



9/12/2023

Ahuriri Community
Mental Health Act Review
Aotearoa Rongā Māori Collective
Chairs Report

Dr Charlotte Mildon
ARMC CHAIR



He Mihi Acknowledgements

We would like to extend our sincere appreciation to the following kaimahi who played pivotal roles in the creation and refinement of this report.

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The Aotearoa Rongoā Māori trustees would also like to thank all the whānau who shared their historical trials and tribulations in having to engage with various Crown entities. Recording your moeamoea to preserve the ancient healing ways of our tupuna for our mokopuna was such an honour. Kei te mihi, kei te mihi, kei te mihi.



He kupu whakatepe

Ko te reo tawhito te mauri o te mana Māori.

Ko te wairua te mauri o te ao Tohunga Māori.

E rua ēnei wehenga korero e hāngai tonu ana ki runga i te reo tawhito.

Ko te reo, nō ngā Atua mai.

The ancient voices of nature are the life force of the mana of Māori.

The spirit is the life force of the world of the Tohunga.

These two ideas are absolutely crucial to the ancient language, the *voices of nature*. A language that is a gift to us from our ancestors of nature.

Mental Health Act Review Summary



Dr Charlotte Mildon

He uri ahau o ngā Maunga tapu o Rongokako me
te Whakapunake
Te Wairoa Hopupu Honengenenge Matangirau me
Tutaekuri oku awa
Ngāti Hinemanuhiri, Porou, Rongomaiwāhine,
Kahungunu oku iwi
Ngāti Maahu rātou ko Ngāti Hinepare, ko Ngāti
Hinganga oku hapū
Moteo rāua ko Puutahi oku marae
Takitimu me Horouta oku waka
Charlotte Mildon ahau
No Heretaunga
No reira tēnā tātou

Tēnei te mihi ki a koutou

Our ARMC membership were disappointed that Te Whatu Ora did not consult Māori nor collate the 'whānau voices' for the Mental Health Act Review. To address this we coordinated a community hui in Ahuriri. It was heart-warming for our whānau to wānanga especially seeing that our kuia had a wealth of knowledge in the historical oppression whānau have endured in the mental health system. Real life experiences were disclosed of whanau members being arrested by police, diagnosed by psychiatrists and sectioned under the Mental Health Act by non-Māori judges. The latter of whom, have very little experience both in whaiora Māori let alone the Māori culture.

Our whānau clearly outlined how Pakēhā law has categorise the spiritual imbalances of 'Māori' based on a scientific biomedical model of health. According to expert Tohunga, the Western mental health system does not align with the lores and philosophies of traditional Māori healing where the emotional, spiritual, environmental, whānau wellbeing is not separate from the mental wellbeing. Standing mental health on its own contradicts the philosophies of Tohunga Māori and shows a lack of respect for the Māori culture..

The categorisation of Māori mental health was proposed for Māori yet the authentic Tohunga Māori possess a deep metaphysical body of knowledge that is steeped in the philosophies of traditional Māori healing. The grouping of Western health services into different categories does not support whānau Māori in any way but rather serves the Western clinicians to compartmentalise their professions into their respective areas of expertise. To date, there are no positive outcomes for tangata whaiora in mental health services.

The Mental Health system works closely with other Crown entities; the police, the CAFS team, the courts, the prisons, youth justice institutions/forensic wards, OT family homes, and women's refuges to name but a few. In our community, these systems have high statistics of Ngāti Kahungunu whānau and whaiora who are detained in residential units with no opportunities to have funded Tohunga led cultural interventions to heal. Instead there is no hope of recovery and whaiora are mandated to take higher and higher doses of strong anti-psychotic meds for the rest of their lives.

The over representation of Ngāti Kahungunu whānau in prisons alone clearly shows a range of spiritual imbalances. Instead of being supported to heal from intergenerational trauma, the whānau are locked up with the mentality to punish. It is important to address the intergenerational trauma of whānau in prison as 93% of both men and women suffer from historical sexual abuse. Criminal offending is closely linked with poverty, domestic violence, drug abuse, dysfunctional families and gang affiliations. Since the onset of the Australian prison contractors, whānau are no longer able to hold their tikanga groups and have been denied access to the Māori Focus unit which breeches the articles of the Tiriti o Waitangi.

Tohunga led traditional Māori healing wānanga has the capacity to heal whānau in prisons which in turn has the potential to reverse the generational criminal offending and recidivism. The colonial approach to punish only creates a future pathway of institutionalism for mokopuna Māori. Many of our rangatahi come straight out of Oranga Tamariki care at 18 years old, groomed for a life time of institutionalisation as an adult, with no life skills to survive in the real world. Instead of funding Tohunga led traditional Māori healing wānanga for rangatahi, the government

proposes to spend millions on building white elephants in anticipation of incarcerating our rangatahi.

