocent Māori belles’ where one such popular category was entitled “Black But Beautiful” (King, 1996). “For those not visiting but settling, the postcard posited the suggestion of pleasurable ownership of a native woman and her land” (Beets, 2000, p.17).

The portrayal of the new land and inhabitants appealed to the voyeur, the soldier, the romantic, the adventurer and those who were poor and disaffected in their own imperial societies. It also included the powerless, namely those shipped to colonies as the unwanted or cast away to the ultimate prison; whom all became colonisers (Smith, 2012). The role of certain western disciplines in the larceny, degradation and impoverishment of Indigenous peoples and needless to say Māori, of their knowledge, lands, cultural views and beliefs are as much implicated in each other as they are in imperialism “Systematic fragmentation which can still be seen in the disciplinary carve-up of the indigenous world: bones, mummies and skulls to the museums, art work to the private collectors, languages to the linguistics, ‘customs’ to anthropologists, beliefs and behaviours to psychologists” (Smith, 2012, p.29).

3.3.2 Indigenous Knowledge

Indigenous peoples also known as ‘First Nations’, ‘Aboriginals’, ‘First Natives’ or peoples who identify their indigeneity through a connection to Mother Earth such as ‘tangata whenua’ for Māori, descend from and identify with the original peoples of the land in contrast to those who have settled or colonised at a later period. Indigenous not only describes original inhabitants but is a term that has enabled a global collective of Indigenous people who have been colonised, to “learn, share, plan, organise and struggle collectively for self-determination on global and local stages” (Smith, 2012, p.7) through and above their colonised experiences and contexts. Indigenous peoples who have been colonised share the common antecedents of having their lands, culture, values and beliefs colonised and their right to self-determination and sovereignty denied through imperialism.

Epistemological understandings and knowledges of Indigenous peoples are diverse and multifarious although share some common notions within and around creation, genealogy, land

and wellbeing and connections with cosmology and spirituality. Indigenous epistemologies and knowledge, and that of tribal epistemologies and knowledge, have a holistic quality encompassing the ordinary and extraordinary (Kovach, 2012) that is culturally sophisticated, multifaceted and complex. Viergever (1999) purports there are distinguishing features of Indigenous knowledge which includes being the creation of a dynamic system that is essential to the physical and social environmental of the communities and is a collective good. Indigenous knowing initiates from within and without, being created in the cosmos, metaphysically and intuitively and from the physical and tangible realms – the inner and outer spaces (Ermine, 1999) and was shared generation to generation through systems like that of te ao Māori, being whakapapa. Indigeneity has deep-seated connections with homelands and the environment as tribal people knew their ancestors were spiritually alive on their lands and were averse to relinquishing those lands to ‘whites’ (Deloria, 1994). Most significantly, Indigenous knowledge is as relevant and powerful in the present context as it was through the hundreds and thousands of years of accumulation, and as so, can be applied in congruence to other knowledge systems (Durie, 2004).

Tied in with Indigenous culture and knowledge, was the communication of knowledge, values and beliefs. Indigenous languages both verbal and non-verbal and in particular oral exchange rather than in written form, was pivotal in shaping and transmitting knowledges (Battiste, 2002). Knowledge was cumulative and imparted by stories, song and chant, through metaphors and symbolism that were distinctive to Indigenous and tribal histories and knowledge (Kovach, 2012). Sadly, many Indigenous peoples have had their language and language structures disordered by the effects of colonisation. The quickest way of ‘liquidating’ a people was to strike at their language to disrupt routine and customary construction and transmission of knowledge. Without language, a people would soon forget who they were and the world would forget even faster (Kovach, 2012).

Another important characteristic of Indigenous knowledge was in its weight and disclosure. As expressed by Pere (1991), teachings reach into the past, present and future of spiritual homelands and are knowledges gathered and protected over 100s and 1000s of years. Knowledge was cherished and concealed “held in trust through the spoken word so that people outside the selected students could not tamper with what was intended from the beginning”

(Pere, 1991, p.3). Therefore, ways in which Indigenous knowledge were conferred through western or Eurocentric comprehension with all its integrity intact, was problematic and limited. Without Indigenous and tribal languages to accompany the knowledge and the implications of a Eurocentric research imperative to disseminate knowledge rather than protect, there were incongruities.

Knowledge about Indigenous peoples were gathered, classified and represented back to the western world and then back to Indigenous peoples, through quantitative and qualitative research paradigms. “Anthropological and sociological observers went to a foreign setting to study the culture, customs, and habits of another human group. Often, this was a group that stood in the way of White settlers” (Denzin et al., 2008, p.4) and ethnographic reports would inform the strategies such as assimilative policies, devised to civilise and control native peoples. Knowledge of communities other than European were often manipulated or demoted in importance to European knowledge such as the dates and numbers of Mayans, Hindu and Arabic; names and devices of exceptional scientists were Europeanised; global discoveries were attributed to Europeans such as Haley’s comet identified 2500 years earlier by Chinese and the categorising and trivialisation of non-western sciences and innovations to ‘art’ (Battiste, 2002).

For most Indigenous peoples and their descendants, it has been the same story of the Indigenous-meets-the-Whiteman. In surmising the repression of the ‘Indian’ Incas by colonisation, Pizzey (1985, p.31) comments “The Apache, the Sioux, the Cheyenne, the Mayas, the Aztecs, the Incas. They probably all share the same family tree; they certainly share the same experience”. He describes accounts of Inca poverty and loss of connection to land, values and beliefs whereby most descendants had become part of the slums of the cities. At one point, the Indigenous population was reduced by 80 percent of its population due to disease brought by colonisers and through slavery. Their identity had been misappropriated through their language, much like Māori. Originally there were probably no people known as Incas, however, there was a group that spoke ‘Quechua’ and are still called Quechua and their term for ‘leader’ was ‘inca’. ‘Incas’ would eventually be what their whole civilisation would become known as particularly by the “white invaders who destroyed it” (Pizzey, 1985, p.12).

Knowledge of Indigenous peoples like, Aboriginals of Australia, Canada and Aotearoa have been marginalised and relegated in educational institutions and churches that have committed to European knowledge and doctrine, and with modern development and urbanisation a deculturalisation has occurred and weakened Indigenous knowledge bases. However, Indigenous scholars have unearthed that Indigenous knowledge is far more than adjunct to western knowledge but have elucidated the confines and inadequacies of Eurocentric theory, promoting Indigenous philosophies, backgrounds, conceptions and learning practices (Battiste, 2002). The educational landscape of Indigenous people has become a contentious and emergent domain underscoring Indigenous knowledge, languages and preferred pedagogies (Smith, 1997; Simon, 1998). The integrity and transmission of Indigenous knowledge is interrelated with land and the ceremonies, science and arts surrounding land, Indigenous languages and genealogy, and the maintenance of that integrity at the interface with Eurocentric knowledge and western research paradigms (Durie, 2005).

3.4 Summary

The selection of methodology for research is of importance, in that the way in which research is conducted must align with the research questions and aims, and incorporate distinct theoretical foundations. For this research, utilising kaupapa Māori methodology was imperative in that the approach, method, theoretical framework and principality of who the research was *with, about, for and by*, was paramount throughout. From the outset, this research was to be about gaining and exploring the stories of young Māori mothers' experiences and therefore required an approach that stemmed from the qualitative research paradigm. Being cognisant and understanding methodologies that relate to those objectives provided a beneficial view to how certain methodologies arrive at various outcomes, but most importantly, how methodology is critical to the framework of the study being undertaken inclusive of design and methods. Previous studies have utilised western qualitative methodologies whilst claiming a kaupapa Māori approach, which has become part of the growing scholarship and rangatiratanga of Māori research.

Kaupapa Māori methodology, underpinned by kaupapa Māori theory and thus, mana wahine theory, provided the most appropriate if not, the only methodology suitable for the 'kaupapa' – purpose and aims, of this research. That is, by Māori, about Māori, for Māori. This research

uses kaupapa Māori methodology exclusive of integrating with complementary qualitative approaches, and in doing so, has also contributed to the kaupapa Māori research academy discussed further in Chapter Four, Methods. Mātauranga Māori, tikanga Māori and te reo Māori are inherent to the methodological framework, whereby the knowledge, value, belief and customary systems of this particular worldview, maintain that the approach to the research is taken for granted, normal, legitimate, valid and authentic.

Chapter 4: Methods

4.1 Introduction

The methods, or tools used in research, are dictated by the methodology that is employed and the overall aims of the research. Choice of method is significant, as Shulman (1981) stated, method generates passion and argument from scientists, as method distinguishes research activity from observation and speculation. In undertaking this research, a kaupapa Māori methodology was used and qualitative methods, conducive to kaupapa Māori ethos of ‘by Māori, about Māori, for Māori’ were implemented (Mataira, 2003; Walker, Eketone & Gibbs, 2006; Jones et al., 2010;). Kaupapa Māori theory-based approaches have grown exponentially among Māori scholars across disciplines (Durie, 2002); their preference being to utilise a research methodology more aligned with Māori ways of being while academically rigorous (Mahuika, 2008). The methods used and developed, fit appropriately with the foci and methodology demonstrating a commitment to the participants, their experiences and to te ao Māori, all significant determinants for me.

Qualitative research as an approach, has transformed with developing and emergent epistemologies (Denzin & Lincoln, 2000) and western academic circles are re-thinking and re-evaluating approaches to research. ‘New’ or ‘alternative’ research paradigms give a legitimate voice to those traditionally silenced, marginalised, colonised or invisibilised (Guba & Lincoln, 1998). Walker et al. (2006) state that kaupapa Māori as a research strategy is about the ownership of knowledge, and validity of Māori ways of doing. “Kaupapa Māori Research is concerned with both the methodological developments and the forms of research method utilised” (Jones et al., 2010, p.2). Stemming from this Indigenous approach to research is the premise that kaupapa Māori is both theory and analysis where Māori are involved (Jones et al., 2010), and the methods compatible to kaupapa Māori methodology need to be firstly scrutinised for relevance (Cram et al., 2003; Mataira, 2003) to enhance the science of the research and sustain cultural appropriateness.

Walker et al. (2006) set out five pertinent components of kaupapa Māori research pertaining to methodology and methods. Firstly, kaupapa Māori research affords full recognition to the cultural values and systems of Māori; secondly it is a strategy that challenges the dominant western constructions of research; thirdly kaupapa Māori determines the “assumptions, values,

key ideas, and priorities of research” (p.333); fourth, it safeguards Māori with full control over the methodological, conceptual and interpretive aspects of the research, and lastly it is a philosophy that guides and asserts rangatiratanga of the protocol and research process. Kaupapa Māori research is not only about Māori participating in research, or research done with Māori communities by non-Māori; it is a research paradigm, philosophy, strategy, approach, theory and praxis where Māori have full control and ownership (Glover, 2002; Pihama et al., 2002; Walker et al., 2006; Cram, 2009; Graham, 2009; Smith, 2012). Such assertions of kaupapa Māori research have raised criticisms from a western paradigm that include the question of objectivity, subjectivity, bias, reflexivity, researcher positioning, which are addressed in this chapter. Kaupapa Māori research is posited to be more about the terms, actions, values and the process of accessing the Māori world (Smith, 2012) rather than the ‘how to do it’ breakdown, which avails Māori researchers to adapting western methods as most compatible, comfortable, complementary and favourable to a Māori way of doing (Walker et al., 2006).

Māori researchers have incorporated western methodological approaches to complement and enhance kaupapa Māori methodology as a growing scholarship, and adapted selected western methods to achieve desired outcomes (Smith, 1999; Mataira, 2003). Kaupapa Māori research with Māori communities who are diverse yet marginalised and therefore considered vulnerable (Smith, 2006), has proven beneficial and successful (Walker et al., 2006; Graham, 2009; Jones et al., 2010; Mihaere, 2015; Webber, 2015), as has research with or about wāhine Māori and young Māori mothers (August, 2005; Murphy, 2011; Gabel, 2013; Gemmell, 2013; Simmonds, 2014). Research has also been produced about or with Māori, wāhine Māori and young Māori mothers that integrates kaupapa Māori with a western methodology, such as qualitative, grounded theory, mixed methods, autoethnography, feminist and or participatory action research (Smith, 2012).

Alongside these approaches, Māori scholars have developed and presented frameworks grown out of tribal epistemologies and as outcomes of research, expressly to enhance the Māori research scholarship but also to challenge and decolonise methodologies. In this chapter I present my own approach to methods within the kaupapa Māori methodology, that were utilised for this research and in doing so, provide examples of research within the kaupapa Māori research academy where similar approaches were undertaken. Due to a dearth in peer-

reviewed kaupapa Māori analysis tools I developed a framework based on tribal worldview and Māori epistemology that synergised with western techniques of processing data. The way I conducted adaptation, compatibility and utilisation of qualitative research methods with kaupapa Māori is presented. Additionally, research from Indigenous and coloured scholars has been incorporated to examine the use of methods developed out of the respective worldviews and epistemologies.

4.2 Researcher's Assumptions

Addressing underlying assumptions, whilst entering a doctoral thesis, was critical. Exploring and recognising that I was critically restricted while conducting scholarly research was humbling and empowering. My inexperience as a researcher included, but was not limited to, the availability of resources, reasoning processes and human failings. It was empowering to recognise my own shortcomings, the shortcomings of choices made, and then adjusting to find the best ways possible to create opportunities from the challenges.

Essentially, this research has been built on assumptions which are key factors to progress, given they are realistic expectations we expect to be true, and therefore form a basis to conduct a research study. Assumptions cannot be helped as one must assume something to discover something: "Assumptions are so basic that, without them, the research problem itself could not exist" (Leedy & Ormrod, 2010, p.62). An assumption cannot be simply stated but requires justification, otherwise the study cannot develop. Assumptions provide a "a leap of faith which does not have empirical evidence to support it" (Patidar, 2013, p.2) and on a basic level, are values and beliefs considered or told to be true often with little or no evidence for verification; and are not statistically or scientifically tested in research. However, tested assumptions through research studies have consolidated and expanded bodies of knowledge.

For this research, the fundamental assumption was that the wellbeing of young Māori mothers is affected by the birth of their first tamaiti. This was a warranted assumption in that: firstly, the human experience of wellbeing is powerful, personal, individual, collective and culturally-bound in many ways; and secondly, becoming a first-time mother is a monumental transitional phase in life, impacting on wellbeing. As researcher, I also assumed the experiences of wellbeing for young Māori mothers would be relational to the components of the wellbeing

model Te Whetū; similar to other Māori models of health and wellbeing such as Te Whare Tapa Whā and Te Wheke, which are well supported and accepted as intrinsic to Māori values beliefs and ways of understanding the world.

Additionally, I assumed that wellbeing was an experience that has varied meanings and expressions to each individual, but included shared ideas of health and happiness. As researcher, I assumed wellbeing was related to all cultures because culture transcends time and has been underpinned by distinct value and belief systems denoted by customs and practices distinct to peoples and groups. Culture is based on a foundation of beliefs, values, customs and practices that are strengthened and redefined over time that in part explain why people do and think as they do. Therefore, culture impacts on experiences of health and happiness and thus, wellbeing.

Another key assumption I made was that kaupapa Māori theory and mana wahine theory were the appropriate theories to approach and explore young Māori mothers' experiences as they are culturally specific, well defined and validated, and encompass critical factors surrounding research and Māori worldview. Kaupapa Māori and mana wahine theories have contemporaneously acknowledged that from a Māori perspective, knowledge and experience is diverse and heterogenous and is inherent to struggle, emancipation and change. As stated by Simmonds (2014) who extended mana wahine theory to mana wahine methodology, it is problematic to argue all Māori women relate to Papatūānuku, tikanga or other concepts intrinsic to te ao Māori, as this denies diversity and the disruption of Māori histories and geographies in the assumption anything Māori will apply. There are challenges attached to assuming general compliance to cultural concepts within a colonial and patriarchal context, such has been the argument of feminists in resisting patriarchal and colonial control over women and nature (Simmonds, 2014). However, through the support and guidance from kuia, kaumātua and ngā māmā themselves and recognition of the varying stages to the reclaiming of cultural identity, care is provided in realising the underlying objective of kaupapa Māori and mana wahine theories to reclaim, resist, conscientise and transform.

I assumed that having a first tamaiti is a time of perceived transition that would be viewed as important within a modern societal context, and would be significant and impact heavily on

wellbeing. The birth of a first tamaiti is a monumental and life-changing event that would elicit many responses and experiences. It also denotes a time when a significant life event can bring forth traditional cultural values, practices and beliefs that to varying degrees, merge with contemporary contexts. This is a significant manifestation, as traditional cultural practices are more presently conducted on marae and spaces that are premised on kaupapa Māori or in private dwellings whilst often absent or suppressed in mainstream western spaces. Therefore, I assume there is a medium for enhancing the wellbeing of young Māori mothers and the current models of care within spaces Māori are expected to engage, by recognising the cultural significance of the birth of a first tamaiti to a contemporary context.

4.3 The Role of the Researcher

Western researchers have argued that Indigenous methodologies could ‘fit’ or ‘sit’ under the mantle of qualitative research, or within several western paradigms as a sub-category that assumes qualitative research approaches, such as constructivist, phenomenology or participatory action research methodology (Kovach, 2012). However, tribal language and mātauranga is central to kaupapa Māori research activities that are effective and beneficial for Māori people. That is, western language and western knowledge is not, nor cannot supplant either tribal language or knowledge.

The interactive and relational features of methodologies such as qualitative and Indigenous, have been essentially based on an interpretive tradition encompassing elements of subjectivity (Kovach, 2012; Denzin & Lincoln, 2018). Babbie (2001) states that “all our experiences are inescapably subjective. There is no way out” (p.50) and “what has been regarded as objectivity in Western social science was actually an agreement primarily among white, middle-class European men. Equally real experiences common to women, to ethnic minorities, to non-Western cultures, or to the poor were not necessarily represented in that reality” (p.52). Indigenous scholars concur this perspective long querying the place of western methods in Indigenous research (Bishop, 1996; Deloria, 1999; Battiste, 2002; Kovach, 2012; Smith, 2012). Indigenous peoples have their own generational knowledges, methods, systematic and predictive models whereby Indigenous knowledge is intrinsically bound to the land as landscapes, forms, eco-systems and spaces for ceremony (Battiste, 2002). Those knowledges and spaces require respect and their integrity to be maintained. Thus, the in-between spaces

where Indigenous researchers engage with Indigenous and western paradigms, is a critical space requiring reflexion, testing and rigour.

The immutable relationship between researcher and research participants is fundamental and complex, and any conflicts of interest that arise require researchers to self-reflect through reflexivity to demonstrate transparency and make sense throughout the interpretive process. For me, working from a kaupapa Māori methodological approach, integrating qualitative methods and immersing myself within, I routinely stepped back to look at ‘both sides’ recognising that insider knowledge is privileged (Tolich & Davidson, 1999; Babbie, 2001; Denzin & Lincoln, 2018). “The critical issue with insider research is the constant need for reflexivity” (Smith, 2012, p.138). Denzin and Lincoln (2018) discuss the multiple selves that researchers bring and become when engaging in qualitative research, espoused by Reinharz’s (1997) research-based selves, brought selves and situationally created selves. As researchers, we must interrogate ourselves, the binaries, contradictions, paradoxes and tensions from our own lives and the identities we discover of ourselves and of the subjects in the field and in writing.

As a ‘Māori researcher’, rather than a researcher who happens to be Māori (Smith, 1999; Durie, 2002), with tribal affiliation to the area in which I researched the wellbeing experiences of ngā māmā who were inherently from the same tribe, I shared epistemological understandings albeit varying, of te reo Māori, tikanga Māori and mātauranga Māori with the research participants. I innately carried with me and continued to develop, the conceptual framework that helped unify the knowledge base and methods of the methodological approach I have applied. In doing so, whilst grappling with the intersection between kaupapa Māori and western paradigms in deliberating the methods, the conceptual framework and reflexive action helped inform and guide me (discussed further in Section 4.7 Rigour and Trustworthiness).

The concept of ‘Māori researcher’ brought opportunities and challenges which needed contemplation and discussion with supervisors and rangatira. Tenets such as being Māori, being a woman, a mother, a nurse, a descendent of Ngāti Kahungunu iwi were acknowledged, as was the area of my interest and passion in which I had practised for some time. I felt progressively invested the more I knew, saw and understood. Advocating for young Māori

mothers, tamariki and whānau wellbeing is an imperative of my practice and personal ethos, and I entered the research as a researcher with contextual knowledge alongside deliberating the concept of becoming both ‘insider’ and ‘outsider’ (Tolich & Davidson, 1999; Babbie, 2001; Bishop, 2011; Smith, 2012). An awareness of power relationships and the management of those indices, was explicit to have remained reflexive as researcher and someone who was part of the tribal area (Smith, 2012).

Ethically and morally I decided not to go directly to the community in which I practised. The decision was based on my belief that this had advantages and disadvantages I considered as ‘researcher partiality’, through knowing the demographical characteristics, of familiarity and amenability. I considered that going directly to the community I knew well, was a potential exploitation of a population historically disempowered, and whose relationships with ‘outsiders’ demanded integrity, trust and confidence. Additionally, to ensure representation of the target group, an appropriate recruitment strategy and conducive methods were required. I chose a ‘word of mouth’ approach to connect me to the research community in its variability and diversity, and autonomous willingness to participate. Acknowledging my role as a ‘Māori researcher’ who considered my position both ‘inside’ and ‘outside’, alongside the ethical and cultural implications, further legitimised the use of kaupapa Māori methodology and the methods and analysis used.

4.4 Sampling and Recruitment

The sampling and recruitment method selected for the research was essential as it encompassed the many variables of the research community, the design and aims. Māori as a collective comprise of many tribes and are inextricably linked to the effects of colonisation and the assimilative policies that render Māori to the margins of society. Albeit many Māori are flourishing in today’s world, many more live impoverished and disenfranchised not only from a conventional Kiwi reality, but also from a cultural one (Durie, A., 1997; 1998; Nikora, 2015). Care with disempowered people (Smith 2006; Sadler et al., 2010) was my utmost concern as I was conversant with the factors and systematic barriers faced by young Māori mothers and whānau. Although the lived realities of all young Māori mothers could not be assumed as disadvantaged, to me it was important to be fundamentally open and compassionate in my actions leave alone assuming my intentions would be received as advantageous. The sampling

needed to be purposeful and conducive to the recruitment and retention of young Māori mothers, but also it was vital to be acceptable to the wider whānau, Māori community and kaupapa Māori research academy.

4.4.1 Sampling and Kaupapa Māori

Roosa et al. (2008) argue that research with minority groups is strengthened when samples are representative of the diversity within those populations. They criticise the emphasis placed on having a large sample size at the loss of quality, when more value is derived from designs that adequately engage samples with greater diversity in the participants' backgrounds. Indeed, this stance is applicable to Māori as there is great diversity within the Māori community who represent a minority people in Aotearoa.

Key factors raised by Roosa et al. (2008) when recruiting from minority groups are similar to those raised by Māori scholars. Firstly, adhering to traditional ways is signified as beneficial to the wellbeing of communities such as Māori, when the cultural worldview is shared and understood by the researcher (Durie, 2002; Smith, 2012; Mead, 2016). Cultural differences with societal institutions can create difficulty engaging Indigenous people and affect sampling. Acculturation and enculturation have a major impact on sampling whereby the former encompasses subjugated peoples who have learned and adapted to the majority culture in which they have been embedded; and the latter encompasses peoples that pass traditional cultural systems from one generation to the next (Roosa et al., 2008). Acculturation has positives and negatives associated with it according to Roosa et al.; the advantages relate to access to employment and education through integration into the mainstream systems. Disadvantages emerge when marginalised people encounter the dominant hegemony of Eurocentric systems and discordance creates stress, difficulties and problems. Regardless, these variables are comprised across the diversity of peoples like Māori, and must be recognised within the research design in accordance to the research goals. Diverse communities represent the various influences from enculturation and acculturation within a society.

Researchers must deal with the complexities of samples that encompass a range of diversity, such as ethnicity and class, which cannot be ignored or risk bias and misinterpretation (Roosa et al., 2008). For my research, a method that ensured diversity was crucial as a diversified

sample of the targeted group would represent and celebrate the distinctive young Māori mothers in our communities. This could then transfer as representational to other communities nationally, Indigenously and globally. Ignoring, fragmenting into subgroups or excluding individuals from the sample is problematic and diminishes adequate representation (Denzin & Lincoln, 1999; Roosa et al., 2008).

4.4.2 Recruitment Strategy

A non-probability approach to sampling was utilised through a purposive and snowballing method. Probability samples or random selection are used for studies designed to represent and mirror the full range of values of a target population (Babbie, 2001; LaVange et al., 2010). Purposive and snowballing provides rich information (Denzin & Lincoln, 1994) and complements a kaupapa Māori approach to engaging with Māori. Purposive sampling permits the researcher to theoretically hand pick participants in terms of their typicality and relevance (Cohen et al., 2000). Therefore, instead of leaving recruitment to chance, the criterion was discussed or provided as a base to various supporters, informants and young Māori mothers. The use of purposive sampling is based on knowledge of the population in relation to the purpose of the study (Babbie, 2001). The method corresponded well with the focus on young Māori mothers. Snowball sampling allowed me to collect data with initial participants who then shared their experience with other young Māori mothers and the community, who then became interested and supportive. I also discussed the research with whānau from the community, who then shared with other young Māori mothers and community members, and so on (Tolich & Davidson, 1999). By integrating two recruitment methods, I utilised a culturally sensitive recruitment strategy, “Adaptations of snowball sampling can be effectively used in the recruitment of members of traditionally underserved or vulnerable populations” (Sadler et al., 2010, p.369), that dually engaged and respected the research community.

The ‘primary selection’ (Denzin & Lincoln, 1994) were young Māori mothers who met the criteria of the research design however, as will be discussed later, other young Māori mothers and wāhine Māori expressed interest in participating. These opportunities were acknowledged as valuable and encompassed into the thesis as significant to kaupapa Māori research. Denzin and Lincoln (1994) refer to this inclusion as ‘secondary selection’, stating that additional interviews of little use should be completed but not have research time or transcribing funds

wasted on them; instead they should be set aside as they may become important at a later time. From a kaupapa Māori perspective and in regards to the reverence of wāhine Māori, these additional insights were important, provided knowledge, context, perspective and additional learning for me.

Following a canvas of the community and possible ways to connect with young Māori mothers who met the criteria, I decided not to go through health, education and social services but to engage with members of the community particularly those of or connected to the age range I was looking for. I made an effort to connect with younger people, I spoke with people I knew through sport, community groups, volunteer work, youth work, study, whānau links, work, the gym, the marae and a diversity of networks. I then asked them to pass on the kōrero to their networks. I received phone numbers, emails, addresses and Facebook profiles of people who agreed to be contacted. Every contact I was given, I followed up. Occasionally the mode of communication did not work, and out of respect, I let the original informant know I had tried. Sometimes the informant was able to establish the connection which was greatly appreciated. Three young women I spoke to, a youth worker, a health professional who was a voluntary youth mentor and my whāngai sister, who all had no tamariki of their own, contacted their old high school friends and mates from their social networks who were young Māori mothers. One informant said, “Gosh, a few of my friends became pregnant while we were at school. I’ll get in touch with them”. I spoke with women who were mothers of young Māori mothers, friends of friends who spoke with friends, community links and groups. This was successful. As I had no Facebook account, I tried other ways to make contact however, one must accept that social media is an essential component of a young person’s world for many reasons, and adapting to the research community was key (Harris, 2015).

An initial meeting was organised by phone, text, email or in person with ngā māmā, for ngā māmā and me to engage kanoahi ki te kanoahi. Sometimes a middle person, who knew the māmā and understood the research discussed the research with the māmā first to ensure she was comfortable in meeting with me. Through the informant or at the initial meeting, I gave the recruitment documents (Appendices A, B and C) and went over them with the māmā. I presented, explained, listened to and answered all queries prior to the recruitment of ngā māmā.

Ngā māmā and I discussed the research, what it was about, how it came about, what it was for, who would see the completed thesis and what would happen to it.

Following time to talk and respond to queries, informed consent (Appendix C) was obtained. The meetings were calm and non-invasive with some humour involved. I shared with the participants a little about myself, my whānau and my aspirations in relation to the research and working life. Within te ao Māori, the practice of disclosing one's whānau background and some information about one's self is valued as integral to relationship building; within the kaupapa Māori research experience it is expected. Researchers must impart their professional, research and cultural backgrounds (Walsh-Tapiata, 2003) and as Walker et al. (2006) assert, be prepared to disclose personal information about their tribal and whānau connections. Within western research, this interaction is a method and skill described as conversational interviewing often preceding qualitative data collection to create a comfortable atmosphere:

at the outset of interviews, researchers facilitate the kind of small talk familiar to conversationalists who have just met; for example, in Western societies, this could include observations concerning travel, weather, or occupations. Conversational entrées to research interviews are seen to facilitate openness, informality, and rapport between interviewers and interviewees. (Given, 2008, p.3)

For Māori, it is more than a 'chinwag about the weather', although care must be taken regardless of paradigm, to how much is shared. I found sharing whānau, whakapapa and whenua background to be a method in neutralising the engagement whereby I entered as the would-be knower and not the expert, ensuring ngā māmā had their mana as the authority (Smith, 1999). Most of ngā māmā immediately agreed to participate and interview times were arranged accordingly. It was evident to me that recruitment with the research community was a 'here and now' space, and through a shared cultural understanding I knew ngā māmā were not interested in 'mucking around'. To me, this is essentially based on the ability to build rapport and trust through a transparent and compassionate manner, and 'walk the talk'.

4.4.3 Participants

The criteria for participants included young Māori mothers aged between 18 and 24 years who identified as Māori and who had at least one tamaiti. Participants could have had more than one tamaiti but my intention was to focus on their experiences around the birth of their first

tamaiti and the 12-month period following. Identifying as Māori was essential to the criteria however, this was not categorised, characterised or compartmentalised. There were no other criteria to identifying as Māori other than recognising oneself as Māori. The study was not an exploration of one's 'Māoriness' or 'how Māori are you'? Ngā māmā were encouraged but not expected to provide pepeha, marae and iwi affiliation, only in so much as they wanted to celebrate their heritage and offer context to their experiences. The diversity of 'being' Māori in contemporary settings, contextual realities and the tino rangatiratanga of ngā māmā to assert themselves was critical to the research. Therefore, the research design was a careful consideration as not to impede their self-determination.

The first tamaiti could have been born to a māmā at any age up to 24 years. For the participants of this research, the ages they gave birth to their first tamaiti ranged between 15 and 23 years respectively. The oldest mother was 24 years, the youngest tamaiti was 3 months, and the earliest pregnancy was shared by a māmā who had been 14 years old. The areas in which ngā māmā lived, were spread across cities and townships of Te Matau-a-Māui and varied between urban and rural locations. Although information regarding the age of each pregnancy, socio-economic status and deprivation could have been highlighted, I felt this was in antithesis to the direction and kaupapa of the research. To me, delving into these determinants would have indicated and endorsed a stigmatising judgment, and that I would be reverting to 'measuring' how (very) young, ill-equipped and unprepared a young Māori mother was. I was entering their homes in their communities, and if I had chosen to take a deficit approach I would have placed value upon their situations and not acquired the diverse experiences surrounding achievement and adversity. The aims of the research were to explore experiences of wellbeing within the contextual realities of young Māori mothers, with an impetus in appreciating 'young' as being youthful, fertile and spirited. By this approach, I ensured respect and mana was reinstated back with ngā māmā, so that that they could convey their personal stories from their unique situations whether positive or negative, and reduce the risk of inadvertently becoming accomplices to an already deficit script.

I was asked by a māmā whose sister had suffered a sudden unexpected death of a baby, if the death of a tamaiti precluded participation. I replied no, this was not determining criteria. However, there were no participants who had been bereaved of a first tamaiti. The criteria did

not exclude young Māori mothers whose tamariki had been whāngai, adopted or even removed through state care, as culturally an underlying assumption was that most young Māori mothers do not ever abdicate being a ‘māmā’ despite circumstances. Additionally, Māori continue to live closely or with whānau and maintain intergenerational care for tamariki. Pigeonholing young Māori mothers and whānau into classifications of who provides the most care and what defines ‘mother’ within a te ao Māori construct, would have been problematic and negated the cultural ethics, epistemology and aspirations of this research. I was averse to forming subgroups, ignoring or excluding young Māori mothers based on inherently important cultural matters. Research methodology that encapsulates a Māori worldview does not rebuff such indices as wasted time or money, but acknowledges the significance and value in determining identity and rangatiratanga.

On several occasions, women who identified themselves as grandmothers or nannies and mothers of young Māori mothers made contact with me and asked to participate. They said they felt they had a contribution to make to this research topic in reflecting on being a māmā and now as a mother of a young Māori mother, that is, a grandmother. Figure 12 shows what a beautiful wahine (mother and nanny), sent me:

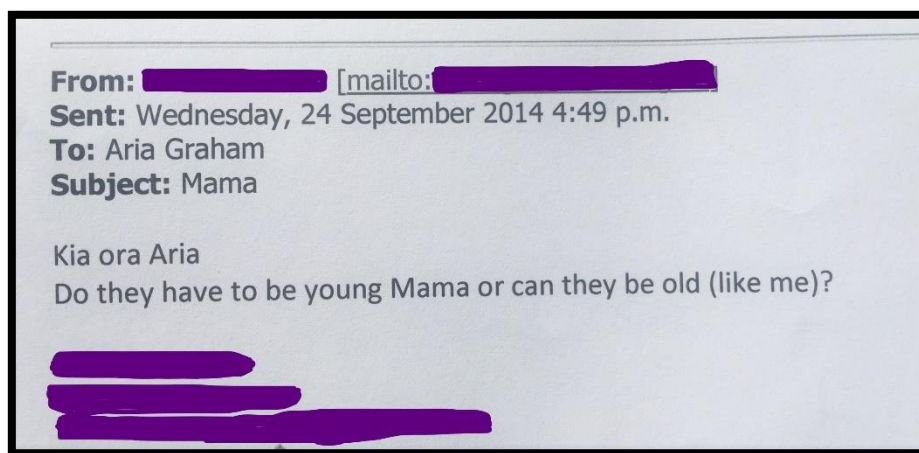


Figure 12: Email from a wahine pūrotu enquiring about being a participant

From a kaupapa Māori perspective, turning down their invaluable perspective and contribution, would have been extremely difficult and culturally inappropriate. However, the likelihood the doctoral thesis focus would become too broad and go off-course was possible unless the primary aim and questions changed. To conciliate, I engaged the guidance of my supervisors

and thus encouraged mothers/grandmothers to speak with their daughters, to consider participating and then encompassed grandmothers in that sense. Therefore, I met with three of ngā māmā who were slightly older and valued their insight.

Sixteen of ngā māmā met the specific criteria who were in various stages of being a home-mum, employee, trainee, student or a combination of several vocations. Eleven of ngā māmā were with partners, 10 of whom were the father of their tamaiti, one māmā was in a same-sex relationship and five of ngā māmā were single. Table 1 gives an overview of ngā māmā who participated in the interviews from the perspective of who they were as ngā māmā. These were not areas I specifically set out to gather information about. The iterations come out the stories of ngā māmā, as some of the most significant experiences that impacted their wellbeing, according to ngā māmā. These significant themes came from the data analysis, refined in phase four (Section 4.6 Data Analysis), preliminary to the final results.

Column one identifies ngā māmā by pseudonyms I randomly chose whilst I was in different spaces of the data collection, such as reading a book, article, listening to a waiata, the outdoor environment. The second column identifies who was at the setting during the interviews, although not necessarily part of or within the vicinity of the interviews taking place. The third column briefly outlines the whānau situation for ngā māmā within the context of the research, and the fourth column depicts who came through their stories as the most significant entity. The fifth column is a succinct outline of the work, training and study background and social connections of ngā māmā. The sixth column are the feelings and medical interventions ngā māmā experienced at birth. The main feelings and descriptions of postnatal unwellness are captured in the seventh column, followed by any indication of specialist postnatal baby care and the experience of skin to skin contact. The final column indicates who ngā māmā lived with immediately after the birth of their first tamaiti. This was significant as living arrangements in those initial days of motherhood, often contextualised wellbeing experiences of ngā māmā. All of ngā māmā raised breastfeeding in some way, however, as I had not specifically enquired about breastfeeding, nor set objectives to examine specific topics of motherhood I felt this was best not discussed in-depth. I was cautious about making implicit indications without formally exploring.

