

EVIDENCE CENTRE
TE POKAPŪ TAUNAKITANGA

MĀORI CENTRED SOCIAL WORK PRACTICE

Evidence Brief

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EVIDENCE CENTRE

TE POKAPŪ TAUNAKITANGA

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The Oranga Tamariki Evidence Centre works to build the evidence base that helps us better understand wellbeing and what works to improve outcomes for New Zealand's children, young people and their whānau.

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EXECUTIVE SUMMARY

Evidence Brief focus

Oranga Tamariki leadership, through its Professional Practice Group (PPG), has committed to move frontline social work practice to a Māori centred¹ approach, using a mana-enhancing practice paradigm.

This evidence brief looks at the following research questions:

A Māori centred approach

- How does Māori centred theory and practice fit with other approaches?
- What are the origins of a Māori centred approach and how has it further developed?
- What are the core components of a Māori centred approach?
- What are the origins of mana-enhancing practice and how has it further developed?
- What are the defining characteristics of mana-enhancing practice and who is it relevant for?
- How is mana-enhancing practice being implemented?
- What enablers support a shift from a Western to a Māori centred position?

Approaches to assessment

- What are the characteristics of international Indigenous assessment approaches in statutory and non-statutory child and family welfare systems?
- What are the characteristics of Tangata Whenua assessment approaches?
- What aspects of Western assessment 'work' for Indigenous/Tangata Whenua populations?
- How are indigenous/Tangata Whenua/bicultural assessment approaches applied and sustained?
- What are the key components of quality assessment for Indigenous populations?

¹ For the purposes of this document the term Māori-centred is used unhyphenated in accordance with the common usage of Oranga Tamariki.

Key findings

Māori centred approach

A Māori centred approach facilitates working with, and for Tangata Whenua in a way that resonates with Te Ao Māori from within a Crown context

A Māori centred approach is consistent with Te Tiriti obligations, statutory functions, mana tamaiti objectives and values, and the outcomes Oranga Tamariki seeks for tamariki and whānau Māori. A Māori centred approach sits between the Ministry's current mainstream approach and one that is Kaupapa Māori. The current mainstream approach is largely informed by Western theories and practices which have been challenged in recent decades, both nationally and globally. Worldwide, Indigenous theories and practices are increasingly influencing the social work profession.

A Māori centred approach has evolved that draws on Māori concepts and promotes Māori values

A Māori centred approach was first explicitly described in the mid-1990s in relation to research, and health and social services design and delivery. The approach puts Māori at the centre of activity and involves Māori at every stage, though it is generally carried out under the control of mainstream organisations. It is strongly imbued with Māori values and aims to enhance Māori wellbeing.

Core components include:

- an overarching philosophical foundation grounded in Te Ao Māori concepts of wellbeing and care
- recognition of the rights and obligations Māori possess as a Te Tiriti o Waitangi partner
- understanding that Māori centred approaches occur in a relational space between Māori and Tauīwi (non-Māori)
- recognition that the locus of control resides, for the most part, within the mainstream system and not with Māori.

Mana-enhancing practice

Mana is the force that binds together the human (he tangata), natural (te ao turoa) and ideological (wairuatanga) dimensions of a Māori worldview. It is central to understanding and enhancing the wellbeing of mokopuna and their whānau. Mana-enhancing social work practice has been explicitly developed by a growing number of Tangata Whenua social workers since the early 2000s.

Key principles of mana-enhancing practice include:

- valuing Te Ao Māori, concepts of wellbeing and cultural identity
- understanding the historical relationships embedded in Te Tiriti o Waitangi
- relationships defined by authenticity, respect, integrity and dignity
- emphasising the roles of whakapapa and cultural narrative in healing processes
- reaffirming and supporting whānau self-determination.

Mana-enhancing practice is relevant for all social workers, and those who design and monitor services

It is critical that the principles of mana-enhancing practice are understood and actioned by all those whose work impacts on frontline social work. The origins of mana-enhancing practice in a Te Ao Māori worldview position it well for Tangata Whenua social workers working with Māori. The approach has relevance for Tauwiwi as well, as its underlying concepts and values promote the enhanced wellbeing of all peoples.

Implementing mana-enhancing practice includes mutual respect and commitment to caring for each other's mana

A rich tapestry of Tangata Whenua practice stories informs a shift from 'imagining' mana-enhancing practice to 'doing' it. Mana-enhancing and related terms convey expectations around how practitioners and services will work with individuals and their whānau. The competent use of Te Reo Māori and of Māori practices and protocols supports a mana-enhancing approach, as does appreciation of keeping the mana of whānau intact. Whānau Ora practice is consistent with mana-enhancing practice, as it is instilled with Māori values and a Māori worldview.

Shifting to a Māori centred approach and mana-enhancing practice will require systems change

A successful shift from the current Western/mainstream approach to a Māori centred approach will require the coordinated implementation of comprehensive, multi-faceted enablers across the four dimensions of systems, practice, workforce development and social work practice supervision.

Approaches to assessment

Internationally, Indigenous peoples, including Tangata Whenua, have identified Western assessment approaches consistently fail to meet their needs

Indigenous peoples advocate for the development of Indigenously-led assessment processes or development of assessment processes undertaken in partnerships with child protection services; prioritising culturally appropriate relationship building in assessment; and culturally competent assessment, within culturally secure environments.

Assessment with Tangata Whenua requires time to build trusting relationships

Establishing rapport and culturally relevant relationships takes time, and needs investment from the outset. Te Ao Māori principles underpin and drive the assessment process. While frameworks provide guidance, application on a day-to-day level in specific practice settings needs to be made explicit. Success requires the meaningful involvement of whānau, having supportive organisational policies, and providing culturally responsive environments. To work effectively with Māori, basic knowledge and skills in Whānau Ora philosophy and whānau-centred practice are invaluable.

Tangata Whenua social workers are equipped to practice Biculturally, but few Tauwiwi social workers are

That lack of Bicultural competence in Tauwiwi social workers negatively impacts the wellbeing of Tangata Whenua. The place for Tangata Whenua, as an equal Tiriti partner with Tauwiwi, needs to be assured if Bicultural approaches are to further develop. Despite Biculturalism being recognised as a

general principle of governance, there is only emergent evidence of Biculturalism in policy and practice. There is arguably traction being gained in the development of Bicultural practice competencies among Tauwiwi social workers.

Sustaining Tangata Whenua assessment approaches requires supporting Tangata Whenua social workers to further develop their cultural knowledge

A significant increase in awareness and knowledge of Tangata Whenua theories, how they inform practice and how they benefit Māori clients is necessary. At funding, planning, design and delivery levels a commitment to a Bicultural approach needs to be in evidence. Bicultural capability development among Tauwiwi is an organisational responsibility, not the responsibility of individual Tangata Whenua social workers.

Key components of a quality collaborative assessment model for Tangata Whenua

- embedding mātauranga Māori (Māori knowledge) and tikanga (processes and settings that are culturally appropriate)
- meaningful whānau involvement in co-constructing 'the story'
- appreciation of a wider whānau context
- knowledge of Whānau Ora philosophy and whānau-centred best practice
- recognising diverse Māori realities and identities
- recognising it is Tangata Whenua themselves who define how they see themselves as Māori.

Implications for Oranga Tamariki

The Evidence Brief findings highlight potential implications for Oranga Tamariki–Ministry for Children which are summarised below for consideration.

Further clarify and critically appraise enablers, and prioritise and coordinate their implementation, to support the shift to a Māori centred mana-enhancing practice paradigm. This will likely, at a minimum, demand the leadership of a Tangata Whenua/Tauwiwi partnership team that includes robust social work practice representation; agreed processes for decision-making; and a strategy for ensuring the meaningful input of staff, in particular social workers.

Critically review existing assessment process/es and tool/s. This review should, at a minimum, include the meaningful input of tamariki, whānau, hapū and iwi; social services agencies, and in particular, social workers across sectors; and Ministry social workers.

Develop enhanced assessment processes and tools with Tangata Whenua to meet the needs of tamariki, whānau, hapū and iwi. Social services agencies, including Whānau Ora service providers, will have additional extensive knowledge, experience and unpublished practice materials that can usefully contribute to this assessment development and piloting work. Oranga Tamariki Tangata Whenua and Bicultural social workers have a key role to play as their knowledge and experience 'at the coalface' can also usefully inform development.

Identify and address, on an ongoing basis, the internal opportunities for, and challenges to, implementing assessment practices that better meet the needs of tamariki, whānau, hapū and iwi. Such opportunities could be identified through, for example, hui, online surveys and small group

interviews with social workers. Addressing opportunities and challenges will likewise require the meaningful participation of Oranga Tamariki social workers in planning, implementation and review.

MAŌRI CENTRED SOCIAL WORK

Background

When the positions, “tā te Māori Whakaaro” (Māori thinking), “tā te Māori titiro”, (Māori views), “tā te Māori tū” (the Māori stance) and “tā te Māori mahi” (Māori applications) are stated and heard they are powerful space claimers (Pohatu, 2005, p.243).

The focus of this evidence brief is Māori centred and mana-enhancing social work practice that preferences Te Ao Māori, Indigenous and Bicultural worldviews, specifically in relation to approaches to assessment. The purpose of the brief is to support the commitment of Oranga Tamariki leadership, through the Professional Practice Group (PPG), to move frontline social work practice to a Māori centred paradigm.

Oranga Tamariki has identified that a mana-enhancing paradigm for practice will be the key driver for the development of systems, policy, practices, and services that will support the organisation to shift from a predominantly Eurocentric/Western position to a Māori centred position. A mana-enhancing paradigm for practice is aligned with Oranga Tamariki core values, priorities, and section 7AA obligations to uphold mana tamaiti, whakapapa and whanaungatanga.

The evidence brief explores the concepts of Māori centred and mana-enhancing practice in the statutory social work context of Aotearoa New Zealand. It includes an examination of the literature to identify and clarify the relationship between these concepts. The brief begins by describing and defining the parameters of a Māori centred social work position. The requirements for achieving a Māori centred social work position, and what is necessary to ensure its sustainability are also considered.

Method

The development of the evidence brief is described in this section of the report, including the search sources and search terms used.

Search tools

Between 22 April 2020 and 07 May 2020, the following academic databases were searched for relevant peer-reviewed journal papers:

- ASSIA (Applied Social Sciences Index and Abstracts)
- ProQuest
- PubMed
- Scopus

During the same period, the following websites/databases were concurrently searched for relevant peer reviewed material and for grey literature²:

- <https://natlib-primo.hosted.exlibrisgroup.com/primo-explore/search?query>
- <http://www.maramatanga.co.nz/>
- <https://nzresearch.org.nz/>
- <https://www.waipareira.com/our-resources/te-Whānau-o-waipareira/>
- <https://swrb.govt.nz/wp->
- https://ir.canterbury.ac.nz/bitstream/handle/10092/13658/Social%20Work%20Pertaining%20to%20Maori%20in%20New%20Zealand_2017.pdf?sequence=3&isAllowed=y
- www.tpk.govt.nz
- <https://nzvfc.org.nz>
- <https://anzasw.nz/aotearoa-new-zealand-social-work-review-te-komako-tu-mau/>

The grey literature was further searched using Google Scholar. Finally, we were provided with a list of reference material compiled by Drs Leland Ruwhiu and Moana Eruera in 2014 as a starting point for the development of the evidence brief. Titles included in this list of reference material were scanned and a number of sources were retained for further investigation in the course of developing the evidence brief. Other relevant material was additionally independently identified from our own previous and current work.

Search terms

Search terms included mana-enhancing practice, mana-enhancing social work (youth work, counselling, psychology, mental health) practice, Māori centred practice, Māori centred social work (youth work, counselling, psychology, mental health) practice, indigenous social work (youth work, counselling, psychology, mental health) practice, social work (youth work, counselling, psychology, mental health) assessment models/approaches, Indigenous assessment models/ approaches, Māori centred assessment models/approaches, Tangata Whenua assessment models/approaches Whānau Ora models/- approaches, bicultural social work assessment models/approaches /frameworks. These terms were used, both individually and in various combinations, to identify relevant literature.

A rapid search was also carried out using the terms First Nations/First Peoples/Aboriginal/Native social work assessment models/approaches/frameworks. It is noted that the *Evidence Brief: Assessment Models, Methodologies and Approaches* prepared for Oranga Tamariki earlier this year (Allen + Clarke, 2020) does include at least some consideration of the literature in these latter categories.

² Grey literature is generally understood to be electronic and print material published non-commercially by, for example, government agencies, academics, industry, and social services agencies. Often grey literature has not been peer reviewed but nevertheless provides reliable and useful information.

Selection and review of material

Both the documents returned from the search, and additional material sourced as described above, were initially refined on the basis of their relevance to the key areas of interest. Assessment of relevance occurred through the review of article titles and abstracts with a considerable number being deleted following this review. Further refinement of the remaining list of sources was carried out iteratively by reviewing abstracts and deleting those of less relevance along with almost all of those published prior to 1999. Other criteria for exclusion included if more recent writing from the same author/s on the same, or similar, topics was available. Articles were either deleted outright or retained and included in one of a number of groups ranked in order of priority interest.

Finally, to further reduce sources to a manageable level only those in the most highly ranked groups were scan read. Following scan reading, a total of 119 sources were retained for inclusion in a priority list submitted to Oranga Tamariki for feedback. The Ministry added no additional sources to the priority list, though we were provided with a background paper, *The Development of the Mana-enhancing Paradigm for Practice*, to further inform the development of the evidence brief.

In the course of preparing the brief, 19 sources were excluded from the priority list of 119 primarily because, following more in-depth reading, their relevance was considered less compelling. A further 20 sources were however, added as the review took shape, resulting in a total of 120 sources being used in the draft evidence brief. Following an Oranga Tamariki review of the draft, a further three sources were included in the final version.

Limitations

The broad literature base referenced in this evidence brief was determined in consultation with the commissioner. The sources incorporated in the brief are reasonably extensive and were largely compiled by Whakauae Research for Māori Health and Development team members familiar with the Kaupapa Māori health research literature and, to a more limited extent, with the Aotearoa New Zealand social work theory and practice literature. Although it is unlikely that literature of critical relevance to the development of the brief has been omitted, it is possible that this may have occurred through oversight and therefore should be considered a possible limitation. Additionally, the evidence brief was developed over a relatively brief timeframe, which may have potentially limited the scope of the sources included.

PRACTICE APPROACHES

Shifting practice positions – What and why?

Oranga Tamariki is seeking to make a significant shift in how its statutory care and protection services are delivered. Currently, services are delivered primarily through a mainstream practice approach inclusive of Māori centred elements. The goal is to move to a Māori centred position using a mana-enhancing paradigm for practice to lead the shift. The position is partner focused, with the partners in this context being the partners to the Treaty of Waitangi. A Māori centred position, using a mana-enhancing paradigm for practice, is currently being scoped by the Ministry. That position is considered to be the best overall fit with the organisation's Te Tiriti obligations, statutory functions and obligations, mana tamaiti objectives and values, and the outcomes it seeks for tamariki and whānau Māori (Oranga Tamariki Ministry for Children, 2020). The Ministry's Practice Programme has been identified as the vehicle to drive the practice shift.

The range of practice positions

A draft diagram developed by the Ministry (refer Figure 1 below) illustrates a continuum of practice approaches for working with Māori. The continuum captures both where the Crown agency's practice is currently concentrated and where its aspirations for future practice lie. A mainstream approach to practice is located at one end of the continuum with a Kaupapa Māori approach being located at the other.

CONTINUUM OF PRACTICE APPROACHES FOR WORKING WITH MĀORI

DRAFT FOR DISCUSSION

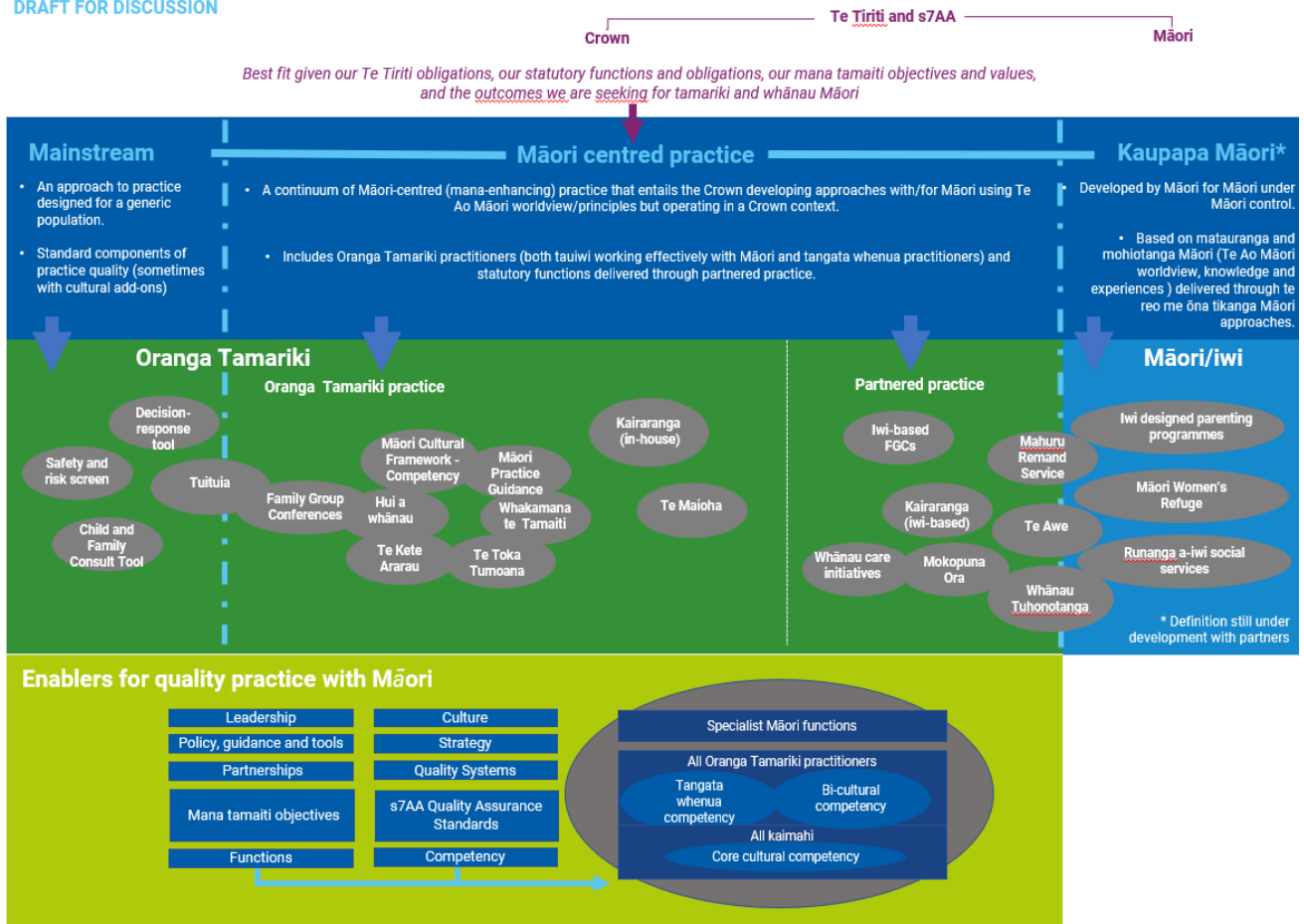


Figure 1: Continuum of Practice Approaches for working with Māori

The broad mid-range of the continuum features a graded Māori centred approach to practice; in effect a continuum in itself. In closer proximity to the mainstream end of the continuum, the Māori centred practice approach features the Crown working with, and for, Māori to develop interventions that resonate with Te Ao Māori principles and worldview located within a Crown context. In closer proximity to the Kaupapa Māori end of the continuum, the Māori centred practice approach sees Ministry social work practitioners and statutory functions delivered through working in partnerships with Iwi and other Māori providers.

Before shifting the lens of the evidence brief to a Māori centred and mana-enhancing approach to practice, the broad nature of both Kaupapa Māori and mainstream approaches are outlined.

Kaupapa Māori practice position

The origins and development of Te Ao Māori driven Kaupapa Māori Theory can be traced to the seminal work of Graeme Hingangaroa Smith (1990) and Linda Tuhiwai Smith (1997). Both identified key elements of Kaupapa Māori theory primarily in the education setting (Dobbs, 2015). Eketone (2008) notes that this early work emphasises a strong alignment between Kaupapa Māori Theory and Critical Theory with both having at their core the understanding that the social world is divided into conflicting groups made up of the powerful and the powerless. Whereas Critical Theory primarily sees

the divide as being based around notions of economic, cultural and social domination, Kaupapa Māori Theory instead considers the socially constructed divide between Tangata Whenua and Tauīwi.