Having presented the benefits of traditional Māori healing to Oranga Tamariki in both of the Hastings offices, the staff shared that 75% of the whānau under the Oranga Tamariki system here in Hawkes Bay are Māori. Transporting tamariki and rangatahi to juvenile institutions or family homes punishes the whole whānau without any provision to heal. Nothing changes and only serves to create a dependence upon the government system. The focus of Tohunga led traditional Māori healing wānanga (an intergenerational method of teaching and learning) has a specific focus on healing the whole whānau not just the child or the adolescent. The Oranga Tamariki Action plan for whānau centred services for children and young people in priority populations clearly identify that 'there are not enough whānau-centred services and supports, and not enough are based in tikanga Māori and delivered by iwi and Māori organisations' [1].

The recent mental health strategies and the roles under the Mental Health Act identify key themes for Māori Health and Māori mental health systems. Yet none of these strategies are working in sync with one another to support the 'overall wellbeing' of Ngāti Kahungunu whānau in our community. Our kuia recalled the oppression of Tohunga Māori dating back to the 1800's where the missionaries introduced Christianity and outlawed Tohungatanga. The ongoing effects of colonisation has resulted in generational trauma whereby Māori not only have the highest negative health and mental health statistics in Aotearoa, but are amongst the highest negative health and mental health statistics in the world [2,3]. The Kia Manawanui; Long-term pathway to mental wellbeing and the Oranga Hinengaro system and service framework strategies [4] do not address the issues raised in this report.

The Crown announced policy proposals for new mental health legislation on the 29th August, 2023 yet expert Tohunga were not invited to sit at the decision making table. The Crown has promised Māori tino rangatiratanga (absolute sovereignty) over their spiritual taonga and whaiora are taonga for their whānau. The Crown therefore has the responsibility to wānanga with expert Tohunga to discuss, debate and co-create culturally appropriate interventions for spiritual imbalances that affect whaiora and their whānau. By not consulting with Tohunga Māori over the mental health

legislation, the Crown have breached the articles of Te Tiriti o Waitangi and the Wai 262 claims. Consulting with mental health executives, kaupapa Māori services and providers, and psychiatrists who do not provide any Tohunga led traditional Māori healing interventions or wānanga for whaiora is irresponsible. Justifying a mental health budget of \$9 billion that proposes the same services for whaiora Māori that has never had any positive outcomes is ludicrous. How can the appointing of a mental health minister whose role is to bring more foreign psychiatrists and psychologists into New Zealand going to support the recovery of whaiora Māori?

The Tohunga who are part of the Aotearoa Rongoā Māori Collective want to be a part of the proposed Mental Health and Wellbeing Commission [5]. Our trustees request that authentic healing Tohunga who are well known for their work in their communities be funded to assess the spiritual wellbeing of the whaiora who are being sectioned in courts. To date, only psychiatrists and lawyers are funded to do mental health assessments prior to court hearings yet neither are experienced in mate wairangi or mate porangi (spiritual imbalances) and nor are they fluent in Tohungatanga (Māori spirituality) or te ao Māori (Māori worldview).

The recommendation for a cross-party mental health wellbeing working group that seeks input from foreign cultures instead of Tohunga Māori, does not address the historical over representation of Māori in the mental health system. In fact, the recommendations in the He Ara Oranga report and the 3.4 Whakawatea te Ara – Māori Health and wellbeing clause [5] has no mention of traditional Māori healing interventions at all. The recommendations in He Ara Oranga to 'take strong action on ... other drugs' fails to disclose the administration of heavy sedation drugs like the Ketamine horse tranquiliser that weakens the internal organs, causes irreparable damage to the heart and, in some cases, results in fatalities.

As from September, there have been 34 suicides in Hawkes Bay since the floods and the He Ara Oranga recommendations for suicide do not include the Te Rau Ora that supports and funds traditional Māori healing interventions for Māori and suicide. Likewise, Te Whatu Ora te Matau o Māui have purchased an online suicide program from New York without consulting local Māori. Executive priority population boards are then asked to kaupapa Māori-ize an American suicide program that has a mono cultural approach and is culturally inappropriate for whaiora Māori. ACC

were able to compare Rongoā Māori alongside clinical pathways, identifying the investment of time per session, consumables used (treatment tools) and the reported outcomes of improved mauri ora and well-being. This comparison has provided ACC with clear evidence and undisputed validity of Rongoā Māori as an effective healing pathway [6,7].