Table 1: Ngā Māmā

Ngā Māmā										
Ingoa Place of interview	At the kāinga during interview	Whānau	Main support	Mahi, ako, social	Birth		Post-natal unwellness - Adverse experiences (from those who disclosed)	SCBU	Skin to skin	Initial living arrangement I - independent W - whānau O - other
					Feelings	Intervention				
Marama Māmā's home	Friend Tamariki playing Mother	Māmā who lived with her partner and two tamariki Support from a close whānau particularly mum; aunts, sister, friends	Mum	Qualified and experienced in the health sector, sports and strong whānau and social networks	Challenge - joy	Pain relief	Baby with chronic condition, very difficult	No	Yes	I
Whetū Friend's home	Friend Tamariki playing Friend's mother	Māmā who was married with two tamariki; support from sister, mum and whānau, friends	Sister	Post-graduate qualifications and work experience; farming and coastal background	Challenge - joy	Emergency caesarean, catheter, baby injured	Blues	Yes	Yes	I
Rā Māmā's home	Nanny Partner Tamariki partner and nanny	Māmā who lived with her woman partner, grandmother and tamariki; support from nanny, mum, sisters, aunts, whānau	Nanny; mum	Work experience and supporting nanny in her older age; training and study	Challenge - unsure, scared	Episiotomy, scissors	Undiagnosed blues - GP said an alcoholic	No	Yes	W
Ora My home	Māmā and me	Māmā who lived with her mum dad, partner, tamariki and siblings; support from mum and whānau	Mum	Work related to sporting ability and background, interested in pursuing a career in law enforcement	Challenge - joy	Pain relief	Post-natal depression, diagnosed, medication, follow up	No	Yes	W
Aio Māmā's home	Nanny Papa Tamariki with nanny and papa	Māmā who lived with nanny, papa and tamariki; support from brother, sister in law and whānau, cousins, aunts, mum	Nanny	Bachelor's degree and work experience; sports and rowing social network	Challenge - joy	Pain relief	Sad, isolation, break up	No	Yes	W
Parearau Māmā's home	Tamariki playing	Māmā who lived rurally with husband and tamariki; support from aunty, mum (overseas), sisters, whānau and female friends from community	Aunty; mum	Work experience in industries like shearing and hospitality; sports, growing social network since living on farm	Challenge - joy	Pain relief	Sad, isolation, disconnection	No	Yes	I

Ingoa Place of interview	At the kāinga during interview	Whānau	Main support	Mahi, ako, social	Birth		Post-natal unwellness - Adverse experiences (from those who disclosed)	SCBU	Skin to skin	Initial living arrangement I – independent W – whānau O - other
					Feelings	Intervention				
Kiri Māmā's home	Mother Sister Tamaiti with nanny and aunty	Māmā lived with mum (working out of area and commutes), father, partner, tamaiti and sisters; whāngai and close with birth whānau; SUDI in whānau	Mum	Bachelor degree graduate, study, work, interest in clothing industry	Challenge - joy	Sweep, was to be induced	Blues	No	Yes	W
Kāpua Māmā's workplace	Workplace café Māmā and me	Māmā lived with husband and two tamariki; close support from whānau	Mum	Work experience in health sector, sports, strong social network	Scared – had to choose between mum and partner for surgery, was very upsetting	Long labour, oxytocin, epidural, caesarean	Struggled with unsettled baby, full on	Yes	Yes	I
Atawhai Māmā's home	Tamaiti sitting on māmā, playing	Māmā lived with three tamariki; strong support from mum, dad, sister, aunty, nanny and whānau; reconciling with father of tamariki; support from mother in law	Mum	Bachelor degree and working towards further study, work	Traumatic	Was going to be caesarean, stopped dilating, epidural, oxytocin	Major loss in whānau, break up	No	Yes	W
Kura Māmā's home	Father in law Tamaiti asleep on mattress	Māmā lived with partner, tamaiti and father in law; support from nanny, ex- mother in law, mum, whānau, friends	Nanny (wanted mum)	Had started bachelor degree with an intention to complete, strong social network	Challenge - joy	Wanted epidural but was too late	Blues, lonely, isolated	No	Yes	W
Aro Young parents' home	Other māmā Tamariki having a kai and playing Partner House- parents Social Worker	Māmā lived in young parents' home with partner and two tamariki, other māmā and house parents; close with mum, dad, sister and whānau	Mum, house- mum	Had moved from out of the area to be supported in young parents' home following CYF involvement; support from mum and whānau	Scared	Stopped dilating, emergency caesarean	Adversity	Yes	Yes	W



Ingoa Place of interview	At the kāinga during interview	Whānau	Main support	Mahi, ako, social	Birth		Post-natal unwellness - Adverse experiences (from those who disclosed)	SCBU	Skin to skin	Initial living arrangement I - independent W - whānau O - other
					Feelings	Intervention Caesarean				
Ria Young parents' home	Other māmā Tamariki having a kai and playing Partner House- parents Social Worker	Māmā lived in young parents' home with other young māmā and their tamariki, and house parents; strong connection and support from whānau, mum, sister, father	Mum, sister, father, house mum, female social worker	Difficult experiences, CYF and Police involvement but unsure of the circumstances, put in state care while pregnant and mistreated; doing well at home; moved around North Island by CYF	Afraid	Left in room at 'home' on her own, just felt like pushing Eventually taken to hospital No support, no communication whānau not told	No	No	Yes	O
Pania Young parents' home - was visiting	Māmā and me (private office space) Young parents' home adjacent	Māmā lived with partner and tamaiti; strong whānau support, mum dad; support from strong network of female friends, mother of a friend	Mum, friend's mother (“mother figure”), friends	Strong work ethic, military experience, strong active social network; sports	Challenge - joy	No	Undisclosed	No	Yes	I
Maia Māmā's home	Tamaiti playing	Māmā lived with whānau and tamaiti, mum, step-father, siblings	Mum	Work and training experience, studying; strong whānau connection	Challenge - joy	No	Undisclosed	No	Yes	W
Wai Māmā's home	Māmā and me	Māmā lived with partner and two tamariki, whānau support, mum, dad (separated), sister	Mum	Qualified, working, further studies; strong whānau network and working ethic	Challenge - joy	No	Bit sad	No	Yes	W
Ani Māmā's workplace	Māmā and me (private office space) Kohanga Reo	Māmā lived with mum, tamaiti and siblings and their families, father passed away; strong whānau connection and brothers' partners and ex- partner	Mum	Worked in shearing industry and overseas, in Māori education, strong connection with gang and Rastafarian cultures; strong whānau and social network	Traumatic	Epidural, massive haemorrhage blood transfusion	Sadness for tamaiti with absence of father	No	Yes	W

4.5 Data Collection

Prior to interviewing, I considered Māori epistemology that underpins kaupapa Māori concepts of navigation and engagement. To determine the suitability of conditions for various activities, Māori used cosmological and environmental markers, like a chart for voyagers or an almanac for gardeners (Harris et al., 2013). Knowledge of the signs, tikanga and an intimate connection with the seasons, tides, stars and moon directed the right times to relocate, travel, fish, plant, harvest and yield. An understanding of the relationship between the environment and people was essential to safeguarding the activities needed for survival and prosperity. Indigenous knowledge is grounded in observation (Suzuki & Knudston, 1992), and applies gathering tools; methods vital to cultural wellbeing.

The development of relationships between researcher and research participants in the data collection process is a key aspect of kaupapa Māori and qualitative research and was key for this research. Kovach (2018) claims relationality arises out of tribal epistemology, and in te ao Māori is captured by the notions of whānau, whakapapa and whanaungatanga (Bishop, 1996; Smith, 2000; Smith & Reid, 2000; Graham, 2007; Te Rito, 2007a, 2007b; Mahuika, 2008). Te Momo (2002) discusses research theories and practice applied in Māori communities, and engaging in research fieldwork premised on marae etiquette as a research technique. I adopted a similar approach to rituals of engagement theorised through te ao Māori. For me, a kaupapa Māori approach required that these notions of whakawhanaungatanga (building relationships) were sustained to the extent that the relationships were mutually beneficial and advantageous. Integration with qualitative methods to the data collection allowed me to get 'close' to the experiences and feelings of the participants, and therefore enabled experiences to be discovered as opposed to being predetermined (Ezzy, 2002). The dual approach is especially significant for people (of wider societal groupings) whose experiences and understandings have been oppressed and subjugated by dominant hegemonic policies and research methods (Ezzy, 2002); for instance, as Māori have been overtly and covertly subjected to since the mid-19th century.

Each māmā was offered time for karakia to begin and end the interview, time was given for whanaungatanga, and all of ngā māmā were given a koha (gift) for the privilege of their time and manaaki (hospitality). Participants were encouraged to have support people with them at any stage of the process if they wanted to, such as the time of the initial meeting and interview. Several of

ngā māmā chose to be interviewed by me in their home, while whānau remained in and wandered around in other areas of the kāinga. Their tamaiti or tamariki wandered in and out of the room during the interview, as did whānau members when attending to the tamaiti or doing household activities. If whānau appeared for the first time, I acknowledged them and gave a mihi (greeting) for allowing me to be there and the māmā would outline what was going on. Whānau appeared interested and intrigued, and with the ‘ok’ from ngā māmā would stay to listen. Occasionally whānau were invited by ngā māmā to contribute or were engaged by ngā māmā who asked or called out for a whānau perspective on whānau-related topics that had emerged. On one occasion, a māmā asked a parent to give some insight into an event and once they were finished, she announced “Thanks, you can go now, this is my time”; we all laughed at her declaration.

I used te reo and colloquial language as this is my demeanour, but it conveyed my knowledge and comfort with language variation, particularly with our own te reo Māori. Being a researcher within kaupapa Māori, it is vital to have an understanding and appreciation of the language. For Indigenous peoples, Kovach (2012) and Smith (1997) claim language is implicitly connected to Indigenous worldview as it is central to epistemologies, communication and relationality. Battiste (2002) offers that language is essential to the survival of Indigenous knowledge, because knowledge, history and legacy are transmitted through Aboriginal languages. I integrated te reo Māori throughout the data collection but allowed the knowledge and use of te reo Māori by ngā māmā, to guide me as to how much and in what ways were most beneficial. The significance of language has been discussed by many Māori and Indigenous scholars (Smith, 2000; Pihama et al., 2002; Maaka & Fleras, 2005; Mahuika, 2008; Vakalahi et al., 2013), alongside its necessity in kaupapa Māori and kaupapa Māori research (Smith & Reid, 2000; Powick, 2003; Walker et al., 2006). As a technique in data collection, the innate use of te reo Māori was imperative. Therefore, it was favourable to be firstly cognisant with te reo Māori and tikanga Māori, and secondly to be clear, transparent, available, and prepared with the accompanying documentation in the moment, rather than an ‘I’ll get back to you’ approach.

I talked to ngā māmā about the Interview Guide (Appendix E) and allowed them to ask questions. However, as Flick (2018) states, not all participants are ready to be interviewed, and could be dissuaded from participating. One must consider the target group, their characteristics, and their understanding or previous experience with the research world (Sadler et al., 2010; Flick, 2018);

potential participants could feel over-challenged. The potential to over-challenge participants is a consideration not only applicable to those who have been marginalised and are vulnerable, but has included professionals who have opted not to be observed or recorded in their practice for research purposes, but agreed to interviews, and vice versa (Flick, 2018).

A whakapapa of the process was shared and created in collaboration with the participants. Graham (2009) describes whakapapa as one of the most prized possessions of knowledge for Māori and great value is placed on its preservation. Therefore, a whakapapa created between the participant and me as researcher was a valuable and valid kaupapa Māori tool in connecting and guaranteeing collaboration along the journey. Agreed times of progress updates were provided by me for the participants through a means of communication as requested by the participants; such as face-to-face meeting, text, email, post and so forth. This usually occurred through planned and opportunistic kanohi ki te kanohi contact, text and phone.

I gathered the narratives of the experiences of ngā māmā through audio-recorded interviews, which were open-ended. Kaupapa Māori principles (Katoa Ltd, 2017) introduced earlier, were considered and applied whilst designing and throughout implementation of the research methods utilised in the research. These included utilising aroha (affection), kanohi kitea and tikanga. The principle of tikanga is about a code of rights or set of rules (Mead, 2016). As a researcher utilising a kaupapa Māori framework, it was imperative to understand and have knowledge of tikanga Māori. Tikanga was the underlying self-check-o-meter that provided a guide and compass to the research design and methodology. Connections were drawn between reflexivity and tikanga as methods to constantly reflect and consider my approach, conduct and trajectory. Tikanga is not only personal, but is based on a Māori worldview and therefore has mutual understandings and ramifications to (mis)conduct. Pan-tribal variances in tikanga were respected as were the adaptations of tikanga by many Māori over time and throughout a contemporary context. Therefore, it was essential to listen to the kōrerorero (conversation) of ngā māmā relating to tikanga based on the Māori epistemologies of individual māmā and their whānau, and not impose my view or a 'wide brush' to interpretation, knowledge and application of tikanga. I acknowledge a temptation to have made general cultural assumptions throughout the process, however, it was through the distinctions and unique expressions of ngā māmā that rich and meaningful data was uncovered.

4.5.1 Interviewing

The way the interviews were conducted, was essentially determined by ngā māmā, which firstly maintained a reciprocation of trust and control between participant and researcher within a kaupapa Māori context. Secondly, the principal intent was to ensure the rangatiratanga of ngā māmā in the most meaningful and sincere sense while meeting the aim of the study that was to explore the experiences of wellbeing around their birth of the first tamaiti. Originally, the enquiry focused on the period ‘following birth’. However, during the initial interviews it was clear to me that in retelling their respective stories, ngā māmā were returning to their journey of becoming a woman and a mother, which included narratives around growing up, adolescence, pregnancy, the build up to giving birth and becoming a māmā. Therefore, I responded to this phenomenon and changed the scope of the enquiry to be inclusive of the journey as naturally defined by ngā māmā.

The interview guide (Appendix E) was written in a way that was easily understood without too much jargon. The initial question of ‘wellbeing’ was purposely positioned at the beginning of the interview to set a foundation. The intention then, was to incorporate ‘wellbeing’ throughout the subsequent areas of enquiry, towards a point where the initial enquiry about wellbeing could be reflected on, and explored for any change or further insight. As wellbeing was purported through the literature review as an individual and collective concept with multiple interpretations, definitions and measures, it was essential to firstly ask ngā māmā what wellbeing meant to them. This was then teased-out, and explored later for any distinctions and similarities between ngā māmā.

Based on the ambiguity and individualistic nature of wellbeing and the need for a kaupapa Māori perspective, wellbeing was extrapolated to ensure an organised method was implemented, and to avoid a haphazard assembly of ideas. Engaging with Māori participants about their personal lived experiences to inherently learn about their wellbeing was acknowledged as sacred ground, and gaining knowledge required respect and protection in terms of seeking, gathering and storing. It was important to acknowledge the sacredness of such knowledge gathering as Salmond (1997, p.401) states, “tapu, or cosmic power, was the source of all creation bringing together complementary forms of life, generating new beings”. Therefore, the guide was constructed based on a Māori worldview that wellbeing consisted of interconnecting components impacted by varying factors, that was relational to a contemporary context. I integrated the five dimensions of

the Māori model of wellbeing, Te Whetū (Mark & Lyons, 2010), into the data collection process as holistic and ideal to guide the interview process and frame the questions.

The method to developing the interview guide (Appendix E) was pertinent, as it needed to demonstrate to the participants that the study was conscientiously based on kaupapa Māori methodology. Te Whetū was not presented in its pure form, but sculpted to encompass the objectives of the study based on Māori epistemological understandings of the tenets, to fulfil the overarching question. I allocated only two questions per dimension, as I was confident that the enquiry and subsequent conversations would elicit plentiful information. I enquired what impact the experiences surrounding the birth of their first tamaiti had on their wellbeing, in regards to the dimensions of Te Whetū; that is, wairua, whānau, whenua, hinengaro and tinana. Although the questions were based on Māori-specific concepts, the questions were open for interpretation and free discussion. Knowledge of kaupapa Māori concepts was not a requirement of ngā māmā, but certainly generated discussion about wellbeing, for example, one māmā queried – was wairua and spirituality about religion and going to church, or something more personal and meaningful to her and her whānau? These queries were not ‘answered’ by me, but left for ngā māmā to talk about within their story. The interview guide worked as an effective but non-prescriptive tool in exploring the wellbeing experiences of ngā māmā as they reconstructed their personal experiences through storytelling.

The interview and engagement process were guided by carefully considered questions, themes and prompts generated by a comprehensive literature search (Tolich & Davidson, 1999). The process involved a Māori worldview, my knowledge-base and active listening techniques (McCormack, 2000; Given, 2008) such as verbal disclosure and body language expressed by participants. I gave ngā māmā an estimated time of how long the interview would take and they reciprocated by giving me an undetermined time limit in which to conduct the interviews. Most of ngā māmā participated while caring for their tamaiti or tamariki and occasionally got up to tend to tamariki by breastfeeding, making bottles, finding snacks or changing kope (nappy). The activities did not appear as distracting but helped ngā māmā relax, focus and engage as they could care for their priority needs at the same time as participate. It was a privilege to observe ngā māmā doing, talking, knowing and being ‘māmā’. In some cases, I provided a cup of tea and kai depending on the preference, choice and comfort of ngā māmā, or ngā māmā offered tea, coffee or water. I would

indicate at what point in the interview we were at and enquire with ngā māmā to how they were feeling about the interview, the time it was taking to do and if at any stage, she wanted to finish. Most interviews took between 60 to 90 minutes.

Not long into the interviews it was evident ngā māmā became more comfortable and familiar with the experience of the kōrerorero, often becoming more conversational and animated. Every interview became very relaxed demonstrated in the humour, ease in expressing feelings, and atmosphere. Most of ngā māmā described the interview experience as a type of “therapy” and thanked me for the opportunity to share their story. On several occasions, ngā māmā became overwhelmed with emotion and paused to take a breath or cried while recalling their experiences. Some of ngā māmā became quiet and some were visibly moved. When I offered to stop the recording, ngā māmā expressed they were comfortable to carry on. I felt that these were moments ngā māmā were recalling some of their most meaningful experiences. During some interviews, ngā māmā would pause to collect revered objects or illustrate something significant that represented to them their connection to wairua, their relationship with their tamaiti or the experience of becoming a māmā. These were highly valued moments that I was very honoured to experience.

The interview method was conducive to a kaupapa Māori approach as it necessitated that I, as the researcher, maintained the inherent responsibilities while conducting research in Māori communities, such as ‘aroha ki te tangata’ (Te Awekotuku, 1991). In the instances where there were more than one participant contributing to the interview I had to manage time more carefully to ensure each participant had the opportunity to tell her story and at the same time cover the core enquiry. Generally, this was not an issue, as the interviews with more than one participant balanced well as ngā māmā enhanced and stimulated each other’s stories.

Towards the end of each interview, ngā māmā were asked again if from their story-telling did they have any other thoughts about what wellbeing means to them and how their experiences influence who they were today. Ngā māmā often smiled considering the wealth of knowledge they had voiced and shared about their personal identity. At the conclusion, time for karakia was offered again. I was very humbled and inspired by the experience with ngā māmā. In accordance with kaupapa Māori, I felt they had shared with me a taonga (treasure), and I offered a koha at the time

of the interview in likeness of a small gift of appreciation (Metge, 1976; Vakalahi & Taiapa, 2013; Mead, 2016). However, as my understanding of te ao Māori has developed over the research process and the findings were revealed, I had cultivated those learnings into additional koha discussed in 4.5.2.

4.5.2 Koha

Koha is described as a donation, gift, contribution (Barlow, 1993) or present; an act of gift-giving with a tradition behind (Mead, 2016). Gift-giving in te ao Māori is about being tika, that is demonstrating good grace (Mead, 2016). “Principles of reciprocity, equivalence and manaakitanga mediated by whakapapa, mana and relationships guided the actions of gift-exchange partners” (Mead, 2016, p.196). As part of kaupapa Māori methodology, koha was intrinsic as it imparted a reciprocal gesture for the contribution made by ngā māmā to my research.

As researcher, I was very humbled and felt there was no material gift to convey my appreciation to ngā māmā for something so treasured and personal as their time and experiences. However, as a token of thanks, a small gift was given following the interviews and at the end of the research process a more significant koha was offered. Being extremely moved and impassioned by the study, I was compelled to seek out the knowledge and skills of a local clay-worker and spoke with her about the PhD research and celebrating wāhine Māori. We discussed a Māori worldview and the creation story, and how this related to ngā māmā and my findings. I asked if the clay-worker would show me how to make ‘ipu whenua’ or ‘oko’, clay vessels traditionally used for the placenta and the umbilical cord to be stored or buried. The clay-worker expressed she was very moved by the preliminary conceptualisation of the data and the ipu whenua, and invited me to spend time with her learning to mould and shape ipu whenua. I spent precious time creating the ipu whenua, imprinting them with unique designs (Figure 13). My sons helped too and loved hearing about what I was doing and all the special things about te ao Māori. In such an intense and busy time, it kept me bonded with my tamariki. I offered each māmā a quality copy of their interview, an abstract and summary of the preliminary analysis, vouchers and the ipu whenua as koha for their generosity. Following completion of the thesis, I envisage visiting each māmā again, hear how they are doing and share with them the findings and outcomes of the thesis. I will also discuss the next steps I am planning, and ask ngā māmā for their recommendations and ideas about furthering the kaupapa around raising the wellbeing of tamariki, young Māori mothers and whānau. This will

include asking ngā māmā if they would be interested in being involved in ongoing developments and dissemination.



Figure 13: Koha - Ipu Whenua I made for ngā māmā

Koha or the act of reciprocating or giving koha was an important part of the research process, whether it was with ngā māmā, the community, rangatira, my supervisors or my whānau. It was a way of showing gratitude and aroha. From a kaupapa Māori perspective, the ritual of koha is a significant feature of utilising kaupapa Māori methodology that connected to Māori ethical values previously alluded to. Additionally, the integration of Māori methods with traditionally western research paradigms must be based on realising Māori aspirations, needs and preferences. Scholarly assertions from a kaupapa Māori perspective pertain to the premise that the outcomes of research by, with and for Māori are long-lasting, perpetual and transformative (Smith, 2003, 2012).

Through feedback, the relaxed informal nature of the interviews was expressed as pleasurable for the participant and their significant people. Follow-up interviews for clarification and additional information were discussed, but none were requested by either ngā māmā or myself. I summarised remarks and indicated when and how further contact would happen if that was appropriate for ngā māmā to which all of ngā māmā agreed. Following each interview, data was stored to my personal

computer with password and code access. The storage, security and destruction of the data were communicated with the participants prior to signing informed consent.

4.6 Data Analysis

In applying a kaupapa Māori methodology, I endeavoured to use a kaupapa Māori method to data analysis. In doing so, I reviewed and critiqued literature surrounding the analysis of data from a kaupapa Māori paradigm. Several scholarly publications discussed kaupapa Māori methods, or adaptation of methods from western research methodologies such as qualitative research methods whilst explicating that tools must be conducive and complementary with kaupapa Māori methodology. There is a tension and challenge that derives from binary perspectives and epistemological understandings, which requires Māori scholars to justify and legitimise kaupapa Māori approaches within dominant western research discourses. Albeit there were exemplars of kaupapa Māori approaches to analysing data, the literature is small but growing and an exciting area of kaupapa Māori research.

In regards to the application of Māori approaches to data analysis within a western research paradigm, I spoke with Māori scholars and rangatira on this quandary and referred to the literature particularly by authorities proficient in kaupapa Māori theory. The scholars and rangatira argued that gaining a footing within the dominant western research paradigm has meant a struggle for autonomy over our own culturally distinctive Māori epistemologies and worldviews that shape and inform our different worlds, which is conferred by Smith (2012). However, this is not to say that Māori knowledges or approaches to methodology and method are inferior, weak or auxiliary to those that are Eurocentric. Indeed, the contrary. Kaupapa Māori tools are as valid and resilient to the rigour of critique as non-Māori paradigms (Irwin, 1992) and transform conventional western thinking (Barnett & Gillies, 2005). Historically, research performed on Māori by non-Māori researchers from methodologies incognisant with a Māori worldview, distorted depreciated and gave agenda to disrupt Māori ways of being, thinking, knowing and doing (Smith, 1999). In stark contrast, kaupapa Māori research now affords the epistemological, philosophical and methodological frameworks to correctly engage research with Māori peoples and most importantly, demands accountability of that engagement.

Lavallee (2009), from the Cree nation and French Métis, discusses in her paper, the challenge in bridging Indigenous ways of knowing and western ways of conducting research, specifically qualitative. In her deliberation of Indigenous knowledge, she acknowledges the term ‘blood memory’, which is based on the belief that thoughts, actions and beliefs are transferred from ancestors through blood; akin to a Māori worldview. Upon this Lavallee (2009, p.22) asserts “Spiritual knowledge cannot be observed by physical means; therefore, as it cannot be measured or quantified, Indigenous spiritual ways of knowing are often dismissed by Western researchers”. Therefore, without Indigenous or kaupapa Māori approaches to data gathering and analysing, there would be no way to credibly discover nor authenticate an account of those knowledges integral to those respective worlds and realities.

For my doctoral research, I utilised a sequential approach to data analysis that encompassed a kaupapa Māori analytical framework with thematic analysis. The interface of western and Indigenous approaches to research analysis has been a common space Indigenous researchers have encountered (Smith, 2012), and presented an exciting opportunity for me. As my research had its origins at Master’s level prior to the upgrade to a doctoral thesis, I had already commenced an analysis of the formative data using a thematic approach alongside an acknowledgement of the application of a kaupapa Māori lens. At that stage, a Māori approach to data analysis remained esoteric in nature, but the beginnings of an appropriate framework had begun formulating. It was within the scope of the doctoral work that deeper exploration and enhancement of a framework was undertaken. To maintain consistency but advance my approach within the doctoral research and contribute to the kaupapa Māori research academy, I continued to apply an analysis in the former vein whilst expanding and strengthening a distinctive Māori framework and lens to data analysis; explicated and discussed in section 4.6.2.

4.6.1 Examples of Kaupapa Māori Analytical Frameworks

I explored the literature from dissertations, research and studies that had generated and applied kaupapa Māori analytical methods to research, and have described distinctive approaches that represent the diversity and capacity within te ao Māori to analyse data. Royal (1998) developed Te Ao Marama: A research paradigm, that drew on the traditional Māori concept of whakapapa as a strength to inspire contemporary Māori theorising and philosophical contemplation. To this end, whakapapa was recognised as an analytical tool to help make sense of “the nature of

phenomena, the origin of phenomena, the connections and relationships to other phenomena, describing trends in phenomena, locating phenomena and extrapolating and predicting future phenomena” (Royal, 1998, p.4); that is, a tool to explore the presence and existence of phenomena. The technique proposes that the analytical process be applied and utilised as required, until research objectives are reached. The method is premised on the notion of whakapapa: a living construct that allows a view to the past and a prediction of the future.

The Whānau Tuatahi research framework, developed by Jones et al. (2010) out of a community-researcher partnership, was examined as an agent for whānau voices to be heard and privileged within the health sector. For this study, western research methods were used in combination with kaupapa Māori. For instance, Interpretive Phenomenology Analysis was used as complementary and conducive to the kaupapa Māori methodology, and ‘Te Whare Tapa Whā’ (Durie, 1985) provided the analytical framework in which the cultural context was analysed. From the integrated approach to analysis, Jones et al. (2010) claimed the research framework as a mechanism for viable adaptation and application of western research methods within a kaupapa Māori methodology. They also quantified the validity through outlining the application of the exemplar using kaupapa Māori principles.

Finally, is the notion of Indigenous elders being sources and conduits of knowledge and guidance; embodied by kaumātua in te ao Māori. Having the support of kaumātua is critical to kaupapa Māori research (Glover, 2002; Walker et al., 2006) to provide protection, spiritual supervision and elevate the cultural agenda throughout the process. Therefore, kaumātua are precious instruments, who through their deep understanding, insight and clarity open the pathways to cultural knowledge by drawing upon ceremonial activities of rituals and mihimihi. Accordingly, kaumātua provide “intellectual involvement in analysing data” (Smith, 1999, p.12). Through kaumātua, their wisdom and innate connections with whakapapa, tikanga, whenua and mātauranga, we have portals and instruments to assist with making sense of and interpreting what we wish to explore.

The three exemplars explicated above, demonstrate pliable, distinct and diverse ways in which kaupapa Māori scholars have recognised distinctive approaches to data analysis from a kaupapa Māori perspective, and applied them. Each exemplar presents pertinent factors that are inherently

cultural, and without cultural distinction research methods that involve Māori is remiss of an authentic approach towards research ‘by Māori, about Māori, for Māori’.

4.6.2 ‘Haaro te Kaahu’ - a Kaupapa Māori Analytical Framework

To organise, frame and make sense of the layers of rich data extrapolated from the stories of ngā māmā, I developed an analytical framework based on a Māori worldview, cultural and tribal epistemological understandings. To do so, I selected a traditional whakataukī from Ngāti Kahungunu that explicates the application of a lens to analyse through. The framework is entitled ‘Haaro te Kaahu’, which captures the aptitude of the kaahu to perceive the world through her/his unique perspective (Figure 14). The practical method of analysis I was undertaking, was clearly an activity of identifying, coding and sorting themes much like the kaahu examining the layout of the land. Additionally, in maintaining a kaupapa Māori commitment to the research approach and design, the method of analysis occurred whilst sequentially considering a cultural perspective. It emerged that this was a cultural approach to analysing the data, and I was able to locate the activity within kaupapa Māori by theorising and developing the framework.



Figure 14: Haaro te Kaahu¹⁵

The origin of the framework begun with the Master’s thesis where I posited the concept realised through my research, and the doctoral work has allowed me to develop and present a critical discussion around the development, conceptualisation and theorising of a kaupapa Māori analysis

¹⁵ This image depicts the kaahu from the Heretaunga whakataukī of Ngāti Kahungunu that soars above the Heretaunga Plains across Te Matau a Māui (the Hawke’s Bay area), surveying the landscape and exploring the surroundings through a distinctive Māori lens. This was drawn by my sons and me.

method. The utilisation of whakataukī is exemplary for conveying mātauranga about the world from a Māori perspective, which are used throughout traditional and contemporary contexts. The allegorical nature of whakataukī offers a distinctive cultural lens that for me, maintained a consciousness to a Māori way of thinking, understanding, doing and being as a Māori researcher whilst working within the conventional western research paradigm.

The concept of lenses and stages resonated with my research that is, as Māori, we interpret the world through shared epistemological understandings, worldviews and distinctive cultural knowledge. From a tribal perspective, the adaption of the kaahu is symbolic, which embodies the notion of viewing, perceiving and analysing her/his landscape. The landscape could otherwise represent discoveries, data, surroundings, environment or experience. Therefore, the time-honoured whakataukī emanates a unique cultural vantage point of an analytical system, based on a Māori viewpoint of perception, value and belief systems, heritage, the vitality of land and language.

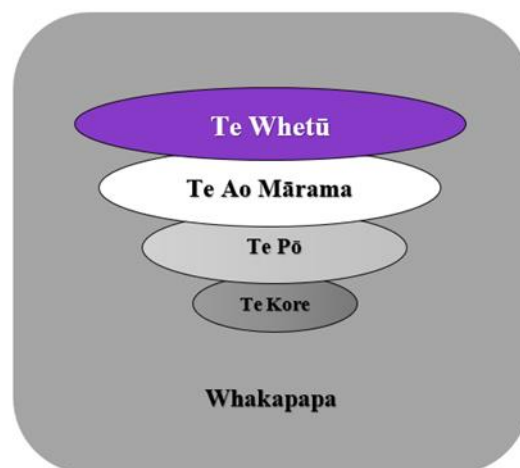


Figure 15: Linear lenses of Haaro te Kaahu

Diagram 15 is a linear explication of the lenses encompassed by Haaro te Kaahu – a kaupapa Māori analytical framework. Whakapapa provides a basis for Haaro te Kaahu, in that everything is interconnected from a Māori perspective. Whakapapa for Māori has origins in the metaphysical as divine beings, to our human genesis; anchoring Māori to the present whilst reaching into the future. Whakapapa has been analogised to a lineal structure and organisation of mātauranga,

providing a system from which to understand and connect. Therefore, whakapapa is an instrument, lens or method to how we rationalise our experiences given space, context and time.

Te Kore, Te Pō and Te Ao Mārama are the stages of transformation that take place during process, development or creation. Although the stages derive from primal origins as described in Chapter Two, Literature Review, our ancient mātauranga is applicable throughout our modern lives. In a contemporary context, the stages may represent the conception and development of a foetus to a baby, the beginning of a thought to a tangible result, the phases of learning a new skill or knowledge to proficiency. In regards to Haaro te Kaahu, the stages represent the way the data was considered, sorted and coded as the data shifted and transitioned as greater development and understanding was gained. For example, in the state of Te Kore (the stage of untapped potential), the data entered a domain of chaos and formlessness. The lens was broad and encompassing, without a preconceived idea or bias to the potential of what could 'become'. In Te Kore, the data was not 'nothing', but it was a gathering of multifarious mātauranga that required careful consideration and time to become familiar with. The question posed was 'what was the whakapapa of the data?', that is, what was the origin of the conceptions, how did the data appear in context to the enquiry, what was emerging, and from the current status how was it progressing? Once some idea of the nature of the data had been perceived through a lens of Te Kore, and whakapapa was applied to vaguely consider some organisation and structure, the data shifted to a state of Te Pō.

Within Te Pō (the stage of form and development), the data was arranged further using a whakapapa process of determining connections whether they were similarities, differences or miscellaneous. The lens narrowed, grouping relational words and notions particularly taking note of significant connections to wellbeing and te ao Māori. The data was shaped into subthemes that were then examined again for additional relational associations. An important and advantageous aspect of Haaro te Kaahu, was the overlapping of stages and the capacity to return the data to former states should there be a need, as per the traditional custom of the creation stages. Nothing was unmalleable. For instance, if the data became impeded or difficult to interpret and shape within Te Pō, the lens would shift from narrow to broad again to ensure the analyses was shaping according to a thorough and critical process. The flexibility of Haaro te Kaahu was important as the analysis design needed to avert the risk of forcing or assuming any associations in the data. For example, the early stage of Te Pō was a period for examining associations closely without

rigidity, thereby the structure or the whakapapa of the data became clearer through analytical care. If the data had returned to a state of Te Kore due to ambiguity, the process was stepped back and re-examined, and began again to ensure congruity. The completion of the Te Pō stage in Haaro te Kaahu, was evident when the data had formed clear sub-themes with explicit links and congruency; an organised whakapapa of themes.

The fourth lens was Te Ao Mārama (the stage of enlightenment, new understanding), and was reached when the sub-themes were clearly explicated. From here, the main themes were defined and firmly identified, and were theorised to how they relate to the mātauranga of te ao Māori. To ensure the data had evolved to this point, I utilised a fifth lens to strengthen the findings of the data. Te Whetū, which was implemented at the beginning of data collection as a framework for the interview questions to connect the enquiry to a Māori perspective of wellbeing, was reinstated to analyse whether the themes connected to wellbeing through a Māori lens in relation and context with ngā māmā. The findings were theorised alongside the five dimensions of Te Whetū: whānau, wairua, whenua, tinana and hinengaro. When the findings aligned congruently and corresponded with each of the lenses, the process was regarded as complete; or ‘whakaoti’ (complete/ concluded); or in western research terminology: saturation.

The analysis of the data was explored using Haaro te Kaahu and thematic analysis sequentially, which provided both a robust and purposeful method to analysing the data. The analytical techniques combined simultaneously to ensure a complementary and valid approach to analysing data from a kaupapa Māori viewpoint that raised the capacity of a conventional western research method of analysis to new potential within an Indigenous research paradigm. Exploring, identifying and interpreting codes, symbols and themes is an integral part te ao Māori in the creation of mātauranga, and is by no means a contemporary practice. However, Haaro te Kaahu enables a kaupapa Māori analytical framework to transpose and contribute to the western research paradigm, enhance kaupapa Māori research methodology, and espouse a method that is critical and thorough in analysing research data to a point of comprehensive and reliable findings. Haaro te Kaahu as an analytical framework, encompasses kaupapa Māori and mana wahine theories and brings with it an in-depth cultural perspective. Alongside a recognised method of analysis, Haaro te Kaahu assists in creating new knowledge, a new contribution to the research academy whilst expounding kaupapa Māori as ‘taken for granted’ and ‘the norm’.

4.6.3 Thematic Analysis

Denzin and Lincoln (1994, p.212) state in a list of characteristics that “Qualitative design demands time in analysis equal to the time in the field” and “requires ongoing analyses of the data”; statements that certainly reflect my process. In carrying out the data collection with my research question, aims and assumptions postulated, I recognised congruence within the stories early on as I immediately started the activity of familiarising with the data. Braun and Clarke (2006) explain it is vital to begin analysis early into data collection, describing this activity as part of phase one. Being cognisant of former findings is important to thematic analysis, so as not to reinvent the wheel, be aware of preconceived notions that are theoretically derived, and open to allow new ideas emerge (Joffe, 2012). For me, this method ensured an impetus to ongoing awareness of the data towards establishing saturation at the appropriate time. Although distinct stories, the thematic nature of the presenting data correlated with the recurring themes recognised as resplendent throughout te ao Māori.

As mentioned, Māori epistemology is laden with codes, metaphors, symbols, markers and signs, used as guides to make sense of the world around us. To explore and examine the data in a method complementary to the kaupapa Māori methodology and research aims, I was drawn to thematic analysis. Thematic analysis aligned well with the development of Haaro te Kaahu. Fundamentally thematic analysis is theoretically flexible and accessible in a raft of ways to analysing qualitative data and although it may seem the ‘poor cousin’ to much more specific, exclusive and better named analytical methods, thematic analysis is diagnostically technical, has distinctive procedural phases and can be done really well or really poorly (Braun & Clarke, 2006). Identified as a worthy method of analyses for beginners and frequently applied by nurses (Vaismoradi, et al., 2013) in the research experience, thematic analysis essentially underpins most methods (Braun & Clarke, 2006) and can be used across methodologies and in relation to different epistemological and ontological positions, to provide rich, detailed and complex account of the data. Therefore, in terms of kaupapa Māori research, it was effective methodologically, epistemologically, ontologically and culturally in my research and as demonstrated, was implemented sequentially with an original kaupapa Māori analytical framework.

