

Manatu ki waaheke in nursing education: a legend for an example

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As described by Selak et al,¹ systemic racism exists in New Zealand healthcare. However, there are programmes specifically established to address this issue. For example, at Manukau Institute of Technology (MIT) a newly developed programme, Te Tohu Paetahi Tikanga Rangatira aa-Tapuhi—Bachelor Nursing Maaori, is in its third semester of delivery this year. (The programme has adopted the use of double vowels rather than macrons to be consistent with Waikato Tainui dialect.)

Manatu ki waaheke—looking back in order to move forward—is part of the ethos of this programme. Specifically, the legacy of Princess Te Puea provides the vision from the past to inform the future of nursing with the taura (students) enrolled in the degree. “Mahia te mahi, hei painga moo te iwi—do the work for the health and wellbeing of the people,” said Te Puea Herangi.³ Princess Te Puea was a beloved and esteemed leader of the Waikato Tainui people and her life story underpins and is intertwined throughout Te Tohu Paetahi Tikanga Rangatira aa-Tapuhi. The backdrop to the development of the programme is reflected in the description of Selak et al.

Overcoming the unconscious bias described in the honest and open reflection by Selak et al¹ is not a new challenge to nursing,² and taura on our programme can attest to this. In class discussions, taura often share examples of racism as they work through what racism means to them and their whaanau, and as they embark on this journey making them part of the very same health system. They want to be the difference, and Princess Te Puea provides the example for the way forward.

Ethnically inappropriate medical care impacts Maaori⁵ and Maaori have poorer health measures than non-indigenous New

Zealanders. Maaori are an under-represented group in healthcare services.⁶ For example, in Counties Manukau Health (CMH), 5% of registered nurses are Maaori, yet they serve a 16% Maaori population.⁷ The incidence of inferior treatment experienced by Maaori rose from twice to three times as likely in the period between 2006 and 2011.⁸ This disparity in care for indigenous populations is not isolated to New Zealand, with other countries such as Canada reporting similar challenges.⁹

This type of experience exacerbates unmet health needs in our indigenous community. Because of this disparity, CMH have partnered with MIT and other community stakeholders to develop and deliver this Maaori-specific nursing programme and address Maaori health inequities.

Because MIT is in the Tainui region of Maaori people, it is fitting that the programme has been designed and developed on the basis of the values of a Waikato Tainui Maaori woman, Princess Te Puea, who was born in 1883. Princess Te Puea's legacy is of absolute dedication to the leadership of her people. She ceaselessly worked to improve their wellbeing and reduce the impact of colonisation by encouraging Maaori to take the best from all cultures and remember who they are.³

Four principles from Princess Te Puea inspire the programme's approach:

1. Kia Tupu: to grow and develop.
2. Kia Hua: to flourish and prosper.
3. Kia Puawai: to nourish and sustain.
4. Kia Tau Te Rangimarie: to gain transparency through equality.

Incorporating these principles and values in the programme resulted in a nursing degree that is fundamentally different from all other nursing programmes in Aotearoa

New Zealand. The academic rigour of this nursing degree is set in a Maaori pedagogical framework—inclusive of key Maaori values and learning experiences specific to the Waikato Tainui people and Princess Te Puea. Marae-based teaching is critical to the programme. Clinical placements for the taura focus on health priorities for Maaori and, where practical, are with Maaori health providers.

The philosophy and principles of Princess Te Puea provide the framework for making sense of life and learning within course delivery. For example, if anti-Pakehaa discussions arise, kaiako (lecturers) are able to discuss the Te Puea Herangi quote: “I am not anti-Pākehā, I am pro Māori,” and the context of this statement and how Princess Te Puea was focused on maximising support for her people to make them a “self-reliant people.” She was very clear that the future had to include Paakehaa and that meant Maaori had to “strengthen their roots so they could cope and not stop being Maaori.”³ Therefore the role of Te Tohu Paetahi Tikanga Rangatira aa-Tapuhi is to grow Maaori and non-Maaori taura within the programme to be strong in who they are and how to work together as Tikanga Rangatira aa-Tapuhi registered nurses and reduce the health inequities experienced by Maaori.

Through their example and leadership, Maaori cannot be “framed as being to blame for their own inferior health outcomes compared to Pākehā.”¹ Rather, the colleagues our graduates work beside as nurses will see an example of the difference they can make through the moemoea (vision).

A research project is currently being finalised that will run alongside the programme delivery, provide data about the engagement of taura with their educational programme and make recommendations for addressing disparities across, education, health, healthcare and more. It is expected that the results will affirm and inform the intrinsic value of an approach that is fundamentally different to any other in Aotearoa New Zealand. This is not just a Maaori-based programme, but rather a programme where our courses are all tied to a woven theme within Waikato Tainui around wellness and strength-based approaches to health and wellbeing.

It is this kaupapa whaanau approach that enables another Princess Te Puea whakatauki, “Mehemea ka moemoeā ahau, ko ahau anake. Mehemea ka moemoeā tātou, ka taea e tatou,” to be realised. Specifically, “If I am to dream I dream alone. If we all dream together then we shall achieve.”³

Competing interests:

Sandra McDonald declares strategic working relationships with Counties Manukau Health in the development of Te Tohu Paetahi Tikanga Rangatira aa-Tapuhi—Bachelor Nursing Maaori, and with Waikato Tainui Kingitanga in supporting the kaupapa.

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REFERENCES

- Selak, V., Rahiri, J., Jackson, R. & Harwood, M. Acknowledging and acting on racism in the health sector in Aotearoa New Zealand. NZMJ 2020.
- Barton, P. The elephant in the room – nursing and Maori health disparities. Kai Tiaki 2018
- King, M. Te Puea: A life (4th ed). Reed 2003
- Palmer, S. C., Gray, H., Huria, T., Lacey, C., Beckert, L., & Pitama, S. G. Reported Māori consumer experiences of health systems and programs in qualitative research: a systematic review with meta-synthesis. International Journal for Equity in Health, 2019.

- <https://doi.org/10.1186/s12939-019-1057-4>
5. Reid, J., Taylor-Moore, K., & Varona, G. Towards a social-structural model for understanding current disparities in Maori health and well-being. *Journal of Loss & Trauma*, 2014. <https://doi.org/10.1080/15325024.2013.809295>
 6. Sewell, J. Profiling the Māori health workforce 2017. Te Rau Matatini 2017. https://terauora.com/wp-content/uploads/2019/05/Profiling-of-the-Ma%CC%84ori-Health-Workforce-2017_Te-Rau-Matatini.pdf
 7. Counties Manukau Health. Māori health plan 2017/2018. <https://www.countiesmanukau.health.nz/assets/About-CMH/Reports-and-planning/Maori-and-pacific-health/d753decdd8/2017-0711-2017-18-CMHealth-Maori-Health-Plan-FINAL.pdf>
 8. Ministry of Health. Wai 2575 Māori health trends report. 2019. <https://www.health.govt.nz/system/files/documents/publications/wai-2575-maori-health-trends-report-04mar2020.pdf>
 9. Kitching, G.T., Firestone, M., Schei, B., Wolfe, S. et.al. Unmet health needs and discrimination by healthcare providers among an Indigenous population in Toronto, Canada. *Canadian Journal of Public Health* 2020. <https://doi.org/10.17269/s41997-019-00242-z>