The Aotearoa Rongoā Māori trustees would like to tono Te Aka Whaiora to consider a Kaupapa Tohunga Māori research project to explore the invisibility of traditional Māori healing in the He Ara Oranga report, the Mental Health system and all the other systems mentioned in this report. On the last day of our community hui, our four trustees came together with a Māori mental health advisor from Te Whatu Ora, a mother who had navigated the mental health system for her daughter for over a decade, as well as a Māori dual practitioner clinical mental health lead/ kairomiromi, to design a research project to test the validity of traditional Māori healing for our Ngāti Kahungunu whaiora.

This resulted in a Health Research Council post-doctoral research application that was fully supported by the Māori health research team at Massey university. The research seeks to evaluate and validate using traditional Māori healing philosophies and practices for Māori whaiora (people seeking wellness), and their whānau (families) in the Hawkes Bay community. A highly skilled advisory panel on board that includes Tohunga Māori, Tohunga Rongoā, kai-romiromi, kai mirimiri, dual practitioners (clinicians and kairomiromi), psychiatrists (both Māori and non-Māori) and a Māori health and science psychologist, all of whom work with high and complex needs whānau and whaiora Māori.

No reira, he whakatauki 'Na tou rourou, nāku te rourou, ka ora ai te iwi nei'

Nāku noa

Na

Dr Charlotte Mildon
Aotearoa Rongoā Māori Collective
Chair

Whānau voices in response to the Mental Health Act Review

BENEFITS FOR AOTEAROA NEW ZEALAND (NZ).



Māori are problematically the highest users of clinical mental health services in New Zealand, contributing to the financial strain in the broader health system.

In support of this research initiative, the ARMC trustees co-created a more suitable mental health model for whāiora Māori informed by the whānau voice in the Heretaunga rohe (Hawkes Bay region). The pilot will test the model and its potential for application throughout the mental health system in Aotearoa, New Zealand.

In July, the ARMC trustees created an opportunity for local Ngāti Kahungunu kuia (grandmothers), koroua (grandfathers), their tamariki (children), and mokopuna (grandchildren) to relate the historical oppression of the Mental Health Act to date.

Te Whatu Ora is contracted to complete the Mental Health Act Review in New Zealand, yet none of the Aotearoa Rongoā Māori members throughout New Zealand had been invited to provide feedback as the 'voices of the whānau.'

The Oranga Hinengaro System and Service Framework strategy clearly outlined the critical shift needed to promote Māori mental well-being to support whānau using a whānau-centred approach. As a result of this issue being raised, Te Aka Whai Ora (Māori Health Authority) contracted the ARMC trustees to collate the voices of local whānau together with the national body of ARMC Tohunga and Rongoā Māori practitioners to provide a report on behalf of our hapu governance board, under the direction of the CE of Te Taiwhenua te Whanganui a Oroutu.

NGA MOEMOEAA FOR MINISTRY OF JUSTICE

Whānau voices:



- The wardens need to know Māori, as in train, before they start their jobs
- Implement tikanga Māori
- Honesty
- Provide access to Rongoā Māori for whānau who are being impacted, i.e., parents, tamariki, siblings
- Māori lawyers
- Different value bases that we have
- Keep our Māori focus units alive and well
- The right people in the right place, including management, political positions, and prison staff, to be able to prepare our Māori Toa not to go back to jail
- A tautoko plan for Ngā Tama Toa as a follow-up to help them if they wish to continue learning and experiencing Te Ao Māori on the outside with their whānau and life if the whānau wish
- The deeply rooted concerns expressed by whānau over the inadequacies of mental health services underscored the urgent need for transformative change. The system's limitations in including Rongoā Māori practices further compounded the challenges faced by whānau, making it difficult for them to actively participate and be included in the care plans of their loved ones. This lack of integration stifles the potential for holistic healing and culturally appropriate support, ultimately hindering the well-being and recovery of whānau Māori.

In the face of these challenges, the Whānau Voice Hui emphasised the pressing need for mental health services that fully embrace Rongoā Māori-led approaches, which are rooted in cultural safety, holistic healing, and ancestral wisdom. Whānau recognised the transformative potential of Rongoā Māori-led care in addressing mental health concerns with authenticity and respect for Māori traditions. The hui participants stressed the importance of breaking down barriers and creating inclusive pathways that empower whānau to actively participate in the care and well-being of their loved ones within the Te Matau a Māui rohe.