Kaupapa Māori has continued to develop subsequent to the early work identified by Dobbs (2015). Alternative understandings of Kaupapa Māori theory have also emerged, such as that advanced by Eketone (2008) who proposes a reconsideration of any primary alignment between Kaupapa Māori Theory and Critical Theory. Kerr (2012) suggests, following her review of the work of a range of theorists, that five broad principles of Kaupapa Māori Theory can be identified. These five principles are: control – Māori control/ownership; challenge - the analysis and mediation of power relationships; culture – Māori as normative including the survival and revival of Māori language and culture; connection - relationship-based knowledge sharing and generation; and change - transformative for Māori.

The substantial development that has occurred since the early 1990s includes Kaupapa Māori Theory being used to guide research and to inform practice in fields including social work (Hollis-English, 2015). A key tenet of a Kaupapa Māori approach to practice is a commitment to a 'by Māori, with Māori, for Māori' position which 'affirms the right of Māori to be Māori' (Pihama, Cram & Walker as cited in Moyle, 2014a, p.30).

Mainstream practice position

A mainstream, Western or Eurocentric approach to practice has its roots in British and American traditions and is therefore informed primarily by Western theories and models. That approach is prevalent in colonised settler societies including Canada (Blackstock as cited in Choate and Lindstrom, 2016), Australia and Aotearoa New Zealand wherein, over time, attempts have been made to adapt it to Indigenous situations. In the context of this country, social work practice is strongly influenced by the dominant Pākehā³ cultural milieu (Boulton, Cvitanovic & Cropp, 2018). Pohatu (2003) observes that despite being constrained by mainstream social work approaches:

Māori social work practitioners are constantly faced with questions like; 'what place do Māori cultural templates have in guiding my practice?' and 'how safe are these cultural templates in my workplace?' The recurrence of such questions suggests that cultural integrity, constantly strives to be acknowledged, in the framing of social work practice and theory in Aotearoa (p.1).

Munford and Sanders (2011) observe that over the past three decades, mainstream social work policy and practice here have increasingly come to recognise the critical role of a diversity of world views in enhancing the development and delivery of social services to better meet the needs of service users. Since the early 2000s more mainstream social work agencies, they assert, 'have begun to explore the ways in which they can incorporate Māori cultural worldviews into their work' (Munford & Sanders, 2011, p74).

³ Pākehā is used here to mean New Zealanders of Western European, and primarily British, descent.

Summary – Practice positions

- Oranga Tamariki is moving to a Māori centred position using a mana-enhancing paradigm for practice to lead the shift.
- A Māori centred position is consistent with the organisation's Te Tiriti obligations, statutory functions and obligations, mana tamaiti objectives and values, and the outcomes it seeks for tamariki and whānau Māori.
- A Māori centred position sits between the organisation's current mainstream position and a Kaupapa Māori position. It facilitates working with, and for, Māori to develop interventions that resonate with Te Ao Māori from within a Crown context.
- Kaupapa Māori is a 'by Māori, with Māori, for Māori' position which 'affirms the right of Māori to be Māori' (Pihama, Cram & Walker as cited in Moyle, 2014a, p.30).
- Kaupapa Māori principles include Māori control/ownership; analysis and mediation of power relationships; Māori as normative; relationship-based knowledge; and transformation for Māori (Kerr, 2012).
- A mainstream position is largely informed by Western theories and practices.
- In recent decades, the mainstream position has been challenged and is now beginning to move towards better addressing the needs of Tangata Whenua service users and accommodating a diversity of worldviews.

MĀORI CENTRED MANA-ENHANCING APPROACH

Indigenous social work approaches

Māori social work practice approaches have gained significant traction in Aotearoa New Zealand in recent decades. The wider social context within which that traction has occurred provides a background to the in-depth discussion of a Māori centred and mana-enhancing approach to practice. Māori social work practice models, including supervision models (see for example, Eruera, 2012; King, 2014; Lipsham, 2012; Murray, 2012; Te Moananui-Makirere et al., 2014), have developed within the context of a broader cultural shift, or Māori renaissance (Hollis, 2006; Walker & Eketone as cited in Dobbs, 2015). That broader cultural shift began in the late 1970s and has since continued to gain momentum.

There is wide agreement that, on a global level, a similar groundswell of social change driven by Indigenous peoples is taking shape, influencing developments in the social services practice and policy arenas (Parker et al., 2017). Ruwhiu and Eruera (as cited in Dobbs, 2015, p.19) observe 'Indigenous people continue to culturally invigorate the development and delivery of social work globally both in practice and theory'. Munford and Sanders (2011) concur observing 'indigenous voices and visions are increasingly shaping the way that practice develops' (p.64) in mainstream settings, including in Aotearoa New Zealand. Wallace (2018) adds 'our Indigenous models of supervision practice are recognised as ground-breaking and Aotearoa is acknowledged as demonstrating global leadership in this specialist area' (p.78). Critically, the influence of Indigenous knowledges and practices on the evolving profession of social work is reflected in the contemporary definition of international social work. That definition acknowledges the significance of both Indigenous and Western scientific knowledges in the profession and practice of social work (Mafile'o, 2015).

Summary – Indigenous social work approaches

- Indigenous models of social work practice, including Māori models, have gained significant traction in recent decades.
- Indigenous models are increasingly influencing the social work profession, theory and practice both in Aotearoa New Zealand and globally.

The contribution of *Pūao-te-Ata-tū*

Pūao-te-Ata-tū, the report of the Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare (1988), was a significant contributor to a paradigm shift away from a dominant Eurocentric worldview. Prior to Indigenous approaches gaining momentum, and indeed since the colonisation of Aotearoa New Zealand, social work practice discourses have been shaped by a Western worldview (Munford & Sanders, 2011; King, 2014; Murray, 2017).

The ministerial review was instigated in the wake of allegations of racist Department of Social Welfare (DSW) practices made by a group of DSW employees, along with a disturbingly high and disproportionate number of tamariki Māori in state care (Keddell & Hyslop, 2019). The Advisory Committee, chaired by the highly regarded Tūhoe kaumātua John Rangihau, set out to examine the provision of State care and protection services for Māori. To identify a Māori perspective on the DSW more generally, the Advisory Committee travelled throughout the country and met with thousands of people at marae, in public halls and in workplaces to hear oral submissions. Many written submissions were additionally lodged, including by DSW staff, Māori Wardens Associations, and branches of the Māori Women's Welfare League.

In its report to the Minister of Social Welfare, the Advisory Committee observed 'like a litany of sound – Ngeri – recited with the fury of a tempest on every marae and from marae to marae came the cries' (Ministerial Advisory Committee, 1988, p.21) as Tangata Whenua shared with the Committee their extensive experience of socially unjust State welfare agency policies and practices. Ostensibly focused on State care and protection, the relevance of *Pūao-te-Ata-tū* was significantly broader as submitters '... invariably brought out equally grave concerns about the operations of other Government departments, particularly those working in the social area' (1988: p.7-8).

Pūao-te-Ata-tū offered an in-depth analysis of the historical, legislative, and cultural factors negatively impacting Māori. The report identified and decried the institutional racism endemic across the country and within its public services. It called for urgent changes to be made to State care and protection legislation, policy, and practices (Hollis-English, 2012) as well as more widely across government at all levels (Department of Social Welfare, 1988). The Committee clearly articulated 'our problems of [Western] cultural imperialism, [and Māori] deprivation and alienation mean that we cannot afford to wait longer. The problem is with us here and now' (Ministerial Advisory Committee, 1988, p.8). Regardless, it has been consistently argued that little has been achieved in the intervening period with respect to addressing what were considered issues of crisis proportions in the late 1980s and which today continue unabated (Reid et al., 2019; Whānau Ora Commissioning Agency, 2020).

Influence of *Pūao-te-Ata-Tū* on social work approaches

An enduring influence of *Pūao-te-Ata-Tū* on Māori approaches to social work has been identified. Hollis (2006), for example, observes that that influence was apparent 'firstly through the employment of Māori social workers but more importantly through recommending the acceptance of Māori methods of practice within the workplace' (p.94). It was 'the first official government document that acknowledged Māori social work methods and recommended their use' (p.1). *Pūao-te-Ata-Tū* has been described as 'the founding document of Māori social work in Aotearoa, second only to Te Tiriti o Waitangi (1840) in its significance for Māori social workers' (Hollis-English, 2012, p.41).

Despite the influence of *Pūao-Te-Ata-Tu* on the adoption and ongoing development of Māori social work models, Webber-Dreadon (1999) asserts that a decade after publication, little had changed in the former DSW. Whilst it may have been expected that personnel would have become 'more culturally aware ... this is not necessarily reflected in the action or practice ... 'colonisational monoculturalism' continues to quietly reign within the Child Youth and Family Service' (Webber-Dreadon, 1999, p.7-11).

Even the Children, Young Person's, and their Families Act 1989, introduced in the wake of *Pūao-Te-Ata-Tu* to support more collective and preventative solutions to child protection, 'was variable in its

implementation and notoriously underfunded' (Hyslop as cited in Keddell, 2017, p.414). Though the proportion of tamariki Māori in foster care did lessen in the years immediately after the Act was introduced, that proportion has since again risen from 49.5% in 2011 to 61.6% in 2017. During the same period, the proportion of tamariki in the total child population of Aotearoa New Zealand remained consistent at 25% (Keddell & Hyslop, 2019, p.411).

Summary - *Pūao-te-Ata-Tū* and social work practice

- The findings of *Pūao-te-Ata-Tū*, which highlighted the impact of racism in this country, have been a significant catalyst for beginning a social work paradigm shift away from a dominant Western model.
- The enduring influence of *Pūao-te-Ata-Tū* on the development of Māori social work models is well recognised.
- The Children, Young Person's, and their Families Act 1989, introduced in the wake of *Pūao-te-Ata-Tū* to support more collective and preventative solutions to child protection, has been judged a success by few.
- Many of the crisis level issues *Pūao-te-Ata-Tū* identified continue to go unresolved.

Origins and development of a Māori centred approach

A Māori centred approach sits within the mid-range of the continuum of practice model developed by Oranga Tamariki (refer Figure 1 above) bookended by Kaupapa Māori and mainstream approaches. The origins and subsequent development of the Māori centred approach is outlined below. Core components of a Māori centred mana-enhancing approach are also identified and discussed. The evidence brief will initially consider the Māori centred element and the mana-enhancing element of the overarching approach in isolation. That separation, however, is artificial and for discussion purposes only.

The recommendations for change made by the Ministerial Committee are consistent with a Māori centred approach. Indeed, the first recommendation included in *Pūao-te-Ata-Tū* concerns guiding principles and objectives to ensure Māori worldviews are included at the centre of Crown social wellbeing policy decision making. The recommendation is reproduced below to emphasise this point:

We recommend that the following social policy objective be endorsed by the Government for the development of Social Welfare policy in New Zealand:

Objective – To attack all forms of cultural racism in New Zealand that result in the values and lifestyle of the dominant group being regarded as superior to those of other groups, especially Māori, by:

- (a) Providing leadership and programmes which help develop a society in which the values of all groups **are of central importance** (*our emphasis*) to its enhancement; and,
- (b) Incorporating the values, cultures, and beliefs of the Māori people in all policies developed for the future of New Zealand (Ministerial Advisory Committee on a Māori perspective for the Department of Social Welfare, 1988, p.9).

In line with the advocacy of *Pūao-te-Ata-Tū*, a Māori centred approach draws on Māori concepts and promotes Māori values. The purpose of so doing is to facilitate engagement with Māori and support

improved whānau wellbeing. At a practice level, keeping Māori clients as the central focus of practice is integral to successfully working with Māori (Barton & Wilson, 2008).

A Māori centred approach to research

A Māori centred approach was explicitly articulated in the mid-1990s, specifically in relation to the conduct of research, initially by Durie and later in the same decade by Cunningham (as cited in Boulton, 2005; Moyle, 2014a). Boulton (2005) further identifies that Durie places emphasis on Māori people and Māori experience being at the centre of research activity. Māori centred research, Cunningham (as cited in Moyle, 2014a) contends is research that involves Māori at every stage and may incorporate both Māori and non-Māori research methods.

In contrast to Kaupapa Māori research, which is typically carried out by an all-Māori research team, under the control of a Māori organisation and according to standards determined by Māori, Māori centred research is generally carried out under the control of, and to standards determined by, mainstream organisations (Cunningham as cited in Herbert, 2001). The locus of control in Māori centred research does not therefore sit within the Māori community, as the case would be with Kaupapa Māori research (Boulton, 2005). In reflecting on the difference between a Māori centred approach to research and a Kaupapa Māori approach, with reference to a Treaty of Waitangi framework, Herbert (2001, p.18) proposes 'Kaupapa Māori research parameters would be compatible with Article II sovereignty assertions, and Māori centred research with Article III citizenship and equity claims'.

The defining characteristics of Māori centred research are further defined by Cunningham (2000) as including the collection of Māori data, the application of Māori data analysis and the consequent production of Māori knowledge. Māori centred research is therefore strongly imbued with Māori values with the aim of the research being to enhance Māori wellbeing. The scope of Māori centred research is further clarified by Selby (as cited in Ruwhiu, 1999) who contends 'Māori philosophies, theories, experiences, values, beliefs and methods are the pivotal vortex of any research inquiry about Māori culture' (p.48).

A Māori centred approach to service design and delivery

An approach to health and social services delivery described as 'Māori centred' was also explicitly articulated in the 1990s. Durie (1999), for example, identified that a Māori centred approach was critical to improving Māori mental health. He observed that few Māori centred programmes were in place prior to the health reforms of 1993, after which a number were introduced. Even so, the evolution of Māori centred programmes, as the decade progressed was '... slow and there remains a need to realign services' (Durie, 1999, p.10).

The development of Māori centred theory, Hollis-English (2015) explains, grew out of Durie's philosophical position that the future evolution of Māori knowledge would need to accommodate the diversity of contemporary Māori lives and worldviews. Durie argues that the Māori centred approach to service design and delivery requires that Māori be the significant players in the design and delivery processes within mainstream settings. Mainstream settings in turn retain overarching control of these processes. Invariably too, elements of mainstream methods and approaches are retained in service delivery (Hollis-English, 2015).

The work of Durie, with respect to Māori centred theory, is considered by Hollis-English (2015) to have been influential in the development of Māori social work theory and practice. In her view, Māori centred theory and practice describes 'Māori social work that takes place by Māori, with Māori whānau within a mainstream organisation (or arguably with mainstream control, such as the New Zealand Government)' (p.8).

Adding weight to the value of a Māori centred approach, Cram (2019) contends that a better understanding of the wellbeing of tamariki, as individuals and as part of whānau and wider communities, will be made possible through the development of relevant national level Māori centred indicators that measure wellbeing. The draft tamariki wellbeing framework proposed by Cram (2019) is underpinned by the Māori centred approach and the principles of measuring Māori wellbeing developed by Tā Mason Durie.

Summary – Origins of a Māori centred approach

- *Puao-Te-Ata-Tu's* recommendations for change are consistent with a Māori centred approach. In line with *Puao-Te-Ata-Tu*, the approach draws on Māori concepts and promotes Māori values.
- A Māori centred approach was first explicitly articulated in the mid-1990s in relation to research. Māori centred research puts Māori at the centre of research activity and involves Māori at every stage.
- Māori centred research is generally carried out under the control of, and to standards determined by, mainstream organisations. It is however, strongly imbued with Māori values and aims to enhance Māori wellbeing.
- Health and social services design and delivery described as 'Māori centred' was explicitly articulated later in the 1990s. A Māori centred approach requires that Māori be the significant players in design and delivery processes within mainstream settings.

Core components of a Māori centred approach

Puao-Te-Ata-Tu draws attention to the interplay between policy and practice, identifying the need to de-construct Eurocentric social policy in order to ensure social services design and delivery that serves the interests of Māori. Māori centred social policy provides a foil for successful Māori centred practice in the statutory social services arena. Amendments to the Oranga Tamariki Act 1989, that came into effect in July 2019, have paved the way to develop the necessary Bicultural policies, practices and services to ensure Treaty-based obligations under section 7AA are met. This section of the Act 'represents Treaty-based provisions specific only to tamariki Māori who come to the attention of Oranga Tamariki' (Oranga Tamariki, n.d., p.2). The Māori centred orientation of section 7AA will potentially inform the development of the Māori centred policy, practice and services envisaged by *Puao-Te-Ata-Tu*.

Māori centred policy and practice fosters Māori autonomy within a relational space that acknowledges the rights and obligations of Māori as a Te Tiriti o Waitangi partner (Ruwhiu, 1999, p.437-450) with Tauīwi. It additionally fosters Māori self-determination and wellbeing, providing the opportunity for Māori to frame their own solutions drawing on Te Ao Māori. The approach incorporates the following

three sets of components: key characteristics, key principles, and aspirational goals. These three sets of components are each briefly outlined below.

Key characteristics

- (1) History: Māori wellbeing will flow from the development of Māori centred social policy that is cognisant of past and ongoing experiences of colonisation as well as of Māori aspirations for the future.
- (2) Māori conceptual frameworks: Have their roots in the values, beliefs, and concepts of earlier generations. Such frameworks were revitalised and further developed during the 1990s with huge potential for ongoing development and to inform Māori wellbeing policy and practice.
- (3) Māori methods of practice: Tikanga and kawa need to be incorporated into all levels of policy development, establishment, and implementation. That incorporation includes being Whānau centred and valuing Māori ways of being and doing, including 'dealing with different types of mana' (Ruwhiu, 1999, p.442).
- (4) Māori participation/ownership: Is about a key role for Māori in driving the development and implementation of policy that 'works' for Māori with supporting these endeavours being the responsibility of non-Māori.
- (5) Policy integration: Just as in Te Ao Māori all things are connected, so too are they in the realm of Māori social policy. The latter, to be effective, must also accommodate a response to the environmental context and the economic, political, and spiritual dimensions of reality for Māori.

Key principles

- (1) Continuity: Acknowledges and values that 'new growth comes from old'. Māori wellbeing is reflected in the cycle of change, adaptation, growth, and development.
- (2) Cultural integrity: Supports the right of Māori 'to be Māori' in the policy and practice setting.
- (3) Cultural relevance: Māori social policy needs to 'make sense for Māori people' (Ruwhiu, 1999, p446) from conceptual stages through to practical development and implementation.
- (4) Tino rangatiratanga: Māori ways of being and doing are at the heart of Māori social policy that supports Māori wellbeing. Non-Māori knowledge and wisdom sit within that.
- (5) Integration/Balance: Is about the interconnectedness of all those aspects that make up wellbeing for Māori.

Aspirational goals

- (1) Promotion of Māori wellbeing at all levels: Policy that 'works' for Māori addresses Māori wellbeing at the micro, meso and macro levels, informed by the life-giving principles of wairuatanga, whakapapa and tikanga me kawa.
- (2) Promotion of Māori identity: Belonging to, and being responsible to and for, the collective is integral to Māori identity and to attaining wellbeing.

- (3) Promotion of self-management: Means 'fostering confidence, respect and systems of accountability which recognise the 'Māori way of doing things' and emphasises the benefits of 'being Māori' (Ruwhiu, 1999, p.449).
- (4) Promotion of development: Endorses an open-minded approach to growth and prosperity; being willing to take on board global experience and wisdom.
- (5) Promotion of generosity: Is aligned with the traditional processes of whakatohatoa (distribution of wealth), manaakitanga (blessing others through service), and utu (display of reciprocity). Social policy processes need to be infused with the spirit of giving and receiving at all levels (Ruwhiu, 1999).

Key Te Ao Māori concepts and their significance, both for wellbeing and for social work best practice, are also explored by Pohatu (2008). He too asserts that Te Ao Māori has much to contribute to the conceptualising of the social work enterprise, to social work theory and to social work practice. Te Ao Māori principles, in effect, underpin the Tangata Whenua and Bicultural social work enterprises in Aotearoa New Zealand.

Insights into the core components of Māori centred practice are offered by Pohatu (2008). He considers that the components are congruent and focused on transformation. Pohatu (2008) observes that Te Ao Māori provides signposts, including enduring hoa-haere (travelling companions, mentors) to guide us through life as well as in social work practice. Takepū are one example of hoa-haere⁴ through the ongoing journey of the attainment of wellbeing. Takepū, or applied principles, can be constantly reworked, are malleable, are grounded in practice and 'are all about supporting people in their relationships, kaupapa and environments in the pursuit of mauri ora' (p.241).