“Thematic analysis is a method for identifying, analysing and reporting patterns (themes) within data” (Braun & Clarke, 2006, p.79). It was useful to be cognisant with the terms associated with

data such as data corpus referring to all data collected; data set is all data from the corpus being used for a certain analysis (Joffe, 2012); data item is each individual piece of data such as an interview, screen biopic or observation that together make up the data set or corpus; and data extract, which is an individual coded piece of data identified in and drawn out of the data item (Braun & Clarke, 2006). Not all extracts manifest in the final analysis, however, the method, attention to detail and veneration of the stories necessitate due process to encapsulate the data corpus to data extract, to ensure a comprehensive and thorough research analysis. It is important that the theoretical framework and the method match (Braun & Clarke, 2006) and to this end I developed an analytical framework that applied to both conventional and kaupapa Māori analytical activity. I have outlined the phases of the thematic analysis process I utilised, applying Braun and Clarke's (2006) six phase process. I acknowledge the sequential application of Haaro te Kaahu, however, to extrapolate the phases and distinction between methods whereby Haaro te Kaahu is more fluid, I have set out the phases of the thematic analysis in Table 2 to clarify the process I undertook.

Table 2: Sequential stages of data analysis - Analysis process, Haaro te Kaahu and phases of thematic analysis¹⁶

	Design	Data collection	Data Analysis					
	Pre-stage One	Pre-stage Two	Stage One	Stage Two	Stage Three	Stage Four	Stage Five	Stage Six
Analysis process	Design	Set up of data collection Gather data	Raw data	Develop data	Synergise data	Review data	Re-check findings	Definitive Saturation
Haaro te Kaahu – stages and lenses	Integrated approach with kaupapa Māori	Gather data	Whakapapa Te Kore	Te Kore	Te Kore Te Pō	Te Pō	Te Pō Te Ao Mārama Te Whetū - reinstate lens	Te Ao Mārama Whakaoti
Thematic Analysis - phases	Phases	Gather data	Listen, transcribe, initial overview	Develop codes and themes	Themes and sub-themes	Review data	Re-check findings – what does it mean	Definitive Complete

¹⁶ Table 2 has been developed and explicated by me

Subsequent to gathering the data (Aronson, 1995), phase one (whakapapa/Te Kore) required familiarising myself with the data which I accomplished through at least two aural reviews of each interview paying attention to tone and inflections, constant engagement with the transcripts, immersing myself and *actively* reading the data in search of meanings and patterns while making initial notes and loosely forming ideas through diagrams. It was critical that I had full transcripts of the recordings, and had read the whole data corpus given that qualitative research usually has smaller samples due to the time-consuming stages of analysis. I manually coded, took notes and wrote on transcripts and in notebooks, drew mind-maps and art to organise my data. I then transferred the data to tables and synopses in word documents, and started the process over for the next phase. This helped with my abstract thinking as it required systematic grounding and I could visually see and understand the evolving data. The evolution of analysis in this phase is synonymous with a shift to Te Kore in the Haaro te Kaahu, as it recognised that the initial stage was a gathering and meticulous processing of raw data, to formulate preliminary notations.

In phase two (Te Kore), I began coding purposefully, focusing line by line, looking for significant and recurring words, phrases or concepts and generating initial codes whether semantic (surface), or latent (buried) I was not yet conscious of. Te Kore remains significant to this stage, where the potential meaning of the data is in early stages. As I progressed I theorised and continued reviewing literature but refrained from interpreting at this stage. I did not want to contaminate the bedrock of coding being laid down by translating over-enthusiastically. Phase two was systematic and a critical time for identifying and noting data on equal terms, while resisting the propensity to begin establishing themes (phase three). I allowed the data to speak for itself although the theory was travelling alongside. Phase two culminated as a mass of transcripts and note pads of data that had been underlined, circled, coloured with highlighters, tabbed and marked with arrows and ‘post-its’, sign-posting various features.

In phase three (Te Kore - Te Pō), I began re-focusing the data to a new level of themes, by collating the coded extracts in relational groupings (Aronson, 1995). Themes were revealed by "bringing together components or fragments of ideas or experiences, which often are meaningless when viewed alone" (Leininger, 1985, p. 60). In regards to Haaro te Kaahu, this phase enters into Te Pō, the stage of development, form and shaping. By now I was analysing the codes searching for overarching themes which took some studying as there were threads, distinctions and grey areas.

Phase three was where the interpretive analysis occurred in relation to exploring the phenomenon drawn from the data. For example, throughout the individual stories, ngā māmā referred to their ‘mum’ or their ‘mother’ at various times which showed through the preliminary coding. As an initial step of phase three, I returned to the transcripts to examine each time reference to ‘mum’ or ‘mother’ occurred and noted the context it was embedded in including the situation, event, experience, feeling or space around that extract. Shifting the extracts through tables, mind-maps and diagrams helped, drawing on an aesthetic proclivity.

From the data that I collated from the first six ngā māmā interviewed, distinctive themes became the formative ideas prior to recruiting another ten ngā māmā. The new data consistently related to the formative themes as I systematically went through, checked and tested by reviewing the context of the narratives, and then integrated. Reflexivity was imperative as it would have been remiss to have made injudicious assessments. Main groupings were captured as being overarching themes, subthemes and lingering codes assembled under miscellaneous for that time. Everything was housed and nothing was abandoned. Four areas developed as pertinent themes, that is, relationships, change/transition, adversity and healing. These themes manifested across four spaces, according to the accounts of ngā māmā: pre-pregnancy, pregnancy, birth and following birth. From here I gathered recurring subthemes and codes.

As the period following birth was a significant space, I extrapolated the themes further exploring and examining subthemes and codes. Adversity was a significant domain to derive from the data at this phase. By phase four I refined and reworked the key themes, whilst in a state of Te Pō. Through theorising the relational properties several themes merged together while others evolved as insubstantial, manifesting elsewhere, did not have enough data to uphold them, or the data was too diverse and incongruent. I queried if the patterns were consistent and if not was there an issue with the theme and was I forcing the data to relate. I then re-read the entire data set, to review whether the themes were relational and accurately reflected and represented the meaning of the data as a whole. I felt apprehensive at this time as I did not want to proceed to themes that were misrepresentative of the stories of ngā māmā. On reflection, I believe this is part of being accountable and reflexive in the role as researcher. Therefore, I spent considerable time on the coding and themes and re-analysing the analysis I was conducting.

In phase five (Te Pō - Te Ao Mārama), I was certain of the themes and related subthemes, and began ruminating the *essence* of the themes in theorising from a Māori worldview, which underpinned the entire data analysis. From this phase and in accordance with Haaro te Kaahu, the analytical process was entering Te Ao Mārama, from a Māori lens of data analysis. As mentioned, te ao Māori is laden with metaphorical connections to mātauranga Māori and in discussion with ngā māmā, rangatira and Māori scholars the themes were named in accordance to the foundational epistemological understandings with the individual māmā and stories in mind. Braun and Clarke (2006, p.92) assert “It is important not to try and get a theme to do too much, or be too diverse and complex”. By returning to the coding, the organisation of the data and narratives and without forcing a connection, I was realigned to the essence and designation of the themes (Aronson, 1995). By this stage I could articulate the themes and the corresponding data in relation to the data set, the research title, aims and in terms of the methodology. Familiarising and growing the theoretical understanding behind the themes was an ongoing process as the research progressed.

Haaro te Kaahu as a kaupapa Māori analytical framework, explicates that there is a whakapapa to exploring stories within qualitative research and kaupapa Māori methodology. When examining western research lenses in data analysis, the stages described by McCormack (2000) are comparative to my data analysis. Firstly, a participant recalls an experience and describes it to the researcher. Ngā māmā expressed their own stories and shared them with me through their interpretation of how it happened. Secondly, as the researcher I considered the stories by listening to the recordings, going through transcripts, analyses, and then in turn, interpret the stories. Finally, the reader reads and reacts to the experience, contemplating the stories through their own interpretation. McCormack (2000) discusses how we develop interpretive stories using the ‘views’ through the multiple lenses we apply. The lenses McCormack (2000, p.286) expounds as active listening, narrative processes of participants, language, context and moments; “Meaning is continually constructed and reconstructed” and made visible through stories. The integrity of the viewpoint and stories of ngā māmā were paramount, therefore the necessity to apply a kaupapa Māori lens to integrate with the qualitative research method of thematic analysis was imperative.

Phase six (Te Ao Mārama), entailed the final stage of the method and write-up of thematic analysis, outlining the complex journey towards clearly articulated findings, which gives my analytical technique merit and dependability. Phase six is distinctly located within Te Ao Mārama

of Haaro te Kaahu. The discussion and critique of the method I used up to this point has been expounded comprehensively to highlight the significance and credibility of utilising thematic analysis sequentially with kaupapa Māori methods of analysis, which is flexible and robust when conducted in a thorough manner (application of whakapapa). Grounding the analytical integration was whakapapa, which was discussed in Section 4.6.2 Haaro te Kaahu. As an extension to the dual approach, the dimensions of Te Whetū were reinstated as a lens, to ensure the validity of the findings in relation to a Māori perspective of wellbeing, validating that the integration of phases of thematic analysis with stages of Haaro te Kaahu produced a robust and trustworthy explication of research findings.

Throughout the process of data analysis several factors were important to constantly consider especially as I was allowing the analysis to just manifest and was not purposely looking for specific characteristics. Firstly, foremost in my mind was the mana of ngā māmā, and ngā māmā being empowered by the process: empowerment means control (Smith, 2002). Therefore, through this emancipatory methodological approach, the ‘stories’ encapsulated their own mana being gateways to meaningful understanding and new knowledge. Secondly, without a kaupapa Māori perspective, western methods could not deduce Māori concepts or notions, recognise or associate Māori concepts to rituals and ceremonies. Therefore, it was vital to work from a kaupapa Māori analytical framework to constantly analyse codes and themes within context, to encompass ontological and epistemological perspectives. Lastly, the research was about the wellbeing experience of ngā māmā, and therefore the notion of wellbeing was intrinsic to the outcome of the findings. By reinstating Te Whetū as a wellbeing lens to the findings, as it had been initially applied in gathering data, demonstrated a conclusive justification to the integrated approach of Haaro te Kaahu.

For thorough thematic analysis, Braun and Clarke’s (2006) guide recommends starting the literature review early into the data analysis to become cognisant with what is potentially developing. It was also important to be cognisant that there should be a disjuncture between the questions asked and the resultant themes, and as researchers who are exploring new knowledge, a clear explication of the method is paramount to demonstrate this distinction.

Table 3: Notions of wellbeing as described by ngā māmā

Notion of wellbeing	Mama 1	Mama 2	Mama 3	Mama 4	Mama 5	Mama 6	Mama 7	Mama 8	Mama 9	Mama 10	Mama 11	Mama 12	Mama 13	Mama 14	Mama 15	Mama 16
Safety	✓				✓	✓					✓	✓				
Safe environment	✓				✓						✓	✓				✓
No violence	✓				✓						✓	✓				✓
Happy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Happy in yourself	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Healthy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Wellbeing measured by child's wellbeing	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Wellbeing measured by child's happiness	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Wellbeing measured by child's health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Positivity	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Practising core values and beliefs	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
No smoking cigarettes, no drinking alcohol	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Whānau connection	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Having support people – someone to talk to	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Personal space – time out	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Free from judgement	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Being a good mother, partner, friend, person	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
'Well' according to te ao Māori concepts e.g. wairua	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Giving e.g. help, support	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Receiving e.g. help, support	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Kind, friendly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Work	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Having finances	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Being strong	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

My findings concur with this, as I was aware the themes were not (and should not be) the questions, for instance the dimensions of Te Whetū which framed the enquiry. Instead, Te Whetū was the wellbeing model to initiate thought, from which the relational findings transpired. Additionally, Braun and Clarke (2006) state themes are not about ‘size’ or prevalence, but what is inherently ‘significant’ and the core of the data.

Braun and Clarke (2006) also recommend checking the emotion attached to the context, the inflections and nuances in the oral account such as laughing, crying, gasps, coughs, which I took note of to relate meaning. Lastly, caution is advised (Braun & Clarke, 2006) against over-analysing the data by going on and on. I determined data analysis was completed, when conclusive themes were reached and could be replicated applying this method. Reaching this stage was achieved through an integrated method, by applying a comprehensive thematic analysis sequentially with a kaupapa Māori analytical framework.

4.6.4 Saturation

Saturation or whakaoti is described as the point in which repetition in the information has been obtained and previously collected data has been confirmed (Denzin & Lincoln, 1994). It also marks the point when the study could be replicated, no new information is attained and further coding is no longer practicable (Fusch & Ness, 2015). The area of explicating data saturation in research has been a neglected field mainly due to the difficulty in defining the concept (Fusch & Ness, 2015). Nonetheless, two issues identified by Fusch & Ness (2015) as being problematic in defining saturation are the many multiple research designs that exist and the varying thoughts of when enough is enough.

For this research, it was valuable to incorporate a method that identified when data saturation had been reached as it signified that further data gathering was no longer necessary in terms of expanding on the quality of the data, which already was very rich. Dibley (2011) captured this notion as ‘rich and thick’. A balance must be struck between the quality (rich) and the quantity (thick) of the data whereby the researcher does not want lots of data with little richness, nor rich data but a lack of it “Thick data is a lot of data; rich data is many layered, intricate, detailed, nuanced, and more” (Fusch & Ness, 2015, p.1409). Lenses from a western research paradigm and their application to data analysis were simultaneously explored with Haaro te Kaahu – a

kaupapa Māori analytical framework. Data saturation and the exploration and use of lenses were valuable tools in the management and converging of data, whilst advancing the meaning of unique narratives through to a well-rounded interpretive account across stories. In Haaro te Kaahu, the kaupapa Māori wellbeing framework implemented at the beginning of research design, is reinstated in stage six to add to conclusiveness.

4.7 Rigour and Trustworthiness

The choice of methods used for the research was carefully considered. Kovach (2012) describes validity as hearing her elders' voices ask if what was done was done in a good way, and was truth spoken? Was there credibility and reliability in the research undertaken and is one able to sleep at night knowing a good job was done (Kovach, 2012). Being credible to my people was important to me and the ability to produce a plausible and coherent explanation of the phenomenon for scrutiny.

“The basic strategy to ensure rigour in qualitative research is systematic and self-conscious research design, data collection, interpretation, and communication” (Mays & Pope, 1995, p.110). In this thesis, I have created an account of the methods utilised so as the data stands independently for further research to be undertaken. The research design was carefully considered ensuring the methods that were selected matched the research questions, aims and theoretical framework. A lack of congruency would have possibly invalidated the process and data, and caused one to rethink the approach and goal of the research (Denzin & Lincoln, 2018). The methods I utilised were conducive to the phenomenon being explored, and were further strengthened by the theorising, development and synergising of western qualitative methods with kaupapa Māori approaches to research. This included recruitment and sampling which were based on integrated methods conducive to engaging the Māori research community.

I ensured a planned approach to data collection through semi-structured interviews premised on kaupapa Māori values and beliefs alongside the practice of tikanga, for instance, whanaungatanga and koha. Validity was added through separating the evidence from second-hand sources or hearsay. A way of achieving trustworthiness was by maintaining detailed documentation of the interviews and incidental observations, and comprehensive records of the process of analysis (May & Pope, 1995) that I maintained through memos and journals. I

listened to each of the recorded interviews sometimes several times, and typed the transcripts. I have presented a detailed step by step explication of the data analysis process (Fereday & Muir-Cochrane, 2006) which is distinct due to the development of a kaupapa Māori analytical framework that merged with a detailed account of thematic analysis.

Furthermore, I have recognised the value of gathering subjective, experiential accounts from ngā māmā who were creating meaning from their perception of reality by ensuring the methods reflected that. I have provided access to the ‘raw’ data and coding templates I created in the process, and demonstrated through this chapter, the findings and discussion chapters, interpretations from ngā māmā by connecting context with their subjective point of view (Fereday & Muir-Cochrane, 2006). The ‘soft data’ were interpretive as I had not experienced the phenomena nor observed it first-hand (Denzin & Lincoln, 2018) and therefore it was necessary that I provided a trail of evidence throughout the research process to demonstrate credibility or trustworthiness (Koch, 1994).

Terms were clarified to safeguard validity and if further contact was required, a mutual agreement was established between ngā māmā and me. Transcripts and updates were offered and provided for participants who indicated they wanted these. Kaupapa Māori research principles, such as rangatiratanga and aroha ki te tangata further endorsed and specified trustworthiness and rigour. Careful planning and attention to detail was critical in my approach and commitment to a kaupapa Māori methodology.

Reflexivity was paramount in that it was the “researcher’s own self-reflection in the meaning making process” (Kovach, 2012, p.32) given that qualitative research and kaupapa Māori is interpretive by nature, relational and assumes subjectivity as a constant factor. Reflexivity was related to validity as it unearthed bias within the research (Kovach, 2012) although in my opinion, being a mother, a woman, tribal and myself a Māori provided positive influence (Dibley, 2011) that supported the sampling and engagement process. If not for identification, recognition and presentation of my assumptions, and an accurate explanation of methods applied particularly through data analysis, my work would not have ensured bias was signalled and addressed.

4.8 Ethical Considerations

Ethical conventions characterise socially adequate behaviour and conduct from that which is deemed to be socially undesirable (Burns, 2000). While the parameters of what is deemed as being socially acceptable have moved in the last 25 years, when one contemplates Māori research, it is imperative that current ethical conventions are followed by researchers; individual and group based (Smith, 2012). Ethical problems are likely to occur in research where human subjects are involved. Accordingly, researchers must be aware of the ethical considerations involved in: voluntary and non-voluntary participation; deception; informed consent; privacy and confidentiality; the right to discontinue; and, obligations of the perimeter (Burns, 2000).

The research methods were framed by kaupapa Māori methodology that was entrenched in tikanga Māori and that involves Māori research communities. The design allowed the Māori research participants to ‘engage’ through a medium that was culturally appropriate, based on institutional ethics approval and kaupapa Māori ethical adherence. Research that involves interviewing human participants and that has been performed by persons who affiliate to an institution such as Victoria University of Wellington, comes under the jurisdiction of the ‘Human Ethics Policy’ (Victoria University of Wellington [VUW], 2012). In particular, I adhered to “social and cultural sensitivity, including acceptance of the principles of the Treaty of Waitangi” (VUW, 2012, p.11). Accordingly, the Treaty of Waitangi and its principles or ‘embedded concepts’ of partnership, participation and protection were incorporated to frame the ethical considerations of this research alongside the kaupapa Māori methodological approach. For instance, an interpretation of the above statement has included: the concept of partnership required that the researcher worked together with iwi, hapū, whānau and Māori communities to ensure Māori individual and collective rights were respected and protected. The concept of participation required that Māori were involved throughout the whole research process, especially research involving Māori; and, the concept of protection required that researcher actively protected Māori individual and collective rights, Māori data, Māori culture, cultural concepts, values, norms, practices and language in the research process.

Adhering to the ethics requirements, each participant was given an information sheet (Appendix B) that explained the nature of the study and their participation, the intended use of

the data and who would have access to it, that the participant details would remain anonymous and how this would be achieved. Information was given and discussed as per Victoria University's guidelines with the participants and questions were answered if asked. The arrangements for storage, security and destruction of the data were communicated with the participants prior as part of gaining informed consent.

Signed informed consents (Appendix C) were filed appropriately in a secure lockable receptacle. Each participant was made aware they could withdraw their contribution within a two-week timeframe, however, no-one did. The interviews were audio recorded and transcribed in full by me and a transcriber who signed a Transcriber Confidentiality agreement (Appendix D). Each interview was saved to hard drive and one encrypted flash stick. Electronic files, recordings and data are stored on a personal password protected computer. Participants were informed of my obligation to breach confidentiality should the participant disclose any risk for themselves or those close to them. Participants were also informed they were consenting to having the information available for publication in journals, conferences or for the University Library.

4.8.1 Māori Ethical Considerations

Māori scholars have identified in their research, the principles, ethical values (Smith, 1999; Cram, 2001) and attributes of kaupapa Māori such as 'aroha' and 'kanohi ki te kanohi' alongside a respect for mana, tikanga, needs, ideas and worldviews (Smith, 2006) as key to the processes and outcomes of the research. To ensure research with Māori incorporated pertinent considerations of te ao Māori alongside institutional ethical standards, Māori scholars have developed kaupapa Māori ethical models. Ethical considerations are inherent within kaupapa Māori methodology as they require processes and engagement to be culturally bound and appropriate, due to the research being conducted specifically with Māori (Smith & Cram, 2001; Pihama, et al., 2002; Smith, 2012; Mead, 2016). Katoa Ltd. (2017) provides information about Māori approaches to research ethics, which encompassed recognising that varying communities required different ethical standards based on their diverse values and principles. Thus, a researcher's ethical approach should encompass recognising and accepting one's own ethical beliefs, having knowledge and adhering to the researcher's institute's ethical committee,

academic and funding bodies and also being cognisant of the cultural ethics as defined and prescribed by the research community.

In providing ethical guides from a Māori perspective, a number of frameworks have been developed, for instance, Mead (2016) has explicated a number of tests to ensure the ethicality of practice in accordance with tikanga Māori. “A researcher should always be guided by the principle of tika...Processes, procedures and consultation need to be correct so that in the end everyone who is connected with the research project is enriched, empowered, enlightened and glad to have been part of it” (Mead, 2016, p.351). As stated, other models have encompassed principles of tikanga and kawa inherent to a Māori worldview and essential when engaging with Māori communities. Framed within kaupapa Māori methodology, I utilised an ethical approach that considered and adhered to institutional ethical standards while underpinned by tikanga Māori values, practices and beliefs. I also acknowledged and integrated my own ethical and moral standards which provided a triangulated method to ethical accountability.

4.8.2 Confidentiality

As with most research that involves participants, confidentiality was paramount in protecting ngā māmā and the research community. Ensuring confidentiality required me to be accountable to the research and ethical values agreed to, alongside maintaining the mana of the participants who contributed their valued time and knowledge. Within a cultural context, or by nature of the interconnecting whānau, hapū and iwi relations within tribal and geographical spaces, knowing who is doing what is often permeable in various situations. In te ao Māori, Māori often have knowledge of various kaupapa due to our innate disposition and intention to support and manaaki one another, or being of a view that the ‘project’ may benefit the greater good of our whānau, hapū and iwi. A notion in te ao Māori, ‘the kūmara vine’ (sweet potato), intimates that news or knowledge is passed on through the social connections and networks, albeit knowledge that is unconfirmed to varying degrees. It is an intrinsic and natural inclination within te ao Māori to transmit knowledge, such is the formidable framework of our knowledge systems like whakapapa or communication modalities premised on oral transmission. Although cultural characteristics exist within te ao Māori to secure knowledge, the same characteristics were at risk of becoming antagonistic to the security of knowledge by belying the research process from a western research perspective. All concerted efforts were taken to maintain the integrity

and confidentially of the participants' identities, but at once a caveat is required that does not admonish the epistemologies that underpin a Māori worldview; instead an exploration of this tension has been explored.

When I explained the research process and ethicalities around engaging with participants, ngā māmā often commented to the effect, 'I don't mind who knows it was me' or 'Is this to help other young Māori mothers?' I appreciated the cultural reasoning, but as researcher I was emphatic that I was bound and adhering to the ethical obligations. However, it was whilst working with the data that I realised that changing details could possibly impact on the integrity of the mātauranga and findings. For example, in an effort to conceal identities, rich cultural meanings attached to the spiritual association with names could be lost in the substitutions. From a Māori perspective, it seemed unethical to alter someone's identity, and I felt I was doing an injustice to ngā māmā by applying research methods to protect their identities that may have been effectively injurious. I consulted my supervisors and Māori academics with this dilemma, and in consideration and review of the text, I felt that the integrity and mana of ngā māmā and their whānau was being upheld whilst protecting their mātauranga. Through this reflective process, I was aware I was examining myself in relation to the research, whilst maintaining important (cultural) ethical values, which encompassed aroha, mana and kia tūpato (Katoa Ltd, 2017).

4.9 Summary

In this chapter I have outlined the methods utilised to undertake this research that are distinct by integrating a kaupapa Māori approach with qualitative research methods. Ensuring the most conducive methods were utilised began by clearly postulating my assumptions early in the research process, whilst considering the research question and aims within a kaupapa Māori framework. The goals of my research question and aims, needed to match my methods and I achieved cohesion through careful consideration and exploration of literature and kōrero around conventional, contemporary and developing approaches to research that are located in kaupapa Māori, Indigenous, qualitative and interpretive spaces. Although the literature is small, kaupapa Māori methods such as data analysis is developing and an exciting space due to the merging of concepts, theory and mātauranga Māori. I have contributed to these developments by presenting 'Haaro te Kaahu', an analytical framework based on tribal and cultural

epistemology. I have demonstrated the adaptation ‘Haaro te Kaahu’ to qualitative research approaches and its applicability to data analysis via a kaupapa Māori lens.

My role of researcher was instrumental as I looked at myself within and between the research spaces of kaupapa Māori and western paradigms. I addressed my role by recognising and acknowledging my own binaries, contradictions and tensions alongside my position as both researcher and part of the research community. Reflexivity was an imperative activity to ensure I constantly reflected on the intersecting positions.

Central to the selection and utilisation of methods within kaupapa Māori methodology, were ngā māmā and their stories that required respect and care, demonstrating actions of Indigenous peoples also demonstrating the validity of their own tribal and Indigenous knowledges and methods to research methodologies. By story-telling we make sense of our being in the world, we attempt to understand and interpret our experiences in that we are inseparable from all that is taking place around us. Analysing and reconstructing the stories of ngā māmā through an interpretive lens to be presented and re-read by the reader, carries responsibility not to be taken lightly. Being cognisant in tikanga, te reo and te ao Māori with the oversight of Māori scholars, my supervisors and kaumātua underpinned the research process. Giving over mātauranga around a significant and personal subject is an act of trust, and altruistically done by ngā māmā who participated in this research. The potential will be to re-generate that gift, and make a valuable contribution to the wellbeing of young Māori mothers and tamariki in Aotearoa, and to young mothers and their children of the Indigenous and global community.

Chapter 5: Findings

5.1 Introduction

The broad aims of the research were to explore the experiences of wellbeing for young Māori mothers (ngā māmā) around the birth of their first tamaiti and the impact these experiences have had on the health outcomes of ngā māmā and their tamariki. This chapter is presented in five parts: in the first part I present Te Piringa (the gathering), which explicates the findings around wellbeing according to ngā māmā and their experiences. Secondly, I present the findings related to the tamaiti, and significance of the tamaiti's presence to the experiences of ngā māmā. This part includes findings around naming and being (the first) mokopuna. The third part is an explication of the findings regarding the power of the female, and the importance of women and their influence in the wellbeing experienced by ngā māmā during pregnancy, birth and motherhood. Three main influences are expounded by significant women, which encompass stability, guidance and empowerment. The fourth part is about ngā māmā, and what the experiences unfurl for them as women and mothers around their experiences. Finally, I present an account of the findings related to wairua and whenua, which have shown to be significant in the wellbeing of ngā māmā around the birth of their first tamaiti, and their on-going connection to te ao Māori. All names and locations have been replaced with non-identifying pseudonyms.

While at times the examples from the stories of ngā māmā are left within quite substantial excerpts, this has been done purposefully as this honours and highlights the synergy between multifarious factors of common experiences. That is, there was often a multitude of considerations happening at one time. Although this may appear arbitrary, it recognises the relational indices experienced by ngā māmā, and respects the narrative of each māmā when one or a few examples have been selected to represent the whole. Therefore, the examples are not only salient but have been left unabridged from the context in order to maintain the integrity of the situation, and provide greater insight to what was experienced by ngā māmā. Cropping the narrative to isolate specific examples to suit my research needs, would have meant relinquishing rich and meaningful contextual information that provides a deeper understanding to experiences of wellbeing; not only for ngā māmā and the researcher, but as thought-provoking and supportive information for young Māori mothers, whānau and the reader.

5.2 Te Piringa - Wellbeing

The notion of wellbeing was not easily captured as a one-dimensional and commonly agreed upon idea. Ngā māmā expressed multi-layered and multi-faceted notions of ‘health’ and associations to wairua, whānau, whakapapa, hinengaro, tinana and whenua. These expressions included the main concepts of happiness, the ability to practice one’s values and beliefs and in relation to te ao Māori, having whānau and meaningful connections, having support and someone to talk to, and tamariki who were healthy and well, as most important. Ngā māmā also mentioned safety, being free of alcohol and smoking, personal space, freedom from judgment, being valued as a partner and whānau member, giving and receiving support, work and financial stability, being strong, and positivity as meaningful experiences. Wellbeing was the verve around exploring the experiences of first-time māmā and the birth of their first tamaiti. It was a very dynamic and personal interpretation, experience and concept that inspired subjective stories from ngā māmā. These experiences superseded predisposed ideas and ingrained hegemonic ideologies or generalisations of what wellbeing is, in women, wāhine Māori, mothers, māmā Māori and whānau.

5.3 He Tohu Aroha - Presence of the Tamaiti

Ngā māmā loved, valued and cherished their tamariki. They revered their tamariki as positive influences and their presence as life affirming. The presence of the tamaiti was a stimulus for development, and for most of ngā māmā the transformation began with the presence of the tamaiti pre-birth; that is, when there was full awareness that the pregnancy was real. Prior to pregnancy, ngā māmā had varying needs for support and existing levels of stability. The presence of the tamaiti incentivised a desire to develop a more solid foundation to foster the wellbeing of both tamaiti and māmā. The respective pregnancy was embraced by each of ngā māmā, whether it was planned or unexpected.

5.3.1 Pregnancy

Whether planned or unexpected, pregnancy was an essential period of bonding for ngā māmā with their tamariki:

As soon as I found out I was pregnant I started writing to her (tamaiti) in my diary...I wrote a poem to her, it should be on Facebook or something. I started writing names, like hold my stomach and talk to her. (Ani)

Being home with parent(s) or grandparents to have the support and guidance of whānau was important to most of ngā māmā, in particular, having the support of mothers and grandmothers:

I told mum and dad I was pregnant...they were happy for me...they asked if I'd move home, so I moved home and it just felt right, like I knew that was what was right for baby, and for me, coz I knew I was gonna get looked after well...so I moved back...and I went back to study to try and finish it off and got heaps of support from my friends there and my kaiako. (Kiri)

The initial responses of ngā māmā to their pregnancies included delight, surprise, trepidation and uncertainty. Some of ngā māmā considered alternative options to keeping the baby:

My mother said what do you want to do? I said, "Have an abortion". But then I didn't want to do that and thought I could do this, I had no reason not to do well...I said to my mum "I'm keeping my baby", she said, "Good, then come home". (Ani)

While for others, the pregnancy was heralded as part of an expected or unexpected 'plan': "I wasn't on any contraception so if I got pregnant it wasn't exactly going to be a shock to me...when I found out I was happy, I wasn't worried or anything" (Kiri). One māmā related the unplanned pregnancy to its greater significance with upbringing, whānau values, te ao Māori and with te reo Māori:

Although I didn't plan to have kids now, I always knew I always planned to have my koro in my child's life coz he has so much knowledge for them to know, especially the Māori side, like both my grandparents are fluent in te reo. (Marama)

Ngā māmā commented about pregnancy with a range of emotions around loving being pregnant, enjoying pregnancy and even missing it; even those who suffered morning sickness or similar: "The whole pregnancy with the first one was great, seemed easy and everything felt wonderful and – I wasn't even hōhā at the end of it" (Whetū). "Knowing there was like something inside of me and now it's not...is sort of empty...I miss being pregnant...the movements...I miss that feeling of Tai (tamaiti) being in me" (Kapua).

Shifting into motherhood and the role of nurturer was a natural evolvement in becoming pregnant even when unexpected. With acceptance, there was little resistance to redirecting energy and resource into preparations:

And then I fell pregnant and mummy instincts kicked in straight away...I cried after it was positive...once I had come to, that was it...Gotta mahi for my baby, got to do everything for my baby...that changed my mindset. Hard out. (Ani)

5.3.2 Birth

The intense experience of meeting their child for the first time and the wonderment of how their growing puku (tummy) had become a real human being was a powerful and sometimes “overwhelming” experience:

The feeling I got when I had Rangī, when he came out I saw him straight away...as soon as I saw his head I can't describe how I felt when I saw him for the first time I was just speechless...I was so focused on my baby, everything around me just went quiet...my dad did a mihi and I started crying...its real...I didn't sleep that whole day...it was all about my baby! I just wanted to stay awake with him. (Kiri)

It just felt unreal coz she went from being inside to being a full human! (Laughs). So I was quite shocked but like happy she came out ten fingers ten toes, one nose and two eyes – straight eyes! (Marama)

“I was exhausted...but they put Tahlei (tamaiti) on me and that was out of this world...I just cried, everyone was crying, I loved it”. (Pania)

One māmā recalled her baby requiring heart monitoring and was taken to the Special Care Baby Unit (SCBU) immediately following caesarean. Holding her baby for the first time and the emotion that accompanied the experience, remained with her and was evident in expressions during her story telling: “*I felt overwhelmed and cried...[With happiness?] Yes...[Was it special?] yes...Yes, I remember holding him” (Aro).*

Immediate ‘skin-to-skin’ bonding was experienced by most of ngā māmā as a very intimate and emotional time. This was a personal event that ngā māmā felt ownership of and for some it was a significant initiation point in forming attachment:

I just remember being so happy and just crying straight away...Roimata lay on my chest and that whole first night I was naked with her on me and she tried to suckle, just the closeness...I had her cuddled on me and I just had her coz no-one else could hold her it was that bonding time, it was just so special. (Whetū)

Those who did not experience skin-to-skin often had less preparation and thus understanding, education and support prior to birth about the benefits of ‘skin-to-skin’ and reabsorption of the vernex. A few of ngā māmā did not take pleasure in the experience and would rather the baby had been ‘cleaned’ and preferred the discretion of their own bodies: “*You know they don’t wipe them down properly...I was in shock... ‘Ew what are you putting on me? He’s dirty, aren’t you supposed to clean him?’*” (Ora).

Haemorrhaging after birth for one māmā meant she was separated from her baby. However, she was relieved that her whānau were there for her baby. The support included her mother, ex sister-in-law and baby’s namesake (who she regards as a sister), and her (female) cousin who biked to the hospital when she heard the māmā had gone into labour:

...I gave birth to my daughter. I put her on me and then haemorrhaged...I had to have a transfusion...I wasn’t being dramatic...I just kept saying my baby’s name, I had written her name everywhere, her full name while I was carrying...and I kept saying and that’s her name and yous better remember that...they (the whānau) said don’t talk like that. (Ani)

Preparation, confidence and support influenced the experiences of ngā māmā. Those who had greater awareness and female support going into birth reflected on the birth experience with more positivity and joy. Ngā māmā who had less support, a lack of ante-natal engagement, and little insight of what to expect, were less prepared for the demands of birth and lacked confidence in the capabilities of their voice and body. For ngā māmā with less awareness, the likelihood birthing classes would have helped was raised: “*I would go to ante-natal classes next time. I didn’t go and I stressed out at the birth. I would have had more knowledge and information and had a better birth*” (Pania).

5.3.2.1 Interventions during birth

With the prospect of bringing their tamaiti into the world, ngā māmā were excited and anxious. However, despite their youth and wellness, over half of ngā māmā experienced a medical procedure or intervention at birth. Most were unprepared for the necessity and lacked understanding around requiring intervention. Procedures aside from voluntary requests for pain relief, included manipulation and induction, sweeping of the membranes, epidural for administering labour inducing drugs, forceps, ventouse and emergency caesarean. Some tore with birth, one māmā talked about being cut and another required a catheter. The anxiety and or fear of the situation was compounded by the lack of communication of the procedure(s), lack of support and advocacy from lead professionals and lack of clarity and consideration of who could be with the māmā during caesareans and if not, an explanation.

He (tamaiti) was overdue two weeks...I was due to get induced but I went in for a sweep on a Monday I went home that night and...it pretty much all started, the pain, the niggles I was having before...the pains I was having it was just a different kind...I knew something was happening. (Kiri)

I was talking to my midwife when we got there and the surgeon came in and gave the options about having baby, they could either do manipulation to try and turn her around or an emergency caesarean and he just gave the options really quick, stood there stared at me and expected me to give an answer. (Whetū)

She was facing the wrong way and (I) stopped dilating at 5 centimetres so they put me on epidural and pitocin I think it's called? And – oh oxytocin, and then I was just about rushed for an emergency caesarean and then little bubba flipped around. (Atawhai)

Everything was going as planned but I was slow to dilate. The midwife tried to get me going and then I stopped dilating all together. It was three days long and I was getting hōhā, I was having baths in the middle of the night. I couldn't sleep and had to have meds to sleep, and I needed to build my energy for pushing but I had an emergency caesarean in the end. (Aro)

Birth became a harrowing event for some of ngā māmā who also had big decisions to make. One example was a māmā who laboured for 22 hours but was then told that she would need an emergency caesarean. She recalled being hooked up to machines and an epidural with the drugs to keep her contractions going but was told she was failing to progress. Her fears included the

outcome of an epidural hitting a nerve or her remaining numb after the procedure, but also the effects of the drugs on her tamaiti. The māmā said she cried when she was given the ‘form’ to sign and had to choose between her mother and partner who would accompany her during the procedure: “*They just cut Tai out, showed us him, and (I) just waited to be stitched up and then (they) wheeled us back in*” (Kapua).