NED KOIAURUTERANGI

PRISON
VOLUNTEER



My connections are with Ngāti Kahungunu, Ngāti Porou, Ngā Puhi and Ngai Tahu. I've been Her Majesty the Queen's guest at the regional prison, and now I'm a voluntary worker in the prison. What got me through was faith in God. That's where the influence is, so if it wasn't for that Māori focus unit... I Wouldn't be here.

For starters, have weekly hui with the General Manager of the whole prison, mediating between the inmates and each unit Manager in each prison across the country. Most units have a Trustee Committee or a Runanga amongst the men to air out any raruraru and plan together to make sure an inmate's perspective is heard so problems can be ironed out and communication between both parties can heal the pain. This benefits the whole prison system.

It's important to keep Māori gangs connected to tikanga so that they will heal and keep a balance, a sense of belonging - to their whakapapa. Have meetings with their leaders. It's hard for me to say this because I have had so many run-ins with gang members in my 20+ years working on the doors in pubs as security. We want them with us. The whole tribe has to be united. Our people need to be united because, without that unity, our people will be the next weak people of Polynesia. The system has made our young think I can't be bothered attitude; drugs are frying their minds! Thank goodness we got you and all our aunties. You have shown me the meaning of our Rongoā that needs to be a part of the prison infrastructure.

I believe that our Rongoā experts should be a part of the infrastructure.

I believe that our Rongoā experts should be a part of the infrastructure.

CHERIE KURARANGI

REGIONAL
RELATIONSHIP
MANAGER



I am Cherie Kururangi of Ngati Kahungunu descent, and live locally within the Hawke's Bays' Napier area. I am a regional Relationship Manager for HBRP and Manawatu Prison from the Mahi Tahi Akoranga Trust with more than 13 years experience in whanau ora navigation as well as over 7 years in specialist cultural assessments.

I support many whanau mauhere to engage with ACC-sensitive claims and try to awhi whānau to engage with Māori pathways and counselling under whatever resourcing support and services I can access. I can only do this if they are also approved to work within the Prisons. Many times because of the arduous processes and numerous restrictions, whānau are missing out on real manaaki, and I feel this contributes to a worsening whanau Risk of Conviction and Risk of Incarceration (ROCROI).

Rongoā Māori services would provide a door opening for many mauhere who will at least need to physically and mentally prepare for the healing they intend to receive to better themselves, especially if we want their positive change to be sustained long term. How I would see this working is through group wānanga inside our prisons with whānau mauhere and for those with sensitive claims and/or at high risk.

I endorse the use of individual therapy, such as romiromi, to help them unblock themselves and be open to learning and changing.

Dr. Charlotte Mildon from Hawkes Bay is at the key most forefront of her profession of traditional Māori healing. She has held many wānanga for whanau with complex issues, most of whom are involved with The Ministry of Justice, Department of Corrections, Police and the Courts. She teaches them how to heal themselves and their whānau. Dr. Mildon's skillset and work are very much needed in every facet of our systems for whanau in need.

Cherie Kururangi

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WIRI WELLBEING

17 JULY 2023

Tena koutou tena koutou katoatoa
Te mea tuatahi, ki wa tatou kaihanga, kaiwhakaora
A IOMATUAKORE Heke iho
Kia Ranginui I tu iho nei
Kia Papatuanuku e takoto nei
Ki wa raua tamariki tae rawa mai
Kia Tatou na ira Tangata ki te whaiao ki te ao marama e
A tena tatou katoatoa e huihui mai ana I tenei wa mo he kaupapa tino whakahirahira
ma tatou na kaiwhakaora o Te Ika a Maui me ki ra hoki ki Te Waka a Maui .
Tena koutou waku Tohuna Waku Tohunga o te ika a Maui me te waka o Maui hoki ra
E piki mai ra, e kake mai ra
Ki tenei hui, ki tenei whakaaturanga zoom whakakotahi o na kaiwhakaora o te ika me
te waka o Maui tena koutou.



WIRI WELL-BEING

We have decided as a whānau that we want to come under the umbrella of the Wai 262 Tiaki Taonga and Indigenous Rights; these rights give us access to Rongoā Māori in the Prisons and Mental Institutions.
We see these places failing our people at the teenage adolescent stage here from the Bay of Plenty to Turangi and Waiariki. There is nothing; they all end up in Starship. We need Hauora of good mentor's around the Country so they don't end up in these State institutions that ruin them at a very young age with Pharmaceutical drugs.

Romiromi and Mirimiri Rongoā rākau and all those healing Modalities need to be a priority so we can start to see changes in our communities, whānau, hapu.