Māori centred takepū identified by Pohatu (2008) and used specifically to inform the development of the social work degree programme at Te Whare Wānanga o Aotearoa in the early 2000s, are explored by Coley et al. (2019). These six takepū 'offer... a framework to guide best social work practice in Aotearoa New Zealand and ... 'best practice' internationally from a Māori knowing' (p.3). They encourage us to continue shining a light on who we are and where our accountabilities lie in our practice. The six takepū are:

- (1) Āhurutanga – Creating and maintaining quality space to ensure and promote the pursuit of best practice in any kaupapa.
- (2) Tino rangatiratanga – Constant recognition of absolute integrity of people in their kaupapa, relationships, positions, and contributions in any context.
- (3) Mauri ora – Constant acknowledgement that at the core of any kaupapa and relationship is the pursuit of well-being.

⁴ Dr Leland Ruwhiu further explains the concept of hoa-haere: The Whakatauākī by Milton Rauhihi for the Highbury Whānau Centre in Palmerston North states - 'Ūwhia te pāwhakawairua, ki te manawanui, kia haemata te tipu'. Emphasising our strength as a community in preparing our young as leaders of the future. Hoa-haere (mentors/guides) are much like pāwhakawairua who pass on the essence of our oranga/rangatiratanga to the next generation.

- (4) Te Whakakoha rangatiratanga – Recognition that successful engagement and endeavour requires conscious application of respectful relationships with kaupapa and people.
- (5) Kaitiakitanga – Constant acknowledgement that people are engaged in relationships with others, environments and kaupapa, where they undertake stewardship purpose and obligations.
- (6) Tau kumekume – Recognition that the ever-presence of tension in any kaupapa and relationship, positive or negative, offers insight and interpretation (Pohatu, 2008, p.244).

Principled practice is central to social work in the view both of Ruwhiu (1999) and of Pohatu (2008). By principled practice, they mean practice that is guided by ngā takepū, ngā whakapono and ngā pou tika, as well as by other wellbeing principles. Additionally, it is expected that social workers will build on these principles, critically analyse their practice and develop their own practice principles over time.

Thus, Pohatu (2008) highlights the possibilities the use of takepū bring with them, to constantly reflect on action and refine practice, highlight the depth of Māori knowledge and wisdom to be explored in support of attaining wellbeing. Every context and practitioner will be different; requiring us to live and breathe the takepū, fully engaging with them and what they are telling us in any given situation in terms of attitudes, behaviours, and values. Integrating the takepū across all elements of the social work programme at Te Whare Wānanga, including content, assessment and delivery approaches, has opened the door for 'a different range of conversations ... in the field of social work education in Aotearoa/New Zealand' (Pohatu, 2008, p.244).

Summary – Core components of a Māori centred approach

A set of core components of a Māori centred approach may be gleaned, drawing upon the writings of academics, practitioners and other experts in the field of Māori development and social service provision. These core components include:

- Appreciation of an overarching philosophical foundation grounded in Te Ao Māori concepts of wellbeing and care;
- Recognition of the rights and obligations Māori possess as a Te Tiriti o Waitangi partner;
- Understanding that Māori centred approaches occur in a relational space between Māori and Tauwiwi, and that this space must be negotiated between the two;
- Recognition that the locus of control resides, for the most part, within the mainstream system and not with Māori;
- Acknowledgement of Māori desires for self-determination;
- Opportunities for Māori to drive their own solutions as and where necessary;
- Practice which is situated in mainstream context but focused on Māori as the priority population;
- The use of Māori tools, models and analytical frameworks to meet and advance the needs of Māori whanau; and,
- An expectation that new, hybrid models, drawing from both mātauranga Māori and mātauranga Tauwiwi may emerge as a consequence of working with Māori whānau.

Mana-enhancing approach to practice

This section begins with a brief consideration of the concept of mana before outlining the origins and subsequent development of the mana-enhancing approach to social work practice, and practice more

broadly, that it has inspired. The core components of the mana-enhancing approach are identified and discussed. Finally, the application of the approach is considered, with reference to Māori and to others; **how** it is applied and **what** it 'looks like' in action.

The concept of mana

Te Aka, the Māori Dictionary Online, defines the concept of mana as:

prestige, authority, control, power, influence, status, spiritual power, charisma...a supernatural force in a person, place, or object. Mana goes hand in hand with tapu, one affecting the other. The more prestigious the event, person, or object, the more it is surrounded by tapu and mana. Mana is the enduring, indestructible power of the atua Since authority is a spiritual gift delegated by the atua, man remains the agent, never the source of mana.... Almost every activity has a link with the maintenance and enhancement of mana and tapu.

A common understanding of the concept of mana is evidenced in the literature. Mana is explored by Huriwai and Baker (2016) with reference to well established sources including Barlow, 1991; Shirres, 1997; Durie, 2001; Marsden, 2003; and Royal, 2006. It is widely understood to underpin the practice of manaaki and has meanings that are nuanced encapsulating, for example, authority, power, and influence. Mana has been described by Pere, 1991; Waitere, 2009; and Winitana, 2004 as multi-faceted, relational, spatial and spiritually informed. Pere also highlights that the concept cannot be readily translated from Te Reo to English without losing its true meaning (Reidy, 2014, p.35).

It is further explained that mana has 'various forms ... none of which are independent from each other. The four most common expressions of mana are Mana Atua, Mana Tūpuna, Mana Whenua and Mana Tangata' (Huriwai & Baker, 2016, p.5). Reidy (2014) adds that Durie (1998, 2001), Marsden (2003), Metge (1986) and Royal (2007) each support the view that 'all groups and individuals [are able to] hold several sub-types of mana at one time' (p.37).

Mana is integral to the Te Ao Māori worldview wherein the spiritual and material worlds are considered to be inextricably linked and inseparable (Marsden as cited in Eketone, 2008). Eketone (2008) explains that mana traverses both these worlds. Royal (as cited in King, 2017) in turn asserts that mana "lies at the heart of Māori, indeed human, health and wellbeing – the degree to which we feel empowered, illuminated and warm about ourselves and life around us" (p.121).

Mana is further described by Eketone (2013) as being a complex and challenging concept to grasp and negotiate in the context of the contemporary social world. He goes on to explain that mana tangata, as one form of mana, is associated with the things that we do and with the personal attributes we bring. Mana tangata, King (2017) adds, can be diminished as a result of our own actions or through the actions of others. How mana tangata is assessed will likely differ influenced by the social groups we are a part of. As Eketone (2013) notes, criminal activity may enhance mana in some circles, for example, but detract from it in others.

Mana and its relevance to enhancing wellbeing

In situations wherein one's mana has been undermined, perhaps through having been a victim of crime, restoring mana will be an important avenue for recovery. Eketone (2013) observes that the

restoration of mana may be equally critical to the wellbeing of both the perpetrators of crime and its victims. Mana tangata as a wellbeing concept, therefore plays an integral role in the healing process and is pivotal to Tangata Whenua social work practice. Not only does mana tangata bring with it the potential for contributing to the wellbeing of others, equally it contributes to practitioner wellbeing. King (2017) adds however, that ‘mana is intimately connected to community wellbeing and does not belong to the individual alone’ (p.124).

The concept of mana has inspired the development of the mana-enhancing approach to social work which is most closely associated in the literature with the work of Dr Leland Ruwhiu. His view of the underpinning concept of mana is therefore of particular relevance and is accordingly further explored here. As cited in Dobbs (2015, p.35), Ruwhiu amplifies the definitions of the various forms of mana, explaining ‘the cultural adhesive of mana’ is recognised by Māori as the force that binds together the human (he tangata), natural (te ao turoa) and ideological (wairuatanga) dimensions of a Māori worldview.

The concept is explored in depth by Ruwhiu (1999), beginning with the notion that mana is an integral element of the Māori cultural framework, setting as it does ‘the conditions for interaction and exchange to occur’ (p.84) within and across the three dimensions of a Māori reality. Mana is intimately connected to the life-giving principle of wairuatanga and to the notion of respect inherent within that. Importantly mana is just as strongly anchored to two other life-giving principles described as combining with wairuatanga to form the integral components of the pre-colonial Māori conceptual platform for wellbeing; whakapapa and tikanga/kawa (refer Figure 2 below).

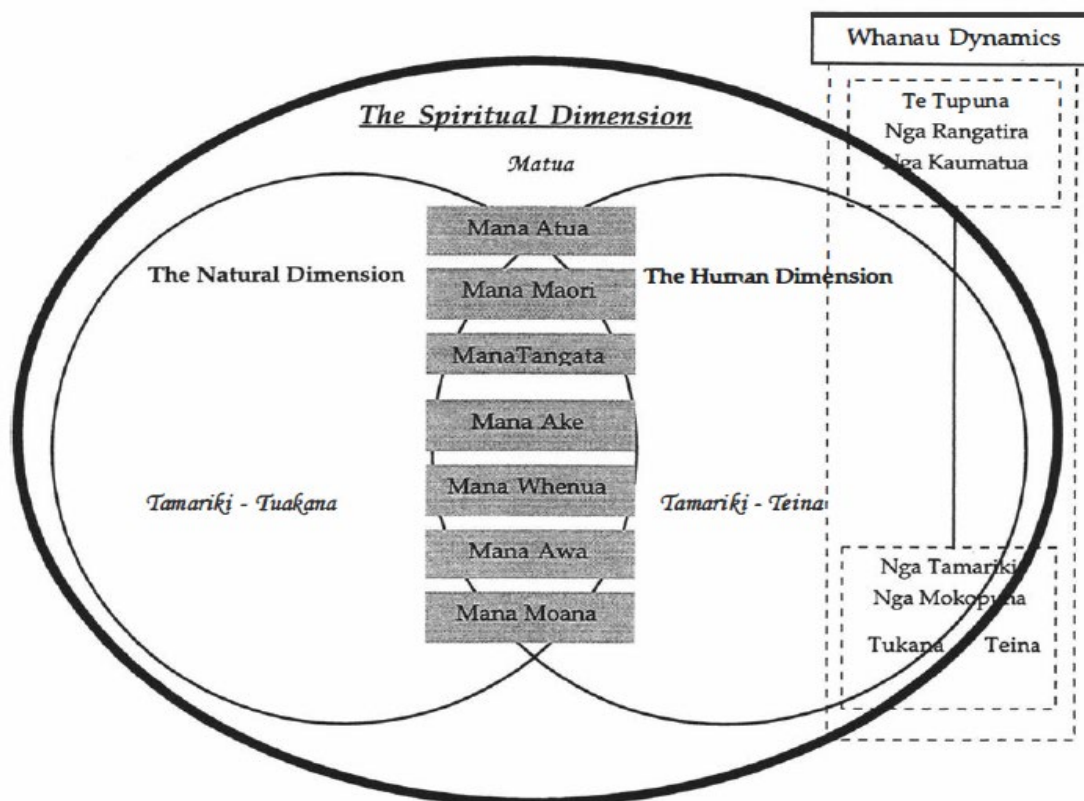


Figure 2. An analysis of the interrelationships between the various dimensions of reality and the role and function of Mana (Ruwhiu,1999, p.120)⁵

‘An analysis of the interrelationships between the various dimensions of reality and the role and function of mana’ is provided by Ruwhiu (1999, p.120). Under the overarching dimension of the spiritual sit the co-relational natural and human dimensions. These three dimensions are inextricably woven together by various types of mana: Mana Atua, Mana Māori, Mana Tangata, Mana Ake, Mana Whenua, Mana Awa, and Mana Moana. The relationships between these three dimensions are explained using a whānau model; the spiritual dimension is represented by matua (the father, te tupuna, ngā rangatira, ngā kaumatua) with the natural and human dimensions being represented by ngā tamariki (ngā mokopuna); the natural dimension being the tuākana (older sibling) and the human dimension being the teina (younger sibling).

The Ko Au Framework conceptualises Māori wellbeing, with mana an integral component, is captured diagrammatically (Refer Figure 3 below). Ko au (the person) sits at the centre, safely surrounded by ngā tupuna, whānau, hapū, iwi, whenua, maunga, awa and moana.

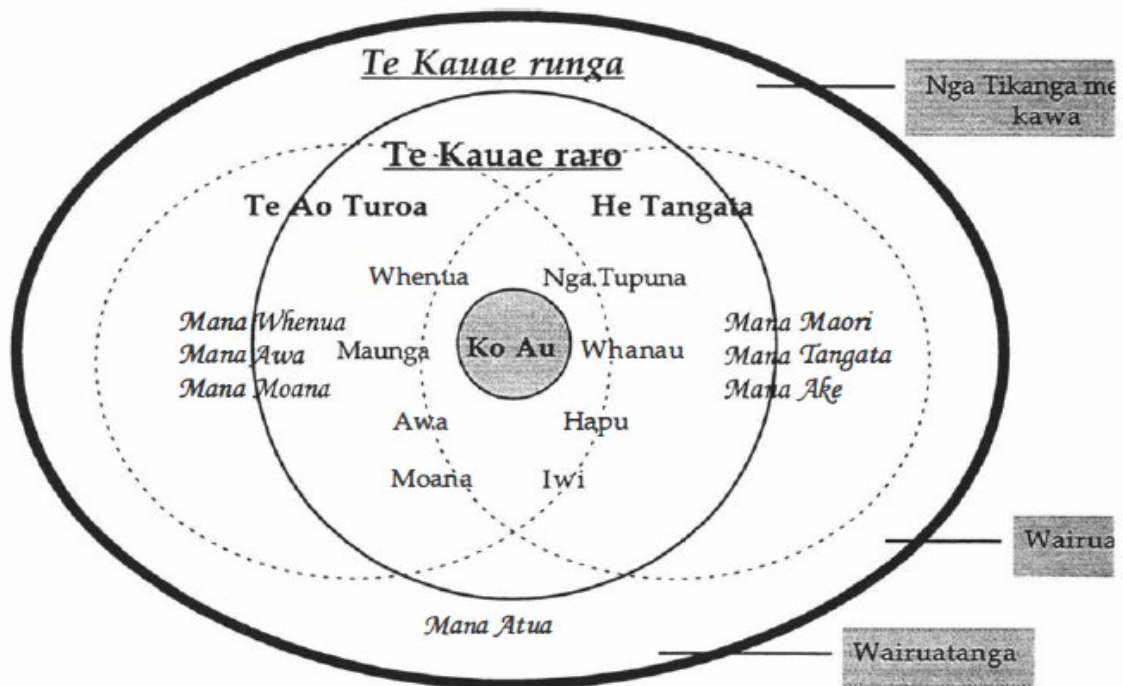


Figure 3. Ko Au Framework on Understanding Māori Wellbeing (Ruwhiu, 1999, p.121)⁶

⁵ Copyright of Dr Leland Ruwhiu’s doctoral dissertation is held by Dr Ruwhiu. He has given permission for this diagram to be included here (personal comms 09 June 2020).

⁶ Copyright of Dr Leland Ruwhiu’s doctoral dissertation is held by Dr Ruwhiu. He has given permission for this diagram to be included here (personal comms 09 June 2020).

The healing matrixes of the three dimensions of reality: spiritual, natural, and human, their corresponding forms of mana and the three life giving principles of wairuatanga, haka-papa and tikanga/kawa collectively, envelope the whole with mana binding the overarching view of wellbeing together. Te Kauae-Raro (the metaphorical lower jawbone) draws together elements of the natural and human dimensions. Te Kauae-Runga, the spiritual dimension and metaphorical upper jawbone, provides the overarching umbrella.

Mana is thus integral to the theoretical framework that Ruwhiu (1999) constructs to understand and enhance the wellbeing of mokopuna and their whānau. The framework has been, and continues to be, widely cited in the literature (see, for example, Dobbs, 2015; Huriwai & Baker, 2016; Lipsham, 2016; Munford & Sanders, 2011).

The role of mana in the healing and strengthening of tamariki is also referenced by Oranga Tamariki:

Mana is the inherent strength and potential within all tamariki from birth. When tamariki are mistreated or harmed, their mana is trodden on and tāpu (a form of sacredness and prohibition passing through generations) is violated. Restoring mana is an important part of healing and wellbeing (“Indigenous Theory,” 2020).

The integral role that mana has to play in enhancing Māori wellbeing is further emphasised by Leaming and Willis (2016) :

Strength of mana is especially important for modern Māori as the loss of land, language and culture has diminished Māori mana and constricted the ability for many Māori to act in ways that adhere to the concepts of 'wairua' and 'tapu' (p.61).

Finally, Eruera and Ruwhiu (2015) draw together the explanatory threads emphasising that mana is:

... a complex multi-layered cultural concept that influences all dimensions of reality, but more significantly has a huge impact on the health and wellness/wellbeing of mokopuna Māori (p.13).

Summary – Concept of mana

- The concept of mana underpins the practice of manaaki and has meanings that are nuanced, encapsulating authority, power, and influence.
- Mana Atua, Mana Tūpuna, Mana Whenua and Mana Tangata are the four best known expressions of mana. Mana traverses the inextricably linked and inseparable spiritual and material worlds.
- Mana Tangata is associated with the things that we do and with our personal attributes. It can be enhanced by our own actions or by those of others. As a wellbeing concept, it plays an integral role in restoration and healing processes.
- The ‘cultural adhesive of mana’ is recognised by Māori as the force that binds together the human (he tangata), natural (te ao turoa) and ideological (wairuatanga) dimensions of a Māori worldview. It influences interaction and exchange across the three dimensions of Māori reality; wairuatanga, whaka-papa and tikanga/kawa.
- Mana is integral to understanding and enhancing the wellbeing of mokopuna and their whānau.

Origins and development of a mana-enhancing approach

The term mana-enhancing, in the broad context of practice, appears to have come in to use in the early 1990s in relation to Māori research. Ruwhiu (1999) discusses tikanga me kawa Māori methodology with respect to the positioning of his doctoral study. He references the work of Te Awekotuku (1991) and Mead (1996) around the development of a Māori research ethics framework. The framework they describe is built around tikanga and kawa Māori. Ruwhiu (1999) uses the term mana-enhancing, for the first and only time in his doctoral dissertation, in relation to the adoption of strategies integral to implementing a Te Ao Māori research framework. Specifically, those mana-enhancing practice strategies include:

seeing people face to face; engaging with people in hui a whānau, a hapū, and/or iwi; being cautious yet willingly hosting and sharing generously one's knowledge, wisdom and resources; listening, watching, searching for knowledge but not flaunting it. These methodological strategies are about bringing together techniques for engagement that enhance rather than strip Māori people's experiences from their cultural realities or contexts (Ruwhiu, 1999, p.53).

Early articulations of mana-enhancing social work practice

The subsequent work of Ruwhiu, in the early 2000s, makes 'one of the earliest references to the term' mana-enhancing in relation to promoting mana-enhancing practice in the social service sector in Aotearoa New Zealand (Huriwai & Baker, 2016, p.6). Both Dobbs (2015) and Hollis-English (2015) highlight that mana, as a critical concept for social service development, is identified and explored in the work of Ruwhiu. An early reference to mana-enhancing practice is also made by Davis (2002). She discusses the meaning of the term mana before focusing on the importance of social services practitioners recognising that their roles are:

a gift delegated from a higher source – you are the agent, or channel, never the source. 'Mana enhancing practice' ensures the covenant relationship between the divine, self and others is transparent and is as easily dissolved by not fulfilling the terms of the agreement. This is displayed through the reciprocal relationships you enter into with others and your wider environment (Davis, 2002, p.5).

Further early reference to mana enhancing practice is made by Ward (2006) in the context of the Tuia Te Whakaaroa Rua Kia Tina model underpinning her social work practice and her work with social work students on placement. Others, including Royal and Walsh-Tapiata (as cited in Te Tira Hāpai Māori, 2020), also contributed, during the first decade of the new century, to 'the development of mana-enhancing practice, especially regarding its principles and values' (Te Tira Hāpai Māori, 2020, p.4). It is in the work of Ruwhiu however, that the mana-enhancing approach to social work practice has been most fully articulated.

Overview of Te Mahi Whakamana framework

The key components of Ruwhiu's model of mana-enhancing practice are outlined by Huriwai and Baker (2016), referencing his 2005 and 2009 publications. Those components include the practitioner valuing Māori cultural identity and concepts of wellbeing; recognising the nature of the historical relationships between Māori and non-Māori generally, and specifically in relation to Te Tiriti o Waitangi;

and, grasping that mana-enhancing practice is born out of Māori experience and understanding of the world. Importantly, the origins of mana-enhancing practice in Te Ao Māori thus set it apart from the Western thought inspired strengths-based approach with which it is sometimes equated.

Honouring the helping relationship, in a mana-enhancing way, necessitates the practitioner focusing and reflecting on the factors structuring the relationship. It includes demonstrating authenticity, respect, integrity and dignity in relationships with both the individual and their whānau. Establishing strong connections are the starting point for building mana-enhancing relationships, including through understanding a person's position in their whānau as well as in their community, and appreciating their wider historical and contemporary whānau connections (Huriwai & Baker, 2016).