Following an emergency caesarean, one māmā lacked mobility and although limited in what she could do, accepted those first 6 weeks as an opportunity to bond with her tamaiti. Although she felt the time was good ‘connection-wise’, the effect of the birth and the needs of a new pēpi (baby), home and working partner were challenging:

The whole new dynamic...it was tough...at some point I did feel sad and upset...I had trouble breastfeeding...after the caesar not being able to drive and relying on other people and not being able to vacuum...Someone come vacuum my house! (Whetū)

5.3.3 Being Home

Providing for a new tamaiti was important to the integrity of the wellbeing of ngā māmā. The reality of a new life in the home requiring total care and dependence was immense for ngā māmā who took it in their stride and individual pace to adjust. Each māmā considered that the presence of the tamaiti had changed their priorities and mind-set around their needs coming first. Ngā māmā went from inherently doing as they wished based on spontaneous choices, to making measured decisions developed by their responsibilities as a māmā. Some of ngā māmā spoke of previously going out a lot, partying, getting drunk, smoking, lacking in exercise and not particularly conscious of their diet. This transitioned to a greater awareness and becoming more discerning of their thoughts and behaviour:

I was quite overwhelmed, more than anything, and it didn't actually sink in till she (tamaiti) came home till she was actually here in the house, like having someone different in the house, then I had to be responsible for somebody other than myself, she was always on my mind, emotionally I was happy like every day I couldn't wait to wake up...something just ticked over. (Marama)

It changed all right. It definitely changed like, it wasn't that way before baby, it was all about me. (Kiri)

Ngā māmā had varying experience and knowledge of caring for babies and some of the realities of providing for a baby superseded the niceties. Employment and living situations contributed to being resourced and being able to provide:

I had help but everyone had to go back to their own routines, so I had to kind of adjust and then it just kind of clicked, I've got to look after myself in order to look after this little baby. (Kura)

Further to these realities of life, ngā māmā did not allow an unplanned pregnancy to deter them from their goals and ambitions for their tamaiti, themselves or their whānau and forged ahead in work, study or sport. With the support of her mother, one māmā returned to work three months after birth and expressed in a small room at work. She then applied her sporting background to a coaching job with children:

I can do a lot of stuff now that I want to. Like Casey was never planned and I'm not ever gonna say he's the reason why I don't have a career, stuff happens, you just need to move on and work around it...I still wanna go for the Police Force. (Ora)

In the initial days following birth and then in the ensuing weeks and months, most of ngā māmā lived with whānau. A few of ngā māmā had rental homes with their partners and one māmā returned to the care of Child Youth and Family (Government Agency). One of the māmā separated from her partner following the birth of their tamaiti and returned to the home of her grandparents. The relationship had broken down with her partner and managing as a new māmā by herself was lonely and financially difficult. Living with whānau provided support, stability and guidance:

Nanny and papa said to come home, that it was all right till I get my feet on the ground...it was nice being around nanny and papa, we could help each other and they loved having baby there, (it) gave them a new lease of life and I had company. (Aio)

For other māmā, having constant support from significant women who could visit and stay if necessary was hugely beneficial:

I wanted to do things myself when baby was born, but I wouldn't have done it without my mum, nan and sister popping in, my girlfriends, cousins and aunties calling around. Most of the time they'd bring a cuppa tea, like doughnuts, sandwiches or pies which was awesome coz sometimes I didn't have time to eat – or I'd forget (to eat) till I was starving...or (they would) chuck the washing on for me, or hold her

(baby) while I had a shower, it's so important to have that aroha around. (Wai)

5.3.4 Naming

Consulting, contemplating and agonising over a name for a new tamaiti was taken seriously; it was deliberated on by ngā māmā with huge consideration, time, meaning, love and respect. Ancestral names were considered on both parental sides, Māori and European; significant place names, events, symbols, aspirations for the future and features of the environment were also taken into consideration as possible names. Some tamaiti were given several names to acknowledge the various significant people and factors and so naming was a privilege and a responsibility; it was also deemed appropriate to treat the tamaiti's naming process with the utmost importance.

Ngā māmā understood the value behind naming their tamaiti and reflected upon the various implications. Therefore at times, ngā māmā relinquished their first choice to respect their partners or whānau wishes of a name, particularly if there was a whānau or whakapapa connection:

We (the māmā and dad of baby) had a couple of names but as soon as he was born I said yup to Daniel (partner) we'll call him Tai because its Māori for... and coz Daniel is the first born in his family so Tai's his first born so we thought we'll just name him Tai which is nicer than Daniel and then his middle name is Kahu which is my surname but (is spelt differently) coz on my granddad's passport and birth certificate he spelt the surname (differently)...that's how they spell it in the islands (Cook Islands)...He (my granddad) passed away...before Tai was born so we gave Tai that name...mum wanted names and dad...we said nah coz people will get upset that, oh you've chosen your name from your family. (Kapua)

I had been through heaps with my sister-in-law, my ex-sister-in-law my nieces and nephews...she was always, she was like the sister to me, you know the one to run to, the one you tell everything to, she was it. And because her name was Reikura and her last name is Everley so my daughter's name is (writes down Reiley for interviewer)...because Regina is queen in (language)...and looks like my name...and everyone thought it would be Anika because I'm Ani after my mum...but I said "No bro" it's Reiley-Gina, and Anika is my mum's name so that too...my brother asked if he could name my baby Ester, we have our own bond me and my brother...we fight like cats and dogs but that's MY brother...but I said "No, I want to"...and so Ester because my

brother is Rasta...and Ana is for my (other) brother (gang member) coz I wanted it there but politely, and Aroha for... love... and Destiny (is) an old school car my dad likes. Reiley-Gina Anika Ester Ana Aroha Destiny. (Ani)

Names were meaningful, personal acknowledgements and expressions of love for the new tamaiti. Sometimes names symbolised events or phenomena such as special marvels like the weather or environment, celestial bodies, planets, moons, stars, waters, a beginning or becoming, an awakening or apparition, a tohu (symbol), and an icon related to a whānau, hapū, iwi or whenua connection:

The moon is very important to my whānau, it affects everything...and the weekend before she was born I walked along the beach and saw the moon reflected in the sea, the rock pools and the river on the walk home...then I asked my mum and nanny, that's where I got her name. (Aio)

His full name is Rangi Amo Jesse Kahutia...because his dad's name is Ranginui, so Rangi is not quite an abbreviation... but it's for Ranginui after his father, and Amo is the name of our (tribal) stone...I picked that because the stone is like a representation of sustenance...and Jesse after my younger sister, (tamaiti's) aunty, we're like best friends and I always said I would name my first kid whether it is a boy or girl have her name and I made sure I stuck to that, and Kahutia is his dad's last name. (Kiri)

Some grandparents asked the māmā for naming rights, however, most of ngā māmā made the decision themselves, or alongside the father of the baby:

I always knew I wanted to name my baby... (my) dad had kind of asked, oh can I name your baby? No! You can't (laughs) I want this to be my thing, but baby's dad gave him his first name...I just wanted to have the rest. (Kiri)

At times, naming rights were contentious when whakapapa, mana, status, acknowledgement of tīpuna and other nuances of te ao Māori were included or there was conflict within the family in regard to the naming: “I think the whole naming sent me into early labour, it was stressful but Laine's dad liked Laine's name so we named him that” (Ria)

Naming...was real bad, there was arguing over it. Not me, but my parents and my partner. I just went in the bedroom. (My) Dad said Kāpara (tamaiti) was born on my (paternal) grandfather Kāpara's

birthday so it took a couple of weeks to confirm Kāpara's name. My mum wanted Kingston or Rāniera, but Kāpara Cohen's first and second name stayed. Kāpara's whole name is my papa's (paternal grandfathers). (Aro)

Whether a name was contemporary, traditional, Māori or non-Māori, each māmā had a deep and meaningful story to how the name manifested. All stories were powerful, expressing the serious consideration afforded to the responsibility of naming their tamaiti:

Choosing a name for my pēpi was an important time and decision. I tried to figure out all these names and loved all of them but her (tamaiti) dad's family is huge and every name I said, one of his cousins was called that (laughs). There were three names I wanted and all of them were cousins' names. In hospital one night after birth I thought of her name, Tahlei, her middle name is Maioha which is named after Hera's¹⁷ daughter and then the next name is his (father of the tamaiti) grandmother's name, Apikara. It's hard coz they're going to have it for the rest of their lives. (Pania)

Some of ngā māmā spoke of their reluctance with giving their tamaiti a Māori name and the fear or potential for names to be mispronounced, changed, abbreviated or nicknamed to appease those who could not or would not pronounce their tamaiti's name correctly. This usually stemmed from experiences with their own names being mispronounced and or depreciated. One māmā settled on a Pākehā name to 'spare' her child from the same:

We (the māmā and father of baby) discussed Māori names and how they are shortened or changed to being unrecognisable, that's what happened to my name. When my mother went to do my birth certificate they printed it wrong and my mother never corrected it and on my birth certificate it doesn't even make sense it's Ania but it's supposed to be Pania...It was always mispronounced by everyone so was shortened to "Parn"...My mum got Pania from her best friend's middle name, I think I have one friend who will never call me by my nickname and my mum says my proper name when she's angry or 'Miss'! (Pania)

Ngā māmā also recalled times they had corrected the mispronunciation of their tamaiti's names and the apologetic responses or resistance they encountered:

I took him to an outpatient appointment and we waited for ages, he was so good waiting, they called out a name it sounded sort of Māori but it didn't sound anything like his name so we waited. After a couple hours

¹⁷ Hera is the mother of Pania's best friend, Maioha. Pania formed a very close relationship with Hera

mum went up and asked if it was going to be much longer for Wehipaeahurei to be seen. The lady was like, we called for you long ago, why didn't you say you were here? She (receptionist) was really annoyed and said they put his appointment time down as we hadn't attended. She growled at me for not listening for his name. The other lady at the desk apologised for not checking if his name was said right. I said it over about three times to show them, We-hi-pae-a-hu-rei, I don't think the other one cared. (Maia)

It was clear that for all of ngā māmā, the 'naming' and 'the name' of their tamaiti was a celebration of life of the past, present and future. Considering and adopting names from whānau, hapū, iwi, significant people places and or events demonstrated the value and innate meaning of whakapapa in all forms. Despite the contemporary realities faced by ngā māmā, with many diverse influencing factors, the significance of the name is treasured and revered.

5.3.5 Whakapapa and the First Mokokopuna

The significance of the tamaiti to the vitality of whakapapa was recognised by all of ngā māmā. Each māmā discussed in different and similar ways, links to whakapapa varying from links to grandparents to the origins of creation. Whakapapa was recounted as a link to the past through genealogy and to the present and future through the meaning of new life. For most of ngā māmā, their tamaiti were even more significant for being the first mokopuna for their parent(s), first great grandchild, or the first child to be born to the whānau in some time. Ngā māmā were very proud to give their whānau 'firsts' and often decisions were affected by this such as the consideration and choice of name and the burial of whenua:

My parents were very excited to hear I was having a baby, shocked at first because I just worked and hung out with mates, but I'm the only girl and I've got the only girl, so it's a big thing. (Pania)

So dad, my brother and my brother-in-law, and I think Jared's (father of tamaiti) dad was there too, they were all outside and then in the room I had my mum, my sister, Jared, his mum, his nan, and my nan...she's the first moko on both sides and none of them wanted to miss it...especially the first baby. (Atawhai)

A māmā recalled her tamaiti was the first mokopuna in a number of years since the sad loss of her sister's tamaiti to Sudden Infant Death Syndrome. The whānau had also lost two babies on

her partner's side, as well as the recent loss of two other nephews. The māmā's parents had asked her to return home in preservation and help care for the māmā and the expectant tamaiti. The māmā cried as she recalled her fears:

Coz I had experienced it coz we had our niece all the time and we'd been through that, like that worry was always in the back of my head, and that first night that I came home...it was in the back of head and I just kept thinking, I couldn't stop thinking about it, and I just broke down, like I was just on the side of my bed watching Rangi in his bassinette and my mother come in and she asked what was wrong? And I just said, you know, I'm just worried that that's gonna happen (pause) to my baby. (Kiri)

5.4 The Power of the Female – Significant Women

5.4.1 Te Koru

As the stories progressed, ngā māmā explored deeper layers and meanings of their experiences and thus, their stories unfurled to reveal an intricacy of experiences and emotions attached to relationships and identity. It was while exploring and analysing these stories that the unfurling koru manifested as symbolic (Figure 16). As the analysis evolved through shaping and strengthening the meaning of the findings, there was a dualistic resemblance with the custom of the koru: unwinding, transforming and revealing. The koru depicts the significant findings of the thesis –

- The main koru symbolises the power of the female. The koru is overarching, protective and provides the nurture of female wellbeing, and the wellbeing of the tamaiti.
- At the kōpū (core, centre) of the koru, is the tamaiti, who is encapsulated by the aroha and tiakitanga (protection) of the whānau and power of the female.
- The three women (archetypes of female power) and secondary koru, symbolise the main provision of significant women to the experiences of wellbeing – Waipatu (stability), Waiariki (guidance) and Waiora (empowerment).

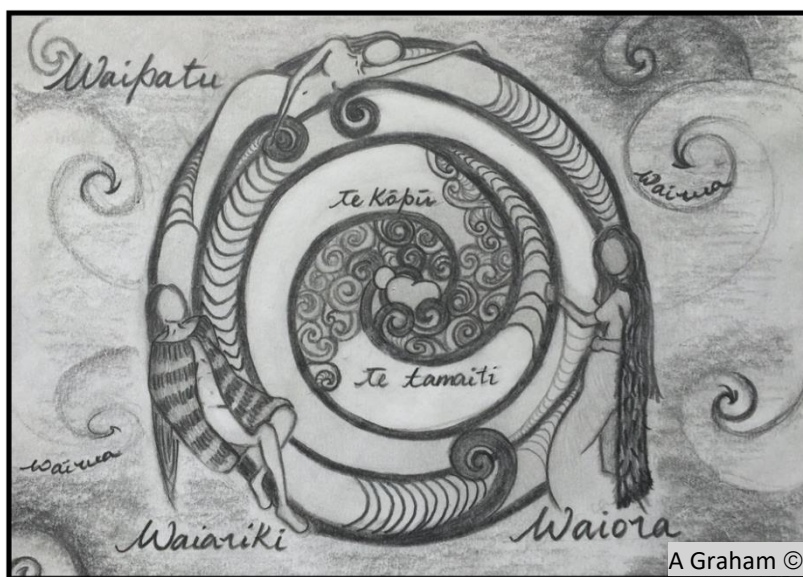


Figure 16: Te Koru¹⁸

The narratives illustrated a synergy between the development of ngā māmā, with the tamaiti at the core and significant entities (female, male) providing waipatu, waiariki and waiora. From a kaupapa Māori perspective, sustenance, growth and development to attain optimal potential is obtained through many factors, where the earthly and physical world connects and intertwines with the celestial and spiritual realms. For Māori, Papatūānuku and Ranginui are the primal parent figures from whom the world was created giving life and protection for people, creatures and the environment (Walker, 1990; Barlow, 1993; Royal, 2003), and the koru develops between the protection and care of the primal parents. From a traditional Māori perspective, concepts and observations of growth and development in the environment, translated to symbolism used in daily life to depict procreation and life; such as the unfurling koru of the ponga (fern plant). The koru design is present throughout te ao Māori to symbolise new life and harmony. The Māori conceptualisation of the unfurling koru as perpetual movement is symbolic of life's changes, challenges and new beginnings.

5.4.1.1 Te Kōpū - the core

The presence of the tamaiti is captured and conceptualised through Te Koru. The tamaiti is nestled at the kōpū of the koru as both a catalyst and recipient of change and development of ngā māmā, which is perpetuated through the powerful female essence and the main elements

¹⁸ Conceptualised and drawn by me

of stability, guidance and empowerment. The power of the female is overarching, and is enhanced through harmony with important male counterparts. The experiences and stories of wellbeing imparted growth, which like the koru, slowly unfurled with development. Through growing confidence, the koru is strengthened and unwraps from its tight formation, allowing more space for transition, realisation and autonomy.

The tamaiti at the kōpū of the koru profited from stability and bonding, and prospered from a consistent and nurturing environment. Stability enabled the tamaiti and the māmā to secure and strengthen the delicate connections needed between them to support new life, to perpetuate growth and develop a sense of self. The presence of a new and dependent life form was uncharted territory for most of ngā māmā, who had varying experience with new babies. The tamaiti provided a new lens on life and new approaches to managing life's situations that facilitated growth.

5.4.1.2 Te Koru Tuatahi – The Principal Koru

The most significant findings from the research were the power of the female and the presence of the tamaiti in relation to the wellbeing and identity of ngā māmā. The significance and power of the female entity was a resounding theme in its indelible impact and recurrence within the lives and experiences of ngā māmā. The principal koru, Te Koru Tuatahi, imparted a constant force in the lives of ngā māmā, and through the narratives, is revealed as a perpetual maternal force, which is ultimately exuded by the new māmā herself. As ngā māmā transitioned from early life experiences to pregnancy, birth and on to motherhood, the koru was likened to a 'backbone'.

Mothers of ngā māmā were the most significant entity and primary source to emanate the power of the female. Mothers were a constant provider of the primary characteristics elicited from the stories – stability guidance and empowerment. The tamaiti emerged at the kōpū of the koru, tightly insulated by the wellbeing, strength and protective abilities of ngā māmā and significant influences around them. Experiences, learnings and adversity enabled and hindered growth, but the tamaiti was a constant incentive for progress and development. Significant women and tamariki were interwoven, and imparted a strength in their vitality (Figure 17).

5.4.2 Tapatoru – Significant Entities

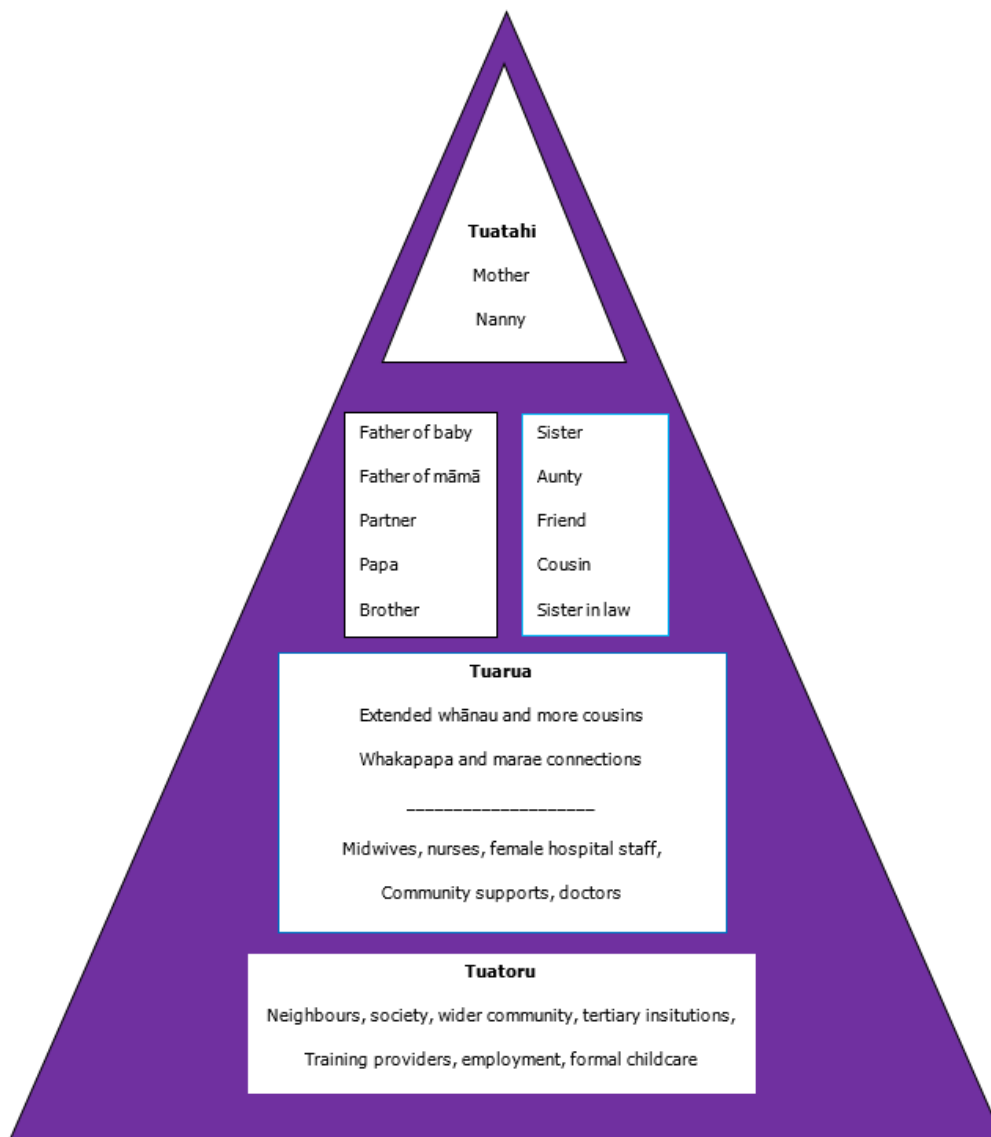


Figure 17: Tapatoru - Significant Entities

The Tapatoru (triangle) demonstrates the significant entities for ngā māmā revealed through the findings (Figure 17). The levels are characterised by the degree of meaningful involvement from the varying entities, and who through the stories, imparted the most influential stability, guidance and empowerment for ngā māmā. It must be qualified at this time that the tapatoru is a depiction of the findings emphasising the significance of women and the power of the female through the stories of ngā māmā in this research. It does not dispel or lessen the various levels of support and importance of other individuals or groups in lives of ngā māmā.

The first tier (tuatahi) signifies the magnitude, prominence and status of mothers, the most 'powerful female' exemplified as integral to wellbeing. It is also important to accentuate high in the echelon, the added significance of nannies, sisters, friends, aunties and cousins through the power of the female. Significant relationships with women particularly of whānau, were valued for being organic, instinctive, unprompted, consistent, unconditionally initiated and reciprocated. Added to this tier are the various male entities, who were discussed and described for their importance throughout experiences of ngā māmā. The presence of the female support was innate, certain and readily accessible for ngā māmā. A melding of both female and male entities enhanced sources of support. Reliable and unconditional sources of support were valued because there was no premeditative expectation that ngā māmā had to deserve it or secure it. Such support was provided by significant women, namely mothers. For example, through the commitment and presence of mothers, ngā māmā had reliable support without the emotional turmoil of losing out on failed relationships. Women and their provision of love and support brought ngā māmā stability, guidance and empowerment to practice and implement their own capabilities as a māmā, and build the skills to becoming an autonomous and confident parent.

The second tier (tuarua) of significant entities was a valuable cohort comprising mostly of women. This tier has two parts; a whakapapa component and a formal care component. Firstly, the second tier is composed of extended whānau through whakapapa and marae connections. These connections include relationships through marriage and partnerships within the whānau and extended whānau to include stepmothers, ex-stepmothers, sisters-in-law and parent-in-laws. Alongside being valuable for maintaining the ties and integrity of whakapapa, women of extended whānau were also significant for their practical support in advice, material provision and imparting functional skills. Additionally, for a māmā who had limited kin or relatives, or a disconnection with whakapapa links, the second tier of female entities was certainly significant.

Included in the second tier (tuarua) were nurses, kaiawhina (support worker), midwives, social workers, community groups and supports, most of whom were female. These entities were beneficial for providing formalised health care and further support needs, particularly through the perinatal period. The entities included the lead maternity carer, nursing and carer staff who provided care on the ante-natal and post-natal wards; special care baby unit staff; nursing staff

and general practitioners who managed and treated conditions such as a tamaiti's allergies or severe reflux; community providers such as WellChild Tamariki Ora nurses and kaiawhina, who delivered developmental surveillance, immunisation and whānau support through home-visiting; and support services for post-natal issues such as a lactation consultant for problems with breastfeeding. A distinctive characteristic of these relationships was an arrangement of provisional reciprocity, which required a level of commitment from agreeing parties to fulfil in meeting certain criteria and expectations of care. Service provision was bound by contractual conditions and funding confines that determined the involvement of supports external to whānau. In turn, constructive and ongoing partnerships were formulated and achieved to varying levels and experiences. Engagement was episodic, finite and involvement formally ceased at discharge.

The bottom and third tier (tuatoru) links to neighbours, the wider community, and society. The connection with neighbours emerged in this tier rather than higher in the tapatoru, which is enlightening given that community is a valuable resource for families. This tier included formal childcare, employment, training or study where ngā māmā engaged and functioned as a member in a domain with greater diversity across culture, ethnicity, class, gender and social status. The tapatoru and the interconnected levels have resemblance to Bronfenbrenner's Ecological Systems Theory (Berk, 2006) in terms of the immediate, internal or central level assigned to an individual(s) that progresses to varying levels depicting relations with the environment. Ways in which systems theory has congruence with the analysis and conceptualisations of this research, was discussed in Chapters Three and Four.

Throughout the tiers, the power of the female remained unequivocally influential. Ngā māmā flourished when significant women were whānau, who shared and reflected similar values, beliefs, principles, worldviews and whakapapa. The connection and power of the female was enhanced through this familiarity. Often when one female was unavailable, another intrinsically filled this space maintaining an ebb and flow of support and care. Consequently, without significant female presence, ngā māmā became vulnerable to isolation, loneliness through a lack of stability, guidance and empowerment.

5.5 The Power of the Female - Waipatu, Waiariki, Waiora

The power of the female was enmeshed throughout the stories of ngā māmā, interconnected with their experiences of wellbeing. The principal koru, Te Koru Tuatahi (Figure 16), depicts the power of the female sourced from significant women across generations principally mothers, and ultimately from ngā māmā themselves. The principal koru is overarching and the provider and connection to Waipatu, Waiariki and Waiora. Wairua surrounds the koru while the tamaiti is embedded at the core. The unfurling koru represents the development of life through life's experiences.

In exploring the first main theme 'Waipatu' through the power of the female, the significant female is revealed as a stabilising factor for ngā māmā providing a constant, enduring, reliable and indelible cogency; a source of protection and security. Significant females instilled stability as necessary to nurturing and growing a healthy whānau that encompassed a supportive and consistent environment as well as benevolent and responsive relationships. Secondly, the significant female provided 'Waiariki' for ngā māmā through supervision and direction in a reassuring and uplifting way. The power of the female manifested as a source of trusted leadership that imparted knowledge, modelled 'mothering', corrected, advised and counselled. Significant female entities enriched experiences supporting ngā māmā to navigate through the myriad of pathways presented to them. Lastly, the significant female was an important source to 'Waiora', whereby they empowered ngā māmā to greater autonomy, self-realisation and awareness through overcoming adversity, healing, acceptance and forgiveness. The significant female was a powerful medium that strengthened existing elements and enabled reconciliation of inner or external conflict. These experiences of empowerment heightened the perceptions ngā māmā had of themselves, of others and of the world around.

The most significant entities are presented in 'Tuatahi' of Figure 17. The overwhelming concept is the power of the female, particularly mothers, and the intergenerational connections between females who impart the greatest impact of stability, guidance and empowerment. Together with the new tamaiti at the kōpū of the koru, the significant elements are encapsulated by the wairua, representing the most significant variables through the experiences of wellbeing of ngā māmā.

5.5.1 Waipatu - Stability

Mum was my greatest support through and through...she's the ol' backbone. (Ani)

Like the overarching mōkehu (main fern frond) or supportive backbone, significant females were renowned as the innate and most important factor in providing and imparting stability according to ngā māmā. The power of intergenerational support through women was valued and clearly important. An example of this common whakaaro (thought) was from a māmā who had the ultimate commitment and support from her mother but celebrated the enduring power of mothering through her late maternal grandmother. In mothering her own tamaiti, the intergenerational perpetuity was felt: “(If nanny had been around) *my nanny would've been being a mum to my mum, telling my mum how to be a mum to me!*” (Ani).

Resoundingly, women were identified by ngā māmā as the greatest source of solidarity, principally represented through their mothers. Mothers were the most prominent providers and archetypes of stability. Ngā māmā regarded their mothers as greatly influential throughout their lives and becoming more so during the pregnancy, birth and arrival of their first tamaiti. Although the support of partners and extended family was highly valued, with impending motherhood, ngā māmā commonly sought stability by returning home to their mothers:

We ended up moving away to Karetai (location) and I had only known I was pregnant for a couple of days...where we were staying just didn't feel right, it just wasn't the right environment I wasn't getting the support I needed, like the family support and stuff, and even food and stuff it was just really hard, and I only lasted there maybe not even a month, but while I was there I told my mum and dad (I was pregnant)...they asked me if I'd move home, so I moved home and it just felt right, like I knew it was right for the baby, and for me, I knew I was gonna get looked after well. (Kiri)

Ngā māmā worried about upsetting whānau. Some of ngā māmā had moved long distances away from their parents and home to study, work or to live with partners and in-laws. In facing the possibility of disappointing partners, in-laws and themselves, ngā māmā made bold choices to return to their mother's care in pursuit of support and stability:

I wanted to go back home coz we were living in Maumahara (location, industrial area) with Jared and with his parents and his nan, and that's when we found out we were pregnant and that's when I was like nah I

wanna go home (laughs) and I had really bad morning sickness with Te Awhitanga and the smell of Maumahara was just like argh, no, I don't like it – I wanna go home. (Atawhai)

For ngā māmā who were raised by their nannies, the maternal pull was equally powerful. Maternal stability was a potent notion whereby 'mother' and 'nanny' equated to 'home'; an institution of reliable love and support: “*Family keeps you stable...My nan feels like home*” (Kura).

Major decisions for ngā māmā often rested heavily on the response and endorsement of their mothers. The dilemmas that surrounded pregnancy and the uncertain living situations were often resolved simply by a mother's imperative. One example to embody this effect came from Ani, who had moved to Australia with hopes to prosper in the agricultural industry. Connecting with home happened every night but the emphasis changed once pregnant:

I missed the support of my mum...I called mum every night, that's how you grew up you always clocked in with mum and dad even more so being hapū...I said, oh I want to come home...my first whakaaro was to abort but I stopped, I thought (and) I rang my mum and she said, come home, straight away. So that was it. (Ani)

For ngā māmā, their wellbeing was significantly affected when learning of being pregnant and carrying their tamaiti. Despite contending with the ill effects, like morning sickness in early pregnancy, ngā māmā experienced similar health and happiness through pregnancy; subsequently, birth was a key milestone. Ngā māmā attributed the calm and steadiness in birth to the strength and presence of their mother and significant women: “*My mum, my sister-in-law – my baby's namesake, my (female) cousin who found out I was pregnant and biked up...I just held my mum's hand*” (Ani).

Ngā māmā had the knowledge and support of midwives and health professionals in their pregnancies and birth. Although mentioned in the process of pregnancy and procedures related to birth, ngā māmā said little about the health professionals' impact in their experiences of wellbeing in contrast to the consistent and significant women in their lives. Most of ngā māmā had 'relief' midwives in attendance due to their lead carer being on holiday: “*I had the worst lady coz my midwife had gone on holiday...I just wanted to cry!*” (Atawhai).

My sister rung my midwife (who) told me, no just wait until your contractions are close together and as soon as I hung the phone up they were like two minutes to five minutes, I said no ring mum I needa go to the hospital...(Kiri)

Mothers were pivotal to providing the stability and strength that ngā māmā needed through the birthing process. Ngā māmā expressed their trust in their mothers who they readily gave authority to in making the best choices around their wellbeing. A reflection to exemplify this was a māmā's three-day labour and the trepidation around being sent home for a third time. The māmā lived in the bush with her parents. Consequently, her mother refused to allow the māmā make another long journey to the bush and instead took the māmā and partner to maternal nanny's home in town where the intergenerational maternal support fortified:

Mum said, no we're not going home this time we'll go to nana's...they (mum and nana) took me shopping and made me walk around...yeah so mum was there right from start to the end, and Jared was too and he just slept...I know, I've got photos of him. (Atawhai)

Mothers were deemed constant, consistent and stable and maintained a presence although held back at times to allow ngā māmā and partners the opportunity to manage. Having significant people around during the arrival of the new born, which included partners, fathers and relatives, was important for ngā māmā. The presence of whānau mainly signified the celebration aspect of the impending tamaiti, particularly if it was a first mokopuna. However, despite the support and attendance of others at the birth it was the strong female identity that was most vital:

My mum was my rock that night...I said to Reef (partner), Aunty Lulu and Aunty Amiria (Marama's mother's sisters), can you just let mum do it? And so my mum stepped up and she was, she helped me through the birth, by just keeping me calm, she wasn't in my ear or anything. (Marama)

Knowing their daughters well, mothers provided relief and assurity for ngā māmā through the struggle of birth, while also being the matriarchal presence to honour the passage of new life. Ngā māmā valued their mothers for assisting with their care during and immediately following birth and the trust of soothing the tamaiti in those precious first moments:

I loved carrying, I just didn't like pushing her out...not birth...but mum was there...she made me laugh, laughter is a way to help me get over things...(then) mum took Piata (tamaiti), mum took her first. (Rā)

Most of ngā māmā described the early days with a new baby as mostly positive, meeting their expectations of being a new mother. The input of a significant female enabled ngā māmā to gain the necessary skills to meet the needs of the new baby. Although midwives and other health professionals were able to impart some knowledge and skills, ngā māmā clearly credited their mothers and grandmothers for modelling and teaching them the essential parenting skills. Some of ngā māmā described certain initial tasks as “scary”, for example, being frightened that the baby may slip in the bath or that they may hurt the baby when changing clothes. Others feared they may sleep through feeding times or sleep through a crying baby but all were surprised at how naturally they were able to respond to their baby’s needs:

My biggest support was nan...it was mostly nan who showed me how to care for Piata...like wrapping (swaddling)...coz I just used to put the blanket over her...nan’s like, no, (not like that) coz she’ll get out...nan showed me mother-craft and mum showed me how to bath Piata coz I wouldn’t do it, I thought I’d drop her. (Rā)

Often mothers or grandmothers lived with or stayed days and nights with ngā māmā. Mothers were able to take over during the day, which allowed ngā māmā to rest and to share baby waking and feeding times through the night. This action had a dual effect providing ngā māmā with comfort and company, and new fathers time to rest for work commitments:

Mum’s a real shocker. Even still to this day she’d get up about three or four times in the night and check, check on baby and check on me. (Mum would say), put that baby back in her bed, you know if I was sitting there feeding Te Awhitanga when she came in, (she would say) put that baby back. (Atawhai)

Mothers and significant women provided security for ngā māmā by organising their work and lives to be available to support and strengthen. Such examples included mothers who returned from cities they commuted to for work, others worked around full-time employment, an aunty shifted towns to support a māmā, and a māmā phoned her sister throughout the day every day for support and reassurance:

When I first had baby I rang my sister Georgia who had two kids by then, I rang Georgia everyday, more than once, and I talked to her about breastfeeding, about sleeping, burping, anything and honestly I rang her all the time and she was like real supportive for me...I had my sister with my first to talk to, and (for a māmā to take) any support you can get or anyone with the same sort of experiences just to help each other out. (Whetū)

In the initial months for ngā māmā who were new and inexperienced, the significant female entities were highly effectual and powerful. They often placed the needs of the māmā and baby before their own and often integrated the impending needs of the new māmā and her tamaiti into a balancing act with their own lives: *“It’s like when I need to go to town and Casey’s playing up, mum will finish work and she’ll take him home...little things like that...then I can finish what I’m doing in peace”* (Ora).

The investment of this innate support was not considered over and above or extraordinary and onerous. Ngā māmā disclosed that receiving such unconditional and absolute certainty helped to raise and sustain wellbeing:

It’s good to have my mum help me with that, I think it came at a good time because she (mum) was flexible, she was able to come with me, with Neecee (tamaiti), I think if she wasn’t there most days oh – I probably would have enrolled myself into a home (institution)! You know, not given Neecee away, but I needed help. (Marama)

Ngā māmā acknowledged how difficult their experience of those early days would have been if not for the presence and stability of a significant female. For some of ngā māmā, a mother or grandmother was not available but they identified surrogate female figures that brought familial support likened to a mother or grandmother as depicted in Figure 17:

With mum overseas it was tough, I thought I’d have no-one to turn to, no-one to take Kimi or tell me I was doing okay or that I should try something else...I wish I’d had my mum to go to. But my aunty was there, aunty was great (support). (Parearau)

Sisters, sister-in-laws, ex-step-mothers, female friends, friends’ mothers and female cousins were identified as supports in supplementing an unavailable mother or grandmother. Ngā māmā often referred to their female friends and cousins as ‘sisters’ illustrating the close connection: *“My cousin Tia and I were raised like sisters we’re so close in age...she had her baby before I did, so she showed me how to feed Marino, and put her to sleep”* (Aio).

Value was enhanced when a sister, friend or cousin was also a mother and could offer practical advice and essential resources. Sisters, friends and cousins were also confidants for ngā māmā of issues and concerns associated with their peer group: *“Me, my mate, and cousin would meet*

at my cousin's house and we could talk about all our girly stuff too, what our mans (partners) did, dye my hair...that was good" (Kura).

Some of ngā māmā expressed times of despair due to traumatic events following the birth of their first child, such as relationship break-ups with the father of the child and conflict with the father's family. However, ngā māmā most often attributed improved wellbeing and an enhanced approach to life, to the support of a significant female entity that was paramount to seeing them through tough times: *"It would be mum...everything she did and I suppose everything she went through, I think she probably went through as much as I went through...even now, it would be mum"* (Ora).

When necessary, sensitive or 'tough love' strategies were applied by the significant female. Due to the trust and respect associated with this identity, ngā māmā accepted the interventions as helpful in recognising and correcting adverse behaviour and attitudes: *"Nanny is the one I would go to for anything, if I was unsure or scared, nanny just makes it seem so much clearer and easier, and that's where I have found my courage"* (Aio).

There were varying degrees of input from others in the tiers of 'tuarua' and tuatoru' of the Tapatoru (Figure 17), however, the entities within 'tuatahi' were the most significant in responding to and influencing positive outcomes. This significance was particularly evident during times of a māmā's detachment to the emotional and physical needs of the baby, excessive socialising, absenteeism, and binge-drinking alcohol: *"I did a lot of (alcohol) drinking...the doctor classed me as an alcoholic...I reckon things would have been different if I didn't have nan (to help me)"* (Rā).