Wiri Well-being

Written Submission

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MOANA LOUSI

K A I R O M I R O M I

He uri au o ngā iwi ko Ngā Puhi, ko Tainui, ko Tuhourangi,
ko Ngāti Raukawa, ko Ngāti Kahungunu ki Wairarapa,
ko Ngai Tahu, a ko Waitaha.
Ko Moana Lousi toku ingoa.
He kaimirimiri, he kairomiromi, he kairongoā ahau.



I do what I do because of my personal journey. I want to make a difference in the lives of others. If I can support them, and help them walk through their journey with a little more ease, then I have made a difference.

My story

As a young teen, I was placed in Bollard and Weymouth Girls Homes and in the temporary foster care of a single father. Where is the accountability for that decision? and how is it even justified? Traumatizing for a young person who doesn't always understand what is happening.

Our current story

I have a son, the youngest of six, who is currently in the justice system. Some of the experiences we've had with social workers, Oranga Tamariki Staff and a district court judge have been sickening. Regardless of how actively involved my whānau and I have been, the experience has, again, been traumatizing and disempowering. If I find it disempowering when I have whānau and friends supporting me, then how much more disempowering is it for whānau with no support? My support includes friends who are social workers, Oranga Tamariki staff, police, lawyers and tohunga, and still, we have felt disempowered.

My practice

For many years Oranga Tamariki staff have been seeing me for supervision and treatment. They come tired, beaten and stressed beyond measure. Sometimes the solution is simple; occasionally, there are some big decisions to be made, and every now and then, they choose their health and wellbeing over their mahi. Romiromi has been hugely beneficial for them.

**Romiromi isn't a standard treatment. It works. It works on all levels.
It changes lives for good. It can help break cycles.**

I have seen and experienced first-hand the benefits of Rongoā Māori wananga for staff, along with access to romiromi treatments. When staff are well, they will respond better to whānau in need.

Moana Lousi

Community Consultation Hui – Written Submission – August 2023

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MOEMOEA FOR TE WHATU ORA



In their aspirations for mental health care, whānau sought services that go beyond conventional clinical treatment, recognising that true healing lies within a holistic approach that considers the interconnectedness of whānau well-being within the broader community and cultural framework. Tohunga Rongoā-led services were perceived as an authentic way to address mental health concerns, drawing upon the wisdom of ancestral knowledge and practices that have been nurtured over generations.

The collective vision for a whare oranga - retreat-type facility and the emphasis on prevention and early intervention underscored the community's commitment to transforming mental health care within the Te Matau a Māui rohe. The aspiration for a nurturing haven, grounded in cultural values and encompassing community-based support networks, reflects a holistic approach that cherishes the well-being of whānau at every step of their mental health journey. By centering their cultural identity and interconnectedness, whānau aspire to build a resilient and caring mental health system that empowers individuals to flourish and thrive.

Community voices:

- Whānau at the decision-making table
- Policies and standards for clinicians to work alongside Tohunga-led services
- Romiromi and Rongoā Māori be funded
- Māori Mental Health - wānanga and Tohunga led services
- Decisions to be with whānau, not by case manager
- Listen to the whānau: Ngā kuia mā, ngā koro mā, ngā tamariki
- Wrap around services for whānau as they should work hard for the best outcomes for nga tamariki/ngā mokopuna
- Kohanga reo moemoea for parents and tamariki to have Rongoā Māori right throughout their programs.
- Ae!! Whakarongo! Whakarongo! Whakarongo!
- Provide trained rongoā Māori practitioners

Provide rongoā Māori treatment to whānau engaged with Oranga Tamariki and offer wānanga.

Tino Rangatiratanga

MOEMOEA FOR TE WHATU ORA CONTINUED

Nga Whakaaro – Compulsory Treatment Orders:

During the Whānau Voice Hui, whānau members passionately expressed their belief that Rongoā Māori, healing, and Tohunga-led services are critical components in mental health care. They emphasised that the incorporation of these culturally rooted practices is essential in creating effective, inclusive, and holistic approaches to supporting mental well-being for Māori.

Regarding Compulsory Treatment Orders (CTOs) in mental health care, the hui brought forth diverse opinions. While some whānau expressed concerns about the potential for coercion, there was an overarching call for greater transparency, accountability, and whānau involvement in the decision-making process surrounding CTOs. Whānau stressed the importance of respecting their autonomy and providing them with a meaningful role in shaping the care and support provided to their loved ones.