The pivotal role of wairuatanga in Tangata Whenua social and community work practice is also considered by Ruwhiu and Ruwhiu (2005) in their further exploration of mana-enhancing social work practice. Wairuatanga, they emphasise, extends beyond spirituality to also encompass the philosophy, concepts and theories of what it means to practice as a Māori social worker. Ruwhiu and Ruwhiu (2005) outline four principles for social workers to consider 'in strengthening their ability to navigate effectively te taha wairua with whānau Māori in need' (p.9). These principles include engaging in mana-enhancing social work:

...realising the interconnectedness of humanity with the natural and spiritual dimensions of reality. In addition, knowing exactly what is meant by, 'if you trample over someone else's mana you are effectively trampling over your own' (Ruwhiu & Ruwhiu, 2005, p.17).

An overview of Te Mahi Whakamana framework of mana-enhancing theory and practice is provided by Hay et al. (2016), specifically emphasising characteristics unique to the Aotearoa New Zealand context. These characteristics include the inseparable links among the spiritual, natural and human dimensions; appreciation of tangata whenua concepts of wellbeing, histories, identities and the role narratives play in sustaining identity; along with knowledge of the Treaty of Waitangi, its history and the ongoing impact of that history on Māori.

Te Mahi Whakamana offers signposts around working effectively with Māori through fully engaging and through respecting cultural difference; appreciating the roles of whakapapa and cultural narrative in healing processes; reaffirming whānau self-determination and supporting it; and 'recognising that the cultural wisdom embedded in Māori ideological and philosophical beliefs can generate solutions or resolutions to Māori welfare concerns' (Ruwhiu as cited in Hay et al. 2016, p.22). The centrality of narrative in sustaining identity and in healing is also recognised by other Indigenous peoples, including those Indigenous to Australia (Milroy, 2014).

Mana-enhancing supervision practice

The place of mana-enhancing practice in Mana Tangata supervision for Tangata Whenua social workers is also considered by Ruwhiu et al. (2008). They highlight:

the significance of wairuatanga, whakapapa and tikanga matauranga Māori – a Māori theoretical and symbolic world of meaning and understanding that informs mana-enhancing engagements within the human terrain (p.13).

To practice in a mana-enhancing way both the social worker and social work supervisor need an in-depth appreciation of a Te Ao Māori worldview and the values and practices that flow from that.

Ruwhiu et al. (2008) explain that mana-enhancing social work theory and practice - mahi whakamana⁷ – is underpinned by the Ko Au and He Ngākau Māori analysis framework that is ‘built on cultural knowledge about dealing with various forms of mana’ (p.24).

Social workers, to practice in a way that is congruent with mahi whakamana, need to be mindful and committed to operating out of a Tangata Whenua worldview. Ruwhiu et al. (2008) describe mahi whakamana as a principled approach to supervision practice that draws on the diverse realities of mana in its various forms. It incorporates three processes critical to engaging with others in a healing and supportive way. The three processes are: being mindful of historical context and influences; the unravelling and sharing of narratives; and being transparent about how we construct our understandings of wellbeing and wellness.

Each of these three processes is further explored by Ruwhiu et al. (2008) in considering their application to the Mana Tangata supervision relationship. They contend that that relationship is consistent with the Māori notion of tuākana – teina which ‘places priority on notions of reciprocity, role reversal, shared mana-enhancing learning, advocacy, planning, guiding and whakapapa responsibilities’ (Walsh-Tapiata & Webster; Webber-Dreadon; Bradley et al. as cited in Ruwhiu et al. 2008).

Contemporary developments in mana-enhancing practice

The mana-enhancing approach continues to be further developed, including in fields beyond social work ‘building onto mana-enhancing practice descriptions showing its breadth of applicability and the interchangeable nature of sets of Te Ao Māori wellbeing principles’ (Te Tira Hāpai Māori, 2020, p.5)⁸. Examples include Eketone (2013) who discusses avoiding diminishing the mana and tapu of others and what that might involve in aspects of social work practice. In particular, he considers a role for the use of karakia in both restoring and enhancing mana.

Mana is further explored by Eruera (2015) and Eruera and Ruwhiu (2015) with a particular focus on its ‘significance in activities focusing on indigenous healing, strengthening and reinforcing resilience of vulnerable mokopuna’ (p.13). King (2017) in turn considers the role of manaakitanga, a foundational Te Ao Māori value, construct and tikanga’ (p.i), in mana-enhancing practice highlighting that manaakitanga is inextricably linked and inseparable from mana. Little et al. (2013) too, discuss manaakitanga and identify how the practice of manaakitanga, in the field of family violence practice, can be used demonstrates respect that in turn enhances the mana of the individual.

Harwood et al. (2018) describe the public health intervention they have developed and implemented in primary health care as ‘a mana-enhancing programme’ (p.76) before going on to identify its mana-enhancing qualities. In adult learning of Te Reo Māori under the umbrella of Te Ataarangi, Paipa (2010) discusses staff and students modelling mana-enhancing behaviour ‘in order to create invitational and safe environments for learning and engagement’ (p.8). Reidy (2014), in the field of psychotherapy, explores the ways in which psychodynamic psychotherapy:

⁷ Seeking a name for mana enhancing practice, Dr Leland Ruwhiu approached his father who gave him a whakatauākī that encapsulated his thinking at the time: ‘Te mana whakaratarata, te iwi Whānui, hei hāpai ngā mahi whakatakātū’. With his father’s permission, Dr Ruwhiu shortened it to ‘Te mahi whakamana’.

⁸ Refer to Te Tira Hāpai Māori (2020) for further discussion of these more recent developments.

can become more culturally embracing through utilising mana-enhancing values and extending relationships to a wider group context and the physical as well as the interpersonal environment (p.9).

Finally, reflecting on developments over the past decade, Te Tira Hāpai Māori (2020) emphasises that 'all foundational Te Ao Māori principles of wellbeing (different combinations for different purposes) can be applied to mana-enhancing practice' (p.5); wellbeing principles are thus interchangeable.

Summary – Development of a mana-enhancing practice approach

- Mana-enhancing practice appears to have first been articulated in the 1990s in relation to the conduct of Māori research.
- Early references to mana-enhancing practice are made by Ruwhiu, among others, who is closely associated with the development of a mana-enhancing social work approach beginning in the early 2000s.
- Key elements of mana-enhancing practice include valuing Māori cultural identity, concepts of wellbeing and worldview, as well as understanding the historical relationships embedded in Te Tiriti o Waitangi.
- Authenticity, respect, integrity and dignity in relationships with both the individual and their whānau are integral to mana-enhancing practice.
- Te Mahi Whakamana signposts include appreciating the roles of whakapapa and cultural narrative in healing processes as well as reaffirming and supporting whānau self-determination.

Relevance of mana-enhancing practice

A mana-enhancing approach to practice, Hollis-English contends (2015), can 'be applied directly to social work as an intervention theory' (p.9). She observes:

In practice situations, this profession deals continuously with people who often experience trauma, pain, grief, loss, separation, and disappointment. Subsequently, our work centres on mana-building strategies and techniques (Hollis-English, 2015, p.9).

Mental health service practitioners as well as those who design and monitor services, need to be able to grasp the concept of mana and work in mana-enhancing ways, according to Huriwai and Baker (2016). Achieving wellbeing outcomes, viewed through a Māori lens, demands the understanding and implementation of a mana-enhancing approach. By way of introduction then, the application of mana-enhancing practice is reliant upon understanding the concepts underpinning the approach, combined with commitment, and the requisite organisational support, to adopt it.

The origins of a Māori centred, mana-enhancing approach in a Te Ao Māori worldview, and its further development through the work of Tangata Whenua theorists and practitioners, position the approach as a seamless fit for Tangata Whenua social workers working with Māori. For Tauwiwi⁹ social workers working with Tangata Whenua in Aotearoa New Zealand, and for Tangata Whenua social workers

⁹ Tauwiwi here means all non-Māori (including Pākehā who comprise the dominant ethnicity represented within the Tauwiwi grouping).

working with Tauīwi, the approach has resonance for a range of reasons, including that its 'core concepts and values ... are universally applicable to the care, support and respect of all people' (Huriwai & Baker as cited in Te Tira Hāpai Māori, 2020, p.5).

Working to understand and appreciate the principles underpinning a Māori centred and mana-enhancing approach; practicing in ways consistent with those principles in supporting the roads of others to wellbeing; and critically reflecting on practice, are all within the realms of both Tangata Whenua and Tauīwi social workers carrying out their mahi in this country.

The universal relevance of the approach is reflected in the guidance it offers for working alongside people to address such shared human experiences as grief, loss and trauma, as well as to foster growth and wellbeing. Universal relevance is further underlined by the compassion and concern for tamariki and mokopuna wellbeing that Tangata Whenua and Tauīwi practitioners have historically shared (Eruera & Ruwhiu, 2016) and continue to share. The integral place of a Māori centred mana-enhancing approach in Aotearoa New Zealand social work is highlighted by the following contention:

Tangata Whenua ways of knowing through the development of our own critical social and community work theories, practice frameworks, models of engagement with associated skill sets and practice tools can only be of benefit for the entire profession of social work practice and in particular the child welfare and protection statutory scene in Aotearoa (Eruera & Ruwhiu, 2016, p.2).

Finally, Māori frameworks and models of practice have been referenced and adopted to varying degrees in Aotearoa New Zealand, across the human services, including in health and education as well as in the social services, in work with both Tangata Whenua and Tauīwi. Munford and Sanders (2011) cite the impact of Durie's Whare Tapa Whā model of wellbeing, with its emphasis on the whole person, as being one example of the relevance and reach of Māori frameworks in contemporary human services practice. Others argue however, that despite the relevance and prominence of Māori models of health and wellbeing, they have nevertheless been integrated to only a limited extent in specific fields such as in treatment programmes targeting sexual, violent and general offending; types of offending where Māori are overrepresented (Leaming & Willis, 2016).

Summary – Relevance of the approach

- Practitioners as well as those who design and monitor services need to grasp the concept of mana and work in mana-enhancing ways.
- Understanding and appreciating the principles underpinning the approach are critical to effective practice.
- Its origins in a Te Ao Māori worldview position it well for Tangata Whenua social workers working with Māori. The approach has resonance for others also for reasons including that its underpinning concepts and values promote enhanced wellbeing generally.
- The universal relevance of the approach is reflected in the guidance it offers for working with people to address shared human experiences such as grief, loss and trauma, as well as to foster growth and wellbeing.

What does mana-enhancing practice 'look like'?

At the heart of mana-enhancing practice, as outlined above, are five core components: valuing Te Ao Māori knowledge; the significance of history and in particular the relationships and obligations between Māori and Tauwi in relation to Te Tiriti; valuing narratives as cultural identity; drawing on Māori concepts of wellbeing, recognising these as being interrelated and central to restoring and maintaining resilience; and principled practice, i.e. practicing in a way that is mindful and deliberate in its mana-enhancing intent (Te Tira Hāpai Māori, 2020, p.7-8).

So, what might that 'look like' in action; in particular, what might Māori centred mana-enhancing practice 'look like' in the context of a statutory care and protection agency with a long-established history of practice largely premised on Western social work and wellbeing models? Pitama et al. (2007) highlight some of the possibilities for change, along with some of the challenges inherent in transitioning from a Western paradigm to a practice framework embedded in a Te Ao Māori worldview.

Using Te Whare Tapa Whā as an example, which they describe as 'a framework that provides a macro-level conceptual base for practice' (Pitama et al., 2007, p.119), they describe working towards clearly identifying, at a micro-level, the processes used on a day-to-day basis that bring the framework to life. The Meihana model practice model they developed to guide assessment in mental health services was developed in three phases over more than a decade. The model is multi-dimensional and includes, for example, a whānau dimension. In practice, the whānau dimension requires practitioners to meaningfully involve whānau in assessment and intervention processes, forging space in clinical settings to ensure that occurs.

Mana-enhancing social work and supervision practice

In the case of transitioning to a Māori centred mana-enhancing approach, the literature provides a rich tapestry of practice stories and analyses to draw upon, which inform shifting from 'imagining' to 'doing'. Whilst much of the literature does not explicitly reference a mana-enhancing approach, that approach is nevertheless implicit in the broader discussion. The sharing of a Māori worldview through the social work literature promotes enhanced awareness and understanding of that worldview and of Te Ao Māori wellbeing principles that comprise Te Mahi Whakamana.

Examples of the literature that specifically reference a mana-enhancing approach, link it to earlier articulations of Tangata Whenua social work paradigms. Eruera (2005), for example, considers what mana-enhancing behaviour might look like within the specific context of Tangata Whenua social work supervision. Effective supervision is critical to successful social work practice (Henley, 2013). Eruera (2005) contends that mana-enhancing supervision includes the supervision partners being able to demonstrate 'respect for, and recognition of, each other's mana along with sharing an explicit goal of enhancing each other's mana (self-esteem and self-worth) in supervision' (p.23).

The critical role of mana in the supervision process and in the supervision relationship is highlighted in King's (2014) discussion of the KIAORA supervision model and in Wallace's (2018) doctoral research. The focus that Eruera (2005) places on the quality of the supervision relationship too is consistent with the view that supervision is most likely to be effective if the relationship supports the wellbeing of both supervisor and supervisee (Simmonds as cited in Henley, 2013).

The importance of the communication skills necessary to practice in a mana-enhancing way with whānau are underlined by King (2017) who identifies the value of being able to use Te Reo Māori as well as being able to draw on:

...tikanga Māori such as karakia, mihimihi, whakawhanungatanga, the demonstration of hospitality, in engagements as appropriate to the whānau/client and the situation e.g. whānau-hui, first contact, times of grief (King, 2017, p.127).

She goes on to stress the importance of being able to participate in respectful but challenging discussion with whānau, in relation to the agreed kaupapa of an intervention, in a way that keeps the mana of both parties intact.

Finally, in their exploration of several constructs originating in Te Ao Māori worldviews that they believe are increasingly being drawn upon within mainstream practice settings to foster respectful working with people, Munford and Sanders (2011) discuss mana. In how it might apply to practice, Munford and Sanders (2011) identify that a mana-enhancing stance requires:

...learning respect, valuing others' views, not trampling on others' positions. In social and community work practice, mana-enhancing practice is characterised by processes that embrace historical understandings and respectfully acknowledge a person's place in their whānau (family), iwi (tribe) and community (Ruwhiu, 2008, p.108). It involves listening to the client's story of what for them constitutes wellbeing. In practice as in life, mana must be protected as losing mana means to lose one's respect and honour (Ruwhiu, 2008, p.116) and if this happens in practice settings relationships with clients will be undermined and work will need to be done to repair these before therapeutic work can begin (Munford & Sanders, 2011, p.68).

Mana-enhancing practice - beyond social work

Mana enhancing practice, and terms similar to it, are now in use by a wide range of health and social services providers (Huriwai & Baker, 2016). The use of the terms conveys expectations around how services will work with individuals and their whānau and the kinds of relationships that will be established and maintained. What mana-enhancing practice 'looks like' in various settings, however, may differ according to Huriwai and Baker (2016).

Developments in the field of addictions provide one illustration of the broadening out of the mana-enhancing practice approach beyond social work per se. *Te Hau Mārire: Addiction Workforce Strategic Framework* (Te Rau Matatini, 2015) considers what is required to successfully grow a nation-wide workforce responsive to Māori experiencing addiction-related harm. Commissioned by the Ministry of Health, the framework, identifies underpinning values that also provide 'a lens to consider for organisational and practitioner implementation' (Te Rau Matatini, 2015, p.9). Featuring among those values is 'Manaaki: [which] acknowledges the mana of others. Service delivery and practice is mana enhancing and mana protecting' (Te Rau Matatini, 2015, p.9).

Mana-enhancing communication is promoted by the Mental Health Foundation in their *Factsheet Mana-Enhancing Communication – A Framework*. The Foundation describes mana-enhancing communication as 'a process where we can close the space between different understandings, while building trust and mutual respect'. Incorporating the use of Te Reo Māori, the Foundation describes

each of five cohesive steps in a mana-enhancing communication process, whilst also providing practice examples: whakatakatū/prepare; karanga/invitation to come together; whaikōrero exploring the issue; whakatau/decision making; and whakaora/implementation - restoring wholeness.

The work of the Auckland-based urban Māori development organisation, Te Whānau o Waipareira, provides another example of the expansion of the mana-enhancing approach:

Their strategic investment in whānau includes Te Kauhau Ora described as a values-based practice for enhancing the mana of whānau, hapū, iwi and hāpori, and providing for the ethos of the organisation (Te Whānau o Waipareira as cited in Huriwai and Baker, 2016, p.7).

Te Kura Nui o Waipareira, the practice journal of Te Whānau o Waipareira, too reflects the increasing reach of the language of mana-enhancement. The journal aims to share 'new insights and perspectives arising from research and Whānau Ora based practice enhancing the mana of whānau, hapū, iwi and hāpori across Aotearoa' (Te Whānau o Waipareira, 2018, p.2). Articles included in the journal draw on the experiences of Waipareira kaimahi across research as well as social services delivery, highlighting what it means to work with whānau in mana-enhancing ways (see, for example, Hakaraia, 2018; White, 2018).

To practice in a way that enhances mana, in the research context, is reflected in the work of Ruwhiu et al. (2009) which involved partnering with Tane Māori to explore Indigenous violence prevention and early intervention strategies. The voices of Tane Māori were integral to the research carried out, including those of men who had a previous history of whānau violence. How men become and remain free of whānau violence was a key objective of the research, and having perpetrated violence in the past did not necessarily disqualify men from taking part in the research.

Practicing in a mana-enhancing way, in the context of the alcohol and other drugs field, is explored by Huriwai and Baker (2015). They emphasise that every interaction with an individual or whānau requires the practitioner to prioritise behaviour that is mana-enhancing. Practices endorsed include: providing a culturally safe place for kōrero to take place; actively engaging with and listening to individuals and their whānau in ways that are respectful of their culture; making space for whakapapa and for cultural narratives in the helping process; and, committing the time necessary to build the relationships that foster care, treatment and recovery.

Mana-enhancing practice and Whānau Ora

As noted previously, while contributions to the social work, wider health and social services and related literature do not always 'specifically mention 'mana-enhancing practice', one can see it was what they were describing' (Te Tira Hāpai, 2020, p.3). A recent body of particularly relevant literature in this regard, incorporating both social policy development and social services practice dimensions, is that pertaining to Whānau Ora.

What is Whānau Ora?

Launched in 2010, the Whānau Ora public policy approach includes the aim of ensuring that the wider social services improve their responsiveness to Māori (New Zealand Productivity Commission, 2015). The approach has been described by the Auditor General as:

...an example of innovation and new thinking in service delivery ... [and as] an opportunity for providers of health and social services in the community to operate differently and to support families in deciding their best way forward (Auditor General, 2015, p.4).

Whānau Ora, taking a strong lead from *Pūao-te-Āta-tū*, positions Tangata Whenua as active participants in the shaping of social service provision, rather than as passive recipients of care designed and delivered principally by Tauīwi, and in particular Pākehā. The approach is imbued with Māori values and a Māori worldview (Boulton et al. 2018). Te Moananui-Makirere (2014) note that though the Whānau Ora public policy is new, the concept of whānau ora is inherent within Te Ao Māori; the wellbeing of the individual is reliant on the collective wellbeing of whānau.

The development of the Whānau Ora policy was driven by the Taskforce on Whānau Centred Initiatives (2010). The Taskforce called for all agencies, including public sector agencies, working with whānau to adopt a whānau ora approach (Kara et al. as cited in Boulton et al., 2018). The Whānau Ora framework developed by the Taskforce is described by Boulton et al. (2013) as “being at once a philosophy, a model of practice and an outcome”. The principles comprising the framework are cognisant of the Treaty of Waitangi, acknowledging that both Māori and the Crown share in the responsibility for achieving whānau wellbeing, or whānau ora. Specifically, they include:

- Ngā kaupapa tuku iho (Māori values, beliefs, obligations, and responsibilities guide whānau in their day-to-day lives)
- Whānau opportunity (to be part of their communities and socially connected)
- best whānau outcomes (whānau empowered to live healthy lives and achieve optimum wellbeing)
- Whānau integrity (recognition and acceptance of whānau accountability, dignity, and ability to facilitate their own transformation)
- coherent service delivery (integrated service provision in the best interests of whānau)
- effective resourcing (scoped to the work to be carried out with whānau and clearly linked to achieving outcomes)
- and competent and innovative provision (recognising the need for skilled and creative practitioners committed to whānau empowerment and to supporting whānau transformation) (cited in Boulton et al., 2013).