Two māmā were raised by their grandmothers from a very young age. Grandmothers were honoured as a binding strength for the whānau. Ngā māmā described that being raised by a grandparent afforded them more of their grandparents' concentration attention and input, particularly their grandmothers. This was especially so once a tamaiti was born into the whānau:

Home is anywhere with my nan. And then when the day comes (when we move on) – I'll have to say it will be to Taeroa (location), just because I know that Nanny Arahia's there happy and safe...Home is

yeah with nan, and in Taeroa, the house on the hill (where the māmā was raised by her Nan in Taeroa). (Rā)

The important relationships ngā māmā had with significant women ensured a vital connection to whenua – to their homeland and marae connections. Connection to whenua provided stability and assurance physically, emotionally, socially and spiritually: “*Having Nan connects me to my papakāinga. That is my home and I will always belong*” (Aio).

I go with mum to the marae all the time, its where we're from, we have lots happen at our marae but sometimes it's just cleaning and doing the lawns and gardens around the pā...we take the babies and kids, they play and we cook a kai, I want Wehipaeahurei to be used to the marae and have a connection to our whenua...my mum is proud of our whenua and so am I. (Maia)

The connection to whenua was imperative for the wellbeing of ngā māmā and the development of the tamaiti. Powerful female entities provided protection and reassurance for ngā māmā who lived away and felt unfamiliar or not engaged with their papakāinga:

I always know where I am from, and I can always go back... Maungapai (location) is always going to be home no matter what...mum feels the same about dad's home (where we all live) and her home (-land is important too). (Ora)

Women were recognised as the most important factor to stability for the wellbeing of ngā māmā in their indelibility to protect, support, strengthen and sustain. Ngā māmā referred to significant women especially their mothers as a backbone, rock, home and connection to the essence of belonging. Regardless of partner, whānau and health professionals' support that was all valued to varying degrees, the greatest source of stability was through their mother and other essential women.

5.5.2 Waiariki - Guidance

Everything my mum said is true, everything my nan said is true...all the things mum and nan said are true. (Kura)

In guidance, ngā māmā looked for truth and where that would be reliably sourced. Ngā māmā held high value for whom they could trust and who provided reliable leadership. Occasions of

meaningful guidance were encapsulated in experiences with entities that expounded a ‘teacher’, role model, advisor or counsel. According to ngā māmā, women bestowed the most valued knowledge around mothering and demonstrated conventional and traditional practices that they chose to inherit before adopting other practices. Ngā māmā sourced truthful and reliable guidance through mothers and significant women such as nannies, who demonstrated leadership through instinct, skill and experience:

Motherly instinct...(It's) the same as I would...my dad would be, oh they're (the tamariki) fine, whereas mum would be, oh I need to check to see where they are, and then sit outside with them while they play not just look out the window. Like dad and Daniel still care for them (the tamariki) but not to the extent that a mother would...my mum would or I would be with them...like Daniel was supportive but I still wanted my mum to help...because he wouldn't understand ...breastfeeding...heavy bleeding after you've had a baby...to know what it's like to stay up all night with a kid and my mum would because she's had children...dad was dad, but she did all the looking after the kids...Tai had a bug and I wanted mum to come over and help...I know how she parents and I know she would care the same as me so I felt more relaxed knowing she was there. My mum would just do it – she'd just do it and I'd do it the same as her because that's how I've seen it (done). (Kapua)

Over and above partners, fathers, health professionals and others who meant well in their care and concern, mothers took primacy when ngā māmā looked for guidance and advice. Although solid and evidence-based information from professionals or sound advice given by someone else was often heeded, ngā māmā would opt for or seek their mother's overall guidance to use or help make decisions:

If I had any problems (with pregnancy and birth) or thought something was wrong I'd always ring my mum, coz my mum doesn't live here, she lives in Kikorangi Bay...dad's working here and she lives in Kikorangi Bay (and commutes home) ...apart from my midwife I knew I could talk to and stuff, my mum was my biggest support. (Kiri)

Women provided guidance across an array of topics, areas, problems and issues that ultimately had positive outcomes. This was clearly the result of guidance going hand-in-hand with the subsequent support and reassurance to follow through. Women, mainly mothers, walked beside ngā māmā through their journey and challenges, rather than in flurries or episodic instalments. The significant female entities were close allies and confidants for ngā māmā through decisions, particularly the tough choices ngā māmā feared they would be judged on. They focused on

encouragement and positive approaches, to look forward and not look back. In some instances, ngā māmā felt the outcomes from taking the advice from the significant female entity saved their sanity and helped the tamaiti to flourish:

I said to my mum, I felt mean for giving up breastfeeding but I had to do it coz I had to do everything and nobody else could feed her unless I was expressing but that just took up too much energy for me and I was trying. When Neecee started on (allergy) formula mum would take her – she was not gone for more than one night, just random nights to give me a break, and I trusted no-one else but my mum to look after Neecee, she hasn't been anywhere else. (Marama)

Mothers were especially influential in guiding ngā māmā in their mothering skills and wellbeing, as they were trusted as having the experience and skills, and also the understanding and empathy with the tasks and challenges of being a mother and a woman. Additionally, significant women were there to give guidance with the greatest encouragement but also to step back and allow ngā māmā to learn, develop and formulate their own knowledge and understanding from succeeding and failing. Guidance in this form was critical as it allowed ngā māmā to build from learnings in confidence:

I had mum there, like 'Eagle Eyes' (laughs) 'Ol' Eagle Eyes!!' Saying, you should...you should...for a while she was literally telling me how to do it, and then I said, mum, can you make it an option? What if I want to do it differently?...I just explained, mum I'm gonna have to learn for myself, but if you can see I'm doing it wrong well then say something, if you can see there's another way I could try it don't say, 'I should'...come in and just let me know there's another way it could be done...but it was different because the doctors and nurses were telling me, you shouldn't be feeding Reiley-Gina that much, you shouldn't be feeding her that often, all the little things...then I got stubborn with her sleeping and they were like, you need to wake her up, do you like being woken up?! I'm not waking my baby up...(feeding) I'm like bro, if she's gonna keep sucking well she's gonna keep eating...I took advice from some, but some I was like, don't tell me what to do...when I seen my mates and their babies can't sleep and mine sleeps through the night...fuck my baby's been sleeping like this from three months. I said, mum the Plunket nurse keeps saying that I should be feeding Reiley-Gina blah blah blah. She said, well it's not your fault baby wants to sleep through the night. Chur. (Ani)

The significant females' guidance affected the wellbeing of ngā māmā greatly, particularly when ngā māmā were overwhelmed with difficulties. With the interests of the māmā and the

tamaiti at heart, the female entities would impart comfort and reassurance. This was essential with issues of attachment and depression. In experiences of unwellness, mothers in particular took a lead role in guiding ngā māmā to improved wellbeing. With the tamaiti flourishing in the care of grandparents and whānau, mothers were able to place more emphasis on the wellbeing of ngā māmā. Ngā māmā recalled their mothers recognising sadness and despair, and responding instinctively. For example, one māmā talked about sinking into a terrifying unhappiness, consequently losing a lot of weight, withdrawing and isolating herself. She felt her whānau were stressed with her unwellness but the greatest guilt was her feelings towards her tamaiti:

*The major one (symptom of unwellness) was when I disowned Casey (crying sadly)...it wasn't a little bit...I just blamed him...for everything, I know it wasn't Casey's fault, I wanted it (to be a mum)...It was through mum...I got help obviously and had a talk to people, and I cried then as well, but I don't know like it helps, but it's never gonna take away that feeling that I disowned my son, for my sake, or I blamed him.
(Ora)*

However, Ora maintained that she improved with her mother's guidance and support to see their family doctor, go on medication, attend therapy, and take some time away with a trusted friend. Ora's father also sought advice from a grand-aunty who with Ora's mother's approval, provided karakia and healing for Ora and the whānau. Similar methods of female-led and whānau-supported approaches helped ngā māmā. Significant women were potent to recognise disharmony and attend to the disorder and turmoil. The intergenerational potency flowed and proved vital to the wellbeing of ngā māmā: “*Nan just told me, you can't do that anymore (drink alcohol excessively and go out partying with friends)...you have to buckle down and look after this baby*”, so I was like, okay” (Rā).

Henceforth, significant women had the wisdom to guide ngā māmā through old and contemporary ills, by traditional, cultural and conventional means. They also recognised when it was necessary to engage professionals (see Figure 17), including doctors, midwives, skin specialists and others. The wisdom of significant women was demonstrated through common sense practices and acceptance, merging traditional practices with contemporary ideas:

My mum...even though she's a nurse and she's breastfed before, that was how many years ago? And so she could help me but she had forgot things, she said, call the nurses ... Get Kelly (the nurse) to show you

how to do it, and I was like, you're a nurse, you tell me! And she's like, no, this was 22 years ago and I'd forgot about that. (Marama)

Women manifested as powerful guiding factors throughout the experiences of ngā māmā, pointing ngā māmā in the right direction but also navigating those choppy seas alongside them. At times ngā māmā turned to female friends for advice especially those who were mothers. In certain friends, ngā māmā recognised the maternal qualities of trust and leadership they could rely on:

My friends stayed all night timing contractions and waiting...While mum was away, they were my biggest support, my friend...her personality is leadership...(she) came in and took over, she was really awesome, held my hand, wiped my face. (Pania)

Friends offered simple but valued guidance that reassured ngā māmā and supported wellbeing. One māmā could call on the advice of her friend's mother who was the housemother of a home for teenage mums. The calm and grounded guidance of significant women was immeasurable for ngā māmā away from their mothers: *"I would ring Hera...she put me right...I had to chill and she was reassuring...Hera would say, babies cry hun, put her in her bassinette and go to sleep"* (Pania).

Being connected to whānau particularly women was imperative to the wellbeing of ngā māmā in restoring and sustaining wellness. The constitution of whānau came in diverse and wondrous forms, as did living situations with the various compositions and fluidity. Whether a māmā was single or had a partner, having significant women around as powerful exponents to supervise, steer and regulate whānau wellbeing was vital.

5.5.3 Waiora - Empowerment

Said with a big joyful smile - I have mana in giving birth. I have my own mana now in giving birth to my daughter. Fuckin no-one can do anything better. (Ani)

The power of significant women to empower ngā māmā across many aspects of wellbeing was implicit and connected closely to emotional and spiritual wellness. The stability and guidance provided by women, namely mothers and maternal grandmothers, provided fundamental tenets to ensuring ngā māmā were empowered towards confident mothering and greater

rangatiratanga. Being free and able to function according to their practices, values and beliefs and those of their whānau, was essential to ngā māmā: *“My parents are sticking by my side...my mum says, do what you want to do and I’ll support it, so hearing that makes me feel sweet, that it’s up to me...that’s important to me. (Pania). “My nan helped pick me up...she was like, get up you can do it and I was like, okay then...and then things I noticed things changing and that I could do it” (Rā).*

It was apparent throughout the stories that the significant female empowered and aided healing of the physical, emotional and spiritual wounds of ngā māmā. The female entity was able to tend to ailments that ngā māmā would not reveal to others, bring together damaged relationships or ensure therapeutic distance if required, and enable reconciliation of the māmā’s self through imparting philosophies of acceptance, understanding and edifying forgiveness to lessen pain and distress: *“Kara (sister) said I had to accept I was having a baby and think positive so that my baby grew in my puku knowing he was wanted and that I could make this the best thing that ever happened” (Aio).*

Part of healing was the significant women’s’ power to convince ngā māmā to have strength and confidence in her abilities to acknowledge but transcend past misfortune and consequent fears. Ngā māmā were uplifted by their mothers’ certainty and belief in positive outcomes, and the encouragement from other women. Mothers reminded ngā māmā that adversity was a moment in time and that suffering would dissipate in due course. Some of ngā māmā had trouble with issues related to birth and breastfeeding. Others had major care and protection events that placed them in the spotlight and redirected their planned trajectory. Often ngā māmā were reluctant to ask for help. Ngā māmā tried fiercely to manage themselves and were largely successful through perseverance and determination. Yet, incapacitation from surgical wounds, difficulty in establishing feeding and issues around poor social choices were examples of vexing factors. In one circumstance, a māmā recalled the terrible state of her nipples from the poor breastfeeding latch she and her baby had developed. The māmā was too whakamā (embarrassed) to show anyone and described how her aunty’s perception, compassion and use of rongoā (Māori medicinal cures) empowered and strengthened her:

Aunty came over and I cried coz my nipples were so sore...she said “Giz a look” and helped me, like bathed my breasts, and dressed them with rongoā – I cried it was such a relief, then she took me to the doctor and

I got medicine, but she kept checking on me and making sure I was healing...she checked Kimi was on me properly to feed...she made me sleep and nursed baby for me...I came right. (Parearau)

Female entities were instrumental in seeking help for various issues, most importantly for serious conditions such as post-natal depression. The significant female empowered ngā māmā back to improved wellbeing by strengthened confidence and spirit to maintain a healthy level of self-efficacy:

Mum said it was up to me to overcome my feelings of inadequacy, because I wasn't (inadequate), she always praised me and made me feel good about being a good mum and doing my studies, I just felt awesome then, and had lots of confidence in what I could do...it made me feel responsible and capable. (Wai)

Ngā māmā gained clarity and improved self-esteem that led to employment and further educational opportunities. Ngā māmā learned to trust, cherish and utilise their skills and knowledge:

I never thought about that as something that I would want to do, it was mum, she said why not put your swimming – what you've learnt – to use, so I'm a qualified swim teacher now, I got all of that out of being a swimmer...a lady got hold of mum and said there's a job going...so I tried it and – I love it. (Ora)

All of ngā māmā experienced very difficult emotional events, which included separation from partners, traumatic hospital events and illnesses experienced by their babies. These events involved various entities throughout the 'Tapatoru'. The healing power of the significant female improved the self-esteem of ngā māmā and empowered their resilience. A māmā discussed the rejection, pain and resentment she harboured when her partner left her for his former girlfriend and how her grandmother occupied her with activities, good thoughts and encouraged contact with her friends and cousins. The māmā felt her grandmother was significant in her confidence to support and continue a healthy relationship between the baby and baby's father:

Nanny Tiare was like, look, this baby needs her daddy, he loves her, it's not her fault...and she's got brothers she's got to know...Nanny's right...now I go to the gym with my friends and play netball with my cousins instead of being angry all the time and shamed out...my baby's happy she gets to see her dad and brothers. (Aio)

Likewise, the female entities recognised overwhelmed and tired 'ngā māmā' and acted as vindicators who had the power to temporarily absolve ngā māmā from their mothering duties. They would direct ngā māmā to have time-out, space and reprieve without compromising the dignity of ngā māmā and earnest attempts to do their best. This was highly valued and empowering for ngā māmā: "*Nan would say you know, leave Piata here (with me) and go and potter around outside (for time-out) or...relax, instead of fluffing around in here*" (Rā).

For ngā māmā, their wellbeing was empowered by maintaining tikanga practices and performing traditional customs such as returning the baby's whenua to home land and carrying out the related ceremonies, including marae connections. One māmā had relied on her mother to help facilitate this tradition as her grandmother could not drive but when it became clear she may not get the opportunity waiting for her mother to participate, the māmā accepted her grandmother's wisdom and was empowered to make a decision to move forward:

We waited for mum, but she took way too long, so we were supposed to take it (whenua, placenta) back to my aunty's in Taeroa, but...nan said, oh well, you put it here (in their rental property's garden), and that was good to me coz we lived here and we know this is going to be a safe place for it, so we did that and nan said her prayers. (Rā)

Women took a lead role in ensuring traditional practices were maintained in a Pākehā dominated health system such as retrieving and returning whenua, which was imperative to ngā māmā and the wellbeing of her whānau. Empowering ngā māmā to incorporate important tikanga within a modern world was also a vital role of women, namely mothers. Experiencing and completing important customs enhanced wellbeing with long-lasting effects that ngā māmā recalled with pride, joy and happiness:

When I was pregnant I wasn't allowed to cut (my hair), I asked my koro, am I allowed to cut my split ends? and he said, yes, and I was like oh okay then, then I said to my mum, what about shave my legs? and she was like (besides the head) we (mother and aunts) all did so I was like if it's good enough for my mum...my koro, you know, he's always said the head's tapu so that's why you don't cut the hair. (Marama)

The intergenerational transfer of tikanga was implicit and the valuable practices ngā māmā experienced, particularly around the female, transpired to commitments to teaching those values and customs to their tamariki especially kōtiro (girls): "*I feel an obligation to teach my*

girls how to respect themselves, respect their body, everything, like teach them all the tikanga around their body” (Whetū).

5.6 Ngā Māmā, E Tipu E Rea - Grow and be Strong

‘E tipu e rea’ is a phrase coined by Tā Āpirana Ngata (Walker, 2001) to celebrate growth and development, and in this instance, is interpreted as an acknowledgement of the triumph gained through facing adversity, which ngā māmā strove to overcome and succeeded. The arrival of the new tamaiti was a time of considerable growth and maturity for all of ngā māmā and through reflection of their experiences of wellbeing was a momentous time for transition and change. All of ngā māmā had made preparations for their tamaiti’s pending arrivals, but equally, experienced unforeseen adversity and made significant sacrifices to ensure their tamaiti were central in their sphere. Such a transition was by no means easy and tested the fortitude of ngā māmā, the vigour of their character and the constitution of their support. Overall, in reflecting on these occasions, ngā māmā were inspired by their tamaiti. The tricky experiences imparted valuable lessons for ngā māmā, particularly in learning that through patience and perseverance, there could be satisfaction and pleasure:

It was cool carrying and getting stuff ready for Marino (tamaiti), everyone was excited and helped out...then I had Marino and it wasn’t all sweet, I planned to use cloth nappies...and that was ridiculous – I couldn’t keep up with the washing, so then it was paying for disposables, then problems feeding, then the father up and left me - in ways I was ready, but in a lot of ways I was dumb (naïve) about stuff...to me it was about hanging in there, and when I did it was worth it. (Aio)

Although ngā māmā were very grateful for and applauded the care that they had received across the health and social sectors, not all supports were helpful (Figure 17). Ngā māmā were looking forward to enjoying their postnatal experience with their baby but some of ngā māmā felt disappointed with their aftercare. Although they had taken action to have these concerns addressed through conversations and formal letters of complaint, no follow up was provided:

When I went in (to the birthing ward) the communication wasn’t very good...the doctor was asking me stupid questions while I was having contractions...she (the doctor) was taking my blood then dropped the instruments and I had blood leaking all over the floor and pillow, then she asked Damien (partner) to pass her the instruments...I also had incontinence...the doctor asked, why are you so worried about the incontinence? Was it because I wanted to stay in hospital? Because my baby was in SCBU (and I didn’t want to leave)? Well no, I was worried

(about the incontinence) because I had no sensation of needing to go for a mimi...I thought, gosh this isn't right. It was kind of like they were trying to get rid of me (that) I was just taking up space...I was changed to at least three different rooms...it was like they didn't even know I had incontinence and haemorrhoids...they didn't come and see me to feed Roimata (in SCBU) even though I had expressed (told them) I wanted to breastfeed...(I didn't know) the nurses were topping her up with formula...I couldn't wait to go home. (Whetū)

And some felt that they were ignored, thus were left feeling devalued but eager to exonerate themselves from services and institutions:

I think because my birth went all right no-one really came to see me after Aotahi-ki-te-Rangi (tamaiti) was born, the ward was really quiet, I was happy to see the kitchen ladies! ...And the staff couldn't pronounce Aotahi-ki-te-Rangi's name right, never mind (they couldn't say) mine (properly) too...I wanted to go home... (Wai)

Ngā māmā related experiences of environmental pressures of the post-natal ward, the miscommunication with non-Māori health professionals, the lack of cultural understanding, the lack of sensitivity, negative personalities and mannerisms from those in 'caring roles'. Sadly, ngā māmā often reflected on the lack of support from professionals to help them understand their own wellbeing (Figure 17):

They didn't tell me (they were cutting/episiotomy), they just went and did it, and then the midwife told me, you've just got to look after yourself, make sure you keep this clean...At the beginning it was – it was like ahhh??...(Rā)

Varying emotions of grief, sadness, anger, fear, confusion and vulnerability were present following the birth of their first tamaiti for all of ngā māmā, which were sometimes attributed to post-natal depression. One māmā was formally diagnosed with post-natal depression and three others described their experiences as such. Although ngā māmā were keen to embrace their new roles, some experienced overwhelming feelings of disconnection with their babies and resentment towards their situations. These feelings and other ailments compounded the various issues that ngā māmā experienced:

(Following birth) I was a bit down, I got to the stage where I wasn't ignoring her (baby)...I couldn't be bothered...I was down a lot...but the feelings just kept getting bigger and bigger as Piata grew older...they classed me as an alcoholic not having post-natal depression, I was a bit

guttled (by being labelled alcoholic)...I was trying to hide the fact that I didn't want anybody to know how I was feeling, then I just came out and said it, I said to mum I don't think I've got a connection with Piata...I don't want to touch her, I don't want her to be near me...it was hard...(thoughts of suicide) sometimes I did that. (A suicide plan) yeah, but I knew I wouldn't go through with it ... so there's really no point ... sometimes (suicide) it's like in the back of my head and I can't get rid of it...alcohol was a way of dealing with what was really wrong...I try and hide it. For no reason I'll just wanna cry so I run away and try but I can't. (Rā)

In some cases, incidences of animosity grew when ngā māmā and partner lived with either set of whānau. Ill-feeling occurred when ngā māmā or partner felt undermined under the roof of their partner's whānau home. In these situations, animosity created some hostility that impacted on the wairua, independence and individuality of the new parents, and their enthusiasm to create their own life and make their own decisions. Compounding the animosity was financial hardship, the lack of employment opportunities and the motivation to find and keep employment which weighed on relationships and sometimes caused tension. The following exemplar demonstrates an experience of conflict and resolution:

I felt like life didn't change and even after I had Casey my life didn't change coz I've got so much support...our (mine and partner's) parents had a lot of say in our relationship...we're quite similar (my partner and I) in our morals and our family...so we clashed because he wanted to be with his family and I wanted to be with my family and they (partner's family) wanted Casey but I'm Casey's mum, so I'm not going without Casey...I'm gonna go running back to my family...for me it's safe...(When we broke up) I think Miharo (partner) grew up a lot being away (from us, having space) and I grew myself, being in the city without mum and dad, as much as I came back like I still had to do everything on my own...(now we're back together) we're (tamaiti, partner and the māmā) getting our own place in town. (Ora)

When there were crises, the states of wellbeing of ngā māmā mirrored this and the heartache was echoed in their stories and tears:

I think it hit me more (depression) when me and Miharo went downhill and everything turned sour. And that's when it hit...I lost a lot of weight...I stopped eating it wasn't that I didn't want to eat it was that I couldn't eat...mum and everyone was running around cooking coz I felt like this and that but couldn't eat it...I think everyone got a bit stressed... but the major one was when I disowned Casey...I just felt like I just blamed him for everything...I know it wasn't Casey's

fault...like I wanted it (the pregnancy)...I didn't want to be a single mum...but it's never going to take away that feeling that I disowned my son for my sake, or I blamed him...I locked myself in the room (and) I knew Casey was all right because he had mum and dad...I don't know what would have happened if I wasn't living at home...I felt like I lost everything...I've been so mean to Casey...I was afraid...I would just stay in my room, I'd get up, go to work, and then go back to my room...I didn't have anything (or) any time for him...that was my own decision ... just looking at Casey didn't make me happy...I was sad...like I felt feelings I had never felt...hate...and rage. (Ora)

Growing up and nurturing their new tamariki meant making wise choices and decisions. Ngā māmā learned to combine the advice of a significant female with their own skills and built their styles and approaches around these. Ngā māmā discovered being regarded as a mature adult and being taken seriously required asserting themselves, which in turn strengthened their motivation to determine the needs of their whānau:

I got to a point when people didn't take me seriously I had to be firm with what I say to them and then they'd be - oh okay, she knows what she's talking about, and I do because I'm thinking if you're just gonna judge me from what I look like and how young I am, you know I know what I'm talking about especially when it comes to my daughter, I know she's allergic to that, Neecee can't have that, and the doctors are like she can have that and I'm actually like well, no she can't have that, go and look at the (hospital) notes if you like. (Marama)

Although the adverse experiences were very tiring and emotionally challenging for ngā māmā and partners, they were supported well by mothers, grandmothers, friends and whānau. They also found increased courage and implemented their own strategies to deal with difficult situations. For one māmā, to address stressors of caring for her tamaiti who had a chronic medical condition and ensure her voice was heard by health professionals, she kept a book with dates, notes and events. This paper trail helped in following an incident when to treat her baby's skin condition, a nurse washed the baby in too much bleach and the baby consequently flared terribly all over. When the nurse refuted responsibility, the māmā was able to recall with confidence from her book that the bleach had been "poured in", at what time and by who. Keeping notes and similar strategies was helpful and empowering, but also made the māmā wonder how other 'ngā māmā' coped in similar circumstances.

I told them it had been poured in by this other old lady (nurse) and I felt like saying to her, if you don't enjoy what you're doing why are you

here? I feel sorry for other mothers, especially Māori ones that maybe get pushed to the back because just different experiences at the hospital for all sorts of people. (Marama)

At varying levels of response, ngā māmā embraced the changes and described the need to ‘grow up’ and the responsibility that came with caring for the tamaiti as an extension of themselves. For ngā māmā, the sense of responsibility flourished by trying new skills and learning to respond to their tamaiti’s needs, which also meant finding independence and making big decisions – progressing from a previous lifestyle of socialising and being free to come and go. Managing time and making plans in accordance to the needs of their tamaiti required maturity and ngā māmā developed the ability to recognise and prioritise their core tasks.

5.6.1 Tāku Tamaiti Tuatahi – My Baby Comes First

It was important for ngā māmā to ensure that their tamaiti were safe by having good caregivers and healthy environments for the tamaiti. Ngā māmā provided for their tamaiti before meeting their own desires, which meant going without luxuries or redirecting finances to save for necessities such as a driver’s licence or vehicle:

Kaimana (tamaiti) comes first in my decisions now so whatever I do I always have him in mind. I used to be a bit of a roamer but you can’t with a little baby...I want to keep him warm and keep to his routine I’m trying to do...I got my restricted licence and I’m saving up for a car. (Kura)

Ngā māmā had learned that having goals was important but sometimes success was abated by the necessities at the time. Of ngā māmā who were adamant that they wanted to breastfeed for a long indefinite period, two experienced pronounced weight loss when altering their diets after being told by health professionals that their breast milk was exacerbating their babies’ skin conditions. Both of ngā māmā suffered on the restrictive diet plans. Eventually one of ngā māmā gave up breastfeeding due to fatigue and put her tamaiti on a special formula. For this māmā, her tamaiti’s sensitive and severely flared skin kept her and baby indoors and away from social interaction, fresh air and a change of scenery. For another māmā, isolation came with her baby’s birthing injury and a healing caesarean wound. Most of ngā māmā experienced difficulty maintaining balance when coping with a lack of adequate sleep, extreme tiredness, trying to meet the baby’s needs and find quality time with their partner:

We (tamaiti and the māmā) used to go for walks all the time that made me feel better but when Neecee started getting to the eczema and itchy I stopped walking...I used to walk everyday so I was losing some weight...the most I lost was with this dairy diet, dairy and wheat-free diet – no food diet! Yeah, I was like so depressed it was not even funny...I felt like I was starving coz I couldn't eat normal stuff, but to me I was just focussed on, well I'm not doing it for myself I'm doing it for my baby. (Marama)

Some of ngā māmā intimated that not seeing friends or having the freedom their single friends had was at times difficult. For some, not participating in the activities of single people was no issue at all, it was more the lack of social interaction and often not being able to participate at all. Ngā māmā looked forward to when their babies could be cared for by others so that they could join in social activities such as a games night with other couples, going to a sports match, 'date night' with a partner, and meeting up with girlfriends for a child-free catch up. Going to part time work or a training course was valued as a time to interact with other adults. At times, ngā māmā admitted animosity and resentment that they could not do what others were, but the tamaiti remained at the forefront of the mama's choices. For one māmā whose partner was not a relative of the tamaiti, she accepted that her partner was not tied to her and baby and was entitled to have freedom:

I'd get Piata's stuff and if I couldn't afford to go out I wouldn't go. I had to put her first and make sure she had everything she needed before I went and did what I did. I can relax when she's in a safe place. Or even if I couldn't afford a packet of cigarettes I'd go without. I've got to sacrifice, it's like now, if there's no-one to watch Piata then I won't go. It's hardly ever we (partner and the māmā) get to go out on the weekend and spend it together, but that's the sacrifice I've got to make, I know Taryn's got to have (a) social life so I can't be counting on Taryn 24/7. (Rā)

Reef (partner) did get a bit jealous with her coz it was always us for a while and then baby comes into the picture it's not always about us so he got a bit 'thing' with that, but he's learned, she's like his world now. (Marama)

Making sacrifices and compromising lifestyle was experienced by all of ngā māmā as part of transitioning into motherhood. Often ngā māmā identified the 12-month timeframe with hypothetical goals, such as the best time to breastfeed to, when all her 'baby weight' should be lost, when to return to work, when to start looking for work, the time to start a long overdue

course, a good time to put baby in formal care, the ideal gap to have another child and an ideal time to return to sport and physical activities:

I wanted to be home for baby's first year at least, my mum stayed home till we went to school, but times are tight...I like work but I sort of dreaded a year coming up...I would have to wean Aotahi-ki-te-Rangi onto a bottle and she hated it but at least she got 12 months (of breastmilk). (Wai)

To make ends meet, ngā māmā improvised and used initiative to bridge gaps. Sharing baby clothes, swapping pushchairs, making do without a vehicle, car-pooling, supporting friends, pulling weeds, growing vegetables, making toys, making swings out of tyres, keeping a budget, doing favours for others are some examples of how ngā māmā prepared and maintained resources for themselves and their babies. Although it was often choice and an avenue for social interaction, improvising was also a necessity to get by. The impetus was their babies and their own wellbeing of having happy babies, reaffirming social connections and managing resources:

At the moment she's (tamaiti) going with a mate of mine (for childcare) and she goes and sees another friend of mine whose got another girl, and they all meet together and have play dates coz I was thinking, coz for me putting Piata in daycare or something like that. But it's way too expensive. They (early education providers) were saying, think about getting a subsidy from WINZ, but that's only if you're doing a course or gotta part time job. I can't do that, I know baby gets out and she's got friends and they have fun. I go do the shopping and get back before Piata gets back. And it's cool too, I can say to her (friend/caregiver), I can only give you this much this week, and she's like don't worry about it, you know. (Rā)

Ngā māmā realised untapped levels of patience and maturity when challenged by the unpredictability of a new baby where they gained problem-solving skills and learned to practise perseverance. Most of ngā māmā walked away from stressful situations then went back to try again, took a deep breath or used positivity, which helped develop coping strategies and parenting skills. All of ngā māmā were faced with varying obstacles and were stoic in their resolve to not give up. Support was very important in the trying times and an increased personal resiliency was cultivated. Ngā māmā acknowledged that 'throwing in the towel' was not an option and therefore how they would rise to the occasion:

Got the connection between me and baby back...I worked on the connection trying to get it back again - and yeah its really good now...I think figuring things out for myself, and taking responsibility of being a

mum, and not turning it away (motherhood), just doing it, so you know...and everything's gonna be okay, that's what I think. (Rā)

Dealing with and learning from adversity fostered pride and accomplishment for ngā māmā and focusing on baby stimulated meaningful action. Ngā māmā recalled their babies' smiles and cuddles, lifting them out of despondency. During tragedy and disorder the baby strengthened the resolve of ngā māmā: *"I remember when my cousin died it was horrible and with all the sadness Kimi slept in the wharenuī and took some of the sadness away for my whānau"* (Parearau).

Despite the adversities experienced by ngā māmā in becoming new mothers, there was a demonstration and expression of devotion for their tamaiti, which reflected in their wellbeing. There was a dual happiness – ngā māmā were well when the tamaiti was flourishing:

She (tamaiti) was smiley from day one, that's why my cousins and everyone nicknamed her 'Koa' because throughout the whole thing (adversity) she's always smiled, so that's brightened me, it's kept me going...Neecee's come a long way, I'm mostly proud of her (than myself), she's the one who's been through it, it was just trying to keep strong for her. (Marama)

The presence of the baby was an impetus for ngā māmā to provide stability. Ngā māmā were guided and empowered by overcoming adversity, which was indelible and lifted ngā māmā to levels of wellbeing that cultivated growth and development. Protecting their child was clearly evident for all of ngā māmā throughout their stories. The approach and outcomes depended on the level of skill and assertiveness of a māmā; constructs, particularly from previous negative experiences also influenced the experiences of ngā māmā. The presence of the baby was significant in the many ways ngā māmā grew and developed their identities. Ngā māmā recognised their own power, such as the power of her voice and opinion as vital to wellbeing. Being resourceful was essential when ngā māmā needed to back themselves.

The experiences of their baby's conditions such as eczema, birthing injuries, reflux and colic or their own ailments of incontinence, haemorrhoids, episiotomy, trouble breastfeeding, headaches, pain and postnatal depression following the birth of their first child shaped the integrity and wellbeing of ngā māmā. Through their stories, ngā māmā acknowledged that they

had very little time for themselves and interestingly, rarely expressed themselves as separate entities to their tamaiti. Plans changed unexpectedly and ngā māmā often relied on an adaptive attitude in facing tribulation. They began to modify the reactive response to an active and proactive approach, which was necessary to maintaining control and being an organised mother.

5.6.2 Rangatiratanga - a Sense of Self

The presence of the tamaiti enriched the lives of ngā māmā. When surmising their experiences, ngā māmā typically reflected and consolidated experiences by communicating a deeper sense of self. Rangatiratanga denotes chieftainship and empowerment, from determining and attaining optimal wellbeing; and also, symbolises the shining of one's light. Ngā māmā were empowered by their experiences as they recognised healing had taken place, relationships had shifted, values were strengthened and ngā māmā shared the support and strength of others. They had developed through experiences of increased responsibilities and life had changed. Of significance was that the tamaiti demonstrated what was meaningful, which transcended the wrongs of the past and presented opportunities as a 'second chance' - an impetus to embrace the present and future. Healing was a transformative experience that came in the form of forgiveness, acceptance, increased self-awareness and identity, reciprocity, consolidation, recognition and love. Empowerment was identified through exploring and acceptance of human fallibility and fragility – that everyone makes mistakes. Through capturing the meaning of their experiences, ngā māmā revealed the significance of their baby to a holistic wellbeing: *“Being a good family member, a good partner, a good mum, a good friend, being happy in yourself”* (Whetū).