As part of the comprehensive endeavour to enrich mental health care, the hui participants conveyed a heartfelt desire for the establishment of a Whare Oranga – a retreat-type facility. This facility would embody the principles of manaaki (nurturing hospitality) and kaitiakitanga (guardianship), providing a sanctuary where individuals can find solace and healing. Whānau expressed their wish for a place where they can take their loved ones when they are unwell and also following their time in acute mental health care. Such a facility would serve as a space of tranquillity grounded in Māori values and practices, fostering a sense of belonging and empowerment for whānau on their journey towards well-being.

The hui discussion also underscored the necessity of dismantling systemic barriers, such as socio-economic disparities and limited access to culturally appropriate services. Whānau advocated for a more equitable and inclusive mental health system that recognises and embraces their cultural identity and values, ultimately leading to better outcomes for Māori whānau within the Te Matau a Māui rohe.

TRACEY PETERSEN

17 JULY 2023

REGISTERED NURSE
TEAM LEAD



- We're not alone; as long as we support each other and work as a collective, anything can happen
- It's about being examples in the communities to be able to fast-track it and get support
- The more we are out there doing the mahi, especially on ourselves, we can influence others to get on board our waka, too, to liberate our whānau.

Kia ora.

Tracey Petersen

Community Consultation Hui – Zoom Submission – 17 July 2023



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VIVIENNE RICKARD

17 JULY 2023

REGISTERED NURSE
HEALTHLINE
MĀORI PATHWAY

Kia Ora, My name is Vivienne Rickard, I give consent for Charlotte Mildon to speak on my behalf.

I'm a Māori Registered Nurse, working for Healthline, on the Māori Pathway line, which gives Whānau Māori an option to speak to a Māori Nurse.

I receive calls from Whānau Māori regarding their own personal issues with mental health.

They are seeking other options for healing, due to prescription medication and counselling not having the best outcomes.

My advice to Whānau Māori when they call, is to seek a Māori healer on the ACC list of Rongoā Māori healers and to go back to our own traditional ways of healing, which have greater outcomes for our people.

My hope is that a pathway is implemented, where Traditional Māori healing is recognised, fully funded and offered to all Whānau Māori seeking help and healing with mental health issues.

Vivienne Rickard



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SHANE WESTBROOK

K A I R O M I R O M I



MOEMOEA FOR RONGOA MAORI

- For Rongoā Māori to be looked after by our tohunga
- Can be shared with others to heal them but not to be sold or lost overseas
- Ko ta mātou tohunga Rongoā Māori he kaitiaki.. he mahi hauora
- Ki ngā tāngata katoa, ahakoa ko wai, ahakoa no hea, otira, kaud e whai rawa te pūtea.
- Ta mātou taonga ki te tawahi. – kaud e ngaro atu tenei taonga a kui mā, a koro mā.

Koina Taku moemoea ki te Rongoā Māori..

Shane Westbrook



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MOEMOEA FOR MINISTRY OF EDUCATION



Community voices:

- Whānau at the decision-making table
- Decision to be with whānau, not case managers
- The pākeha policy governs us; we need to resurrect the Hokai Rangī Strategy and see what is being done and what is not.
- Including Tikanga o Te Ao Māori in Education
- Māori education to be run by Māori: Kura Kaupapa; Kohanga Reo
- Listen to the people re: Rongoā
- Introduce karakia every morning
- Wānanga with tohunga to ensure standards and practises are tika and safe while still honouring our traditional practices
- Let Tohunga dictate standards, qualifications, practises etc.

According to Dessa and Kiriana (daughters), the Kohanga Reo kaimahi are co-creating Rongoā Māori initiatives at Waiohiki with the whānau. The kaimahi were harvesting blue gum leaves with the tamariki and boiling up the wairākau to heal the lungs of silt poisoning. They are also making pani with the whānau to normalise our healing ways in the home with the mokopuna. The kaimahi requested that they all work on eating healthier kai that has less sugar and more vegetables in it. As a whānau, kaimahi are receiving regular mirimiri treatment, and engaging in monthly romiromi wānanga and continue learning traditional Māori healing to decolonise the Kohanga Reo of the Crown's oppressive control of the education of our mokopuna Māori.

KAHURŌA REIHANA

KOHANGA REO

He mihi tuatahi ki a koe Charlotte,
e karanga mai ki tenei o tātou hui, he mihi hoki
ki a koutou, e mihi atu ki a koutou,
te whānau a Pakipaki, me tātou katoa, heoi ano.



Yeah, I learned heaps today. I'm not interested in building relationships, MSD, Justice and all that; I'm just worried about myself.

I'm involved with Kohanga a lot, and my number one priority is tamariki (*points to board). This is what's happening to me today, too. The Ministry of Education is coming in and changing laws that I disagree with because the kaupapa of Kohanga is:

'Whānau run, whānau decision.'