Whānau Ora in action

So, what does Whānau Ora ‘bring to the table’ in terms of informing a Māori centred mana-enhancing practice position? Grant (as cited in Boulton et al., 2018) highlights that Whānau Ora delivery has a focus on the enhancement of mana in contrast to mainstream approaches, Thus:

The difference between a ... [kaiārahi] who can go into the home, speak the language of the whānau, engage in a way that’s meaningful and still leave them with their mana intact [and a worker who is not able to do these things] cannot be underestimated.... We have people who are used to being in a health setting or a social work setting which are really valuable skills but sometimes they don’t access whānau in a way that leaves the whānau with a mana-enhancing experience (Boulton et al., 2018, p.263).

Research carried out by Savage et al. (2017) also highlights the focus of Whānau Ora on enhancing mana. In considering the role of the 27 Whānau Ora navigators, or kaiārahi, across Te Waipounamu who participated in their study of Whānau Ora, they note:

Several ... previously held positions as social workers and commented on the process of letting go of the restrictions that had been imposed on them by their previous roles. In particular, dropping their assumptions and expectations about making decisions for whānau or fixing what they perceived to be a problem, and allowing whānau to plan their own path and support them to achieve this. At the heart of the Navigator role is whanaungatanga and 'restoring the mana' of the whānau through the process of realising the moemoea (dreams and aspirations) of the whānau (Savage et al., 2017, p.9).

Kaiārahi who participated in the research carried out by Savage et al. (2017) described the skills, knowledge, and attributes they believed to be integral to the kaiārahi helping role. These were grouped into six key categories: life experience, the ability to be reflective, communication skills, community networks, personal views and tikanga. In terms of life experience, having a high level of self-awareness was emphasised, including being able to identify where their own issues might compromise their work with whānau. In terms of the ability to be reflective, kaiārahi noted the importance of recognising that the whānau they worked alongside had much to teach them.

In the area of communication, advanced listening skills were emphasised along with going at the pace set by the whānau. Extensive kaiārahi community networks and working relationships were considered critical to meet the needs of whānau. In relation to personal values, those highlighted included open-mindedness, empathy, aroha, valuing equity, integrity and 'always acknowledging the strengths whānau have' (Savage et al., 2017, p.9). Kaiārahi considered that tikanga underpinned the way they worked, including putting whānau first, understanding what is tika and what is pono, and practicing manaakitanga (Savage et al., 2017).

The kaiārahi and managers who participated in the study carried out by Savage et al. (2017) saw the process of whanaungatanga as critical to their Whānau Ora approach. Thus, a heavy investment was made in the time taken to build effective relationships and establish connections through whakapapa. They:

noted the importance of establishing a relationship with the whānau before they had to enter into an agreement. For many of the Navigators who had come from Government departments this was an important way of working that underpinned how they approached whānau. Rather than providing a service and an agreement, it was about establishing a relationship and shared understanding through whanaungatanga (Savage et al., 2017, p.10).

Whānau Ora whānau-centred practice is further explored by Te Moananui-Makirere et al. (2014) who describe the Te Ara Whakapikiōranga competency-based framework and its use as a guide to whānau-centred practices. The framework was developed over three intensive phases, with extensive nationwide consultation being carried out in the initial engagement phase. The principles underpinning the framework as it evolved 'were tested in a range of practice settings including training, research and provider development contexts across Iwi, sectors, disciplines and professions' (Te Moananui-Makirere, 2014, p.13). Te Ara Whakapikiōranga contributes to strengthening practice with whānau with the aim of growing and maintaining wellbeing. The framework includes four wāhanga, each of

which can be applied in ways that work best for different whānau. These wāhanga are Te Āu I Te Whānau, Puna Ki Te Puna, Te Tohu O Te Rangatira and Hono Mai Hono Atu.

In 2019, the government appointed Independent Whānau Ora Review Panel completed its Whānau Ora assessment report. The Whānau Ora review highlights the significant successes of the Whānau Ora approach in supporting whānau to achieve their self-identified priorities (Whānau Ora Review Panel, 2019). Whānau Ora is also having some positive impact on the way that health and social services are designed and delivered for the benefit of Tangata Whenua and, by default, Tauwiwi.

Summary – Mana-enhancing practice

- Possibilities for change, along with challenges, are inherent in transitioning from a Western paradigm to a practice framework embedded in a Te Ao Māori worldview.
- The rich tapestry of Tangata Whenua practice stories available usefully inform shifting from ‘imagining’ mana-enhancing practice to ‘doing’ it.
- Mana-enhancing supervision includes mutual respect and being committed to caring for each other’s mana.
- Mana-enhancing and related terms convey expectations around how services will work with individuals and their whānau.
- The competent use of Te Reo Māori and of Māori practices and protocols support a mana-enhancing approach, as does appreciating what it means to keep the mana of whānau intact.
- Whānau Ora is imbued with Māori values and a Māori worldview, takes a strong lead from *Pūao te Ata Tū* and is consistent with mana-enhancing practice.
- The Whānau Ora framework is cognisant of the Treaty of Waitangi, acknowledging that both Māori and the Crown share in the responsibility for achieving whānau wellbeing.
- Pivotal to the Whānau Ora Navigator role is whanaungatanga, enhancing and restoring the mana of whānau. Navigators invest heavily in relationship building and establishing connections through whakapapa.

Shifting to a Māori centred mana-enhancing approach: Enablers

The literature indicates that facilitating a shift from a Western to a Māori centred mana-enhancing approach will require comprehensive and multi-faceted enablers. The Oranga Tamariki *Continuum of Practice Approaches for working with Māori* (refer Figure 1) underlines the comprehensive nature of the enablers with its reference to factors including leadership, quality systems, resourcing, competency and policy development. Enablers critical to facilitating Oranga Tamariki transition are extensive and likely to include at a minimum:

Systems

- Implementing section 7AA; essentially the Ministry’s systemic change facilitator. Section 7AA has mana tamaiti, whakapapa and whanaungatanga principles and objectives at its core and is integral to the Ministry meeting its Treaty obligation in its work with Māori (Oranga Tamariki Ministry for Children, n.d.).
- A system-wide commitment to supporting a paradigm shift, including promoting system responsibility and involving Māori leadership through a genuine commitment to partnership.

Successful socialisation, across all levels of the organisation, of a Māori centred mana-enhancing approach to service design and delivery inclusive of Māori thought and practice leadership and the privileging of a Māori worldview.

- The systemic embedment of mana-enhancing practices and behaviours throughout the organisation, not only in practice with whānau but internally in staff interactions and relationships, supported by the organisation's values (which include mana).
- Recognising, and acting on the understanding that the embedding of a Māori centred approach will require much more than just 'having a service with a Māori name with Māori concepts in its vision statement' (m, 1999, p.414). Mitchell (2018) reinforces that point asserting: 'Mana comes from a Te Ao Māori perspective. Maintaining this kind of mātauranga Māori lens is about challenging the dominant way that we see the world, and are seen by the world, where mana-enhancing becomes a tokenistic act or a tick box exercise'.
- An internal commitment to embracing the new paradigm. King (2017) observes 'manaakitanga is mana-enhancing social work practice... [it] must maintain its cultural integrity as it is applied to social work practice with Māori and should not be seen in isolation from the context in which it is founded... its expression in our social work practice can either be suppressed or encouraged depending on our, and our agencies, commitment...' (p.125).

Practice

- Willingness to listen to the voices of tamariki, whānau, hapū and iwi who use the services of Oranga Tamariki, and to hear what they are telling us about their needs and perspectives (ref. for example, Ministerial Advisory Committee on a Māori Perspective for the Development of Social Welfare, 1988; Whānau Ora Commissioning Agency, 2020).
- Willingness to engage with tamariki, whānau, hapū and Iwi who use the services of Oranga Tamariki partnering with them in collective design and monitoring of Māori centred mana-enhancing service delivery.

Workforce development

- A workforce positioned to integrate Māori centred and mana-enhancing knowledge and skills into day-to-day practice which, in turn, also requires a commitment to assessing workforce development needs, including training gaps.
- Designing and delivering ongoing workforce development initiatives, including training, to support practitioners to transition to a Māori centred mana-enhancing approach to delivery (noting that approximately two-thirds of the social work workforce are Tauwiwi, predominantly Pākehā. In stark contrast to this Tangata Whenua to Tauwiwi staffing ratio, tamariki Māori are significantly disproportionately represented amongst those who come to the attention of the statutory care and protection service) (Eruera & Ruwhiu, 2015).
- The service is, in turn, the largest employer of social workers in Aotearoa New Zealand (Children's Commissioner as cited in Boulton et al., 2018). Dobbs (2015) notes that the national and international literature supports: 'Using co-constructed Indigenous and non-indigenous knowledge and frameworks...which combines the knowledge and practice that both Māori and Tauwiwi bring to social work practice allows workers to develop culturally sensitive and responsive practice' (p.7).

Practice supervision

- Assessing and redefining supervision policy through the lens of a Māori centred mana-enhancing approach to practice. Eketone (2012), for example, considers 'cultural supervision is an important part of Māori social work practice' (p.29). Murray (2017) adds 'the value of Indigenous knowledge and tradition in contemporary settings cannot be refuted. Therefore, Indigenous social workers must advocate for supervisory practice to meet their cultural needs' (p.119).
- The further consideration of what appropriate cultural supervision might look like for Tauwi practitioners in the context of Oranga Tamariki. Moyle (2014) supports the view that Māori supervisors are best positioned to offer Kaupapa Māori, cultural and cross-cultural supervision to social workers employed in frontline roles. Wallace (2018) further considers Bicultural, cultural and Kaupapa Māori supervision approaches and what role there may be for Tangata Whenua supervisors in working with Pākehā supervisees in cultural supervision. Henley (2013) explores how Bicultural practice may be reinforced through the application of a Bicultural social work supervision framework that can additionally foster the social work supervisory relationship.
- Commitment to assessing current needs and gaps in the provision of Māori centred mana-enhancing practice social work supervision in the light of the redefined supervision policy.
- Designing and delivering ongoing workforce development initiatives, including training, to support practice supervisors and supervisees to transition to a Māori centred mana-enhancing approach to supervision. King's (2017) research reinforces that competent supervisors will need to be 'able to support kaimahi to reflexively examine their social work practice in respect to manaakitanga, Te Ao Māori imperatives, and their ongoing professional development' (p.127).
- Research carried out by Wallace (2019) informs her conclusion that supervision needs to be re-indigenised and 'the assumption that Western perspectives can adequately define supervision theory and practice' (p.30) needs to be challenged. That view is supported by others, including Elkington (2015), who additionally proposes that a viable starting point for working towards an inclusive Bicultural approach to supervision is:

... a caucus arrangement to examine ... values in privacy, re-evaluate the situation and negotiate a relationship built on participation, protection and partnership as exemplified by Te Tiriti o Waitangi. ...So must Māori and Pākehā, Tangata Whenua and Tauwi do the same to reconcile a relationship that has been somewhat battered by the experience of a dishonoured Treaty (Elkington, 2015, p.30).

Summary

The literature confirms a mana-enhancing paradigm can support, and indeed expedite, a shift from a Western to a Māori centred position, and that successful shift implementation will mean drawing on comprehensive and multi-faceted enablers. Coordinated implementation will be needed across the four dimensions of systems, practice, workforce development and supervision. The systems dimension necessitates a focus on implementing section 7AA; a system-wide commitment to supporting the shift; its successful socialisation, across all levels of the organisation; and embedment of mana-enhancing practices and behaviours throughout the organisation.

The practice dimension necessitates willingness to listen to and engage with tamariki, whānau, hapū and iwi, partnering with them in collective design and monitoring of Māori centred mana-enhancing service delivery. The workforce development dimension necessitates adequate positioning of the workforce to integrate Māori centred and mana-enhancing knowledge and skills into day-to-day practice; and design and delivery of initiatives, including training, to support practitioners to effectively transition.

The practice supervision dimension necessitates assessing and redefining supervision policy through the lens of a Māori centred mana-enhancing approach to practice; further consideration of what appropriate cultural supervision might look like for Taiwi practitioners; commitment to assessing current needs and gaps in provision; and designing and delivering ongoing workforce development initiatives, including training, to support practice supervisors and supervisees to effectively transition.

ASSESSMENT APPROACHES

Overview

This section of the evidence brief considers assessment processes in the social work literature, as well as in that of related professions and practices. The section begins by defining assessment. Indigenous assessment approaches, in both statutory and non-statutory child and family welfare systems, as well as more broadly, given the limited literature identified specific to child and family welfare, are then discussed. Tangata Whenua/Bicultural assessment approaches, both within the child and family welfare system and beyond, are also considered. How these approaches are applied and sustained is canvassed along with the question of 'what has worked' for Indigenous/Tangata Whenua populations when using Western approaches in statutory and non-statutory child and family welfare. Finally, the key components that constitute quality assessment for Indigenous and Tangata Whenua populations are identified.

Defining assessment

Assessment is conducted by professionals and allied practitioners right across the health and social services fields both in Aotearoa New Zealand and internationally. The focus of assessment will clearly differ across professions and fields of practice depending, in part, upon the particular area of health and wellbeing they seek to address. Assessment approaches are however, commonly informed by Western perspectives and sociocultural contexts.

The Western social work process typically incorporates cumulative and overlapping stages. Assessment is carried out at an early stage in the process. It involves the social worker attempting to understand a client's presenting issue/s - interpreting or 'making sense' of these issues - and identifying the resulting needs (Hay et al., 2016).

In the field of child welfare, gathering and analysing information during the assessment process is considered key to better understanding the situation of the child and their family. Information is generally gathered from a range of sources to inform an assessment, including from the child where possible. As is noted in Oranga Tamariki's *Practice Review into the Hastings Case* (2019), a social

worker's responsibility to engage, reflect and understand the situation of a tamaiti and their whānau is 'nowhere more complex and the required professional judgements more finally balanced than in the field of statutory child protection' (p.2). The Ministry, being the lead agency with statutory responsibility for the care and protection of tamariki in Aotearoa New Zealand, defines assessment as:

A continual and collaborative process used to understand the risks, needs, challenges and strengths of tamariki and their family/whānau. Assessment is central to all our work. Assessment enables us to construct a roadmap for change (Oranga Tamariki, 2020, <https://practice.orangatamariki.govt.nz/policy/assessment/>).

A collaborative assessment process, in the Oranga Tamariki context, is expected to include a range of people such as parents and caregivers, wider whānau members and other professionals working with mokopuna and their whānau.

Social work assessment is described by Parker et al. (2017) as a wide-ranging and key professional task 'which concerns the analysis and exploration of social situations, human conditions and needs and acts as a precursor to social work action oriented towards change' (p.1). They note too that assessment is a complex undertaking that has been described as the cornerstone of good social work practice. Parker et al. (2017) however, challenge the view that assessment is an inherently positive process, pointing out that such a view:

does not allow for the various ways in which... [assessments] may be conducted or the purposes to which they may be put. It is important to critique the moral purposes underpinning assessments, and dangerous simply to undertake a social work assessment because of unquestioning custom and practice within a particular organisation or with a specific client group (p.1).

They further contend that it is critical to recognise that social work assessment tools and processes are not neutral but are heavily influenced by setting and by dominant culture (Parker et al., 2017).

Indigenous assessment approaches and application internationally

Though 'there are significant differences between Indigenous peoples ... it is possible nonetheless to identify shared realities, comparable patterns of development and common aspirations for the future' (Walsh-Tapiata, 2004, p.2). In colonised or settler societies including Canada, Australia and the United States, as well as in Aotearoa New Zealand, social work theory and practice has historically been developed and dominated by a Western perspective.

Challenging Western understandings of assessment

The social work assessment process can be understood as being mediated by factors including how the social worker, who is in effect constructing knowledge through their own lens, perceives 'risk', and the situation of a child potentially 'at risk', (Stanley, 2005). The relevance of Western approaches to assessment for Indigenous peoples, both in child and family welfare systems and more broadly has, in recent decades, been questioned and is increasingly being considered detrimental to Indigenous wellbeing. Indigenous social workers are forging approaches to social work practice, informed by

Indigenous theories and knowledge, that better reflect Indigenous worldviews and interests. The degree to which these approaches have been able to be implemented however varies.

An explanatory model to explore how assessment in social work has evolved in Indigenous contexts in Malaysia, Nepal and Vietnam as well as in the UK, is proposed by Parker et al.(2017). The model, or developmental typology, of assessment approaches is clustered around a horizontal axis (theoretical across to relational) and a vertical intersecting axis (adaptive up to normative) (refer Figure Four below). The purpose of the model is to encourage social workers to potentially:

locate assessment tasks and functions in the socio-political contexts in which they are undertaken ... [and] to understand some of the reasons social workers and their organisations practise in these ways.... it can assist social workers in reflecting on the values underpinning their practices. It can also assist in identifying for what purpose and for whom social work assessment serves, allowing practitioners to set the service user/client centre stage and to highlight those purposes which work against them (Parker et al., 2017, p.5).

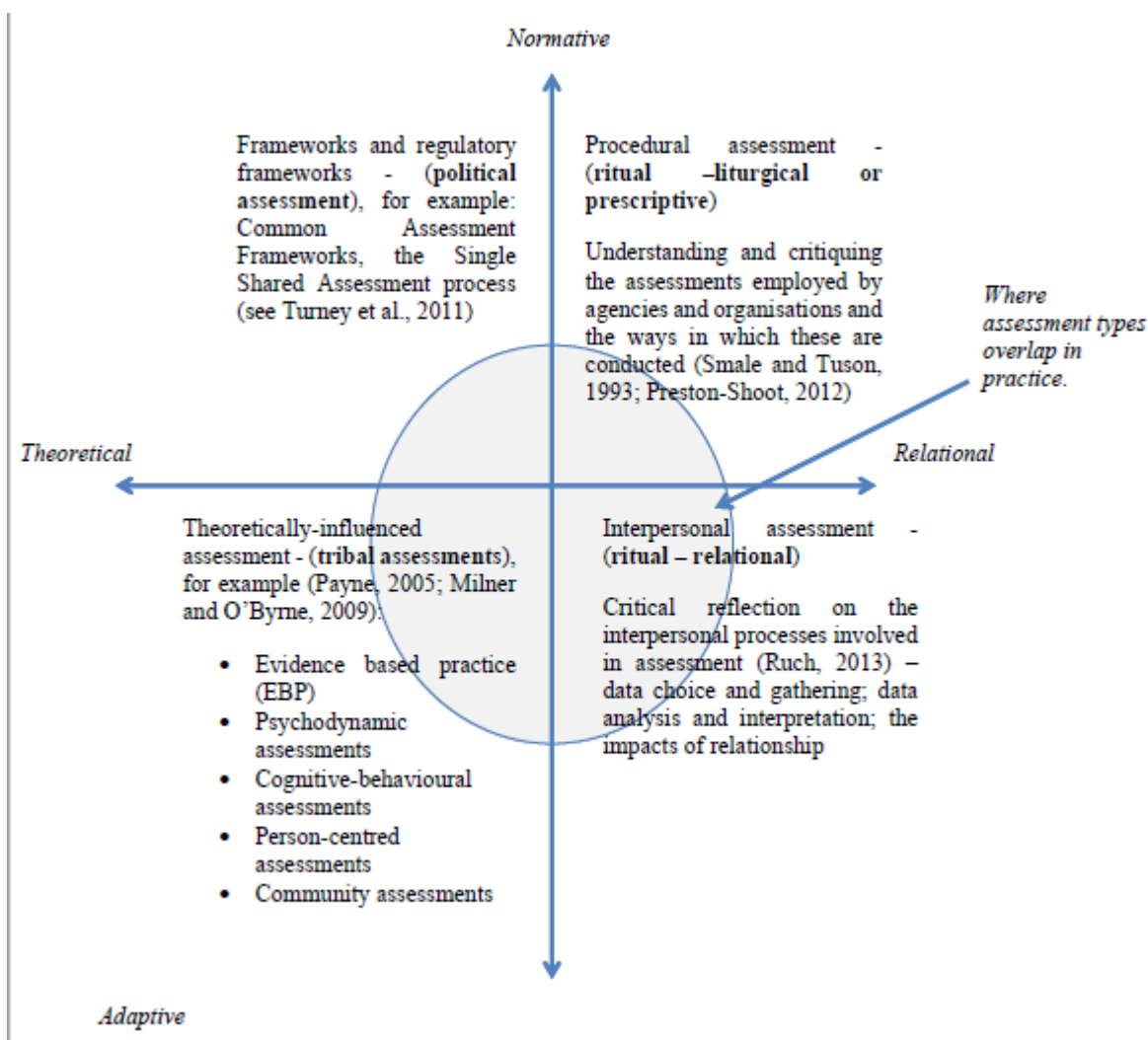


Figure 4. Assessment in daily social work practice (Parker et al., 2017, p.3)

Indigenous Canadian perspectives

In the Canadian context, Bertshca and Bidgood (2010) observe that child welfare practice and policy has historically 'been rife with Eurocentric, mainstream assumptions and cultural misunderstandings' (p.98). Cowie (2010) supports this view, as do MacDonald and MacDonald (2007) who note that child welfare practice and systems for First Nations children have remained unchanged for many years demonstrating that 'colonialist ideologies have not changed significantly in Canada' (p.34) even now. Lindstrom and Choate (2016) reference the challenge laid down by the Truth and Reconciliation Commission to address the inadequacies of Canadian social policy and practices, including with respect to Aboriginal child protection.