It was not until later on in the process of telling their respective stories that ngā māmā started to consider and explore themselves as separate entities with their own wellbeing. Over the time of motherhood, their thoughts and purpose had focussed on their tamaiti and whānau, and considering their wellbeing as a separate entity was enlightening. There was almost an inference of selfishness to ponder one's own needs. Consequently, ngā māmā had made very little time for themselves:

Just 5 minutes here and 5 minutes there, and sometimes I do think I really need to have more time for myself...I'm too busy focusing on everybody else and not on myself...It was tough dealing with a new

baby, everything's different and everyone comes to see the baby and not you. (Kura)

Once ngā māmā revealed and explored their stories, they also described instances where they were emancipated through their experiences by learning self-compassion. By understanding and having acceptance of their own vulnerabilities and human inadequacies, ngā māmā gained more self-esteem and confidence, and their capacity to nurture the self and tamaiti expanded. By learning from mistakes and recognising their own weaknesses, ngā māmā understood the strengths and imperfections of a mother as a woman and human. Ngā māmā gained insight from their own experiences and were then able to impart this acceptance and forgiveness onto others, bridging emotional and physical divides. Thus, relationships improved and the wellbeing of ngā māmā flourished. Through a more informed perspective, ngā māmā gained higher awareness and better insight:

I used to think my mum was real selfish...I was real angry at mum for leaving us I thought how can you leave your own children? So when I had baby I was even more angry because Marino means the world to me, but then as time went on I could see why my mum couldn't stay, she wasn't well, it wasn't us (the children) it was mum and where she was at. I feel like because of Marino and who I am now I have let it go...one day I hope mum will want to see her moko's and I want her to know it's okay. (Aio)

Yeah...I can see her (tamaiti) regretting me for not having a dad...but then she'll grow up and think about it... the doors always open...I just know she's got a brother...and she can get up and say her whakapapa...yeah and I'm her mum...everyone be like chur look at that blimmin white girl when she gets up on the marae...I've done something right in my life. (Ani)

Although time and possibly intervention would be required for deeper more complex underlying issues, ngā māmā learned that attributing fault and blame could not progress aspirations for the future; and ignoring problems would impede hopes for the same. Understanding and acceptance enhanced the outlook of ngā māmā to a calmer and more composed riposte to life:

To go through life without kids, to me after just having her I couldn't picture life without her, like she's everything...when I die she's gonna be living on...you carry it on...I think everything happens for a reason, that's how I live, even if I don't agree with what it was I just think they

still happen for a reason, like I believe, before she was even born the Lord knew she was going to have this (severe skin condition) so it's not a test, it's about keeping strong for the child. (Marama)

With developed insight, ngā māmā described relationships as either flourishing or ending due to a change in perspective and meaning. New relationships were created due to the arrival of the tamaiti, and damaged and estranged relationships were improved through the mutuality of love for the baby where ill feeling or past injustices were put aside or laid to rest:

Baby brought us (mother and the māmā) back together, because we've been apart for so long, and it's like we were friends, but now we're actually mother and daughter and we're connecting again so yeah, she's help change a lot... (Rā)

The wellbeing of ngā māmā prospered significantly with good relationships where the tamaiti was the motivation to move forward transcending liability for past indiscretions and also strengthened already strong bonds between ngā māmā and loved ones. The loss and gain of relationships was part of the transformation:

About tamaiti's father – He got into a relationship with another girl and I think if we had stayed up there (the bush) I would not have coped...isolated...but in town I'm near my friends and nanas around the corner...I look back now and think after all of that...you see a different side...we (māmā and father of the tamaiti) get on really really well just as friends...and sit there like this and have conversations. (Atawhai)

Ending some relationships was difficult and occasionally motivated by pride. Ngā māmā described how friendships they once had dissolved as ngā māmā disassociated from drinking heavily and partying. Their single friends ceased visiting and some of ngā māmā found that they were sometimes lonely and isolated. Some of ngā māmā experienced a conflict of values with friends who also had children but continued to party and drink excessively. New avenues for social contact emerged outside of whānau links where ngā māmā also found fellowship in community groups: *“I joined a mummy and baby group and have made good friends” (Aio).*

Constructive and consistent relationships were important for ngā māmā and experiences of positive relationships strengthened the foundation for the baby's development because they felt

supported. The tamaiti was significant in ensuring that ngā māmā were more astute in their choices, responded more adeptly to mistakes and more proactive in pursuing the necessities of daily living. A stable environment assured an equilibrium that nurtured the baby in harmony with the wellbeing of ngā māmā:

I didn't have the money, time, babysitters or desire to do those things like drink and smoke dope anymore...and we were out country and have one car...when our first (tamaiti) came, sometimes he'd (partner) get the farm truck then I could go to the village and meet up with the māmā group...they're older than me and mostly Pākehā but the ladies are awesome and they're really good to the kids...we exchange clothes, baby gear, do baking, it's mean...sometimes the girl over the hill picked me up or we'd get together at one of our places with the kids...they play and we yak. (Parearau)

With an increased sense of self, ngā māmā learned that faith and courage in their convictions was a strength and source of sustenance for their tamaiti. Ngā māmā reflected on childhood experiences, what was learned, who they learned from and what lessons and knowledge were most treasured by them:

I want my daughter to grow up knowing a lot of Māori things and the actual true Māori things, like speaking te reo fluently...I'll take her to papa he's like the Ace of Hearts to me, he can teach her everything and in the right way. (Marama)

Additionally, ngā māmā identified adverse childhood experiences and consciously omitted various parenting techniques. Based on experiences of wellbeing, ngā māmā filtered what was of value for the growth and development of their child and what was detrimental:

I wouldn't say (my mother) abandoned me, but I don't want her (tamaiti) growing up how I grew up (without my mother) – but, then growing up with my nan would be cool because then I can pass on things that my nan taught me to her. (Rā)

Ngā māmā shared the beliefs, cultural, spiritual, environmental and humanitarian concepts that they valued, which incorporated elements of a holistic approach to wellbeing including the core elements of Te Whetū – whānau, wairua, hinengaro, tinana and whenua. Ngā māmā pointed out the ill-effects of substances such as nicotine and alcohol and wanted their children to understand the messages of living well. Ngā māmā also valued a violence-free and safe

environment as conducive to nurturing the happiness and health of their tamaiti. The following exemplar typifies the position of all of ngā māmā in the research:

For me wellbeing...is to be in good mind and good emotions, and good what I put out there is what I'm going to get back, with Neecee, just for her to grow up to know what's good and what to do like...to respect others...everything she sees will show the way she's been brought up, so the way we've been brought up you know respecting other people especially the older ones, doing things without being told, I wanna bring her up like that...especially the biggest thing in our family is the positivity-ness, my koro and my nan always said if you don't got anything nice to say don't say it at all or if you're not going to do something properly don't even start...I wanna bring back all of those things and teach Neecee everything that I know...be a nice person my mum always says...keep healthy...stay away from the smokes and drinking...so her tinana and everything is going to be good and healthy. (Marama)

Through varying experiences, ngā māmā identified their strengths and recognised their qualities as valuable; with a developed confidence and sense of self expressed wanting to help others:

I didn't think I would be able to handle what I've handled going through with baby, if someone had told me I was gonna do this every day – I probably would not have had kids for a while, like I would have waited...if someone could have predicted the future for me I would have been scared to have kids but I think it's happened for a reason I've learned to manage it so all I can do now is help other people who need help and give them experience of what I've gone through and for them to know they're not on their own, and every kid is different, but I can see how it could have gone worser than what it was. (Marama)

Ngā māmā acquired an appreciation and self-awareness of their capabilities, limitations and capacity. Skills and attributes were projected, thus they felt pride in their triumphs and gained respect from others for their achievements. The journey was acknowledged as tough but enriched a sense of self, bringing ngā māmā closer to their tamaiti and others. Ngā māmā acknowledged that they had a deeper sense of self since the birth of their first tamaiti, particularly in the first year. They had learned to prioritise and manage their home and finances, be independent and access needs, have better understanding and tolerance towards difficult situations, and be more proactive and assertive towards life: “*But if I know there's something I've got to do I'll try, try and do it*” (Rā).

I've had a lot of learning curves that have made me stronger. Yeah but now that I look back they were good learning curves. They may not have

been at the time but they all worked out for the better. And I'm stronger because of it. (Atawhai)

Through greater self-awareness, ngā māmā had a better appreciation for the 'greater scheme' of life, which encompassed contributing to a positive future for their whānau in consideration of the wider and global community:

One thing Reef and I, we're happy to see happy kids, and I like to be able to say – look at them, they're so happy – and everyone should be able to say that but it doesn't happen, that's something I like to see and want to continue to have so they're always happy. (Marama)

What I learn and pass on to my child is important to me because I want Roimata to be a good person and do good things in the future. I want her to do really well in life...she can be anything she wants and because she will have good values and know her tikanga she will make a difference one day. (Whetū)

Ngā māmā had gained greater wellbeing and rangatiratanga through their own achievements by using their skills and talents, enjoying the satisfaction of helping others and observing others' improved wellbeing. Giving back and having their skills valued was empowering:

Happiness for me is baby...and doing what I want to be doing which at the moment is teaching swimming...knowing you're helping someone, like there's lots of kids that can't swim, I suppose it's rewarding just knowing that you can help...it's amazing by the end of the term we've got kids who couldn't put their face under are putting their face under which is a huge deal, or swopping from the little pool to a big pool, or going in the deep end. (Ora)

They spoke of their aspirations for the future and were inspired to contribute to the wellbeing of other new young māmā, particularly through the reciprocating-concept of Tuakana-Teina, which is an experienced older sister (sibling) helping an inexperienced younger sister (sibling). The concept is empowering in that it enables each female to give and receive support and care, enhancing and restoring wellbeing:

I've learnt to let people help me, if I need help, coz I want to do the same, I want other young mums to let me give them help...especially mums who don't have a nanny, or mum or aunty, if I gave advice to a mum it would be to take all the support you can. (Maia)

I grew up with nan, so, she looked after me so now I've got to return the favour and look after her. (Rā)

5.7 Wairua – Spiritual Wellbeing

The power of the female through significant female entities and the presence of the tamaiti were critical to the experiences of wellbeing of ngā māmā as conceptualised by the koru (Figure 16). The conceptualisation of the experiences of wellbeing through the koru was suspended in and surrounded by the power of wairua. As wairua permeates all creation, more than just that of a physical sense, and is endowed by entities from a higher source, it was vital to incorporate the significance of wairua as revealed throughout the stories of ngā māmā.

The spiritual perspective and awareness of wairua was a significant factor tying into the wellbeing of ngā māmā, often shared with significant entities of 'Tuatahi' (Figure 17). For ngā māmā, wairua was the impetus for practising tikanga Māori to celebrate and protect, which gave meaning to traditions and belief systems, ensured a divine connection between life and death, and gave meaning to significant intangible and unquantifiable events. Wairua consecrated the belief of being 'looked after' by a higher force; it evoked premonitions about the baby and made sense of the unexplainable. Acknowledging the presence and power of wairua at various times throughout their life experiences was not only vital for ngā māmā in celebration and gratitude of the affirmative, but also for lifting suffering and tribulation through karakia (blessings), spiritual rituals and incantations:

Even when I was giving birth to her (tamaiti), my koro, he told me the next day he goes, I knew when you went in (to give birth). I said, how do you know? He said that my nan (who has passed away) had visited him, he knew Neecee was a girl before I even told him, because he said that my nan had come to him and said, "she's beautiful"...those are the words that came from her...Your nan visited me that night you had Neecee and was telling me all these things...you know...(it all goes) back to the wairua. (Marama)

A māmā recalled the powerful experience she had while observing her children playing happily at home. The māmā had always had a very special relationship with her father who had died tragically in an accident years before the birth of his mokopuna (grandchildren):

Talking about wairua...both of my kids they've had those moments when they're little and they're staring into space and they're laughing and

then I'm like, who are you laughing at? But they're laughing at their koro, my dad, he comes to see them, and he's watching over them.
(Whetū)

An insight into the power of wairua and the reaffirmation of the importance of wairua from significant entities was vital when facing adversity and also strengthened, guided and empowered ngā māmā:

Like when I was down I used to think, is my nan helping me? My mum used to always say yep, you know nan's around, she's always around us, everything is connected to wairua, I believe in all that stuff you know...they (our tīpuna) pass on (die), but they're still around.
(Marama)

To expand further on this notion, the significance of wairua was also captured in the stories of tikanga that ngā māmā practised while pregnant with their first tamaiti and following the birth. These practices were reinforced by whānau in anticipation of new life and were tikanga passed down through whakapapa, whereby most of ngā māmā innately had the understanding and knowledge of when and why to implement it. These customs included not cutting hair during pregnancy, not displaying photos or scans of the pregnancy and ensuring moulds and belly casts were put away somewhere discreet. Some of ngā māmā refrained from modern practices altogether because of their knowledge and commitment to preserving wairuatanga and the threat of violating tikanga. Other 'ngā māmā' were conflicted between traditional and contemporary ideas of celebrating birth by wanting to exhibit images of their pregnancy (unborn baby) on walls or through social media. Ngā māmā attributed these conflicts to the availability of electronic devices and the advancement, speed, access to and instant gratification of modern technology – like digital photos, pregnancy scans, online tracking tools for pregnancy progress, and belly and breast casting kits. However, when possible, ngā māmā consulted elders and their mothers who gave advice and explanations and in some cases, made small exceptions to the rules:

Because my baby wasn't in the world yet...I had to be protective of the unborn baby...the baby's alive but until it's out in the world and it breathes its first breath, that's when it's true human...I was told...never take photos of when you're pregnant, you shouldn't be doing that, because it (the entity) is wairua, it's not born yet...that's not for the world...that stuff is tapu...even when you pass away what's living is your wairua. (Marama)

Nanny said “Don’t show that off (pregnancy photos), (we must) protect the wairua” ...I was gutted, but we talked and I understand”. (Aio)

Although most experiences that signified the presence of wairua following the birth of the baby were wonderful for ngā māmā, some events were disconcerting. In attempts to make sense of these experiences, ngā māmā consulted with significant female and male entities as they were concerned the events were linked to mental health issues. Instead of being scared of the events, ngā māmā were comforted in knowing that these occurrences transpired through previous generations:

It feels like someone’s pushing down on my head like there’s a hand, and I’ve had a chat to nan about it, she said it could be someone trying to communicate with me...these (experiences) are the first time they’ve happened (to me)...Nan said it’s on my dad’s side apparently (connection with spirits), my great great great grandmother or something, she could communicate. (Rā)

Some whānau sought relief for ngā māmā carrying distress by consulting respected elders in the whānau who lifted burdens associated with wairua. One māmā’s father sought out a matriarchal figure who blessed the māmā and the whānau. The māmā had become withdrawn, was diagnosed by her general practitioner with post-natal depression and prescribed medication. The māmā credits the medical intervention and treatment for assisting her improved wellbeing, but believes the blessing not only helped her, but lifted the grief her whānau were experiencing alongside her:

I got blessed, by one of my nans, and I felt it helped and I think dad felt a lot better knowing I was fine...it was Nanny Rau, she did it and it was also one of the priest men, and we just went round to Nanny Rau’s house...I suppose if you believe in that kind of stuff it’s gonna help a lot more ...it definitely helped that’s when it (the distress) probably went away. (Ora)

In most instances, the ethereal was a comforting tohu that was accepted and brought relief in times of pain and tragedy. The spiritual experiences were connected to the presence of the tamaiti and associated with significant women.

There’s something deeper about Te Awhitanga, I don’t know if it was the environment that she was brought into (with younger brother Kane dying) Te Awhitanga felt so many emotions around her all at one time...she’s special that kid...have you ever heard that saying

“Through the eyes of a child”? My aunty came down after Kane passed, I was sleeping in his room with Te Awhitanga, and one day she was just goo-ing and gaa-ing and smiling at nothing so I just left her there and she was like that for ages...then another time Te Awhitanga disappeared and I found her in mum’s bedroom and she was standing at the end of the bed playing with someone (not visible) going “boo” like peek-a-boo...even at nana’s I was watching her out the window going “bladebladeblah” and looks like she’s holding someone’s hand. We (the whānau) know its Kane. (Atawhai)

5.7.1 Whenua

Connection and belonging to whenua was important to ngā māmā who each conveyed a special place that they were from, lived at, would visit, or wished to return to in the future. Traditional ties to whenua were significant due to whānau and whakapapa connections. It was an obligation and privilege for ngā māmā to have ties to whenua and then pass down to their tamaiti. Ngā māmā wanted their tamariki to have this connection and to be able to identify with and know their whenua. Whenua was often linked with significant entities particularly ancestors and grandparents. Ngā māmā called their whenua connections ‘home’ and likened this sense of belonging to an important person, often a significant woman, also referring to her as ‘home’.

Further to tikanga practised prior to birth, ngā māmā shared the highly valued tikanga of returning their whenua to the earth (see Chapter Two). Returning the whenua was a practice that most of ngā māmā and their whānau held sacred. Ngā māmā and their partners or whānau travelled back to ancestral land or established new sites to accommodate current needs. These practices were to ensure the whenua was returned to the land and the tamaiti was sanctified by this custom. Trees and plants were placed to denote the connection to the whenua, and symbolise new life. Ngā māmā shared their stories of returning or planning the return of their whenua to special places:

Me and my sister Georgia, her two girls, and my two girls, their whenua (placenta) are all going to be buried under the same tree...so that our four girls will be together and that was really important for us that the whenua goes back to the whenua. (Whetū)

Mum buried ours...she buried it before my nan’s flax...my koro told me that back in the days they used to hang it in a tree, the pito and everything into the tree and the birds ate it...what’s the difference (it all returns to the whenua). (Marama)

Some of ngā māmā valued family gardens as receptacles for the whenua and ensured that they made their request to keep their whenua very clear to their midwives as placenta had been known to be discarded after delivery. One māmā travelled four hours with her partner to return her tamaiti's whenua to their homeland:

The drive back up the coast was beautiful and it felt right and good...we rent a farmhouse and didn't want to bury our whenua there coz we would eventually move, and it couldn't stay in the freezer, and coz we wanted to go back up the coast anyway we figured it was meant to be.
(Parearau)

Intangible forces were highly significant. Forces inherent to Te Ao Māori such as wairua and its relationship to māmā Māori and birth, have been discussed in the literature review. Unseen and unquantifiable in a material sense, co-existed to protect and enhance wellbeing. Ngā māmā expressed the significance of wairua through their experiences of growing up and of becoming a māmā.

Although seemingly inconspicuous at first glance, the powerful nature of wairua was undoubtedly influential. Ngā māmā captured the importance of wairua and the connection of wairua to their experiences of wellbeing, through events and the sharing of beliefs and describing practices and rituals connected to Te Ao Māori. Ngā māmā discussed wairua through very intimate experiences they had shared with significant entities in their whānau. For example, their tamaiti, their mothers, fathers, grandmothers, grandfathers and aunties. These occurrences gave greater meaning and insight to the experiences of ngā māmā and explained the 'unexplainable' providing a gauge, comfort, protection and reassurance for ngā māmā and tamaiti.

Although not always clearly articulated or defined, spirituality and transcendental forces otherwise expressed as wairua contributed to the wellbeing of ngā māmā manifesting as sustenance for wellbeing. In Figure 16, wairua appears as an intangible unseen force undefined and undetermined, contributing to the nurture and sustenance throughout the koru's life cycle. Wairua emerged throughout the stories often linked with significant whānau members, both female and male, pakeke (adult) and tamaiti. A balance of influences was important and vital in the experiences of ngā māmā. A spiritual essence greatly enhanced the wellbeing of ngā

māmā from conception, to pregnancy, to birth through to motherhood. The power and capacity of important relationships with whānau and the environment both earthly and existentially, affected ngā māmā significantly. Wairua had a deep and profound presence through the experiences of wellbeing of ngā māmā.

5.8 Summary

Each māmā was unique and had her own powerful story. There were complex and layered meanings to their experiences, situations and circumstances that affected their wellbeing. Phases of life and concepts of ‘who she was’ at a particular time, were often more significant to ngā māmā than an age or developmental stage. Being ‘young’, in terms of a negative notion, was not a factor unless ngā māmā were queried about it, judged for it, or had reflected on a situation where they observed themselves as being a ‘young mum’. Their wellbeing was interwoven with the wellbeing of their tamaiti, whose presence was a catalyst for their experiences.

Ngā māmā drew meaning from exploring their experiences of wellbeing in relation to the birth of their first tamaiti. Consequently, ngā māmā related this to their personal growth, aspirations, and the perpetual forming of identity. Becoming a mother for the first time was greatly significant and contributed to who she was. Central to the wellbeing of ngā māmā was of course their tamaiti, however, the most influential entity were significant women who provided the most stability, guidance and empowerment. This finding was very evident throughout the stories, particularly the presence and input from mothers. The entities of new tamaiti and significant female did not exist in isolation to each other but interconnected with the māmā. A triangulation bonding mother, māmā and tamaiti emerged, becoming a powerful and potent unit.

Mothers and other women, and the power that they evoked consistently emerged as critical to how well ngā māmā experienced pregnancy, birth and motherhood. The wellbeing of ngā māmā and her mokopuna was forefront for mothers, who naturally took on a leadership role in the experience of motherhood. Each māmā conveyed experiences of wellbeing with the enduring female power that embodied care, love, support, reliability, trust, guidance, strength, knowledge, and a connection to important family and cultural belief systems and customary

practice. Men provided a vital role in the wellbeing of ngā māmā, particularly partners, fathers and grandfathers but in a different way to significant women. Ngā māmā acknowledged the role of others for their support and assistance, which included professionals and services. When the support was compassionate and professional, ngā māmā were extremely complimentary and thankful.

Ngā māmā were faced with a range of adversity, confusion and hardship, but with the support of significant people particularly whānau and women, ngā māmā experienced strength from healing, a greater sense of awareness of herself and her wellbeing. Being able to practice tikanga Māori was important to ngā māmā who related their culture and worldview as essential to their wellbeing. The intergenerational perpetuation and succession of maternal love and support exemplified by mothers, was constantly alluded to as an enduring power and although not conspicuous was the consistent underlying influence of wellbeing for ngā māmā.

Chapter 6: Discussion and Conclusion

6.1 Introduction

The focus of the research was the wellbeing experiences of ngā māmā following the birth of their first tamaiti, however, the parameters opened up as every māmā revealed a whakapapa to their experience, rather than a ‘piece’ of the whole story. Ngā māmā revealed three distinct stages of experience, although not always told chronologically. The stages included pregnancy and the lead up to birth; birth and the experience surrounding birth; and the initiation and early period into motherhood. Ngā māmā spoke of events, people, challenges and celebrations across these stages, about what was significant as they related their experiences of wellbeing.

The findings of my research signified that the most consistent and prominent factors to the wellbeing experiences of ngā māmā, were the presence of the tamaiti and power of significant women. The presence of the tamaiti and thus becoming a mother was a journey of development for ngā māmā, who became increasingly aware and perceptive of their own identity and rangatiratanga through their stories, and by *telling* their stories. The most significant entities to support and influence the wellbeing of ngā māmā, were significant women, who were acknowledged throughout the experiences of ngā māmā. A range of experiences to impact the wellbeing of ngā māmā emerged from the stories, and significant women were credited by ngā māmā for being a consistent, reliable and trustworthy strength. These women imparted important qualities that were drawn from an analysis of the findings, which are exemplified through Waipatu (stability), Waiariki (guidance) and Waiora (empowerment).

Without the presence of the tamaiti there was no story, and according to ngā māmā, the presence of their tamaiti happened before the birth event in knowing that their tamaiti was present physically and spiritually. Pregnancy was seen less as unintended and more predestined, valid and meaningful as many of ngā māmā related ‘tohu’ to their pregnancy. The spiritual connection relates to Indigenous research where young Indigenous mothers and their families considered their children as ‘a gift from the creator’, being an unfathomable event to human perception (Eni & Phillips-Beck, 2013). To ngā māmā, their tamariki were integral to their wellbeing from conception, whose presence became an impetus for change and development for the individual and the whānau.

The literature predominantly pitches early motherhood in wāhine Māori as deficit and undesirable (see Chapter 2) (Quint et al., 1997; Dickson et al., 2000; Wilson & Huntington, 2005; Breheny, 2006; Strickett & Moewaka Barnes, 2012; Ware, 2014), however, this study rarely captured the problematisation through the many experiences. Ngā māmā who shared their stories for my research were unique, individual, diverse and resplendent of their own lived realities. Although ngā māmā recalled occasions when they were made to feel inadequate because of their age and ethnicity, such incidences occurred more often within a societal paradigm, and infrequently within their own whānau, social and cultural contexts. Studies from Aotearoa incorporating a kaupapa Māori perspective such as Goodwin (1996), Rawiri (2006) and Adcock's (2016) Master's theses and Simmond's (2014) doctoral study, shared similar findings with my research. In particular, these findings included the value and significance of support systems, whānau, and women of the whānau in the pregnancy, birth and motherhood experiences of (young) Māori mothers. Gabel (2013) and Simmond's (2014) doctoral theses extend on Māori maternities, and look at the motherhood journey and power from a mana wahine position.

Other closely related are qualitative studies analysed in Chapter Two explored the experiences of young Indigenous mothers (Quinless, 2013, Ussher et al., 2016). For instance, the First Nations Canadian and Australian Aboriginal studies, recognise the diversity of family and significance of 'networks of care' in the wellbeing of young Indigenous mothers, and constructions and experiences of motherhood respectively. Both studies acknowledge the impact of historical trauma on the contemporary contexts of young Indigenous mothers, but also highlight the positive aspects of Indigenous mothers' experiences and a resolve towards adversity. These studies have assisted in bringing into view the mutual experiences of young Indigenous mothers including Māori, based on the indelibility of cultural epistemologies and worldviews in the aftermath of colonisation, whilst indicating the various cultural and social distinctions across the experiences.

6.2 An Explication of Te Koru

Te Koru (Figure 16) encapsulates the significant features to come from the stories of ngā māmā. At the kōpū of the koru is the presence of the tamaiti, who is connected to the wellbeing of their māmā. This notion is similarly endorsed from an Indigenous perspective whereby the *centre* of

the family and community is regarded as the child's rightful place, who expounds meaning, purpose and destiny for the family and community (Eni & Phillips-Beck, 2013). Within Te Koru, the tamaiti is the reason, the stimulus and recipient of change, whose presence incentivises the 'power of the female', which is depicted as the enveloping main koru. The main koru (power of the female) signifies the love, strength, protection, leadership, care and nurture generated from the significant people in the wellbeing experiences of ngā māmā, and implicates women as the most significant people, primarily mothers (mothers of ngā māmā).

The innate and intimate connection between mothers and ngā māmā, indicates a familial strength that has significant implications for the wellbeing needs of ngā māmā. Mothers were innately responsive and supportive of ngā māmā and their mokopuna, and in doing so, were an essential factor through the journey to and into motherhood. In a whānau-approach to support ngā māmā, the power of the female was an encompassing variable that extended through others who were important to ngā māmā and their wellbeing. That is, the main koru explicates an embodiment of the caring and nurturing aspect of those involved with ngā māmā led by women, but inclusive of men respective of the individual stories. Complementary forces are associated with a Māori worldview that recognises the symbiosis between female and male, whereby the feminine aspect is recognised in men and vice versa. The indication that nurturing and mothering by Māori men was common in traditional Māori society (Jenkins, Harte & Ririki, 2011; Taonui 2011), was apparent through the stories of the majority of ngā māmā in this research. However, the shortage of acknowledgement regarding the positive input of men, either conveys a dearth in the availability of positive male influence or the power of women in this domain, which has implications in the heightened value and influence of women to impact the wellbeing of young Māori mothers and whānau. It also signals ambiguity in regards to the location of men in the wellbeing of young Māori mothers. Overall, the importance of mothers indicates that young Māori mothers need strong reliable maternal women in their lives that they trust, to help navigate the pathway to and into motherhood, and who reinforce the prospect that they are managing and flourishing across the dimensions of wellbeing.

Waipatu, waiariki and waiora proved the most influential resources to support wellbeing and were consistently provided by mothers and women, but in fact valued in all those supportive of ngā māmā. Since stability, guidance and empowerment was most effectual and invaluable when

sourced and imparted by mothers, the innate and intimate connection between mother and māmā is indicated as inimitable and vital to benefitting wellbeing. The consequent repercussion of this vital connection, is the protection and strength imparted to the tamaiti at the kōpū of the koru and has implications for the way wellbeing is considered and counted as significant in the lives of young Māori mothers and the whānau system in general. The power of the female through mothers and women to effect and influence positive wellbeing experiences for and with ngā māmā and therefore their tamaiti, is a crucial finding discussed in this chapter.

Regarding a Māori worldview and a perspective of maternal wellbeing, the power of the female in this research is indicated as strong, perpetual and pliable like the curling koru, which looks back on itself to where it has been, as it continues to move forward. Te Koru is physically and spiritually symbolic of the connection to te ao Māori, where wairua is indelible to all that is unknown (Te Kore), known (Te Pō) and to be experienced (Te Ao Mārama). The spiritual-cultural connection and significance of the findings of this research is two-fold. Firstly, wairua has implications for the mother as ‘te whare tangata’, the house of humanity (Tomlins-Jahnke, 1997a), that from a Māori perspective of inception, we are implanted with spiritual attributes such as tapu, mana, wairua and mauri (Henare, 2001). Secondly, the tamaiti is both ira atua and ira tangata (human essence) (Tomlins-Jahnke, 1997a; Yates-Smith, 2003; Tamati, 2007) – a celestial and earthly being. From the womb, the tamaiti reaches Te Ao Mārama where they breathe in life and air rushes their lungs. From thought to inception, the tamaiti is part of a whānau and a whakapapa, a mother and father, and therefore belongs and is treasured. To reconcile the physical and spiritual realms, the whenua is ceremoniously returned to Papatūānuku, and like the tamaiti represented in Te Koru, remains nestled at *te kōpū o te whenua* - at the breast of the primal mother, Papatūānuku. This alludes to young Māori mothers and their tamariki being individual of physical and spiritual essence, but also connected physically and spiritually.

Research has indicated the value of wairua and practices associated with spiritual values and beliefs to maternal and female wellbeing (Rawiri, 2007; Gabel, 2013; Simmonds, 2014). From this research, ngā māmā indicated that they had a varied understanding and connection to important mātauranga Māori surrounding creation and femininity, but nonetheless it was important and each māmā desired to and practised what they did possess. Acknowledging

divine origins and the practices that reinforce a spiritual connection to those origins, indicates that wairua is imperative to young Māori mothers and their tamariki, and has implications for the way mātauranga is protected and transposed to support the wellbeing of young Māori women in becoming future mothers. That is, the impetus for young Māori mothers to move forward is knowing, understanding and reflecting on where they originate, and bringing forward with them what is valued and meaningful.

6.3 Power of the Female

Women are found to play an indelible role throughout te ao Māori as leaders and nurturers (Tomlins-Jahnke, 1997a; Durie, A., 1997; Gabel, 2013; Simmonds, 2014), and kaupapa Māori and mana wahine scholarship alongside tikanga and the unwritten mātauranga of te ao Māori, emphasises the value of wāhine Māori. Mana wahine goes further to expound that through struggle, resistance and enlightenment space is created for wāhine Māori to be revitalised. There is momentum in exploring and redefining the contemporary position of wāhine Māori, our significance, experiences and lived realities, whilst recognising that wāhine Māori remain part of a symbiotic unit. At the foundation of te ao Māori, whānau and whakapapa are essential to the wellbeing and identity of the individual and the collective (Moeke-Pickering, 1996). The importance of whānau and social support systems for young Māori mothers particularly through mothers, grandmothers, aunties, sisters and friends, has been acknowledged in a small but developing source of studies, as in Indigenous research (Dalla, et al., 2009; Cooke, 2013; Eni & Phillips-Beck, 2013; Quinless, 2013; Ussher et al., 2013; Brown et al., 2016). Older women of the family, particularly mothers, were the main sources of influence (Kandasamy, 2015). Women of young Māori mothers have been emphasised as integral to the transition to motherhood (Goodwin, 1996; Collins, 2005, 2010; Rawiri, 2007; Gabel, 2013; Simmonds, 2014; Stevenson et al., 2016; Adcock, 2016), and my findings also indicate that women are integral in the transition to self-hood of ngā māmā. This transition has implications in how becoming a mother strengthens young Māori mothers and enables their strength to emerge, facilitating and perpetuating the power of the female. Another critical implication for the wellbeing of young Māori mothers, is that the power of the female not only protects the tamaiti, but protects and promotes the identity and wellbeing of the young Māori mother by enhancing self-awareness, self-efficacy and self-determination. This is vital for women, and consequently for the wellbeing of whānau in growing leadership and perpetuating the strength of whānau members.

The power of the female that manifested in various ways, was often understated in its presence but simultaneously potent. For instance, the power of the female as innate and intimate was almost ‘taken for granted’ as just being there, but would subtly lift the confidence of a *māmā* and impact her experience of motherhood, particularly during adversity. Adversity was diverse and personal but included relationships, illness and parenting. The imperceptibility of women, indicates that beyond society’s dominant beliefs of what is ideological, and how adversity is managed, young Māori mothers instinctively trust and rely heavily on their mothers. Exemplifying a mother’s influence, was that *ngā māmā* indicated they gravitated towards mothers as their primary maternal model, and main ‘mother/woman’ archetype. Despite obscuring and intrusive beliefs that prevail around maternal wellbeing, cognisance with a mother’s mothering approach and role as a woman in the *whānau* has implications for *who* young Māori mothers choose as their primary source of stability, guidance and empowerment.

The maternal archetype was revealed from the findings as an intergenerational force, which indicates the powerful cyclic investment of mothers, grandmothers, sometimes great-grandmothers, and also mothers’ sisters (aunties), female siblings and cousins. The intergenerational power of the female, was an important characteristic of a *māmā*’s wellbeing through pregnancy, birth and early experiences of motherhood of this research. Being a ‘young’ mother has implications that often mean young Māori mothers’ mothers are ‘younger’ and have a greater ability to support, and that grandmothers and great-grandmothers are available to help too. Many of *ngā māmā* had their grandmothers or grandparents involved in their lives and three had significant mothering from their grandmothers from the time they were little to the present. The relationships between *ngā māmā* and nannies showed that the bond was special, where the love and wisdom of a nanny was regarded with esteem (Pere, 1988; Simmonds, 2014). Although a generation apart, *ngā māmā* relied on the stability, guidance and empowerment provided by their nannies as they navigated pregnancy, birth and motherhood, indicating that nannies and intergenerational care was integral to the wellbeing of *ngā māmā*, particularly in the absence of mothers (Bernstein, 1998). As nannies aged, *ngā māmā* took on a reciprocal caring role, which reinforced strong cyclical maternal themes such as ‘*ūkaipō*’ (source of sustenance) that expounds traditional maternal concepts of *te ao Māori* (Moewaka Barnes et al., 2013; Gabel, 2013). For *ngā māmā* who had a nanny as their primary maternal figure, their own mother still had a presence to various degrees.

For ngā māmā, intergenerational maternal investment meant mātauranga was passed on, support was scaffolded around māmā and tamaiti and with financially sound and robust whānau structure, they were rarely alone, isolated or unwell. The support system encapsulated whānau values, beliefs and practices, which incorporated whānau principles about women, for women and by women. The principles perpetuated inter-generationally, and most of ngā māmā planned to share and teach their tamariki, especially daughters, what they had been taught about mothering. The intergenerational power of the female maintained whakapapa of maternal and female wellbeing, and women embodied several archetypes in their support of ngā māmā. These archetypes included nurturer, healer, teacher, confidante, advisor and counsel, indicating that mothers and women exude a leadership that young Māori mothers respond to, trust and rely on as custodians of women's care from a Māori perspective. Few studies have directly captured this knowledge, particularly in regards to young Māori and Indigenous mothers although some mention has been made. However, the impact of the power of the female generated from whānau on the wellbeing of young Māori mothers is critical and an important finding of this research.

Most of ngā māmā had the investment they required within their whānau, while a few demonstrated adaption and tenacity in connecting with other female support systems to supplement or replenish a dearth. Despite not all mothers being easily accessible, ngā māmā connected as they needed to with significant women they trusted and relied on. Supplementation indicates that ngā māmā recognised that not having significant female involvement from their whānau was a gap in their wellbeing and had implications for the role of the community, public sectors and men in the wellbeing of young Māori mothers. Partners, fathers and grandfathers provided strength in different ways, but complementary to the power of the female. Women of whānau and friends were a significant pool of support (Goodwin, 1996; Rawiri, 2007; Simmonds, 2014), and contributed to the stability, guidance and empowerment of ngā māmā. Additionally, others outside of whānau and friends were acknowledged for their involvement, for instance, professional health care workers such as midwives, doctors, nurses, kaiawhina and social workers; playgroups and formal childcare services; training and study institutions and organisations and people and places of employment (Goodwin, 1996; Rawiri, 2007; Gabel, 2013). The variation and diversity of people who became involved with ngā māmā during pregnancy, birth and motherhood, ranged from a few to many depending on each māmā's respective experiences. The solidarity of a significant

woman with a māmā was imperative, and the findings indicate that mothers epitomised that connection. The implication is that in all, a mother's consistent presence and involvement was highly valued and desired.

6.3.1 Waipatu (stability)

Stability is an important and fundamental factor in the wellbeing of young mothers (Apfel & Seitz, 1991; Breheny & Stephens, 2010; Dodge et al., 2012; Atkinson & Scott, 2014; Kandasamy, 2015), and a primary and settling presence is emitted by significant women (Benoit & Parker, 1994; Arnold et al., 2011). From the findings, stability was revealed by ngā māmā in the sourcing of steady and reliable support systems, homes and environments that preserved their wellbeing and the wellbeing of their tamaiti. This was often indicated by a māmā returning or living at home with her mother or parents/whānau. Mothers were seen as stabilising, which has implications for the type of environment and care that young Māori mothers value as stable and secure, to be cared for and understood. The recurrence of ngā māmā referring to their mothers as 'home', indicates stability but also a connection to te ao Māori through 'ūkaipō' (Gabel 2013) or 'te whare tangata' (Simmonds, 2011). In an Indigenous study, young Navajo mothers referred to the reservation as 'home', and that the reservation would always be a place to return to their roots regardless of the pathways they chose (Dalla et al., 2009). Similarly, Māori view the marae as a permanent home (Selby, 1994) and in this thesis, is also personified through women. Additionally, ngā māmā described their mothers as a 'backbone', 'rock' and 'connection', as did those who were raised by their nannies. Mothers were portrayed as consistent, solid and reliable as ngā māmā experienced the highs and lows that came with pregnancy, birth and motherhood.

Disclosing a pregnancy to parents particularly mothers, was more than a question of viability but rather a consultation on what to do, which indicates ngā māmā wanted the stability and reassurance from trusted people (Collins, 2005; Rawiri, 2007). Family support for early pregnancy has been observed in other studies (Collins, 2005; Adcock, 2016) and from my research, has implications for what matters to ngā māmā such as gaining acceptance and that it would be okay. Mothers became part of the decision-making process with ngā māmā and whilst they maintained a supportive position, the decision was ultimately left to the māmā. From the stories of ngā māmā, the prospect of a new mokopuna was consistently received with positivity

and happiness (Vakalahi & Taiapa, 2013; Adcock, 2016), which was a surprise to some māmā, but placed more emphasis around the probability of having a tamaiti, rather than the disapproval from loved ones. This indicates that pregnancy of a young Māori woman is often welcomed by whānau who are then pivotal to the trajectory of a new mother, which has implications towards the wellbeing of young Māori mothers and their tamaiti. Abortion has been well covered through other studies that research teenage pregnancy, and although it has been prevalent in society, remains relatively taboo. Abortion has been pitched as an acceptable if not expected contraceptive option for teenage women who become pregnant or feasible if becoming accidentally pregnant (Fonda et al., 2013).

The narrative of young Māori women who become pregnant and do not abort, has implied an opposition to abortion as a normalised option of unwanted societal pregnancies and strategy to kerb an ethnic deficit (Woodward et al., 2001; Breheny & Stephens, 2010), particularly as more Pākehā are likely to terminate pregnancy (Dickson et al., 2000). The discussion around a Māori worldview and findings of this research, indicates that Māori have a distinct cultural background and epistemological understandings around creation, birth, life, whānau and whakapapa, and that termination is in direct antithesis to a Māori perspective of procreation and holistic wellbeing. Although the literature contends that young Māori women lack prevention of pregnancy through the use of contraceptives, sex and pregnancy are indelibly linked to cultural beliefs, values and practices inherent to te ao Māori. The inference is that the acceptance of Māori regarding the pregnancy of younger mothers is queried to be a standardised part of culture, a norm or expectation that this is part of being Māori. This is clearly correct from a cultural and Indigenous perspective (Ware, 2014; Adcock, 2016) and inclusive of the findings of this research; however, the dominant narrative conveys a negative overtone.