Now, they want to take over.

I'm against it. I haven't done anything; I'm not going to change.

In saying that, it's really about educating our whanau to say no, don't follow them; it's about us. Besides that, yeah, all this, (*points to board), the ministries, what you've done, (*motions to Charlotte) what people are going through - I'm learning, so for you, Charlotte, awesome.

I need to go to this type of wānanga all the time because this is interesting; I'd usually go to kohanga or somewhere else.

I don't worry about myself. It's only Kiriana my girl she's always looking after me and she's the one that gets me out the door, or Dessa, "you've gotta go and see Charlotte." "What for?" I had a sore back, "No, why do I have to go there?" and you put it back in place. From then on, yes, I believe in you. One quick thing I must say: with the doctors, I refuse medication, so even though you got this, you got that, What does that mean? No, I'm not interested, bye, see ya, so Charlotte, you're my why. Kia ora.

Kahurōa Reihana



HERA TAUKAMO

KUIA

Kia ora koutou.
Kei te tautoko ngā mihi, kia mihi a ki mua i ahau.
what have I found out today?

I found out that we are not alone.

We are here as a whānau to awahi ki tētahi ki tētahi.
But I started in this mahi because of my girl Dess. She got me into this Māori thing. I don't believe in that, and it took me a while cause when she was in it, she was so motivated. She got me going, I told her to shut her mouth, shoo, shoo, go away, but she never actually told me to go - I went on my own. I ended up going myself and when I did go, man, I've never looked back.

My legs were swollen, they were black. Charlotte put poultice on it and then wrapped it up with glad wrap and I looked like a robot. I had to hop on the bed for 3 hours. After 3 hours, when I took it off, it was alright, everything had gone down and I thought far out. So, I got to my doctor and I show him, that I ended up losing weight cause she put me on a diet. My doctor couldn't understand cause I had been going to him for 15 years, and I still stayed the same size, and he was wondering why. So, I told him, I went to my rongoā doctor and he said, "Ooh, I wouldn't mind sending my patients who have the same problem." He asked, "Could you tell me her name?" and I said, "If I tell you I have to kill you."

When we talk about MSD, I only knew about MSD through the cyclone, and that's the only way I knew what MSD was. I've learned a lot, some of them were not very good.

I've learned a lot today Charlotte, I love you and I will support you and your team.

Hera Taukamo



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MOEMOE FOR IWI RELATIONSHIPS



Community voices:

- The wardens need to know Māori, as in train, before they start their jobs
- Communication!!
- Wānanga
- Understanding their policies
- Decision-making collectively with hapu
- Iwi having legal pathways to enable Rongoā to be available to Māori within all Health and Justice systems
- Proper training with staff
- Create opportunities/financial assistance for rongoā practitioners to provide services to whānau, hapu, iwi (look after the healers)
- Love; positivity
- Kotahitanga against poverty
- Kotahitanga with Rongoā Māori

RAEWYN TURNER

17 JULY 2023

KAIMIRIMIRI/KAIMAHI



Since I've met Charlotte, she can't get rid of me. Healthwise, I've come a long way. My life was really going downhill, and now I have a future to look forward to, and I trust Charlotte with my life, so that's big for me.

After two years of Rongoā Māori treatment through ACC and romiromi wānanga, Raewyn is now working as a kaimirimiri.

She brings her children and her mokopuna to ongoing romiromi wānanga to heal all four generations of her whānau. Their own healing now being paramount.

Raewyn Morrell

Community Consultation Hui – Mana Ahuriri Board Room – 17 July 2023



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HERA FERRIS

17 JULY 2023

KUIA

It's been a lovely hui.
But as I said, revisit that strategy
the Hokai Rangī Strategy,
See what they've got there, did they do
anything about it?
We need to get together to go through it.
So thank you very much for today.
Kia ora.

Hera Ferris



LILY STONE

17 JULY 2023

KUIA

Kia ora whānau.
Thank you very much, I've enjoyed
myself. You're all my whānau.
Love you my dear, love you all. God bless
you.

Lily Stone

Community Consultation Hui - 17 July 2023

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KOOTIRO KINEY

KUIA REFUGE

- Whakamana our kuia with healing
- Provide safe homes
- Mirimiri funded
- Someone to talk to and trust
- Have all generations: a plan to make sure they are not alone
- Funded pick-up service for our kuia to come together and korero, spend time together, go places such as kohanga, pampering days, lunches

Kootiro Kiney

HIRAIRA KAIO

KUIA REFUGE

I really appreciated coming here today.