Drawing on a wide-ranging literature review, and on expert consultation with Indigenous elders, Lindstrom and Choate (2016) discuss major changes needed in child protection methodologies including in assessment practices. Assessment approaches developed from a Western perspective are likely to be inappropriate for use with Aboriginal peoples, placing them at a disadvantage in their dealings with child protection services. Culturally relevant assessment approaches, they argue, are in urgent need of development in the Canadian context. That development could, Lindstrom and Choate (2016) suggest, be most usefully undertaken by Aboriginal groups themselves or in partnerships between Aboriginal groups and child protection services.

To develop culturally relevant approaches to assessing parenting capacity, taking in to account the expert consultation and the literature review they conducted, Lindstrom & Choate (2016) propose some steps forward. These steps are: including the wider family in the assessment process; the use of appropriate 'family' mapping tools with individuals and families; the use of community support mapping; the use of resilience-based approaches; considering cultural connectedness as well as the impact of intergenerational trauma; including an elder in the assessment conversation; and including the primary support system in home visits made by the social worker as part of the assessment (Lindstrom & Choate, 2016, p.55).

Indigenous American perspectives

Extensive literature, which supports the requirement for culturally relevant assessment tools and processes to be developed and used in social work with Indigenous Americans, is cited by Elliot-Groves (2019). She also remarks upon a body of literature that specifically identifies 'the need for assessment tools to be congruent with local ontological and epistemological ways of being' (Elliot-Groves, 2019, p.3) rather than being situated as universal. Elliot-Groves (2019) goes on to report the results of a small-scale exploratory study, carried out with fellow members of the Cowichan Tribes in the United States, which involved their design and pilot testing of an Indigenous biopsychosocial assessment for use with their tribal youth. An in-depth narrative interview assessment tool was developed 'through a culturally grounded, community-based process. This process supported a focus on relationality, interdependence, and intergenerational transmission of knowledge during the interview' (Elliot-Groves, 2019, p.1).

A detailed account of how the assessment protocol was developed and applied is provided by Elliot-Groves (2019). She describes the four separate phases of developing the protocol, which included 'a focus group with Cowichan elders; a nature walk for tribal members of all ages led by a Cowichan

medicine person; a session of art therapy with Cowichan youth and their families; and audio-recorded narrative interviews with five youth participants' (Elliot-Groves, 2019, p.5). It is concluded that the youth assessment protocol developed and used by the Cowichan Tribes can effectively gather both relevant clinical information and additional data critical to understanding the needs of Cowichan youth that mainstream biopsychosocial assessments are poorly equipped to capture. The strengthened assessment process is expected to contribute to improved outcomes for Cowichan youth and for their families.

Indigenous Australian perspectives

In the case of Australia, Aboriginal and Torres Strait Islander peoples have led work to inform culturally aware mental health policy and practice development which seeks to improve outcomes for Indigenous populations. Assessment, it is argued, to be effective for Indigenous Australians, needs to be conducted in a culturally competent way, and within a culturally secure environment.

Recognising the broad diversity of attributes impacting on an individual's assessment may require practitioners to consider histories of trauma, including intergenerational trauma. Dudgeon and Ugle (2014), for example, emphasises that in order to work effectively with Indigenous Australians and their families, it is first critical to appreciate that they are part of a diverse population in terms of both their cultural and personal backgrounds and histories. Building awareness of a person's kinship connections and obligations is an important starting point in the forming of a relationship and in carrying out an assessment:

Good practice requires professionals to build a picture of all family members and others who might be significant in a particular situation. It is not always obvious who has the final authority about a member's health and wellbeing. For example, for a child it may not be the parents but the grandparents (Dudgeon & Ugle, 2014, p.260).

Working with Torres Strait Islander peoples similarly requires an understanding of their unique and distinctive history and culture, as well as an appreciation of their diversity. The active and ongoing demonstration of sincerity, trustworthiness, openness, honesty, empathy, helpfulness, friendliness, and truthfulness is critical for working with these communities, as is 'being yourself'. Dudgeon and Ugle (2014) also highlight the importance of avoiding criticism of individuals, listening in preference to talking, using humour with care and being open to recognising the knowledge, skill and talent within communities. Involving families in work with individuals is a necessity, as is seeking guidance from Indigenous peoples. Dudgeon and Ugle (2014) go on to explain that care needs to be taken when raising sensitive issues around which there may be cultural taboos. Mentoring from Indigenous elders may also be a possibility in some situations.

The dominating influence of Western models in the assessment and helping processes, which privilege an illness perspective and a focus on the individual, are also noted by Adams et al. (2014). Assessment tools that 'work' for Aboriginal people however, 'are culturally appropriate and validated for Aboriginal populations' (Adams et al., 2014, p.272), being holistic in nature and inclusive of qualitative dimensions. A range of assessment tools and measures designed for use with specific Aboriginal groups such as youth and women are described. These tools and measures are characterised by the emphasis they place on cultural identity, the inclusion of individual, family and community factors and building a comprehensive and nuanced understanding of a person's situation.

Critically however, Adams et al. (2014) assert:

Cultural competence is fundamental to good assessment practice. ...culturally competent assessment involves a commitment by the practitioner to self-exploration, critical self-reflection and recognition of the implications of the power differentials inherent in the role of clinicians and clients (p.278).

The positions of both Dudgeon & Ugle (2014) and Adams et al. (2014) in relation to assessment with Indigenous Australians are supported by Posenelli et al. (2018). In addition, they offer social workers information to support the conduct of effective assessment in urban-based mainstream health settings. The points that Posenelli et al. (2018) highlight are consistent with the focus placed on cultural competence and building a full, culturally and individually relevant assessment profile.

Further weight is added to the argument that assessment practices must be cognisant of Indigenous knowledges, culture and values by Blagg et al. (2018). In discussing the results of research they carried out in partnership with Indigenous communities in Australia around the use of innovative models to address violence against Indigenous women, Blagg et al. (2018) note:

Indigenous participants maintained that Indigenous knowledge needed to be taken seriously and granted the same status as “Western” epistemologies, which means privileging the views of Indigenous men and women as the principle bearers of knowledge on family violence rather than simply helpless victims or incorrigible offenders, bereft of agency (p.7).

Concluding that opportunities exist to develop locally informed Indigenous-led practice models that are responsive to the needs of local Indigenous communities, Blagg et al.(2018) cite:

... strong support among Indigenous and non-Indigenous stakeholders for a “country-centred” approach to family violence practice. Mainstream systems should increasingly defer to Indigenous organisations and Indigenous practices, placing them at the centre of intervention (Blagg et al., 2018, p.6).

The position advocated by Blagg et al. (2018) with reference to Indigenous and locally led practice models is consistent with that of Elliot-Groves (2019) who advocates specifically for development and use of assessment tools built around Indigenous knowledges, ways of knowing and being in the US context.

The practice models Blagg et al (2018) discuss are considered successful for a number of reasons including their strong focus on building ‘long term “open door” relationships with clients, and [acknowledging] the unique cultural obligations of Indigenous women’ (Blagg et al., 2018, p.6-7). Establishing robust and purposeful relationships is considered critical to the success of everything else that follows, including assessment, in terms of supporting Indigenous women to thrive.

Summary – International Indigenous approaches to assessment

- Assessment is influenced by dominant culture and by setting; it is not a neutral process.
- Regular and critical reflection on assessment purposes and process strengthens practice.

- In Canada, culturally relevant child protection assessment approaches need urgent development. Indigenous peoples have advocated for development to be Indigenously led or undertaken in partnerships with child protection services.
- Indigenous Americans argue for the development and use of culturally congruent assessment in mainstream interventions. There are examples of assessment approaches developed by Indigenous Americans, being successfully used to better address the needs of tribal youth.
- Indigenous Australians identify relationships as being pivotal to an assessment approach that benefits them. Conducting assessments in a culturally competent way within a culturally secure environment is critical.

Tangata Whenua assessment approaches and application

As has already been emphasised throughout this evidence brief, a Western perspective has strongly influenced the evolution of the social work profession in this country, along with influencing social work practice and social services agencies operations generally (Hollis-English, 2015). Nevertheless, Hollis-English (2015) observes that Tangata Whenua social workers have been forging approaches to social work practice, inclusive of assessment, 'upon a strong foundation of Indigenous knowledge, theories and values' (p.5).

Relationship building and engagement in social work practice

A Tangata Whenua approach to assessment conceptualises assessment as an integrated component of a wider helping process; that is, the assessment approach is no different to other phases in the helping process insofar as to where and how it is carried out. For some whānau, the marae will offer the best place for interaction, including assessment, whereas for others in their own home may be a better fit. Similarly, Hollis-English (2015) suggests involving kaumātua and engaging with the pōwhiri process will be appropriate for those whānau who are open to that. The use of models such as Whare Tapa Whā to inform an assessment framework might also meet the needs of whānau.

Research carried out by Walsh-Mooney (2009) and Mooney (2012) explores the ways in which Māori social workers prioritise and practice rapport building with rangatahi and their whānau in the early stages of the social work process wherein assessment is carried out. Establishing and maintaining rapport with clients and their whānau is widely viewed as being critical to the achievement of successful outcomes in the helping process. However, there can be significant barriers to rapport building, especially in statutory settings such as child protection where historically, for Indigenous peoples, mainstream social work is strongly linked to punitive practices such as forcible removal of children into State care (Cowie, 2010). As Walsh-Tapiata (2004) observes:

It should come as no surprise that many indigenous peoples are suspicious and distrustful of social workers and others associated with helping systems. Social workers must build trust with indigenous communities before any work can be accomplished (p.4).

Assessment, as noted above, is generally carried out during the early phases of the social work process, and to be most effective, clients and their whānau need to have trust in the social worker. Research carried out by Walsh-Mooney (2009) and Mooney (2012) highlights that for the Māori social workers who took part in her study, drawing on Te Ao Māori values, beliefs and worldview was critical to practice, including rapport building, with both rangatahi and their whānau. She goes on to argue:

Organisations need to be aware of how valuable a rapport relationship can be (particularly for Māori social workers and the individuals and families they work with) and the resources, time and space required in order to achieve this. While this can be difficult due to the likelihood of there being a lack of resources, and time and space may be seen as a luxury when certain tasks are required, for example crisis/high risk assessments, these interactions are enhanced and more authentic with rapport (Mooney, 2012, p.59-60).

Integrating Māori knowledge into social work practice

The critical importance of rapport building aside, Mooney (2012) goes on to emphasise that being clear about the kaupapa of the interaction with the client is necessary along with clarity around tikanga processes and whanaungatanga principles, integrating Māori knowledge into practice at all levels of engagement. Reflective practice is, Mooney (2012) adds, 'essential for Māori social work professional and personal development' (p.49), as is cultural and practice supervision. The increasing demand for, and the critical role of, cultural supervision for practitioners working with Māori and Māori whānau was identified as far back as the early 2000s (Walsh-Tapiata, 2002) and that demand continues unabated as Mooney's (2012) work attests.

Research carried out by Hollis-English (2015) highlights that for the 26 Māori social workers who took part in her study, the values and beliefs that underpin and guide the processes they use, in all stages of their social work practice, are conscious and embedded in their Te Ao Māori worldviews. Participants were drawn from a range of practice settings in turn influencing the opportunities available to them to practice in a way consistent with their theoretical perspectives and worldviews. Hollis-English (2015) concludes 'there are many challenges for Māori social workers within social service organisations that are unsupportive of Māori theories' (p.13).

The extent to which Tangata Whenua social work approaches are being implemented in statutory and non-statutory child and family welfare systems appears to be variable. In part, this may be explained by the culture of the sector within which services are developed and delivered. Whereas in mainstream services generally, and in particular those in the public sector, opportunities to implement Māori social work practice may be limited, the opposite is likely to be the case in Māori controlled Kaupapa Māori providers.

Consistent with Mooney (2012), referenced above, Kirkwood (2014) describes his social work practice with tamariki and their whānau in the engagement phase of a wraparound system of care. This specific case was located within a Child and Adolescent mental health intensive clinical support service at a District Health Board (DHB). He explored the Te Ao Māori values and processes that underpinned his work with whānau in this mainstream service context. Kirkwood (2004) found a high degree of congruency between many of the principles of the wraparound approach and the principles of the Treaty of Waitangi. This congruence helped facilitate a broad scope within which Kirkwood was able to practice; effectively allowing him to practice in a way that fitted with 'who he is' as a Māori social worker.

He describes placing an emphasis on 'voice and choice' that is, about listening to, and learning from, whānau about what their issues are and how they understand them. Mapping the supports whānau have in their communities is a part of this engagement and assessment process, as is considering

‘the most inclusive, less restrictive, culturally appropriate and mana-enhancing settings that whānau access, that safely promote the wellbeing of child and whānau in their community’ (Kirkwood, 2014, p.5).

By way of contrast, Semmons’ (2006) observations of mental health service provision, as a DHB mental health social worker, reflect the findings of Hollis-English (2015) with respect to the challenges Māori social workers may face in some practice settings. She observes that the wellbeing, cultural values and beliefs of Māori clients are often poorly served with limited opportunity for the use of Māori models of care contributing to ‘differences of opinion ... about cause, and appropriate assessment and treatment procedures based on differing cultural constructs of mental illness’ (Semmons, 2006, p.36).

Summary – Tangata Whenua social work assessment approaches

- Relationships are at the heart of engaging with Tangata Whenua in assessment as in all other elements of the social work process. Establishing rapport and relationships takes time which needs to be invested from the outset.
- Drawing on Te Ao Māori values, beliefs and worldview is critical to Tangata Whenua practice. Te Ao Māori principles underpin and drive the assessment process as they do all other elements of the social work enterprise.

Assessment in other fields

Durie has long contended that mental health assessment measures need to be implemented in ways that make sense to Māori and ‘should also be capable of measuring the degree to which cultural and spiritual factors are associated with the problem’ (Durie as cited in Hollis-English, 2015, P.8). Pitama et al. (2007) observe that Te Whare Tapa Whā, Durie’s holistic wellbeing model for understanding Māori health, provides a framework that has been used, and further adapted, to guide preliminary assessment with Māori service users and their whānau in settings including mental health services.

Te Whare Tapa Whā and related frameworks sit alongside Māori beliefs, values and experiences in informing the assessment process. Such frameworks have arguably gained increasing, and well-documented, traction in delivery of health services to whānau (Barton & Wilson, 2008) both by Iwi and in mainstream settings (Pitama et al., 2007, Munford & Sanders, 2011).

Challenges around a Tangata Whenua approach in mental health services

Moving from a primarily Western practice framework to the use of a framework in mental health service delivery that ‘also actively engages with Māori beliefs, values and experiences’ (p.119) is challenging (Pitama et al., 2007). In the development of their Meihana Model, based on Te Whare Tapa Whā, Pitama et al. (2007) found it was critical to keep the model and its clinical application firmly anchored within a Māori paradigm. Doing so helped to avoid the discourse becoming ‘de-Māorified’ (Pitama et al., 2007, p.120) which tended to happen among some practitioners who viewed the assessment approach as simply a reflection of best practice generally. For some too, the Model tended to be viewed as a convenient check list to tick off and to apply to their work with members of any ethnic minority group.

Whilst at a conceptual level, a framework such as Te Whare Tapa Whā can provide overarching guidance, its application on a day-to-day level in a practice setting requires further clarification specific

to that setting. Pitama et al. observed that when such clarification was not grounded in an appropriate cultural context, this tended to 'lead to a default to predominant culture assumptions and expectations, with little if any real consideration of clients' specific cultural needs and wants' (Pitama et al., 2007, p.120).

Ways forward for a Tangata Whenua assessment approach in mental health

The Meihana Model, and its contribution to assessment that 'works' for Māori, is described by Pitama et al. (2007). They stress that in implementing the model, the practitioner needs to be mindful of the overlay of Māori beliefs, values and experiences across each of its dimension. The purpose of so doing is to facilitate the integration of cultural realities with the presentation of the client. The Meihana Model is made up of six interconnecting dimensions that together comprise a multidimensional assessment tool (Pitama et al., 2007). Use of the tool is an ongoing process involving the individual, their whānau and likely several key workers with one practitioner acting as the lead facilitator coordinating 'the gathering of assessment information across the dimensions' (Pitama et al., 2007, p.121). The dimensions comprising the model are whānau, Tinana, Hinengaro, Wairua, Taiao and Iwi Katoa.

With respect to the whānau dimension, the emphasis is on making sure whānau are included in assessment processes in ways that work for them. It includes having organisational policies in place to support whānau involvement in the work with the individual. With respect to the tinana dimension, it is critical to facilitate access to culturally appropriate services to contribute to the assessment of physical wellbeing and to have the policies in place to support this element of the assessment. Within the hinengaro dimension, the role of appropriate cultural context is integral to the use of assessment tools and decision making.

With respect to the wairua dimension, taking account of spiritual practices along with feelings of attachment is important. The Taiao dimension concerns ensuring the physical environment is conducive to the participation of the individual and of the whānau in critical processes including assessment. Finally, the iwi-katoa dimension considers, in assessment processes, the social contextual factors impacting on the wellbeing of the individual and their whānau. Pitama et al. (2007) therefore emphasise that assessment is much more than an interaction between a practitioner and an individual, incorporating:

... a combination of multiple relationships that occur within a larger system ...[enabling] clinicians and services to recognise the need for development of support initiatives and policies that create an environment responsive to the needs and aspirations of Māori (p.123).

A study recently carried out in West Auckland with tāngata whaiora, whānau and kaimahi from four mental health service providers (Strang et al., 2018) identified that cultural and clinical processes have the maximum effect when they are well integrated for the benefit of tāngata whaiora. They also noted that Māori models used to guide service delivery were most effective when they were aligned with the day to day realities of life for urban Māori using the services. It was important therefore that opportunities existed to develop and implement 'innovative and bespoke cultural models' (Strang et al., 2018, p.7) of practice.

In the field of psychology, Manna (2003) proposes the use of an interactive Māori model that she argues is of greater value in the process of assessment in the Aotearoa New Zealand context because

it acknowledges all the dimensions of wellbeing from a Te Ao Māori worldview: physical, spiritual, whānau and mental. Te Pounamu aims to integrate a Māori model with traditional clinical assessment processes. Manna (2003) contends that Te Pounamu can usefully be implemented in a bicultural practice setting.

A review of the literature related to effective assessment and treatment of Māori parents with substance use disorders (SUDs) was conducted by McLachlan et al. (2015). They noted the consistently significant contribution that parental SUDs make to adverse outcomes for tamariki. Māori, in common with other Indigenous populations, have higher rates of SUDs and psychiatric disorders than the Tauwiwi population in tandem with resulting impacts that tend to be more severe.

Findings of the McLachlan et al. (2015) review highlight the critical importance of carrying out thorough assessment, inclusive of both individual and whānau protective and risk factors and considering possible child welfare issues. Wharewera-Mika et al. (2016) too stress the need for thorough assessment, including gathering information about past trauma where relevant. McLachlan et al. (2015) conclude that to work effectively with Māori, practitioners need to have 'at least some basic knowledge and skills in Whānau Ora philosophy and whānau-centred best practice' (p.96).

A Whānau Ora approach

In the context of Whānau Ora practice, [Te Puni Kōkiri \(2015\) in *Understanding Whānau-centred approaches: Analysis of Phase One Whānau Ora research and monitoring results*](#) discusses what whānau-centred approaches to practice 'look like' and how they contribute to improved wellbeing outcomes for whānau. They identify that critical to effective practice is a firm anchoring in Te Ao Māori and in whanaungatanga. Effective relationships are a touchstone which are essential for supporting positive change.

The results of the analysis of Whānau Ora practice highlight that practitioners and providers work with whānau in ways that are 'effective in generating high levels of trust' (Te Puni Kōkiri, 2015, p.10). With trust and rapport established it becomes increasingly likely that whānau will continue to engage successfully with providers, enhance connectedness both within and between whānau, as well as culturally. Benefits accruing from this connectedness include skill and knowledge development.