By looking critically at the literature through a kaupapa Māori lens, the findings of this research indicate that for Māori creating life is not a deficiency, illness or abnormal (Moewaka Barnes, 2013). It infers a different view of life, reinforced by the values, beliefs and customs of te ao Māori that protect important tikanga (Rimene et al., 1998; Simmonds, 2014). Two decades ago, young Māori mothers were reluctant to tell their parents they were pregnant (Goodwin, 1996) worried they would face reproach. However, sex, menstruation, pregnancy and birth are not shameful acts but are in fact meaningful and sacred (Yates-Smith, 2003; Murphy, 2011;

Adcock, 2016). The standpoint in which Māori see, know, do and be in the world is buoyed on a knowledge system of whānau, whakapapa and wairua. The need to protect what is intrinsic to Māori for stability and wellbeing, amongst the negativity but also alongside the advances of new thinking and globalisation, is a challenge for Māori and certainly Māori women (Yates-Smith, 2003), where there are implications for young Māori mothers.

Positive whānau appraisal and stability, especially from mothers, was significant for ngā māmā. The findings indicate that in practical, emotional and spiritual ways, whānau connection by mothers popping in and out and staying overnight, sisters phoning every day and aunties calling by regularly, maintained a sense of stability for ngā māmā. Furthermore, this ‘simple’ yet consistent and invaluable practice of extra companionship and support by mothers and women of the whānau, consequently averted potential crises, such as the discontinuation of breastfeeding from difficulties with the practice, energy and feelings around feeding; sleep deprivation of ngā māmā from the disruptive sleeping patterns of new babies; trouble with dealing with health issues alone, either of the tamaiti or the māmā; a decline in feelings of coping expressed through not being able to complete jobs around the home and other obligations; the overwhelming feelings of loneliness and failure that derived from isolation whilst familiarising with a new stage in life. Health professionals must be cognisant of the important role of women and whānau in the lives of young Māori mothers, and practice inclusively of their invaluable support, knowledge and commitment to the young Māori mother and her tamaiti – not in superiority, absence or antipathy. According to ngā māmā, the role of mothers and women consistently supersede the input of others, and therefore the approach by health professionals must be to understand, include, complement and reinforce their instated value. At present, the role of health professionals such as nurses to provide or fulfil a role closer to that of significant women, particularly for mothers who are isolated from trusted women, is limited to the structure, scope and kaupapa of the service provided. Health professionals may also be restricted by a lack of awareness in their own understanding regarding the cultural, social, spiritual and emotional implications of their care and the needs of young Māori mothers at this critical stage of life, which may not encompass the lived realities of those mothers from a Māori perspective. Therefore, it is imperative that health professionals review and address the models of care from which they practice, to what is most appropriate and ‘best fit’, and also examine their confidence and competence in meeting the cultural needs of young Māori mothers.

The extensive role of the whānau in times of change, particularly mothers and women, infers a contrasting representation to what is often overlooked about the value of family support from a mainstream perspective, such as health and social development. Certainly, there are constraints and issues regarding negative lifestyle choices and poverty, however, with a dominant discourse admonishing whānau capacity, the implications for not acknowledging mothers and whānau, creates a lack of investment in what is already in place and most valued. Despite all good intentions of mainstream education, social and health systems, ngā māmā will turn to their mothers and women for stability in the most meaningful sense. That is, the intimate connection and trust between mothers and ngā māmā is vital to wellbeing and incomparable to pseudo-services. Not all young Māori mothers are able to access the unconditional stability of their whānau, however, the implication is an opportunity to develop an understanding and closer replication to what is fundamentally beneficial to the wellbeing of young Māori mothers.

6.3.2 Waiariki (guidance)

Ngā māmā valued guidance that was reliable and trustworthy, which was primarily sourced through their mothers. Although ngā māmā were offered guidance from several entities whom they respected, ngā māmā more often followed the advice or example of their mothers. International studies concur with the guidance of mothers being essential (Hunter, 1997; Bernstein, 1998). A paper that examines the role of grandmothers and women as Indigenous knowledge managers, relates their significance to maternal and child wellbeing (Aubel, 2006). The finding that indicates the importance of reliable truth and therefore trustworthy guidance for ngā māmā, was associated with what was instinctive, known, observed and proven through significant people, namely mothers. The implication that mothers are recognised as leaders in the whānau who have knowledge, experience and skill, encapsulates several archetypes such as teacher, role model, advisor and counsel (Tomlins-Jahnke, 1997b; Mikaere, 2003; Aubel, 2006). Mothers were often attributed with the knowledge and experience to guide ngā māmā through challenges and the stages of pregnancy, birth and motherhood, but more importantly, mothers were there within the context of the māmā's reality. All of ngā māmā connected with at least one significant woman almost daily, kanohi ki te kānohi, text, phone call or social media. Advice went hand-in-hand with practical support, which grew the confidence and skill of ngā māmā, for example, handling the new tamaiti was explained, modelled, supervised and shared. These experiences were important to ngā māmā, particularly in bonding with the tamaiti, in times of doubt and not feeling well. Additionally, ngā māmā were able to obtain

direction from their mothers, but also ask for or be given space whilst ngā māmā and their partners practised autonomy, which indicates a comfort and understanding.

The significant women's guidance signified the intimacy and connection with ngā māmā who were more likely to consult with trusted women of their whānau in the first instance, and less likely to immediately confide in others, such as health professionals (Collins, 2005; Rawiri, 2007; Eni & Phillips-Beck, 2013). This was supported by the shared notion that 'my mother mothered me, and I turned out ok'. Ngā māmā conferred with significant women about breastfeeding, problems with the tamaiti and women's issues prior to professional help. They also respected and valued the input of professionals and community support during their experience, seeking and agreeing to referrals to and from midwives, WellChild care, doctors and lactation consultants as necessary. However, ngā māmā would generally listen to the advice from professionals then verify the information with their mothers or significant women, or compare the professional advice with their own experiences, and discuss with their mothers (Collins, 2005; Rawiri, 2007).

These actions are similar to findings of a study of Aboriginal mothers who were guided by a secret and sacred 'Grandmother's Law' (Kandasamy, 2015), and a study of white and African-American mothers who sought their mothers' guidance about childbearing (Lee, 1982). Mothers, nannies and significant women were able to merge conventional practices with traditional knowledge, and share their understandings. That is, mothers integrated both tikanga and mainstream practices around the stages of motherhood, by implementing a respectful common-sense approach to the relevance of significant systems. Karakia was an important practice for many of ngā māmā within their experiences of wellbeing, which was often imparted by and shared with significant women (Abel et al., 2001; Gabel, 2013; Simmonds, 2014; Stevenson et al., 2016). A clear message to two māmā was to protect the wairua of the tamaiti, even in an 'unborn' state, which precluded displaying ante-natal photos, scans and belly casts. Although there were popular contemporary practices around marking pregnancy, birth and motherhood, there were whānau who asserted the protection of the wairua, which is a validated practice in te ao Māori (Yates-Smith, 2003; Le Grice & Braun, 2016):

The implanted spirit, the *wairua*, must remain with the embryo and the developing human body, *tinana*, in order for the body to continue growing. *Wairua* is necessary for the existence of the body. Its

conspicuous feature is that is part of the human being that dreams, and if the person is threatened, it is the *wairua* that experiences the threat. It is the *mauri* that binds the *wairua* and the embryo-body (*tinana*) together, and in this integral life exists. (Henare, 2001, p. 209)

The formal provision of peri-natal care that *ngā māmā* experienced, lacked the attention and inclusivity of who *ngā māmā* recognised as significant to their wellbeing. The mainstream health care system was more inclined to concentrate on the professional role and privilege the mother-child-expert triad (Fonda et al., 2013), which indicates a lack of consideration for the role of *whānau* throughout the stages of pregnancy, birth and motherhood. In some instances, an ideologic triad did not exist, and therefore *ngā māmā* and their situations did not ‘fit’ the western construct of the preferred family unit. The implication of categorising women in accordance with idealised specifications considered ‘normal’ (Breheny & Stephens, 2010; Strickett & Moewaka-Barnes, 2012; Gabel, 2013), in effect ‘others’ young Māori mothers by deterring and excluding them from (full) participation, engagement, success and enjoyment on their terms, of their experiences (Lawlor et al., 2001; Collins, 2005).

The guidance of mothers and other significant women as leaders of *whānau*, was overlooked or relegated by the mainstream model of maternal care (Aubel et al., 2004; Aubel, 2006). From the findings that encompass wellbeing from a Māori worldview, *whānau* particularly mothers are acknowledged for their constant support throughout the continuum of motherhood and not fragmented into different entities across pregnancy, birth and motherhood. The inclusivity of significant women, namely mothers, is indicated as relevant and necessary. Though it may be rebuffed as unconventional or interdependent through a mainstream lens based on neo-liberalism and a western ideology of family that premises independence and individuality, in reality, the support and involvement of significant women is empowering for young Māori mothers, especially from a Māori worldview (Rawiri, 2007; Taubman et al., 2011).

6.3.3 Waiora (empowerment)

Ngā māmā drew strength from women, and the empowerment *ngā māmā* yielded from women such as mothers, indicates a bolstered self-concept and awareness that has implications for the notion of *rangatiratanga*. Facing challenges, unveiling unrealised strengths and taking control were common amongst *ngā māmā*, who recognised their development embedded within the

stories of their experiences. Ngā māmā spoke of having mana in becoming a new māmā, which infers an awareness through making a powerful association to a divine connection, female potency and authority (Pere, 1991; Henare, 2001). Across ngā māmā, the challenges were diverse and individualised, which enhanced self-concept, self-determination and thus a sense of mana. All of ngā māmā experienced similar instances of empowerment through their experiences of wellbeing, and the implication of becoming a māmā formed a sense of pride, achievement, strength and confidence.

Mothers and other women significant to ngā māmā, expounded a non-judgmental standpoint towards the respective ngā māmā they supported. In fact, the empowering nature of mothers and women as advocates, champions and guardians of ngā māmā, indicated a deepened confidence in ngā māmā to explicate autonomy (Gabel, 2013). The interrelationships that gave ngā māmā stability and guidance, empowered ngā māmā towards tino rangatiratanga, a position that was denoted with a reciprocation of trust and accountability. The implications of rangatiratanga, revealed that the support of women motivated perseverance and determination in ngā māmā and they felt their confidence grow when their whānau, especially mothers, had belief in them. The effect of (positive) appraisal is empowering in the transition and growth to motherhood and grandmother-hood, where important social systems impact one's self-perspective, self-image, self-respect and self-acceptance; young mothers' experiences benefit from positive affirmation (Taubman et al., 2012). When ngā māmā were given appraisal, this significantly influenced their self-image, wellbeing and the situation.

Adversity was consistent throughout the stories of ngā māmā, and significant women empowered ngā māmā by supporting healing through compassion, reconciliation and skills to cope. Mothers and the nannies who raised ngā māmā were particularly accepting and positive, which allowed ngā māmā to experience mistakes or set-backs and then rise in learning from those lessons. The findings indicate that women particularly mothers reassured ngā māmā that they would be supported, which in effect mended relationships; mothers encouraged respite, provided karakia, assisted with the return of whenua to important places, provided reassurance and helped to resolve problems. Empowerment from the findings of this research, provided healing. The holistic approach of mothers and women strengthened ngā māmā by considering the whole wellbeing (Mark & Lyons, 2010) when dealing with obstacles and adversity. Women

were there for emotional, physical, spiritual, relationship and inter-relational wellness, and empowered ngā māmā by relating the options of being well. Again, karakia was a common ritual of most of ngā māmā and their whānau, and the spiritual connection was indicative and recurring amongst the experiences of wellbeing. Being encouraged and supported by significant women and whānau to practice tikanga, practices and beliefs from a te ao Māori perspective was experienced by all of ngā māmā and signifies an inherent component to wellbeing. An examination of the connection to te ao Māori and wairuatanga of ngā māmā, indicates empowerment and strength amongst their whānau and their personal wellbeing (Gabel, 2013; Simmonds, 2014; Stevenson et al., 2016). Wairuatanga and tikanga were purported as implicit through the experiences of ngā māmā as intergenerational beliefs and practices, which were transmitted particularly through women who were implicated as custodians of certain mātauranga. Wairuatanga and tikanga provided an explanation and rationale for indiscernible phenomena, and therefore strengthened the Māori worldview of ngā māmā (August, 2005; Murphy, 2011, 2014; Gabel, 2013; Simmonds, 2014).

From the findings, ngā māmā indicated that challenges brought empowerment although not all were negative, which has implications for what is perceived as insurmountable and insightful within the lives of young Māori mothers. There was a difference between challenges that were adverse, and those that were testing. Although tragedy, rejection and pain were among adverse feelings towards negative experiences, the stress from study, work or parenting offered new knowledge. Ngā māmā were open to change and through an examination of the various components they encountered, were not usually unnerved by complexity. When asked what made a difference, many of ngā māmā primarily indicated their mothers or a significant woman in their life. Ngā māmā felt positive and proud of motherhood despite the deficit lens of stigma, which contributed to adversity (Adcock, 2016), for instance, when advocating for their tamaiti's health care they indicated that their voice and opinion was necessary and mattered, and they aspired to academic achievement whilst being a new māmā. The findings explicate that becoming a māmā did not mean a reality relegated to the confines of domestic life, where persistent loneliness and isolation have been shown to propagate (Choi, Henshaw & Baker, 2007). Study and work alongside motherhood was implicated by ngā māmā as normal and unexceptional, and thus infers that young Māori mothers bring a contemporary and invigorated perspective to the role of (early) motherhood.

Tension was occasionally acknowledged by ngā māmā, which was more likely attributed to shared-parenting and household roles amongst the māmā, a partner and parents. However, the findings infer that developing relationships, parenting skills and knowledge were part of wellbeing experiences and came from modelling and assistance and then exercising or creating the space to practice autonomously. The implication is that empowerment is derived from input and assistance, and also self-determination. Co-operative parenting and living, was revealed as strengthening and normalised for many of ngā māmā who flourished in their respective and individual whānau environments.

As ngā māmā reflected on and processed their experiences surrounding wellbeing, an inward understanding and enhanced awareness emerged. Awareness was revealed through their insight, recognition and confidence, which translated into outward aspirations to pass on their knowledge to others. Through growing confidence there was empowerment, and hence the desire to empower others, particularly other new māmā. Examining this inclination, revealed that ngā māmā commonly identified through their own experiences of wellbeing, a gap in what is perceived by general society as suitable support and knowledge-sharing for their cohort. Ngā māmā were instinctively motivated to provide support for other young women. Ngā māmā often expressed that they would be eager to share their knowledge and support, indicative of a regenerative process much like the maternal cycle, the perpetual movement of the koru, and the enduring power of women.

6.4 Tapatoru - Significant Entities

The Tapatoru (Figure 17) encapsulates the entities of significance, and indicates through a visual explication the critical nature of who is considered most significant in the experiences of wellbeing for ngā māmā around the birth of their first tamaiti. Mothers are at the pinnacle that infers the primacy of mothers in providing, addressing, ensuring and reinforcing care through stability, guidance and empowerment of young Māori mothers, which is a pivotal and powerful implication. Women are integral and essential, and men counter the balance. Even though this may not appear a new discovery or exclusive to Māori, my research indicates how significant and powerful the implications are. These implications have a wider significance than just for Māori. Ngā māmā are at the core to the perpetuity and wellbeing of tamariki Māori and whānau, hapū and iwi; a direct impact on whakapapa and te ao Māori. The implication is also

significant for the wellbeing of Aotearoa, and what this means on an environmental, Indigenous and global scale.

6.4.1 Tuatahi

Having whānau support and someone to go to were important to the wellbeing of all of ngā māmā who participated in my research. Significant people in the lives of ngā māmā were trusted, consistent, protective, competent, strong and reliable sources of support. Whānau and inter-generational involvement were prominent findings in other studies and literature regarding young Māori mothers that expounded the value and indeed necessity of whānau care and involvement (Pere, 1988; Moeke-Pickering, 1996; Goodwin, 1996; Rawiri, 2007; Pihama, 2010; Collins, 2010; Families Commission, 2011; Vakalahi & Taiapa, 2013; Stevenson, et al., 2016; Adcock, 2016). In a contemporary Aotearoa context, the composition but also beauty of ‘whānau’ has been recognised as dynamic and diverse, as people establish and grow significant and sophisticated familial collectives (Durie, 2001).

Of most significance to the wellbeing of ngā māmā of this research, are mothers and other significant women. A Māori worldview validates the power of women, whose significance and potency is being revitalised through the work of kaupapa Māori and mana wahine scholars capturing the essence of traditional mātauranga Māori relational to the exploration of the lived realities of contemporary Māori women (Tomlins-Jahnke, 1997a; Gabel, 2013; Simmonds, 2014). Kaupapa Māori theory has been underpinned by mātauranga and tikanga Māori and framed by inherent Māori principles (Smith, 1991; Te Awekotuku, 1991; Pihama, 2010). Like mana wahine theory (Simmonds, 2011, 2014), kaupapa Māori theory does not exist in isolation but is cognisant with other theories, and seeks to resist, conscientise and transform (not necessarily in that order) the experience and reality of Māori towards greater rangatiratanga (Smith, 1997). In doing so, it signifies a shift towards an objective of emancipation. Mana wahine theory extends the kaupapa Māori foundation and is cognisant with feminist theory. In contrast to feminist theory, mana wahine exemplifies the prominence of wāhine Māori, perceptibly through the struggle to redefine themselves according to wāhine Māori (Te Awekotuku, 1989; Goodwin, 1996; Irwin, 1990, 1992, Smith, 1992, 1998, 1999; Evans, 1994; Mikaere, 1994; Tomlins-Jahnke, 1997a; Pihama 2001; August, 2004, 2005, Gray, 2006; Simmonds, 2014). The contribution of Māori female and male rangatira, scholars, academics

and whānau have been imperative to building on and strengthening the framework applied in my research, including the knowledge and work from the Indigenous research paradigm, the colonised, coloured, minority, feminism, goddess and marginalised peoples. A culmination of theoretical understanding and frameworks, contextualised and illuminated the outcomes of this research.

What the theoretical framework expounds to me, alongside my personal experiences, ethos, my professional experience and Māori, Pākehā and Samoan whakapapa, is that the meaning we assign to experience within distinctive contexts, belongs to who experiences it. The knowledge about ngā māmā lies with ngā māmā, whānau and the community and as Māori researchers and mokopuna we are conduits. Ngā māmā succinctly identified who and what was of most value. Although significant women were indicated as most significant, it certainly cannot be refuted that the presence and role of men were important to ngā māmā, when imparted in a positive and nurturing way (Taonui, 2011). When ngā māmā had positive experiences and involvement with men, they discussed partners, the father of the tamaiti, fathers, brothers and grandfathers with respect and affection. Although the input of men was very meaningful in their own way, women were consistently identified as primary sources of stability, guidance and empowerment.

The findings also draw attention to the role of fathers. Although there was praise for important men by the majority of ngā māmā, especially in their support and care of the tamaiti, there was a lack of (positive) male involvement across all. The value of men cannot be discounted particularly when their input was mostly meaningful, and there is currently a lack of exploration in the area of men and the wellbeing of young Māori women in a contemporary context. The exploration of fathers and young fathers has increased over the last three to four decades where there has been greater emphasis on mothers' and fathers' experiences (Pattnaik, 2013). However, there is conflicting research around the role and involvement of birth fathers, who have been positively and negatively re-presented, and in regards to global, Indigenous and Māori research, young fathers have been framed in various ways: supportive, positive and invested in the young mothers and tamaiti, or absent and in denial of paternity (Edwards & Ratima, 2011; Taonui, 2011). Young Māori fathers are marginally (mis)represented due to the

small but developing pool of research regarding young Indigenous and Māori fathers, which is an area requiring further development.

6.4.2 Tuarua

The second echelon of significance encompassed the cultural community and the professional community. The cultural community of extended whānau and the marae provided a cultural backdrop, which normalised and accepted familiar natural ways of being. The input of health practitioners such as midwives, nurses, hospital staff, doctors, and community supports provided specialised support connected to the pregnancy, birth and early motherhood respectively.

On one hand, there was the connection to te ao Māori through whakapapa, whānau and whanaungatanga, which was applied, observed and experienced within whānau settings and on the marae. Ngā māmā were cognisant and proud of their marae connections, tūrangawaewae and the extended whānau through whakapapa, indicating a sense of belonging. Belonging has implications for the wellbeing and identity of young Māori mothers, to engage with cultural spaces, values and beliefs, and as Māori continue to observe customary ceremonies inherent to te ao Māori. On the other hand, the findings indicate that the majority of midwives, nurses and doctors involved with ngā māmā were acknowledged with positive affirmation and valued for their specialist care, however, ngā māmā did not speak a lot about practitioners. Most of ngā māmā were satisfied with the care and guidance they received from health professionals, some were complimentary but did not overly praise them. Discussion of health professionals came in the way of contextualising and describing an experience. This indicates that health professionals were one part of a holistic experience that included the physical, medical, biomedical or health aspect interwoven with the social, emotional, mental and spiritual components; leading to implications for understanding the value of those involved with young Māori mothers, as descriptions were never one-dimensional. Although some experiences with health, education and social professionals were negative and some very adverse, ngā māmā did not single-out or personalise their stories to disparage specific entities. Instead, the role of the person responsible helped convey an experience that impacted significantly on the māmā, and indicates the aptitude and collective wisdom amongst ngā māmā who despite transgressions were more affected by the experience than concerned with the delegation of blame. Forgiveness

for ngā māmā was indelibly linked to reconciliation, healing and wellbeing (Rata, Liu & Hanke, 2008), and linked to the stability, guidance and empowerment imparted by women within the whānau, and the value of mothers at the pinnacle of the echelon.

6.4.3 Tuatoru

Lastly, but of importance was the wider society that provided childcare services, employment and learning opportunities for ngā māmā. The findings show that all of ngā māmā were engaged with some of or a combination of education, work or training. Tuatoru indicates who or what ngā māmā wanted to become, future prospects, other adults who could care for their tamaiti outside of the whānau, and the various regional and global influences within Aotearoa. Sport, art, culture, performance, academia, employment opportunities, hospitality, health care, farming, community and voluntary experience took place in the wider community and was significant to wellbeing. Tuatoru counters the societal argument and misconception that young Māori women who become pregnant do so because there is nothing else to do and the myth about obtaining an income and avoiding work.

Although society perpetuates the stigmatisation and marginalisation of minority peoples such as young Māori mothers, ngā māmā rarely lamented any negative experiences. Instead, ngā māmā appeared to glean what they required from the wider community, to support their core systems, their wellbeing and the wellbeing of their tamaiti. This did not manifest as apathy or indifference, but from the findings was indicated as merely a part of life and functioning inside and outside of the whānau. With whānau support, especially support from mothers, navigating the wider community was not an issue for most of ngā māmā. Mothers and significant entities provided transport, communication, childcare, child drop offs and pick-ups, study help, domestic support and resources when necessary. Ngā māmā had their own vehicles, utilised public transport or walked. Therefore, the inference is that young Māori mothers are encouraged, supported and bolstered by whānau, particularly mothers, to positively engage with society and the wider community.

Cultural and professional communities, and wider society either espoused or diminished the access ngā māmā had to services, resources and opportunities, which was often related to levels of compatibility. The findings indicate that what is offered, available and accessible in the

community, impacts the engagement rates of young Māori mothers who connect when the community framework is conducive to facilitate their aspirations. The implication is that the emphasis on what young Māori mothers are perceived to need, requires shifting. The presence and requisite of community resources for the support of young parents, evidently young mothers, has been recognised as important (Goodwin, 1996), but also speaks of the underlying issues such as the dearth of systems to protect and enhance the wellbeing of young mothers (Moewaka Barnes et al., 2013). Where parent groups have been unsuccessful, one inference has been that mothers lacked the social skills to feel comfortable (Goodwin, 1996). However, by erasing the negative narrative of the failure being the mothers', and instead re-examining the character of the community and thus compatibility of resources, the summary is a systematic failure of presented initiatives. Returning to the social skills of mothers, it is of value to consider the social nature and need where young Māori mothers thrive in their own social systems, rather than criticise a perceived incompetence. Thus, the validity, viability and conduciveness of the environment to promote wellbeing and engagement, is an important aspect of wellbeing to consider.

6.4.3.1 The Community and Society

Ngā māmā had various engagement with the community depending on their health, education, social, work and care arrangements and needs. All of ngā māmā engaged with a Lead Maternity Carer early, and spent time with doctors, WellChild or Plunket nurses and valued the care that they received from their primary health care carers, even though some had experienced untoward events (Rawiri, 2007, Gabel, 2013; Adcock, 2016; Stevenson et al., 2016). This reality indicates that ngā māmā were averse to criticising those who were part of their pregnancy, birthing and motherhood journey when the principal impetus of the research approach, was conveying the māmā's experiences around the birth of her first tamaiti, which was consistently celebrated.

Often midwives, nurses and doctors would give sound and caring advice and ngā māmā were responsive to their expertise (Collins, 2005; Rawiri, 2007; Stevenson et al., 2016). However, when ngā māmā did not understand or felt displeased with the communication, mothers and other significant women would be consulted (Rawiri, 2007). This action infers that the most meaningful relationships in the lives and experiences of ngā māmā had history, longevity and

substance. For instance, the most pertinent experiences to impact on wellbeing included mothers, nannies or partners. Contact with the health care system was often episodic, formal and brief. Some of ngā māmā felt let down by the contact that they had with the health care system, but communicated their dissatisfaction or asserted themselves accordingly. Often ngā māmā had come away from adverse situations and in reflection had assessed the experience as negative and hence they felt it would be too late to address. Some of ngā māmā had delayed or disengaged from care (Collins, 2005; Adcock, 2016), due to a poor experience, which indicates a serious risk to the health of young Māori mothers. The implications of disengagement leave young Māori mothers without the appropriate clinical connection to help maintain their wellbeing. Potentially, better communication and relationships that meet the needs of young Māori mothers would allow them to voice their displeasure in a safe and constructive manner, and ensure negative experiences are mitigated by their valuable feedback, for future young mothers.

The involvement of mothers, women and parents and the reconfiguration of their lives to support ngā māmā, indicates whānau are amenable to the needs of ngā māmā and their tamaiti. The implication of such involvement creates opportunities for young Māori mothers and tamariki to positively engage with school, childcare, work, training and positive social activities. Mothers and grandparents helped with car seats and food for the tamariki, and were cognisant of ngā māmā schedules and routines. Several of ngā māmā delayed returning to work or study, and others returned earlier whilst at home with their tamaiti. Breastfeeding was a primary factor and some of ngā māmā decided to wait to re-engage with work or study whilst their tamaiti still breastfed. Some of ngā māmā breastfed during work breaks by travelling to where their tamaiti was cared for, or expressed breastmilk during work breaks for the next day and stored milk in the staffroom fridge requiring the need to be highly organised. Mothers have been shown to greatly improve breastfeeding rates for young mothers through their support and encouragement (Aubel, 2006; Kandasamy, 2015).

Mothers were important as they recognised the impact and significance of motherhood, and that the support of whānau and friends as well as access to suitable community resources was essential to support māmā indicating that communal care and community support requires a responsiveness to support cultural needs, especially for Aboriginal women (Smylie, 2014). Ngā

māmā determined their routine according to what was feasible and where there was support. Those with partners acknowledged their partners for their commitment to their whānau and their work. Bolstering the māmā, partner and tamaiti, was often the māmā's mother, or a significant woman to support. Those with less whānau support, relied more on their partners, the community (Goodwin, 1996) or became acquainted to periods on their own. Ngā māmā established and maintained their own networks in the community, and conveyed many experiences and knowledge they had gained through their interests, study or work.

6.5 Ngā Māmā and the Power of the Female in the Context of Aotearoa New Zealand

Within the context of Aotearoa New Zealand, the power of the female in relation to ngā māmā was indelible to culture, geography and history. For instance, a Māori worldview was intrinsic to the experiences of ngā māmā due to the interweaving of te ao Māori through their stories, signified by their use and connection with tikanga, reo, mātauranga Māori and whenua. Ngā māmā acknowledged and indicated ways that they practised their values and beliefs, customs and ceremonies, which enhanced their wellbeing. For example, ngā māmā used karakia to strengthen a way forward, tohu as symbolism of pregnancy, whakapapa to debate the looks and name of their new tamaiti, and tikanga around protecting the unborn tamaiti and returning the whenua to Papatūānuku. Ngā māmā lived in whānau structures and most were or had lived in homes that were multi-generational. They were cognisant and proud of their tūrangawaewae, and connected with their marae. Although the power of the female could be argued as universal, in relation to young Māori mothers in Aotearoa, my research expounds that the experiences of wellbeing of ngā māmā are culturally bound to te ao Māori as there is no other place on earth where Māori derive their epistemological understandings and ontological perspectives.

There are few spaces within contemporary society where Māori can connect with te ao Māori as taken for granted or normalised. There are even fewer opportunities where wāhine Māori can explore te ao Māori and experience their power beyond their own private spaces. One place where being, doing and thinking Māori is normal, is the marae, although to some extent western influence has impinged on this space too. The marae is a place where women and men, perform legitimised customary roles based on tikanga that observes the balance of opposing and complementary states. The findings of my research show that the power of the female is influential throughout the stages of motherhood, and therefore outside of the marae, connects

Māori women with te ao Māori despite a dominant western health system and discourse about motherhood. In many ways through the power of the female from a Māori worldview, motherhood remains a women's dominion, that is, Māori women have power, influence and control respective of their lived realities. The power of the female to stabilise, guide and empower ngā māmā is significant. Māori motherhood is a space where te ao Māori attempts and is in some ways successful at entering a contemporary context, but regardless will exist anyway, according to the stories of ngā māmā.

The power of the female is an important finding in understanding the experiences of wellbeing of ngā māmā around the birth of their first tamaiti as it has not been acknowledged to this extent before within the given context, and to this level of significance. The continuation of the power of the female in regards to the experiences of ngā māmā has subsisted albeit understandably transformed over time and through the threat of abolition from colonisation. Through the stories shared by ngā māmā, the potency of women to bring stability, guidance and empowerment was shown to be integral to their experiences of wellbeing, despite the various factors impacting on māmā. The power of the female from a Māori worldview remains indelible to the wellbeing of ngā māmā as it connects them with the mana of wāhine Māori from creation and Papatūānuku, through an identity within te ao Māori transposed to modern society, and the revitalisation of the Māori feminine in a contemporary context (Yates-Smith, 2003). 'Power' manifested as intergenerational, and was perpetuated through whakapapa, whānau and wairua. Ngā māmā acknowledged significant women who expounded the power of the female, which subsequently revealed the strength and vitality they recognised within themselves.

6.6 Wellbeing

The wellbeing ngā māmā experienced around the birth of their first tamaiti had many layers, and was intrinsically connected to who they are and what is meaningful to them. In reconstructing their experiences of wellbeing through a frame of hinengaro, tinana, whenua, whānau-whakapapa and wairua, ngā māmā shared meaningful and evocative stories of their experiences to motherhood. Wellbeing was a personal perception, and conceptualised through experiences and understanding associated with thoughts and feelings. In uncovering the experiences, it was not so much what happened, but who was most significant.

A number of ngā māmā had troubled times with relationships, which connected to their foundational, spiritual, physical, emotional and mental wellbeing. It was not always clear if relationship issues caused a change in wellbeing, or if a decline in wellbeing affected relationships; however, they were inherently linked. Only one māmā was formally diagnosed with postnatal depression (Collins, 2005) and whose un-wellness was identified and supported by her mother. Some of ngā māmā identified un-wellness within themselves but did not seek professional intervention and managed challenges by a tenacity to get through difficult situations and by having the support of a trusted entity - mothers and for other ngā māmā - nannies, aunties and sisters. However, this could have been potentially adverse should ngā māmā have become or actually been very unwell and isolated from significant people. Nevertheless, ngā māmā had transcended difficulties and in telling their stories, indicated insight into their experiences and the context in which they had occurred. An examination of ngā māmā not feeling well around the birth of their first tamaiti, has implications for how young Māori mothers learn about self, information and an ability to communicate concerns (Collins, 2005; Stevenson et al., 2016). Fears were allayed and adversity was minimised when ngā māmā felt their burdens were shared and understood, and that an acknowledgment of spiritual wellbeing was encompassed. A consideration and acknowledgement of the spiritual dimension was inherent to the wellbeing of ngā māmā (Simmonds, 2014) and infers an important dimension of wellbeing for young Māori mothers.

Wellbeing for ngā māmā was intricately linked with their tamaiti and whānau. Each māmā discussed her tamaiti, whānau and being able to practice her values and beliefs as integral to wellbeing. Ngā māmā were able to share their wellbeing concerns including spiritual concerns, with their mothers, nannies and significant women. Spiritual wellbeing from a Māori worldview lacks recognition in a dominant mainstream system, but was clearly an important factor in the lives and experiences of ngā māmā. This relational and communicative factor to appreciate spirituality in symbiosis with all components of wellbeing, was consistent among ngā māmā, and having mothers and significant women to consult with, indicated a sense of safety, understanding and support. Ngā māmā often expressed that if their tamaiti was well and had what they needed, ngā māmā were happy and well. Notions of deficiency were not conveyed as prominent, and could indicate that the ecology of the whānau provided a buffer (Bernstein, 1998) to the negative perceptions of young Māori mothers. Ngā māmā showed

mana and integrity as they expressed their experiences, and became very enunciated when discussing their tamaiti, significant entities and their experience and connection to wairua.

6.7 Wairua, Karakia, Whenua, Tikanga

Being able to exercise and enjoy the values, beliefs and customary practices that were shared with their whānau and significant entities, provided ngā māmā with a positive sense of wellbeing. Ngā māmā signified there was leadership in important entities who could guide the whānau positively and safely. Ngā māmā were cognisant on various levels with their wairua (Pere, 1988; Mikaere, 2003; Murphy, 2011, 2014; Simmonds, 2014), and the wairuatanga inherent to life. There were many stories of experiences not of the ‘physical’ world, but that related to something spiritual, deeper and more meaningful. Wairua was interwoven throughout the lives of ngā māmā, not in repositories set aside for the supernatural or paranormal activity and although not tangible, ngā māmā could interpret and bring meaning to wairua. Should something have not made sense, ngā māmā had often shared or found wisdom from mothers, nannies and significant entities regarding the experience and significance.

Karakia was used and understood by all ngā māmā particularly in evoking positivity, gratitude and protection (Rawiri, 2007; Gabel, 2013; Simmonds, 2014; Stevenson et al., 2016). A connection and understanding to tikanga varied among ngā māmā, as did the practice and frequency of tikanga (Gabel, 2013; Simmonds, 2014, Stevenson et al., 2016). However, ngā māmā respected what they knew and did not know, and when they had insight or trusted guidance they applied the mātauranga accordingly.

Nearly all of ngā māmā obtained the whenua (Gabel, 2013; Moewaka Barnes et al., 2013; Simmonds, 2014; Stevenson et al., 2016), and returned it to somewhere special. Some of ngā māmā were not sure about the whenua and pito, and although familiar with karakia, not all of ngā māmā used karakia at the time of birth, as traditionally performed (Simmonds, 2014). When they did come to understand more, some of ngā māmā were disheartened, for instance, they wish they had understood more at the time. This indicates that in preparation for pregnancy, birth and motherhood, that ngā māmā should be far better supported to understand mātauranga Māori and tikanga Māori, particularly around wairua, karakia, tapu, noa, mana and mauri, so they may choose and embrace what they want. With such low engagement in antenatal

programmes, opportunities based on kaupapa Māori would be appropriate and valuable for young Māori mothers.

Ngā māmā had an acute awareness of the meaning of ‘home’ and sense of belonging. Marae, tūrangawaewae, hapū and iwi affiliation were consistently discussed in relation to wellbeing and identity. Although not all of ngā māmā were fluent in te reo or entrenched in te ao Māori, the kaupapa behind wellbeing from a Māori worldview developed through discussion and their own thoughts and feelings. The wellbeing components of Te Whetū were an appropriate frame. It was integral to understand, appreciate and acknowledge wairua as a force complementary to holistic wellbeing, not absent or in isolation. Understanding Māori dimensions of wellbeing indicates an important factor in understanding the wellbeing of young Māori mothers, and the implication of embedding appropriate Māori models of wellbeing in mainstream care to support young Māori mothers, is implied as elemental.

Having a connection with wairua was comforting and meaningful to ngā māmā, and was part of an innate aspect of their wellbeing. From the inception of being hapū, through to the first breath of their tamaiti in Te Ao Mārama, a connection with wairua was imperative. Mothers, nannies and significant women were important to the recognition and practice of wairuatanga, karakia, and tikanga. Ngā māmā were empowered by understanding and practising ceremonies that stemmed from a Māori worldview. Significant men were additionally important, where ngā māmā benefitted from the guidance and mātauranga they gave about wairua and tikanga. Guidance from a female and male perspective was valuable in mitigating un-wellness and adversity. The stories have indicated that wairua or the spiritual aspect of wellbeing, is indelible to the experiences of ngā māmā, which perpetuates and preserves a powerful connection between wāhine Māori and te ao Māori through whenua, whakapapa and whānau. Therefore, wairua has manifested as a significant dimension in the wellbeing of young Māori mothers; permeating experiences and central to identity.