I found that - I was diagnosed in 2015 with cancer, and at that time, I needed something like this. I didn't understand a lot of the information that I was getting until I met up with a koroua of mine and he said to me that I should go and see a rongoā, and she made me so much more easier in my mind, through the journey that I had to undertake. and so I wasn't so afraid of what I was in for and today has been wonderful.

Hiraira Kaio



WYNAH
ROWE



K U I A

It's been a great day.

It was even more excellent coming to this kaupapa.

Its been really good listening to all these stories, hearing about, well you know, the different things:

- Ministry of Education
- Ministry of Justice
- Oranga tamariki and
- Our kuia.

**If we stand strong and tall with each other
we can get what we want into the system.
But, we have to be together and stay strong.**

Kia ora.

Kaia Wynah



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TAMMI HEAP

17 JULY 2023

M I D W I F E
K A I R O N G O A
L I F E C O A C H

I think I've just come to a conclusion that the way it fast-tracks... I think that's Māori for Māori; first in the way that we should be funded - for all of our whānau as mana whenua to earn in rongoā Māori - because we work our people first, and I think that's gonna really get our whānau and our rohe healing really quickly.

I know that in a lot of spaces, that anyone who wants to enrol they can enrol, even within free spaces; but it often can mean that mana whenua can be excluded; and then you've got people missing out, as in...

OUR COMMUNITY, OUR KUIA and that being healed.

You know, I'm thinking, what's the way to fast track it?

So, if we see something that we want to do, and it is rongoā - that those that apply - Māori are the ones that get the positions first.

Tammi Heap

Community Consultation Hui - Zoom Submission - 17 July 2023



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REO KING



DREAMS AND GOALS

GOAL

The goal would be to see Rongoā Māori used at its full potential without question, just like pakeha medicine, if that makes sense.

DREAM

That it will continue to rise without being halted, just as a lot of things Māori has been. Being able to choose how to benefit ourselves medically through rongoā.

Reo King



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GABRIELLE KUPA



Nō Ngāti Kahungunu rātau
Ko Ngāti Tū wharetoa,
Ko Ngāti Rārua,
Ko Ngāti Apa ki te Rā Tō,
Ko Te Rūnanga o Tainui,
Ko Maniapoto,
Ko Rangitāne,
Ko Ngāti Kuia ahau.
Ko ahau te kairongoā me te kairangahau.
Ko Gabrielle Kupa ahau.

My dreams and aspirations for rongoā Māori are:

- to be integrated into all aspects of living, from birth to death and everything between.
- For our hapū whānau to bring peace of mind to the well-being of the parents and their hapori.
- To the well being of all pēpi.
- For education to bring enlightenment on how people can take ownership of their own lives with help and guidance from skilled and experienced Rongoā practitioners and tohunga as a strength based approach rather than a deficit approach where whanau feel overwhelmed.
- The dream is to have multi layers of wellbeing
 - Wairua, Tinana and Hinengaro
- Where people have access to all different kairongoā within their area, and access to the correct Rongoā rākau to meet their needs.
- Also the support needed for Kairongoā, so they can maintain and flourish their wellbeing journey. Kairongoā is not a light job and should be respected as such.
- It is also my goal that Kairongoā should be supported to deliver the best possible outcomes for themselves and their whānau they are working with.

Gabrielle Kupa

References

1. *New ways of working*. (2022, March 8). Oranga Tamariki — Ministry for Children. <https://www.orangatamariki.govt.nz/about-us/our-work/new-ways-of-working/>
2. Cram, F. (2010). *Shifting Māori health needs. Māori population trends health service needs and medical workforce requirements issues arising*. Wellington: Ministry of Health.
3. Hamilton-Pearce, J. (2009). *Mana wāhine in information technology: ngā kaiwhatukākahu me tekākahu*. [Unpublished doctoral thesis]. AUT University.
4. *Oranga Hinengaro System and Service Framework*. (n.d.). Ministry of Health NZ. <https://www.health.govt.nz/publication/oranga-hinengaro-system-and-service-framework>
5. *Repealing and replacing the Mental Health Act*. (n.d.). Ministry of Health NZ. <https://www.health.govt.nz/our-work/mental-health-and-addiction/mental-health-legislation/repealing-and-replacing-mental-health-act>
6. Accident Compensation Corporation. (n.d.) Rongoā Māori, Frequently Asked Questions for Accredited Employers and Third-Party Administrators. ACC.
7. Accident Compensation Corporation. (n.d.) The phenomenal growth of Rongoā Māori. ACC.