Approaches in public health primary care

Research being carried out by Harwood et al. (2018) is focusing on collecting and analysing the results of the application of a Mana Tū model of care, including success factors. The Mana Tū model of care, a whānau ora approach to diabetes type 2, is being developed and implemented to address ethnic and social inequities in disease rates, outcomes and determinants. The model of care is an evidence based Kaupapa Māori programme designed for the primary health care setting.

A key element of the model is that practitioners conduct a full initial assessment with clients, many of whom are Māori. Harwood et al. (2018) provide a brief description of the approach taken to assessment, noting that it:

...includes clinical, social, health literacy and whānau-wellbeing related questions that are validated and reliable; and specifically seek whānau participation. Importantly, by going through a checklist, listening and facilitating the process where the person and their whānau identify

opportunities to take charge, people take ownership and are more engaged about living with their long-term condition (p.79).

Being able to effectively carry out the assessment process outlined above is crucial. Having the skills, aptitudes and cultural competence to establish the necessary relationships, build rapport and work longer-term with clients are important requirements of the key worker, or kai manaaki, assigned to each client. To this end, the kai manaaki who are driving the Mana Tū model of care are drawn from a range of practice disciplines including social work. Ensuring practitioners are culturally competent to work with Tangata Whenua is also emphasised by others, including Wharewera-Mika et al. (2016) who also promote having in place a robust Tangata Whenua flax roots level workforce.

In reporting their study of the Māori cultural adaptation of a brief mental health intervention in primary care, Mathieson et al. (2012) note that increasing the skill of primary care health workers in Māori mental health assessment is likely to enhance early intervention and reduce the need for referral. They additionally note that elements of practice considered important to include in working with Māori are:

an emphasis on whakawhanaungatanga (the process of forming relationships); an emphasis on the whānau (family) and iwi (tribe); use of te reo...; an emphasis on spirituality and fostering of strong cultural identity. At the same time, it is important to maintain awareness of cultural diversity among Māori...International indigenous literature reflects similar concepts and values to those that have been identified in the New Zealand literature (Mathieson et al., 2012, p.232).

Approaches in nursing

In nursing, as in social work, assessment is an integral component of practice. The dearth of models available in the nursing arena to guide practice that are 'constructed within a Māori cultural context' is noted by Barton and Wilson (2008, p.6). They contend that the Te Kapunga Putohe (the Restless Hands) model, can contribute to filling the practice-model gap, illustrating 'how Māori knowledge and the knowledge of nurses can be incorporated into the health experiences of Māori clients' (Barton & Wilson, 2008, p.6). If the practitioner is able to confidently support a positive Māori identity within a service setting that is clearly respectful of Māori values, beliefs and practices, it is more likely that better Māori wellbeing outcomes will be achieved.

The principles underpinning the model include acknowledging and working with the person, and their whānau, as part of a wider collective, as well as working 'in partnership with the tangata (person) to promote their self-determination and personal integrity' (Barton & Wilson, 2008, p.11). In the view of Barton and Wilson (2008) Te Kapunga Pūtohe, though principally a resource for Māori nurses, can be used by Tauwiwi working with Māori people and their whānau. They do note however, that the utility of the model 'does require understanding of mātauranga Māori and tikanga Māori (Barton & Wilson, 2008, p.13).

Findings from research conducted by Dudley et al. (2014) in relation to neuropsychological assessment, highlight the importance of health practitioners recognising and valuing the cultural identity and background of Māori clients through the assessment process. They add that 'culturally responsive neuropsychological assessments ...lead to better outcomes for ... Māori ... and their whānau' (p.20).

Summary – Assessment beyond social work

- In mainstream health, and particularly mental health, services Tangata Whenua models such as Te Whare Tapa Whā may be promoted to better guide assessment with Māori service users and their whānau.
- Moving from a primarily Western practice framework to the use of a Tangata Whenua framework presents challenges. Whilst frameworks provide guidance, application on a day-to-day level in specific practice settings needs to be made clear.
- Several Tangata Whenua assessment models are being successfully used in health services. Key to their success includes involving whānau, having appropriate supportive organisational policies in place, taking account of spiritual practices and providing a culturally responsive physical environment.
- To work effectively with Māori, practitioners need to have 'at least some basic knowledge and skills in Whānau Ora philosophy and whānau-centred best practice' (McLachlan, 2015, p.96).

Assessment tools

Tools for identifying and organising information about family life, and tracking family history and behaviour patterns such as ecomaps and genograms are at times used by social workers and others in the health and social services practitioners, for assessment, planning and intervention purposes. In the family assessment process, the genogram and the ecomap can also be used in conjunction with risk assessment tools (Kennedy, 2010a).

The use of ecomaps and genograms, in work with whānau, is described and analysed by Kennedy (2010a, 2010b). Ecomaps are diagrammatic representations of 'the relationships and influences between individuals, families or collectives, and their ecological environment, including their social and support networks' (Kennedy, 2010a, p.1). Genograms are also diagrammatic; however, they focus on illustrating the relationships within and between whānau, including family, social and emotional relationships. They may also incorporate social and health data including age, health status and education.

In the course of her research carried out with whānau, Kennedy (2010a, 2010b), has reimagined the ecomap and genogram as tools for the Aotearoa New Zealand context, ensuring that they are Māori centred and that they can contribute to whānau ora. She explains that building ecomaps and genograms is for her a collaborative process drawing on the multiple perspectives of whānau to foster engagement and create resources that are meaningful for whānau. She further explains:

The collaborative process assists in building awareness and strengths of relationships and influences, and may also provide insights leading to self-reflection, the volunteering of further information, and/or lead to the identification of unrealised potential (Kennedy, 2010a, p.1).

The genogram and ecomap tools can be used together Kennedy (2010b) explains, to generate a more holistic understanding of the life of a whānau and the influences upon it. Finally, she observes alignment of the tools with:

Kaupapa Māori principles and practices by taking a collective approach to looking at whānau, which goes beyond the narrow approach utilised thus far – that of deriving populations from the aggregation of individual data. Viewing whānau as a collective as determined or depicted by

whānau will be the value of this method, which in turn will inform policy more accurately than through the aggregation of individual data (Kennedy (2010b) p.8).

A tool and approach reimagined for use in the Aotearoa New Zealand context by Pipi (2010) is also now being used by practitioners in the assessment process in the alcohol and other drugs field. In her action research and evaluation work with whānau, Pipi (2010) uses PATH (planning alternative tomorrows with hope) primarily as a planning resource, inspiring other Kaupapa Māori researchers to further develop the use of the tool in their own communities (see, for example, Potaka Osborne & Gifford, 2018).

PATH is versatile and is used across a range of practices. The PATH process needs to be guided by a skilled practitioner who is able to work effectively with individuals and with their whānau using a collaborative style. The process results in the creation of a visual representation of where a whānau is currently, in terms of its overall wellbeing, whilst also clarifying and capturing their aspirations for their shared future.

The PATH tool and the PATH process resonate strongly with Māori, aligning well with Kaupapa Māori principles and practices (Pipi, 2010). The moemoeā and tūmanako (dreaming and visioning) elements of PATH are, she believes particularly powerful, adding:

What I have learned is that when you give the participant the pen to create their own images of their ideals, they create an image that has a 'pull' for themselves and others toward those ideals. Often these images will contain Māori symbols such as the poutama, the awhiowhio, the koru and harakeke – images that provide powerful cultural hooks to concepts, ideals and visions (Pipi, 2010, p.6).

Key to the effective use of the tools and processes outlined above, as each of the authors emphasises, is skill in whānau centred practice. Eruera et al. (2013) concur, noting a raft of skills and expertise required by practitioners who must be competent in:

creating a meaningful relationship with the whānau whereby whānau take the lead supported by the facilitator; managing whānau dynamics; the practice of tikanga processes; the facilitation of healing and conflict resolution; ensuring inclusiveness and opportunities for intergenerational participation; maintaining a safe space; providing a forum that enables whānau to discuss and agree upon their own kawa or practices for communication and treatment of each other; facilitating a process for whānau to identify and agree upon a collective moemoeā or vision, recognising each other's strengths and gaining continued participation in the process (Eruera et al., 2013, p.10).

Summary – Assessment tools

- Tools such as ecomaps, genograms and PATH are sometimes used by social workers, and other health and social services practitioners, including in the assessment process.
- In Aotearoa New Zealand the ecomap, genogram and PATH tools have been 're-imagined' by Tangata Whenua and used collaboratively in a range of ways with whānau, including in research.

- The ability to work in a whānau centred way is key to the effective use of these re-imagined tools.

Bicultural assessment approaches and their application

It is the Indigenous voice that sets the standards from which to determine how Indigenous narratives are represented within Western ways of knowing (Smith as cited in Karena, 2012, p.63).

Biculturalism and its history in Aotearoa New Zealand

Ruwhiu (as cited in Munford and Walsh-Tapiata, 2006) describes biculturalism as a relationship between an Indigenous people and those of other cultures. Sibley and Liu (2004) assert that Biculturalism¹⁰ has its roots in this country in the 1840 Tiriti o Waitangi with its notion of partnership between Tangata Whenua and Pākehā (at that time represented by the British Crown).

Biculturalism is described by Belich (as cited in Sibley & Liu, 2004) as 'one of the most important social and political developments in New Zealand in the last half century' (p.88). Morgan and Mattson (2018) add that Biculturalism came to prominence in this country late last century as a way of making sense of the relationship between Tangata Whenua and Tauwiwi. The Māori renaissance that began at that time, as Tangata Whenua reasserted their identity and challenged the social, political and economic dominance of Pākehā, demanded a rethink of the relationship between Tangata Whenua and Pākehā Tauwiwi/non-Māori¹¹ (Morgan & Mattson, 2018, p.6).

Making the partnership between Tangata Whenua and Tauwiwi enshrined in Te Tiriti o Waitangi a reality, did not begin to occur until the late 20th century. Even then, Sibley and Liu (2004) argue, while Biculturalism had emerged as a general principle of governance in Aotearoa New Zealand, there has been a significant lag in biculturalism being implemented in specific policy areas.

Whilst many Pākehā support biculturalism in principle far fewer are supportive of it in relation to the reallocation of resources in favour of Tangata Whenua (Sibley and Liu, 2004). Thus, as Bennett and Liu (2018) assert, 'Biculturalism is a system of meaning that contributes to the construction of New Zealand identities...It is not about a substantial redistribution of power and resources in favour of Māori that a more substantive partnership should imply' (p.95).

Working Biculturally

Consistent with the position of Bennett and Liu (2018), King (2014; 2017) asserts that it is important to take a critical approach to biculturalism being aware that the ideals it represents are not necessarily

¹⁰ In this brief, Bicultural with a capital letter refers specifically to the relationship between Tangata Whenua and Tauwiwi (including Pākehā) in the Aotearoa New Zealand context whereas bicultural (with no capital) refers to the relationship between Indigenous peoples and coloniser/settler populations generally.

¹¹ The term Tauwiwi includes Pākehā but it also includes all those peoples who have arrived in this country subsequent to the signing of Te Tiriti o Waitangi e.g. Pacific and Asian peoples as well as Eastern Europeans and others. All these peoples have now joined Pākehā as Te Tiriti partner to Tangata Whenua.

translated into practice in the social workspace. For that translation to occur, the place for Tangata Whenua as an equal partner with Tauīwi needs to be assured.

Working in a Bicultural way cannot be taught, rather it needs to be lived and experienced according to Mataira (as cited in Goldson & Fletcher, 2004). On the other hand, Goldson and Fletcher (2004) suggest that classroom-based learning may support the ability to practice Biculturally. They discuss their experience of facilitating the learning of counselling students, most of whom are Pākehā, and preparing them to practice in a Bicultural context. They conclude:

Setting up a democratic classroom context, which invites freedom of expression and the right of reply between Treaty partners, seems to be highly conducive to the creation of a jointly owned Bicultural praxis. Perhaps most important of all, modelling a committed partnership between Māori and Pākehā would seem to be an effective method for facilitating authentic engagement of students in the complexities of the Bicultural training context (Goldson & Fletcher, 2004, p.41).

Bicultural practice in social work, Munford and Walsh-Tapiata (2006) note, centres around Te Tiriti o Waitangi, with the responsibilities and rights it confers, and is relevant both for Māori and for Pākehā (and other Tauīwi). The challenges facing the development of Bicultural practice in this country are significant yet, as Munford and Walsh-Tapiata (2006) articulate, moving forward is reflected in attempts being made by social workers:

...to translate the articles of the Treaty into...daily practices and to have a commitment to look at new ways to contextualise it as a living document and as a guide for ...practice with diverse populations. It begins with work on articulating what relationships and partnerships actually mean in practice and identifying how Bicultural frameworks, where both tangata whenua and tauīwi contribute, are present in all aspects of our work (p.428).

Bicultural assessment challenges

In specific relation to assessment processes, Moyle (2014) notes the major negative impact for whānau when social workers are unable to practice biculturally. Her research identifies that whānau are regularly being assessed only on their presenting issues with inadequate canvassing of the underlying issues and contributing factors impacting whānau. Such a narrow view reflects that often Pākehā and other Tauīwi social workers lack understanding of Te Ao Māori and have little if any networks among Tangata Whenua. Positive outcomes for whānau are further jeopardised, Moyle (2014) observes, when risk assessment tools are culturally inappropriate and at best adaptations of tools imported from non-Indigenous sources outside of Aotearoa New Zealand.

Research with Tangata Whenua social workers conducted by Moyle (2014) examines their experiences in the care and protection field. She notes the poor Bicultural practice her study participants report regularly witnessing among their Pākehā social work colleagues. That lack, in turn, contributes 'to significant barriers that whānau Māori experience in care and protection' (Moyle, 2014, p.55). Often, the study participants took it upon themselves to compensate for the dearth of Bicultural practice capability among their Pākehā colleagues in the care and protection system, informally adding to their own already significant practice responsibilities.

Moyle (2014) observes that the under-representation of Indigenous social work practitioners in care and protection work is particularly detrimental as it limits 'the growth of Māori-appropriate

programmes and methods in essential social work with whānau' (p.57). However, more Tangata Whenua social workers alone will not, in itself, effect change; to achieve that will demand additional strategies, including incorporating Tangata Whenua knowledge into mainstream delivery frameworks. In practice, Moyle (2014) adds, 'this means whānau Māori-specific teams with Māori and non-Māori practitioners working Biculturally using Māori practices and methods' (p.57-58).

As has previously been noted, approximately two-thirds of the Oranga Tamariki social work workforce is Tauwiwi, mainly Pākehā, but Māori tamariki are disproportionately represented among those who come to the attention of the agency. Inevitably then, Tauwiwi social workers will be carrying out assessments and other interventions with tamariki and their whānau. As Walker (2012) asserts, 'If people are going to work with Māori then they will have to learn how' (p.66). The challenge will be in facilitating the necessary learning and shifts in perspective. Preparing practitioners for practice in a Bicultural context is a dynamic process. Adding to the complexity, in Walker's view, is:

...the development of Bicultural practice in Aotearoa New Zealand is still at such an emergent phase... Students may be limited in their Bicultural development because of [a fieldwork placement] organisation's 'hard' or 'soft' commitment to Bicultural goals, structures, policy and subsequent practice (Durie, 1995, 'Bicultural Continuum') (2012: 71).

Social work education, Keddell and Hyslop (2019) note, includes a focus on Biculturalism and on structural analysis, that explores racism, colonisation and their impact on Tangata Whenua. However, education is arguably limited in its ability to influence Bicultural social work practice as other competing influences are also at play. Citing Beddoe, Keddell and Hyslop (2019) observe, for example:

social workers are not immune to the constant immersion in negative media stories or social commentary [that targets Tangata Whenua]. This is especially pronounced within a neoliberal environment where individualised blame is never far from the surface of public comment' (p.411).

They go on to argue that this broader social context, which tends to situate Tangata Whenua as 'inherently riskier than other groups' (Keddell and Hyslop, 2019, p.411) may in turn colour decisions made by some social workers in the assessment process, despite any social work education they may have undertaken.

Research carried out exploring statutory and non-statutory social workers perceptions of risk, in the course of conducting child safety assessment, and the impact of ethnicity on their associated decision making is discussed by Keddell and Hyslop (2019). Using a Māori whānau vignette and a Pākehā family vignette, study participants were asked to rate child safety risk. Research findings indicate that practitioner assessment of risk was, to at least some degree, impacted by client ethnicity; child safety was assessed as being a higher risk in the case of the Māori whānau vignette than in the case of the Pākehā family vignette.

Bicultural assessment enablers

Skilled, consistent and regular Bicultural supervision may contribute to more robust Bicultural assessment practice. Henley (2013) argues that 'using a Bicultural approach supported by Bicultural supervision strengthens the work that social workers do with Indigenous families and ensures that ... social workers practice from a Bicultural perspective' (p.57). She goes on to assert the contribution that using a Bicultural framework can make to supporting positive outcomes for clients. Whilst the

primary client group targeted for improved outcomes may be Tangata Whenua, nevertheless ‘the widening of Bicultural and Indigenous therapeutic and health spaces in Aotearoa/NZ is likely to bring great benefits to Māori [as well as to]... others (Bennett and Liu, 2018, p.94).

Drawing on Māori cultural frameworks

Māori cultural frameworks such as Te Whare Tapa Whā, have been taken on board, to varying degrees, by mainstream health and social services service providers, practitioners and educators across diverse fields (Munford and Sanders, 2011). Munford and Sanders (2011) additionally contend that the influence of these frameworks, central to Māori social work practice, holds significant promise for the development of mainstream social work practice responsive to the needs of Māori. A Bicultural approach, Munford and Sanders (2011) suggest, ‘which combines the knowledge and practice that both Māori and Tauīwi bring to the helping relationship allows workers to develop culturally sensitive and responsive practice’ (p.74).

Concrete examples of shifts in practice norms in mainstream social work, in taking on board Māori cultural views, are explored by Munford and Sanders (2011). They describe ‘specific constructs that ... [their] research has shown to feature prominently in mainstream social work practice settings’ (Munford and Sanders, 2011, p.65). The constructs of kaupapa, tikanga/kawa and within that construct homai ki te tangata, te kanohi ki te kanohi and manaakitanga; and ako are, Munford and Sanders (2011) note, being used in practice ‘in constructive and developmental ways to shape ...work with clients, ...work with each other and also to shape interactions with other key stakeholder groups’ (p.67).

Drawing on Māori cultural frameworks In the family violence field of practice

In the family violence field of practice, Little et al. (2013) provide a further example of the shift to using elements of Te Ao Māori in assessment and intervention that Strang et al. (2018) refer to above. Little et al. (2013) describe the use of the whakawhanaungatanga process in a Bicultural approach noting:

the process sets in motion the vehicle that enables a sourcing of a wide range of support and/or information. It then becomes the binding force in its various settings to collaborate and gain consensus (p.50).

In the family violence field of practice also, the Tū Mai Awa framework and its application is discussed by Morgan and Mattson (2018). Tū Mai Awa is a locally developed framework intended to inform a Biculturally sensitive and consistent project approach to family violence intervention and systems advocacy. Morgan and Mattson (2018). explain:

The understanding of Biculturalism mobilised in this project is informed by Te Tiriti o Waitangi (Treaty of Waitangi) and Māori explanations of how the spirit and intent of Māori agreement to Te Tiriti can guide Bicultural practice (p.6).

The Tū Mai Awa framework is built around the three houses metaphor which features a whare each for Tangata Whenua and for Pākehā along with a shared Treaty House for the two peoples to come together safely in a Bicultural partnership (Royal as cited in Morgan and Mattson, 2018). Within the Treaty House the principles of tikanga Māori and response-based practice have evolved together to generate a Bicultural approach to working with family violence: ‘working reflexively, upholding dignity,

intervening safely, and engaging social analysis' (Morgan and Mattson, 2018, p.8). What each of these components of the Tū Mai Awa Bicultural framework 'look like' in action is described in further detail by the authors.

Drawing on Māori cultural frameworks in mental health services

Since the 1990s there has been a growing trend for elements of Te Ao Māori to be used in assessment, planning and treatment, specifically in mental health services (Strang et al., 2018). A literature review carried out by Strang et al. (2018) highlights a shift to:

...incorporate cultural care for Māori; a movement from identifying need and reason has gradually translated into actual cultural care provision for Māori within therapeutic settings. The result of this is an interface, where Western and Māori models of health are considered and practiced (p.41).

In their evaluation of a cognitive behavioural therapy protocol, specifically designed to meet the needs of adult Māori with depression, Bennett et al. (2014) explore whether or not incorporation of Māori processes contributed to successful outcomes for Māori clients. Processes used included engagement, spirituality, whānau involvement and metaphor. They conclude that the intervention worked well, with clients reporting a reduction in symptoms of depression. They add:

there can be little question that the provision of a mental health service which not only acknowledges but actively celebrates the uniqueness of a client's ethnic identity represents a state of affairs to be highly coveted (Bennett et al., 2014, p.11).