6.8 Identity

My research explored the experiences of 16 distinctive and unique individuals whose identity was further sculpted in becoming a māmā. The wellbeing of ngā māmā was deeply associated with knowing who they were, where they come from, having access and understanding of that

knowledge, being able to assert that knowledge and being respected for their distinctiveness. Becoming hapū did not come across as a mistake or problem through the stories inferred by ngā māmā, and life continued on as they went to work and to study. Most of ngā māmā enjoyed being pregnant and some felt it was the healthiest they had physically been. This proclamation was evident in the way ngā māmā conveyed that sense of wellbeing, which permeated their emotional, mental and spiritual wellbeing; it was a ‘well’ time. In terms of tinana, ngā māmā were not too perplexed in the physical changes whilst carrying their tamaiti, however, once the tamaiti was born ngā māmā became more aware of the physical changes that had occurred. Smoking and alcohol consumption ceased when hapū, which indicates that ngā māmā were perceptive and knowledgeable of risk factors to the tamaiti in-utero. However, a lack of knowledge about the effects of motherhood on the tinana, and the harm of substances clearly remain important issues in regards to gestational diabetes, that half of pregnant Māori women smoke and the effects of fetal alcohol syndrome and tamariki Māori (Ministry of Health, 2017). These issues have significant implications for better and more appropriate early education with young Māori women about wellbeing, and in the design and facilitation of ante-natal programmes.

A connection to te ao Māori was clearly important as ngā māmā embellished discussion around their role in whānau and their associations with whakapapa, marae, childhood experiences, places they had lived, the area they came from and the areas their parents and partners came from. This was affirmed with the philosophies and aspirations ngā māmā held within their respective contexts, as many were engaged in activities that encompassed a Māori worldview. Ngā māmā knew what they wanted from their journey into motherhood, they had the support and articulation. However, there was a clear disparity between what happened confidently and assuredly within the core social system (with mothers, women and whānau), to what often transpired in the health care system. For some of ngā māmā, this was their first encounter with the health care system and health professionals other than the occasional doctor’s visit; especially having been well and youthful. This would indicate that navigating a foreign system had challenges and in all, was an unfamiliar environment for most of ngā māmā. Additionally, not recognising one’s values and beliefs within the system was disconcerting for ngā māmā, who then relied heavily on the support and guidance of mothers, nannies and significant women. Consequently, the threat to one’s identity and wellbeing is undoubtedly challenged

particularly if the system is focused on perceiving young hapū Māori women through a dominant deficit lens.

Being at once young, Māori, woman, and (first time) mother, connected ngā māmā to traditionally subjugated subgroups, and in gathering all those subgroups into an inclusive identity, has relegated the perception of young Māori mothers. However, ngā māmā did not sense an integrated identity as deficient, but accepted and celebrated their identity and spoke more about belonging to and identifying with wairua, whānau, whakapapa and whenua than being inadequate. Self-concept, self-awareness and self-determination flourished with experiences that emanated around the birth of their first tamaiti, positive and negative, which was a significant transition, shaped by many constituents.

6.9 He Tamaiti - He Tohu Aroha

From pregnancy to birth and motherhood, each of ngā māmā described their tamaiti with affection and love, which indicates a sense of purpose in becoming a mother and has implications in the societal perception of young Māori mothers and the investment in their wellbeing. Names for the impending tamaiti had been contemplated, baby gear and paraphernalia had been gathered, and a plan for the birth was usually established and shared with partners, mothers and significant entities. Most tamaiti, were also first mokopuna and therefore, were very special to both sets of grandparents and respective whānau. Whānau contributed to preparations and anticipated the arrival. All of ngā māmā recalled the birth process clearly, and the arrival of their tamaiti stimulated emotion and pride. Although some births were difficult and troubled, ngā māmā remember the smell, look and sound of their tamaiti, the first touch and impressions. Tamaiti inspired the best of the whānau who were happy, protective and proud. There were variations of tikanga Māori practised, such as karakia, waiata, oriori, care of the pito and whenua (Gabel, 2013; Simmonds 2014), the first awahi, the first mihi to the new tamaiti, and the first experience of 'te ūkaipō' for ngā māmā and their tamaiti.

Ngā māmā did not reflect much on the role of the health professionals in pregnancy and birth, but were clear their greatest supports were their mothers, and seeing their tamaiti for the first time. In recalling their journey to motherhood, most of ngā māmā identified tohu that affirmed

that their tamaiti and pregnancy was meant to be; that is, predetermined. Therefore, ngā māmā embraced the time of motherhood with the mātauranga that their tamaiti was ordained and predestined through tohu associated with something divine. The notion of divinity was affirmed by ngā māmā relating the tohu to tīpuna or those who were close to them but had passed away. In the realm of kaupapa Māori, these conversations and recollections were spoken with ease and confidence as there was a mutual understanding and recognition of the wairua bound to te ao Māori indices, shared between ngā māmā and myself. The tamaiti was not perceived as ‘just a baby’, the tamaiti was an entity encapsulating love, hope and protection, but was also generating and encapsulated by love, hope and protection.

With wairuatanga in mind, ngā māmā deliberated over names that were derived from whānau, events, experiences, environmental phenomena and sometimes, just because ngā māmā ‘liked it’. Nonetheless, names were seen as precious, meaningful and important (Bishop, 2011; Dalla, Bailey, Cunningham, Green & Vyhlidal, 2013; Gemmell, 2013; Gabel, 2013; Simmonds, 2014) whether they were Māori, Pākehā, created, traditional or from whānau or whakapapa. Ngā māmā had taken time, consideration and sometimes incurred the ire of whānau in giving a name. More than once some of ngā māmā said that whānau had asked to name the tamaiti, but fathers (who were involved) were given equal say in the final decision. A hesitation in giving a Māori name indicated a fear of mispronunciation or distortion of a special name to nicknames, however, the resurgence of te reo Māori and developing awareness of non-Māori to pronounce te reo Māori correctly could mitigate this in the future. Special and personal stories accompanied naming, and therefore the names of tamaiti were integral to experiences of wellbeing for māmā, and the journey and privilege of becoming a mother.

6.10 Prospects for the Future

The narrative of women being important in the lives of young mothers is not new, however, from this research, it is signified as vital in the context and wellbeing of young Māori mothers. Quantitative studies have provided information based on scientific and empirical data, but have lacked the voices, feelings, thoughts and experiences of young Māori mothers to fully contextualise, understand and appreciate their lived realities. A small but growing source of qualitative and kaupapa Māori research is being developed and utilised in exploring the experiences of young Māori mothers, and is challenging the dominant methodological

approach. Indeed, listening to and valuing the voices of young Māori mothers and honouring mothers, significant women and the power of the female, are key contributors to wellbeing and imperative to the developments in the future of Aotearoa. Further research in the following areas will progress and build on the current research and knowledge:

- Kaupapa Māori research into the experiences of young Māori mothers surrounding pregnancy birth and motherhood that focuses on wellbeing and emancipation
- Kaupapa Māori research into the power of wāhine Māori in regards to women's vitality and maternal wellbeing
- Research pertaining to the experiences of wellbeing of young Māori fathers through the voice and perspective of young Māori fathers
- Research on the experience of the significant women who provide support
- Utilisation of the kaupapa Māori analytical framework developed from this thesis, 'Haaro te Kaahu', in future kaupapa Māori research and scholarship
- Contributions to kaupapa Māori methodology particularly in regards to the development of specific kaupapa Māori research methods premised on kaupapa Māori theoretical frameworks

6.10.1 Implications and Recommendations for Nursing

This research has important implications for nursing that will inform nursing across the spectrum of nursing practice, especially pertaining to the choice and application of optimal models of care and the wellbeing of young Māori mothers, tamariki and whānau Māori. The research will also inform nursing care about the necessity to understand and value cultural ways of knowing, being and doing to achieving best wellbeing outcomes. This research has relevance and significance to the wellbeing experiences of young Indigenous mothers, and other young mothers on a global scale who are challenged by and struggle within a dominant western mainstream health system, but otherwise flourish within their own positive social systems. Thus, in enhancing the nursing discipline, and developing relationships inter-disciplinary, throughout community and with Indigenous people, this research makes a significant contribution to the advancement of nursing practice and recommends that we:

- Develop cognisance of the lived realities of young Māori mothers and whānau in diverse communities, and develop nursing approaches, practice and models of care based on the intrinsic needs of young Māori mothers, tamariki and whānau
- Advance an integration of Māori notions of wellbeing such as those encompassed in Te Whare Tapa Whā, Te Wheke and Te Whetū into nursing knowledge and practice that raises the wellbeing and rangatiratanga of young Māori mothers and their tamariki
- Improve the rates of Māori studying towards nursing, the recruitment, retention and leadership of Māori nurses particularly in areas of maternal, child and whānau wellbeing
- Develop and strengthen kaupapa Māori research in nursing to ensure a greater understanding and appreciation of how kaupapa Māori benefits whānau (patients), practice and the greater nursing academy

6.11 Study Limitations

This research is not without limitations, although is minimal in light of the significant contribution to new knowledge:

- The study was undertaken in one region of Ngāti Kahungunu – Te Matau-a-Māui, Aotearoa. Participants were from urban, rural and semi-rural communities, which may have differentiated perspectives on experiences as young mothers of urban and rural settings if there was no whānau to return to or connection to the marae and Māori community
- Self-selection and snowballing recruitment may lead to lack of diversity in the participant group although a clear and robust approach was utilised for recruitment and explicated in Chapter Four
- The time elapsed from birth to the interview may have influenced the responses to the experiences leading to a less homogenous participant group in terms of the saliency of recollection

6.12 Summary of key messages and outcomes of my research as recommendations for service providers and government/policy makers

To support and raise the wellbeing of young Māori mothers, and therefore impact the health and wellbeing of tamariki and whānau Māori, and future implications for prosperity in Aotearoa, I make the following recommendations:

6.12.1 The Wellbeing of Wāhine Māori and Māmā Māori

- There must be more investment into the wellbeing of māmā Māori, who embrace and influence the future wellbeing of Māori, which directly impacts Aotearoa. The forecasted trajectory of increased Māori birthing rates must be supported and celebrated. There is a failure to invest in young Māori mothers, specific to their needs, which therefore frames future Māori birthing rates as problematic. Investment is required from conception.
- Women of whānau and whakapapa are significantly valuable to the wellbeing of young Māori mothers, particularly mothers (of young Māori mothers). The value and presence of significant women must be acknowledged and encompassed into young Māori mothers' experiences of pregnancy, birth and motherhood. The important connections between young Māori mothers and their mothers, which impacts tamariki and the wellbeing of the whānau must be nurtured and supported so that young Māori mothers become the future strong mothers, of new mothers and thus new fathers.

6.12.2 The Power of Women

- Young Māori mothers benefit from observing, modelling and the supervision of reliable and consistent trusted women. Young Māori mothers seek or are drawn to maternal figures, and maternal figures innately take young Māori mothers under their wing. The natural ecology of this intergenerational care is powerful, and accessible where there is an absence if supported and captured in the appropriate model and environment.
- Where there is a dearth of significant female stability guidance and empowerment in the lives and wellbeing of young Māori women and mothers, based on the findings of this thesis initiatives must be created to supplement, replenish and reproduce these highly effective and culturally appropriate systems of support. Strong, confident and compassionate maternal figures are needed to provide stability, guidance and empowerment through robust relationships with young Māori mothers based on trust,

reliability and consistency; connection is enhanced where there is shared cultural values and beliefs, and whakapapa. Grow availability, involvement and accessibility.

- The hononga or bond between young Māori mothers and their tamariki is implicit, and must be valued throughout pregnancy, birth and motherhood and a child's lifespan. The idea that either abortion is a viable option to counter unwanted societal pregnancies, or that it is appropriate to remove babies at birth from mothers who are deemed to be undesirable is inequitable and overlooks vital opportunities to strengthen women, families and communities across Aotearoa.

6.12.3 Research and Initiatives

- Approaches to exploring the wellbeing of young Māori mothers must be empowering and emancipatory. Such approaches get to the core of understanding, by refuting prevalent deficit discourse such as notions of vulnerability and resilience. Deficit initiatives about the examination and surveillance of young Māori mothers and tamariki, and dialogue such as 'blame and pity' that keep young Māori mothers locked into subjugation, must be transformed.
- The notion of being 'young' in regards to a Māori mother, is problematised, politicalised and stigmatised by a dominant mainstream society, but instead must be understood and re-perceived. Transforming entrenched dominant discourse and overturning the persistent deficit dialogue is achievable through implementing the recommendations of this thesis, which benefit the wellbeing of young Māori mothers.
- Improved understanding and access to mātauranga from birth as a birthright, will impact future health implications, for instance, sexual health, reproduction, breastfeeding, breast care, cervical screening and smoking cessation, and will also influence social determinants (epidemics) such as domestic violence, child mortality rates, substance abuse, criminal activity and incarceration. From a broader perspective, there are powerful economic implications that are related to issues around housing, education and employment.

6.12.4 Mātauranga Māori

- Young Māori women/girls require access to the mātauranga from a Māori worldview that acknowledges and empowers their mana as a female, which is an important resource for their future decisions, choices, assertions and aspirations particularly around reproduction.

- Mātauranga to transpose includes:
 - The vitality of wairua, whakapapa and whenua connections
 - Influential female entities from whakapapa (such as Papatūanuku, Hineahuone, Hinetitama, Hinenuitepō, Hineteiwaiwa, Hinemoana; tribal entities)
 - Practices that honour the female aspect (such as honouring the whole feminine being, menstruation, femininity, power, fertility, knowledge about holistic wellbeing, connection with the male element)
 - Mātauranga that sanctifies life and procreation (such as tikanga, karakia, mana, ihi, wehi, mauri, whenua, pito, mihi, te reo, pūrākau, tribal histories and traditions)
 - The symbiosis and vitality with and of the male element

6.12.5 Young Māori Fathers and Tāne Māori

- Young Māori mothers flourish from the input and involvement of positive, consistent and a nurturing male influence. Encouraging men to be involved and supportive of women is pivotal and can be achieved by also embracing the wellbeing and aspirations of ngā tāne.
- More research is required surrounding the experiences of wellbeing and perspectives of young Māori fathers. There is a very small pool of research that needs to be grown, which will be essential in supporting future tāne Māori and whānau Māori. The wellbeing of young Māori men is in decline and must be raised to ensure they flourish, and complement the wellbeing of young Māori women.

6.12.6 Services and Policy

- Young Māori mothers flourish from a connection with te ao Māori, however, the significance and vitality of wairua and whenua in their holistic wellbeing has been gravely overlooked. Acknowledging, recognising and applying the significance of wairua and whenua in any given situation, influences the wellbeing of young Māori mothers. Services that provide maternal care must encompass intrinsic aspects and access to te ao Māori, and be spaces where cultural knowledge and practice is normalised and welcomed unreservedly.
- Initiatives surrounding perinatal care, must grow the autonomy and self-determination of young Māori mothers, enhancing their ideas and notions surrounding motherhood and womanhood related to their contemporary lived realities. Young Māori mothers must be encouraged by these same initiatives to impel an invigorated approach to motherhood, which includes advocating for their wellbeing and the health of their tamariki, be it at

home study or work, and not coerced into subscribing to traditional western constructs of maternal domestic ideologies. Young Māori mothers flourish when they decide to or are given opportunities to work, study or train during various times surrounding pregnancy and motherhood, which minimises isolation and loneliness.

- There needs to be greater acceptance and expectation of cultural responsiveness among health professionals, models of care, services and policies related to young Māori mothers, and firm parameters around ‘fit for purpose’. This requires greater emphasis on envisaging a reality that premises by Māori, for Māori and about Māori, and in doing so, refutes approaches to health that are incongruous and incompatible with young Māori mothers’ needs.
- Young Māori mothers thrive and communicate effectively within their social systems of support, which is rarely acknowledged within dominant health care systems. When engaging in health care services, young Māori mothers must be encouraged to identify and share “who is important to your wellbeing?” “Who do you want/need involved in your care?” This/these recognised entities need to be invited, welcomed and involved in as much of the care as young Māori mothers want. These may be mothers, fathers, nannies, partners and/or cousins; what do you (young Māori mothers) want/need?
- Policies and the role of health practitioners and services must be compatible with the needs and lives of young Māori mothers to facilitate their aspirations. Practitioners and services must be safe, constructive and valuable according to young Māori mothers; and practitioners must encourage communication and feedback to negate the possibility of disengagement.
- Services that fragment the wellbeing experience of young Māori mothers must be replaced with approaches that are comprehensive and inclusive of the whole being (hinengaro, tinana, wairua, whānau/whakapapa and whenua), and are kaupapa Māori designed, based and led. Young Māori mothers must not be expected to ‘fit in’ with initiatives, but initiatives must be developed as complementary to the wellbeing and aspirations of young Māori mothers, as demonstrated through this thesis.

6.12.7 Hei Whakamārama i te Mauri me te Mana– Conscientising Essence and Meaning

- When te reo Māori is incorporated into health and social systems, such as names of programmes, concepts, visions, values, goals, these must explicate the correct mātauranga of that ‘name’ in every meaningful sense of the word(s). Current frameworks

branded as ‘Māori’, must be re-evaluated via a Māori lens; this will provide greater benefits for young Māori mothers and whānau Māori.

6.12.8 Workforce Development

- A larger Māori health workforce such as more Māori nurses who provide an integrated approach of clinical and cultural acumen, is required. The recognition, promotion and development of roles such as kaiawhina, kaimahi and community workers, who essentially embody the wisdom and experience of older women, are important maternal figures. Coupled with appropriate models of wellbeing, Māori practitioners contribute to the growth of a purposeful and competent whānau and community resource, who can support the wellbeing of young Māori mothers and fathers.
- Education policies that impact the future health workforce require a commitment to cultural competency and responsiveness, and also the importance of pedagogies that integrate and promote a Māori worldview.

6.13 Final Reflections

The journey of undertaking this research has been both humbling and inspiring, one of the most important and challenging experiences of my nursing career and life. As a Māori nurse, I have always exemplified – woman and Māori first and nurse second, and the integration has assured me that what I do is *tika tonu*. I think of when I first started nursing, and all of the women and mothers who allowed me the privilege of entering their homes and lives. I am honoured to have shared in their wellbeing and the wellbeing of their new babies and tamariki, and how much I admired and learned from the many women and mothers. From those early days to now, having the privilege to explore the experiences of ngā māmā by gracious women who allowed me a precious opportunity, has been a tremendous honour as a nurse, a mother and a wahine Māori; a journey I will continue.

6.14 Conclusion

This research was an exploration of young Māori mothers’ experiences of wellbeing around the birth of their first tamaiti, in Aotearoa. Through kaupapa Māori methodology, grounded in a kaupapa Māori and mana wahine theoretical framework, the research captures the voices and stories of ngā māmā, and reveals important components to their wellbeing within their lived

realities. This research observes and acknowledges the whakapapa of te ao Māori, the cosmogonic and cosmologic connections, the historical experience of Māori pre- and post-colonisation and the contemporary context of young Māori mothers in Aotearoa. By applying a kaupapa Māori lens and approach to this research, the voice and position of ngā māmā is primacy.

There are two original contributions that this study makes to the field; the first is in respect to knowledge regarding the power of women in the experiences of wellbeing of young Māori mothers around the birth of their first tamaiti. Although the mana of wāhine Māori and the importance of women in the outcomes of new mothers has been elicited in other studies and within a small pool of Māori and Indigenous studies, this research provides new knowledge regarding this important area. The second contribution is related to kaupapa Māori methodology. A kaupapa Māori analytical framework ‘Haaro te Kaahu’ has been presented, premised on an integration of thematic analysis with a kaupapa Māori approach to the analyses of research data. There is a developing source of kaupapa Māori research methods emerging from the kaupapa Māori research academy, and ‘Haaro te Kaahu’ adds to this growing area of research methodology that has been clearly and robustly explored and explicated within this research.

Young Māori mothers’ experiences of wellbeing surrounding the birth of their first tamaiti is an area that has had little exploration, particularly from the stories of young Māori mothers’ lived realities, through their voice and perspective. A kaupapa Māori methodology enriched with a kaupapa Māori approach to data analysis specifically developed for this study, has ensured that this research presents an authentic, valid and trustworthy explication of new knowledge and research development.

The ‘voice’ of Māori mothers needs to be heard and included into the politicisation of the wellbeing of young Māori mothers in order to transform current dominant deficit discourses. A kaupapa Māori, wellbeing, strengths-based and emancipatory approach resists the deficit theorising of young Māori mothers, and through conscientisation, places their experiences and power as forefront transforming what is known and how it is known. Within the whānau setting, young Māori mothers are experiencing wellbeing around the birth of their first tamaiti and

thriving. The success of young Māori mothers within environments of supportive whānau, extends to their success in social, health, education and employment opportunities. Therefore, there needs to be further exploration and consideration regarding how the power of significant women can be raised and enhanced to influence the outcomes of wellbeing for young Māori mothers. In the absence of significant entities in the wellbeing experiences of young Māori women and mothers, determined efforts to replicate such beneficial entities of stability guidance and empowerment within the context of a Māori worldview, is paramount. Essentially, developing whānau wellbeing and sustainability is the ultimate goal and most pragmatic solution for ongoing revitalisation.

There is a dichotomy that exists between what young Māori mothers value, and what a dominant society imposes. This research indicates that the success and ability for young Māori mothers to thrive is possible due to their innate strength, whānau support systems and connection to know and practice ways of being from a Māori worldview, and whilst these successes are lacking in mainstream systems and society, they are taking place in spaces cognisant of te ao Māori. It would be advantageous to make a concerted effort within the mainstream health care system of developing more Māori nurses, doctors, midwives and health professionals with a strong kaupapa Māori understanding and application to practice, as would greater cultural competence and application of te reo Māori across all disciplines.

Additionally, the Māori community requires more ability to determine, explicate and exercise their needs as the ‘experts’ of their wellbeing, based on a kaupapa Māori perspective and Māori worldview. To this end, how abortion is framed as a ‘good outcome’ in favour of well young Māori mothers, is incomprehensible. With the understanding of a Māori worldview about creation and life, and the knowledge of the power of significant women to support whānau, the notion that young Māori women are better off terminating pregnancies reveals a conflict to wellbeing from a Māori perspective. Although self-determination is paramount, such ‘solutions’ based on pervading deficit discourses of blame and pity derived from value-systems antagonistic to te ao Māori, speaks more about our society than it does about young Māori mothers. We are spiritually and morally poor as a society if there remains an assumption that blame and pity are an acceptable way to control and marginalise people, especially mothers in our community.

Wāhine Māori are a powerful force, without being so they would not have survived this long under such oppression and demoralisation. Young Māori mothers of this research have expounded a strength and grace that encompasses traditional values, beliefs and practices and cultural epistemological understandings within contemporary realities, where their experiences are challenging and rewarding. The significance of women particularly mothers in the wellbeing of young Māori mothers indicates a time-honoured investiture that protects and supports fundamental institutions of te ao Māori, that is, whānau and whakapapa. Mothers and women bring stability, guidance and empowerment for young Māori women that can positively transform adverse situations and promote positive trajectories. Mothers and women who are well, strong and supported are needed by young Māori mothers for positive wellbeing outcomes.

Young Māori mothers who are limited to episodic and formal relationships to support their wellbeing in their pursuit of being competent mothers, are at risk of dis-engagement, loneliness and isolation. This research indicates that young Māori mothers need innate and intimate relationships with mothers and women that propagate trust, reliability, understanding, compassion and love. The transition of mātauranga Māori from woman to woman is vital as it is within these communicative systems that wāhine Māori are presented with knowledge and solidarity that raises their awareness and consciousness regarding their meaning, purpose, vitality and reverence. This implication is adeptly captured in the conceptualisation of Te Koru that explicates the power of the female through perpetual movement: experiencing the present whilst looking back upon oneself and where one has been, and advancing forward.

The role of men is of significant value for young Māori mothers and requires attention, particularly in the sustainability of te ao Māori. Tāne Māori require their own insights and emancipation and in doing so, reclaim their reverence in context to their lived realities and synergy with wāhine Māori. Strengthening young Māori mothers is a definitive way to reinforce and protect future generations of Māori, hine (girl) and tama (boy), and enrich the wellbeing of Māori in a contemporary and prospective context. The potency and power of wāhine Māori to ensure the stability, guidance and empowerment of women and mothers of the future is an important component and finding of this research. There is a balance to reinstate

between wāhine Māori and tāne Māori, mamia and papia, as the significance of complementary forces is vital, particularly for tamariki and youth.

Tika tonu, ue, tika tonu ue,
Tika tonu atu ki a koe e māmā,
Hiki nei koe aku whakaaro pakia
He hiki aha tō hiki?
He hiki roa tō hiki?
I a hā hā!
E māmā, te uaua ana
E māmā, te mārōrō
Inā hoki rā te tohe o te uaua nā
E tau nei
Ana, ana, ana, hī

E te māmā, ko koe te waipatu, waiariki me te waiora;
te wairua kore here, te whare tangata, te aroha.

It is the truth and it is right, māmā
That as you journey through life
You will encounter troubles and adversity
That you will face, struggle, and wrestle with.
You have power; and through those experiences
You will be a strong woman and mother

Māmā – you are stability, guidance and empowerment;
you are a spirit of freedom - creative and limitless,
you are the house of humanity, you are love.

Appendices

Appendix A. Invitation



GRADUATE SCHOOL OF NURSING MIDWIFERY AND HEALTH

Nau mai - Tohatoha mai

Welcome & share with me

An invitation to participate in a study called -

Tika tonu: Young Māori mothers' experiences of wellbeing around the birth of their first tamaiti (child)

Tono (Invitation)

You are invited to be part of a study of young Māori mothers' (aged 18 – 24 years) experiences of wellbeing in the first 12 months following the birth of their first tamaiti (child).

Your first tamaiti must be at least 3 months old to be able to take part in the study. You can be the mother of one child or more. Your part will involve participating in a one to two hour interview to kōrero (talk) about your experiences of becoming a mother, your feelings and reactions, the support you have had, your thoughts and decisions, your health and how you feel your wellbeing has been.

Study Objectives

This study will help develop and advance an understanding of young Māori mothers' experiences following the arrival of their first tamaiti and how this impacts on young Māori mothers' wellbeing. This will help develop an understanding of young Māori mothers, their tamariki and their whānau and build on information and research. This will also help enhance

and advance the support, services and professionals who work alongside young Māori mothers, tamariki and whānau in Aotearoa.

If you are interested in participating or have any questions, please contact:

Aria Graham

PhD student

Graduate School of Nursing, Midwifery and Health

With approval from the VUW Human Ethics Committee

Ph. [REDACTED]

[REDACTED]

grahamaria@myvuw.ac.nz

Expressions of interest will be gratefully received from: _____ to _____.

Supervisor details –

Dr Kay de Vries

Head of School

Graduate School of Nursing, Midwifery and Health

Victoria University of Wellington

PO Box 7625

Newtown

Wellington 6242

Ph 04 4636650

Email kay.devries@vuw.ac.nz

Appendix B. Information Sheet



INFORMATION SHEET – PARTICIPANTS

**Tika tonu - Exploration of young Māori mothers’
experiences of wellbeing
around the birth of their first tamaiti (child)**

Ko Ngaruroro te awa

Ko Kahurānaki te maunga

Ko Waipatu te marae

Ko Ngāti Kahungunu te iwi

Tēnā koe. My name is Aria Graham and I am studying toward a Doctor of Philosophy in Nursing (Nursing PhD) at the Graduate School of Nursing Midwifery and Health (GSNMH) at Victoria University of Wellington. I am the Clinical Nurse Co-ordinator for Gateway for the Child Development Unit, Hawke’s Bay District Health Board. I have previously worked in various roles, but had specialised in the area of Well Child Tamariki Ora, focusing on child, māmā and whānau wellbeing.

My supervisors are Dr Kay de Vries (Head of School at GSNMH) and Dr. Amohia Boulton (adjunct at GSNMH) and also the Associate Director at Whakauae Research.

Dr Kay de Vries can be contacted on 04 4636650 or kay.devries@vuw.ac.nz at Graduate School of Midwifery Nursing and Health at Victoria University of Wellington.

Dr. Amohia Boulton can be contacted at Amohia.Boulton@vuw.ac.nz at Graduate School of Midwifery Nursing and Health at Victoria University of Wellington.

Why is the research being done?

I am very interested and passionate about the health and wellbeing of women, their tamariki and whānau, particularly Māori women and tamariki Māori as there is so little known about their wellbeing even though Māori rate poorly in areas of health, education and social-economic status. Wellbeing is vital to having happy and meaningful lives and I am interested

to learn from young Māori mothers about their experiences at a time of significant change – the birth of their first child.

I am interested to hear the experiences of young Māori women:

who are aged 18 to 24 years;

who have at least one child or more;

whose first child is over 3 months old;

who is Māori through her whakapapa / whānau / ancestors; and,

who would like to kōrero about the experiences following the birth of their first tamaiti.

I would like to know how a young Māori mother's experiences impact on her wellbeing. I would like to hear what things affect young Māori mothers' wairua (spirit), tinana (physical health), hinengaro (mind and thoughts), whānau (family and relationships) and her whenua (connections and ties). I would like to hear what happened following the birth of her first tamaiti and how wellbeing is made better or worse for young Māori mothers. I would also like to hear what young Māori mothers would recommend about what support people and groups, services and professionals should do to help improve the wellbeing of young Māori mothers for their future, and the future of their tamariki and whānau.

This research will inform further research on young Māori mothers' wellbeing, support people and groups, services and professionals about how they work alongside young Māori mothers.

Participation

Your participation is entirely voluntary (your choice). If you decide to take part you will be asked to sign a consent form to show you have agreed to take part.

Participation in the study is confidential and no one (whānau, family, friends, services, counsellors, nurses, doctors etc) will be told that you are being interviewed without your consent.

You can withdraw from the study at anytime prior to the interview and you can also stop and withdraw from the interview/s at any time. You can also withdraw your information and data from the study up to two weeks after the final interview.

The interview/s

The interviews will be relaxed and conversational style like we are having a kōrero where you can discuss your experiences of wellbeing in the 12 months following the birth of your first tamaiti. This means you can go at your own pace, take your time, talk about your experiences in depth and express your thoughts in your own way. The interview will take place at a time,

place and date we have agreed on, where you feel comfortable and it's quiet like your home, a quiet room in the community or marae, or at a quiet room you may want the researcher to arrange – it will be up to you. You can bring a support person with you if you wish.

You will be offered a whakapapa / timeline of dates and catch up times that you and the researcher agree on.

There will be water, milo, tea and coffee available and something light to snack on.

The interviews will be audio-recorded and may take 1-2 hours, but can be broken up into shorter lengths with breaks if you wish.

You will be given the option for a follow up interview in case there is anything you would like to add.

You will also have the opportunity to review a summary of key themes from your interview.

Benefits and risks of being a participant

Some people find it beneficial to talk about their experiences and share them with others, especially as your stories are very important and may help other young mothers who need support and understanding

If you feel upset during the interview the interview can be stopped. You may wish to withdraw from the study, reschedule the interview or have a short break until you feel comfortable. I will inform you of support networks available for you, and provide you with information if you need it. We will have a debrief (sum up) at the end of the interview where you can raise any concerns or questions.

Confidentiality and privacy of your information

My researcher supervisors, interview transcriber and I are the only ones who will have access to your information and all details such as your name will not be included on printed notes, transcripts, audio recordings or files. All the information will be locked away in a secure locked cabinet for 10 years and any electronic files, recordings or data will be stored on a personal password protected computer for 10 years and then destroyed. While all steps will be taken to protect your identity, a small possibility exists that someone who knows you very well may be able to identify you even from this small amount of information.

The only time I will have to breach confidentiality is if I feel you disclose during the interview or any other time we speak, that you (or those close to you) are at risk of harm. I will discuss my concerns with you and what information will be passed on to my supervisors and appropriate services.

What will happen to this research study?

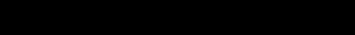
In New Zealand all research involving human participants must be approved by an Ethics Committee, which may be contacted if you have any concerns. The Health Research Council

of New Zealand has specific guidelines for health research involving Māori to ensure research contributes to Māori health development and responsive to the needs of Māori. Ethics approval has been granted for this study by the Victoria University of Wellington Human Ethics Committee.

The results of this research will be available to be used for publication in academic or professional journals; for dissemination at academic or professional conferences and / or for deposit of the research paper or thesis in the University Library (student research).

You can also contact me:

Aria Graham – PhD student

 or email grahamaria@myvuw.ac.nz

Nō reira, ka nui ngā mihi ki a koe,

Aria Graham

Appendix C. Participant Consent Form



PARTICIPANT CONSENT FORM

**Tika tonu: Young Māori mothers' experiences
of wellbeing around the birth of their first tamaiti (child)**

I have read or have had read to me the information sheet dated on **Tika tonu – Young Māori mothers' experiences of wellbeing following the birth of their first tamaiti (child)** and have had the details of the study explained to me.

I have had the opportunity to consider the information, ask questions and discuss this study. I understand that I may ask further questions at any time.

I understand that taking part in this study is voluntary (my choice) and know that I have the right to withdraw from the study at any time and up to two weeks after the interview/s, but after that the interview would become part of the research data. I understand I can decline to answer any particular questions.

I agree to provide information to the researcher on the understanding that anonymity and confidentiality will be maintained at all stages of the research (the information will be used only for this research and publications arising from this research and will not use my name, information identifying location of events and people will be disguised or removed, and that no opinions will be attributed to me in any way that will identify me).

The information will be kept confidential to the researcher (Aria Graham), her supervisors, (Dr. Kay de Vries, Dr. Amohia Boulton and Dr. Kathy Nelson), her professional supervisor (Christeve Le Geyt), and the person who transcribes the recordings of my interview/s.

I understand that there is no payment for my or anyone else's participation.

I understand that the audio-recorded interview will be destroyed at the end of the project, and that the transcribed interviews will be retained in storage for 10 years, after which time they will be destroyed.

I agree to participate in an interview: - Yes No.

I agree to the interview being audio taped: - Yes No.

I would like a copy of the interview when it has been transcribed: - Yes No.

I would like a summary of the overall research results: - Yes No.

I also understand that I have the right to ask for the tape recorder to be turned off at any time during the interview.

I _____ (full name) hereby consent to take part in this study.

Signature _____ Date _____

Address for the interview and / or results summary to be sent to:

Appendix D. Transcriber Confidentiality Agreement Form



TRANSCRIBER CONFIDENTIALITY AGREEMENT FORM

PhD Thesis Title: Tika Tonu: Young Māori mothers' experiences of wellbeing around the birth of their first tamaiti

Researcher: Aria Graham

I have read the information sheet outlining this study.

I have discussed with the researcher the nature of the research and have had any questions answered to my satisfaction.

My role as the research transcriber has been outlined to me by the researcher.

At all times the research information (tapes and transcripts) will be inaccessible to other persons.

The researcher has assured me that she will debrief me following transcribing to address any issues should there be any that arise from transcribing.

Most importantly, I understand and agree to keep the information I hear and type in the course of transcribing confidential to the researcher and myself.

Transcriber's Full Name:

Signature:

Date:

Researcher's signature:

Date:

Appendix E. Interview Guide

INTERVIEW GUIDE

Tika tonu: Young Māori mothers' experiences of wellbeing around the birth of their first tamaiti (child)

Researcher: Aria Graham

(Firstly I would mihi (greet) the participant and ask if she would like a karakia before we begin).

I want to explore your experiences of wellbeing following the birth of your first tamaiti, particularly in the 12 months following birth. I am looking for your stories and experiences about wellbeing, and what wellbeing means to you.

Experiences of wellbeing

Wellbeing has different meanings to everyone, what does wellbeing mean to you?

Tell me about your wellbeing after having your first baby.

Experiences of wairua and wellbeing

Having a baby can be a life changing event with lots of mixed feelings and emotions, what feelings and emotions did you experience after having your baby? How did this affect your wellbeing?

Experiences of hinengaro and wellbeing

Women are affected by the birth of their first child differently, what thoughts or ideas did you experience after the birth of your baby?

What was new or different about how you thought and the decisions you made? In what ways did this affect your wellbeing?

Experiences of tinana and wellbeing

Our bodies go through lots of changes when pregnant and having a baby, how did the changes in body affect your wellbeing?

How did you care or feel about your body after having baby?

Experiences of whānau and wellbeing

Support is really important for new mothers, who supported you after the birth of your first baby and in what ways?

Who do remember or think made a big difference to you after baby was born and in the 12 months following? And how?

Experiences of whenua and wellbeing

Whakapapa, who we come from and where we come from is different for us all, how do you feel connected to where you're from?

Where is home for you and why is this place important to you? Does being connected affect your wellbeing? And if so, how?

Experiences of meaning

What has helped you to make sense of this experience (becoming a new mum)?

What have you learned or taken from this experience?

Wrap up questions

Is there anything else you want to tell me about your experience that we have not discussed?

Would it be okay for me to contact you with any follow-up questions I may have about what we have discussed?

If over the next two weeks you remember something you would like to add you can contact me.

Prompts (to clarify ambiguous, missing, confusing information)

Prompts to gain further description

How did it happen? When did that occur?

You mentioned...can you tell me a little more about this event/experience?

You talked about...what was your reaction to this?

Can you tell me more about the events that led up to or added to this?

Probes to clarify meaning

What did that mean for you?

What was that like?

Probes to encourage participant introspection and reflection

What is an example of that?

Why do you think that happened?

What were your thoughts at the time?

Can you tell me more about why this was so significant to you?

(At the closing of the interview I would thank the participant and offer her a small koha in gratitude and acknowledgement of her time and matauranga (wisdom and knowledge). I would ask if she would like a karakia to close our hui (meeting).

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