The intersection of the clinical and the cultural in the formulation of a framework for carrying out psychological assessments in Bicultural settings with Māori is considered by Macfarlane et al. (2011). By way of providing context, they note the predominance of Pākehā among practitioners and the disproportionately high number of Māori service users. In common with Durie, they go on to emphasise the importance of effectively carrying out culturally relevant assessments that 'make sense' for Māori.

Although the practitioner and the client may have little in common in terms of age, gender, ethnicity and so on, Macfarlane et al. (2011) contend that nevertheless they will still 'share many aspects of common humanity, including lifelong experience of being both assessor and assessed' (p.7). Approaches to assessment that contribute to the process being a genuinely collaborative undertaking are supported by Macfarlane et al. (2011). They recognise however, that assessment as a shared enterprise poses particular challenges when there are cultural gaps between the assessor and the assessed.

Macfarlane et al. (2011) note that whilst there is a growing literature exploring aspects of assessment in the field of psychology that 'work' better for Māori, this has provided limited guidance around the extent of cultural process necessary. To fill that gap, Macfarlane et al. (2011) describe their use of the Tō Tātou Waka psychological assessment model. Tō Tātou Waka is built around a Māori worldview. Utilising the model requires that the practitioner be open to learning about Te Ao Māori 'so that they can better understand, acknowledge as important and infuse into their practice particular social and behavioural nuances specific to Māori' (p.11).

The model includes appropriately seeking out the support and guidance of senior members of the Māori community to guide practice and using relevant processes of engagement and interaction with

the individual and their whānau. It 'proposes that culture is materially, socially and ideologically constructed and embedded in the lives we live. Tō Tātou Waka is not [however] a stand-alone framework that can simply be applied regardless of context' (p.12-13).

Drawing on Māori cultural frameworks in social services learning facilitation

Finally, the Takitoru decolonising framework, used in his work to support Māori counselling students to recognise, understand and work with intergenerational trauma, is critiqued by Karena (2012). The framework draws on a series of five models that are consecutively used to raise awareness of the personal and broader social impacts of colonisation, in the first instance, to stimulate reflection and to subsequently impact practice. In the fourth phase of framework implementation, participants focus on personal transforming power to move past the impacts of the historical trauma driven by the colonisation process. In the fifth and final solution-based phase, Māori and Pākeha/Tauīwi students prepare to work together in a meaningful way through separately negotiating a Te Tiriti o Waitangi journey of discovery. An intended outcome is the forging of a robust Bicultural partnership.

For the practitioner, being equipped to undertake genuine Bicultural practice that 'works' for Māori whānau, is underpinned by a Bicultural perspective 'that stems from a Kaupapa Māori epistemology, and Indigenous worldview that links professional practice with culturally safe practice' (Karena, 2012, p.73).

Principles for action

Jigsaw et al. (2014) in *Increasing Violence Intervention Programmes Responsiveness to Māori: a Whānau-centred approach for the VIP programme* describe principles for informing action that health professionals, including social workers, can use in their everyday practice to improve effectiveness of their services for Māori and Māori whānau. Jigsaw et al. (2014) identify what is working well for violence intervention programme participants in different regions of the country.

As an outcome of determining what is working well, 12 principles to inform practice responsive to Māori are identified. Though assessment is not specifically referenced, the 12 practice principles are applicable to all phases of the helping relationship. Of particular value for the practitioner is the inclusion of concrete ways that each of the 12 principles can be put into action. For example, in relation to the principle of Manaakitanga, it is suggested:

...action is taken to enhance the mana (prestige and integrity) of each individual. Relationships are based on compassion, generosity, reciprocity and respect. Ways to put this into practice: Build trust with Māori individuals and whānau from the first point of contact; Convey a genuine, open, supportive, caring and respectful attitude; and offer a comfortable and welcoming environment for Māori (including the physical environment and the behaviour and attitudes of health professionals) (Jigsaw et al., 2014, p.26).

Finally, it is clear that the principles of practice developed by Jigsaw are readily transferable to other fields of practice to inform a Bicultural approach.

Summary – Bicultural assessment approaches

- Biculturalism in Aotearoa New Zealand has its roots in the 1840 Tiriti o Waitangi with its notion of an equitable partnership between Tangata Whenua and latterly, Tauwi.
- Despite Biculturalism being recognised as a general principle of governance, there is only emergent evidence of Biculturalism in policy and practice. The place for Tangata Whenua as an equal partner with Tauwi needs to be assured if Biculturalism is to further develop.
- Whilst Tangata Whenua social workers are equipped to practice Biculturally, there is a significant lack of Tauwi social workers who are able to do so. That lack impacts significantly on the wellbeing of Tangata Whenua service users as well as on Tangata Whenua practitioners.
- There is arguably some traction being gained in supporting the development of Bicultural practice competencies among Tauwi social workers; Bicultural supervision and familiarity with Māori frameworks may contribute to competency gains.
- Bicultural assessment approaches are being developed and utilised in fields of practice, including family violence and mental health.
- Principles of action that support Bicultural ways of working and readily translate to practice situations have been developed in the family violence field of practice.

How are these approaches sustained?

Embrace opportunities to learn about Te Ao Māori. Introduce yourself to the whānau, make eye contact, ask who they are. And be aware that we know ourselves best and we are responsible for our own wellbeing – Ngaropi Cameron, Chief Executive and Senior Family Violence Programme Facilitator and Educator, Tu Tama Wahine o Taranaki (Jigsaw et al., 2014, p.21).

The literature reviewed identifies examples of Tangata Whenua, Indigenous and Bicultural assessment approaches being implemented, to varying degrees, across the health and social services both nationally and internationally. In most instances, challenges around using these approaches are also highlighted. Nevertheless, efforts to embed Tangata Whenua, Indigenous and Bicultural assessment approaches are continuing.

Ways of sustaining Tangata Whenua, Indigenous and Bicultural assessment approaches, in societies wherein Western approaches remain ubiquitous, are explored in several of the papers we have reviewed. Hollis (2015), for example, discusses the support that Tangata Whenua social workers need to develop their cultural knowledge, to effectively integrate their Tangata Whenua identity, theory and tikanga into practice and to sustain it. Assessment is, of course, an integral component of that social work practice.

Right across the social services, Hollis-English (2015) contends, there is a need to significantly increase the levels of awareness and knowledge of Tangata Whenua theories, how these theories inform practice and the resulting benefits that accrue for Māori clients when Tangata Whenua approaches are used. She argues that key sources of support, facilitating Tangata Whenua social workers to practice as described above, include social work training organisations, social services agency management systems and structures, and in fact 'all social workers that are dedicated to providing Indigenous families with more appropriate support' (Hollis-English, 2015, p.13).

Noting that many social services agencies are transitioning to working in ways congruent with Te Tiriti o Waitangi, Hollis-English (2015) recommends that they need to ensure cultural capability at an organisational level and not simply rely on the goodwill of individual Tangata Whenua employees to provide that capability. She encourages agencies to constantly reflect on their Bicultural practice, formalising this through the establishment of a system of organisational review.

Ways of sustaining a Bicultural approach to assessment are also explored by Pitama et al. (2007), who consider how implementation can be nurtured in mainstream mental health services. They emphasise that, in order for a Bicultural assessment approach to become effectively embedded in practice, the wider implementation context needs to be 'structurally committed to increasing success outcomes for Māori' (p124). By the wider implementation context, they mean the funding, planning, design and delivery levels of the system within which a Bicultural assessment approach is being applied.

Under the broader umbrella of a structural commitment to increasing success outcomes for Māori, mental health services need 'to provide adequate support and professional development for clinicians to enable them to develop a clearer understanding of Māori beliefs, values and experiences' (Pitama et al., 2007, p.124). The support for clinicians that Pitama et al. (2007) reference, to ensure that appropriate assessment and analysis is conducted, includes having Māori colleagues, Kaumatua and other Māori support roles in place, available and fully utilised throughout the entire assessment and intervention process.

The professional development requirements for clinicians, including social workers, using the Meihana model Bicultural assessment approach includes:

explicit support and resources to enable workers to extend beyond the potentially limited focus of Western paradigms. The Meihana model has the prerequisite that clinicians who utilise it have a clear understanding of cultural safety and cultural competency and are able to demonstrate abilities within both of these areas with regards to Māori (Pitama et al., 2007, p.121).

Factors contributing to the sustainability of implementing non-Western assessment approaches in the health and social services are clustered at a number of levels. At the organisational management and governance level it is critical that Tangata Whenua and Bicultural approaches to assessment and intervention are supported through overarching policy and commitment to prioritising positive outcomes for Tangata Whenua. Dedicating the necessary resources to make that commitment concrete is required. At the service level, ongoing practice supervision and professional development is necessary. At practice level, opportunities to practise using a mana-enhancing approach need to be prioritised and supported as does the commitment to critical reflection on practice.

Summary – Sustaining approaches

- Sustaining Tangata Whenua social work approaches, inclusive of assessment, requires supporting Tangata Whenua social workers to develop their cultural knowledge.
- A significant increase in awareness and knowledge of Tangata Whenua theories, how they inform practice and how they benefit Māori clients is necessary.

- Social work training organisations, social services agency management systems and structures and social workers generally have a responsibility to sustain Tangata Whenua approaches.
- Bicultural capability development is an organisational responsibility not the responsibility of individual Tangata Whenua employees. At funding, planning, design and delivery levels of the organisation a commitment to a Bicultural approach needs to be in evidence.

What has 'worked' for Indigenous peoples/Tangata Whenua?

The literature we have reviewed provides little evidence that Western social services approaches generally, and approaches to assessment specifically, are effective for Indigenous populations. A range of literature that considers social work assessment processes and tools, primarily in the context of statutory and non-statutory child and family welfare systems, was sourced in the conduct of the review, albeit it is important to note the quantum of literature that deals with these issues is limited. Thus, the limited nature of the literature we have been able to review will have some impact on the conclusions the brief has reached regarding what 'works' for Indigenous peoples, including Tangata Whenua.

The literature that has been more readily sourced is that which applies to (1) social work and/or broader social and health services approaches to interventions across a range of fields of practice rather than specifically statutory and non-statutory child welfare (2) the wider remit of social work and/or broader social and health services processes generally inclusive of assessment but where assessment may not be specifically identified and distilled.

That literature highlights a consistent theme of shortcomings identified in how adequately Western social and health services approaches 'work' either for Indigenous peoples internationally or for Tangata Whenua in Aotearoa New Zealand. Examples include approaches inclusive of assessment processes, which are generally based on sets of questions that reflect Western culture and Pākehā worldviews, that are inconsistent with the cultural contexts of Tangata Whenua (Barton & Wilson, 2008; Dudley et al., 2014; Pitama et al., 2007).

Additionally, Pitama et al. (2007) cite a broad range of literature to support the view that, in the mental health field 'there are indications that inaccurate or inappropriate assessment of Māori can lead to misunderstanding, misdiagnosis and mistreatment' (p.118). Whilst elements of Western assessment approaches may be relevant in some clinical settings, in the main it is apparent that these approaches have not served Indigenous peoples, including Tangata Whenua, well.

Summary – Relevance for Indigenous peoples

- Western assessment approaches generally do not meet the needs of either Indigenous peoples internationally or of Tangata Whenua in Aotearoa New Zealand.

Quality assessment for Indigenous peoples/Tangata Whenua

The diversity of Māori realities and the dynamic nature of a Māori identity [reinforces] the notion that a one size fits all approach is unlikely to meet the needs of every Māori (Durie as cited in Bennett & Liu, 2018, p.97).

As this evidence brief has already established, from a Te Ao Māori worldview, the assessment process looks very different from the ubiquitous Western assessment approach. The key components that make up quality assessment for Tangata Whenua include an emphasis on a collective approach to understanding presenting issues and deciding how these issues are best addressed. Therefore, rather than assessment relying on a primary focus on the individual, the focus is on the inclusion of whānau in the process and on appreciation of the wider whānau context.

Incorporating Māori processes, such as karakia and pōwhiri, and being willing to facilitate assessment in locations that 'work' for Māori, which could include marae, as well as drawing on the cultural expertise of kaumātua (Hollis-English, 2015), are key components of quality assessment. The use of Tangata Whenua models adapted for social work practice, or developed from within the profession, is also necessary. There remains a baseline requirement however that Māori knowledge and tikanga drives any collaborative assessment model developed.

The position of Hollis-English (2015) regarding some of the key components of quality assessment that her work identifies is reinforced by Barton and Wilson (2008). They emphasise the importance of the quality of the relationship between the practitioner and Māori clients and their whānau. The use of Māori centred models such as Te Kapunga Pūtohe to guide practice help to promote positive relationships because they facilitate practitioner connection with Māori and their whānau in ways more likely to meet their needs (Barton & Wilson, 2008).

An effective assessment process for Tangata Whenua, in the context of mental health services, needs to include a strong whānau focus that can accommodate the location of Māori identity within a collective (Pitama et al., 2007). Such an approach 'challenges the practitioner to see an individual as part of a whānau and to explicitly engage with, and utilise, the whānau as part of assessment and intervention' (Pitama et al., 2007, p.119). In this way, the assessment and intervention journey becomes a collective rather than an individual journey and is co-constructed with whānau rather than being developed for an individual in isolation.

Key components of a quality assessment with Tangata Whenua, in the view of Pitama et al. (2007), also include the practitioner having the competency and willingness to actively engage in exploring Māori beliefs, values and experiences with the individual and their whānau. Knowing when and how to seek appropriate Māori cultural advice during the assessment process is equally critical.

As previously noted, McLachlan et al. (2015) reviewed the literature to establish considerations for the effective assessment and treatment of Māori parents with SUDs. Findings from that literature review highlight the critical importance of carrying out thorough assessment, inclusive of both individual and whānau protective and risk factors, taking in to account possible child welfare issues. Recognising the importance of working with whānau as a collective entity is key to carrying out comprehensive and effective assessments with Māori. Having a clear understanding that whānau and family are not interchangeable concepts is a basic requisite as is an awareness of the comprehensive and multi-

layered nature of whānau. McLachlan et al. (2015) conclude that to work effectively with Māori throughout the helping process, practitioners must have 'at least some basic knowledge and skills in Whānau Ora philosophy and whānau-centred best practice' (p.96).

McLachlan's (2018) practical toolkit provides guidance around using a Māori-centred approach to enhance engagement and to support positive outcomes for whānau. The toolkit is being used by practitioners around the country, including social workers. McLachlan notes 'the toolkit requires practitioners to have a thorough understanding of tikanga Māori, so it is mainly being used by Māori practitioners' (New toolkit offers Māori-centred approach to mental health, 2018).

As with the Meihana assessment model which Pitama et al. (2007) discuss however, there may be opportunities for Tauwi to draw on McLachlan's practical toolkit in work with Tangata Whenua, provided that appropriate training, monitoring, organisational-level support and Bicultural practice supervision is available and fully utilised as intended.

A Whānau-centred approach, ensuring cultural safety from the point of first contact, is identified by Wehipeihana (2019) as central to the effective responsiveness achieved through the Family Violence Integrated Safety Response pilot to Māori. Services:

delivered with respect and in a tikanga way, through the use of karakia and the presence of wairua, for example ... [means that] whānau draw strength and confidence from the tikanga embedded in Kaupapa Māori approaches and the culturally safe environments created (p.4).

Wehipeihana (2019) goes on to observe that an approach that has a focus on building relationships through manaakitanga, whanaungatanga, rangatiratanga and whakapapa significantly reduces barriers to whānau engagement. Successfully engaging and building rapport with whānau, using a mana-enhancing whānau-centred approach, is key to facilitating genuinely collaborative assessment and intervention. A key component of quality assessment in this scenario is trusting in whānau to themselves determine who for them is whānau and what it is that they collectively want to work towards changing.

Finally, it is important to be mindful of 'the diversity of Māori realities and the dynamic nature of a Māori identity' which Durie (as cited in Bennett & Liu, 2018, p.97) names and which Hollis-English (2012) also reminds us of what it is to 'be Māori' will likely mean different things to different people. Durie's point underlines the requirement that social workers are able to utilise their skills to effectively engage with Tangata Whenua in whatever way they define themselves as Māori. In the assessment process it may be all too easy for the social worker to make assumptions about a client's cultural identity and what that cultural identify means to them. Dominelli (as cited in Keddell, 2007) cautions thus:

The power the social worker holds in naming and categorising others goes unquestioned, as does the presumption that the particular "model" should be used with all whom the worker deems to belong to a particular group...In this manner the client's own way of defining and attributing meaning to their own culture is assumed rather than sought in the assessment process (p.62).

Dominelli's point is reinforced by Keddell (2007), who adds:

The role of the [statutory child welfare] social worker, as an agent of the state, should begin with a child's and family's own definition of their cultural identity, taking into account the discourses of the child, family and wider society in constructing cultural identity.

Summary – Quality assessment for Tangata Whenua

- Māori knowledge and tikanga should drive development of any collaborative assessment model.
- Assessment with Tangata Whenua should incorporate whānau involvement in co-constructing 'the story', Māori processes and settings that are culturally appropriate and appreciation of the wider whānau context.
- Relational building blocks are critical in working with Māori as they facilitate the creation of a whanaungatanga weave.
- Being aware of when and how to seek appropriate Tangata Whenua cultural advice during the assessment process is important.
- Knowledge of Whānau Ora philosophy and whānau-centred best practice supports mana-enhancing assessment.
- Recognising diverse Māori realities and identities is necessary, as is accepting that Tangata Whenua will themselves define how they see themselves as Māori.

CONCLUSION AND IMPLICATIONS

Overview

The literature highlights opportunities for improved outcomes for Tangata Whenua in moving from a Western to a Māori centred practice position. Enablers to support effectively making that shift can be identified across four dimensions of systems, practice, workforce development and supervision. Within the systems dimension, they include implementing section 7AA; a system-wide commitment; successful socialisation, across all organisational levels; and embedding mana-enhancing practices and behaviours throughout the organisation.

In the practice dimension, willingness to listen to and engage with tamariki, whānau, hapū and iwi partnering with them in collective design and monitoring of service delivery is highlighted. In the workforce development dimension, positioning the workforce to effectively integrate Māori centred and mana-enhancing knowledge and skills into day-to-day practice is identified. In the practice supervision dimension, assessing and redefining supervision policy is noted along with supporting practice supervisors and supervisees to effectively transition.

Moving from a Western to a Māori centred practice position will have implications for how assessment is conducted. Typically, in mainstream settings, a Western worldview and approach to assessment will be the norm, with an Indigenous or Tangata Whenua worldview and approach being in second place if not altogether side-lined. A Western approach to assessment does not however, tend to meet the needs of Indigenous peoples including Tangata Whenua. Given the increasing use of Tangata Whenua approaches in social work, and in the broader health and social services, there are opportunities to further develop assessment models and tools that 'work' better for mokopuna and for their whānau.

Implications

The Evidence Brief findings highlight potential implications for Oranga Tamariki, which are summarised below for consideration.

Further clarify and critically appraise enablers which support the Oranga Tamariki shift to a Māori centred mana-enhancing practice paradigm. This will likely, at a minimum, demand the leadership of a Tangata Whenua/Tauīwi partnership team inclusive of robust social work practice representation; agreed processes for decision-making; and a strategy for ensuring the meaningful input of staff, in particular social workers.

Prioritise and coordinate the implementation of enablers to support the shift to a Māori centred mana-enhancing practice paradigm. Implementation will likely, at a minimum, demand project management led by a Tangata Whenua/Tauīwi partnership team inclusive of robust social work practice representation; agreed processes for decision-making; and a strategy for ensuring the meaningful input of staff, in particular social workers.

Critically review existing Oranga Tamariki assessment process/es and tool/s. That review will likely, at a minimum, include the meaningful input of tamariki, whānau, hapū and iwi; social services agencies and in particular, social workers across the sector; and Ministry social work staff.

Develop enhanced assessment processes and tools, working closely with Tangata Whenua, that better meet the needs of tamariki, whānau, hapū and iwi. Social services agencies, including Whānau Ora service providers, will have additional extensive knowledge, experience and unpublished practice materials, that can usefully contribute to this assessment development and piloting work. Oranga Tamariki Tangata Whenua and Bicultural social workers have a key role to play, as their knowledge and experience 'at the coalface' can also usefully inform development.

Identify and address, on an ongoing basis, the internal opportunities for, and challenges to, implementing assessment practice that better meet the needs of tamariki, whānau, hapū and iwi. Identification could be usefully undertaken through vehicles including hui, online surveys and small group interviews with social workers. Addressing opportunities and challenges will likewise require the meaningful participation of Oranga Tamariki social workers in planning, implementation and review.

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