

Tino rangatiratanga and wellbeing

Position statement

June 2024



Tuia te rangi e tū nei
Tuia te papa e takoto nei
Tuia i te here tangata
Tihei mauri ora.

He hōnore, he korōria ki te atua ki te runga rawa
He whakaaro maha ki a rātou kua haere ki te wāhi ngaro
Rau rangatira mā, ānei ngā whakaaro me ngā kōrero nā Te Hauora Hinengaro.

MHF stands firmly as a Te Tiriti o Waitangi partner supporting Māori to exercise tino rangatiratanga and improve the wellbeing of tangata whenua

Our position

The Mental Health Foundation of New Zealand (MHF) stands firmly in support of the preamble and articles of Te Tiriti o Waitangi. We support the United Nations Declaration on the Rights of Indigenous Peoples, which affirms the right of indigenous peoples to self-determination and reinforces the guarantee of tino rangatiratangaⁱ in Article Two of Te Tiriti o Waitangi.ⁱⁱ

Exercising tino rangatiratanga supports positive wellbeing outcomes for whānau Māori, now and in the future, and as an organisation continually aiming to be Tiriti-aligned, the MHF supports embedding tino rangatiratanga throughout our health and social systems so Māori and non-Māori can achieve collective wellbeing.

ⁱ A concept in te ao Māori (the Māori world) that has no single English term which properly represents its meaning). Although it can mean autonomy, self-determination, sovereignty and/or independence, its true meaning is more nuanced. Rather, it refers to Māori control over Māori lives, with the overarching purpose to improve the collective wellbeing of a group, including iwi, hapū and whānau ([Te One & Clifford, 2021](#)).

ⁱⁱ For information regarding the Waitangi Tribunal's explanation of the meaning of the Treaty of Waitangi, see <https://www.waitangitribunal.govt.nz/treaty-of-waitangi/meaning-of-the-treaty/>

Context

In simple terms, rangatiratanga can be understood as Māori control over their own affairs, including tikangaⁱⁱⁱ, taonga, and their social and political organisation.¹ It is the effective exercise of mana^{iv} and entails the maintenance of collective interests (such as environmental resources, health and wellbeing, and other taonga) for successive generations.² Prior to European colonisation of Aotearoa New Zealand, rangatiratanga was freely expressed by Māori. However, in the face of rapid change and the challenges posed by European contact in the early 19th century, Māori saw a need to assert their rangatiratanga to the wider world, leading to the signing of He Whakaputanga o te Rangatiratanga o Nu Tirenī in 1835.^v He Whakaputanga asserted that sovereign power and authority in the land resided with Te Whakaminenga, the Confederation of United Tribes, and that no foreigners could make laws.³

Five years later, Te Tiriti o Waitangi^{vi} built on the collective declaration of Māori rangatiratanga provided by He Whakaputanga. It afforded the British Crown the right to establish self-regarding government in Aotearoa, while also re-affirming that Māori held “tino rangatiratanga o o ratou wenua o ratou kainga me o ratou taonga katoa” (i.e., “tino [utmost] rangatiratanga over their lands, villages and all their treasures”) and offering Māori the same protections, rights, and duties as English citizens.⁴

However, in the decades following 1840, the Crown imposed governance, health, education, taxation, and land control systems upon Aotearoa (and upon Māori)

ⁱⁱⁱ Māori protocols, behaviours, and customary practices. These rules cover all aspects of life including the facilitation of relationships throughout generations, including within whānau, hapū and iwi. Tikanga is always adapting and responding to different time periods, situations, and settings. Matike Mai Aotearoa defines tikanga as “both a law and a discrete set of values” ([The Independent Working Group on Constitutional Transformation, 2016](#)).

^{iv} Mana can be understood as power, authority and control derived from the atua, whakapapa to the land, and connection to tūpuna or ancestors ([Reweti, 2023](#)).

^v Also known as the Declaration of Independence of the United Tribes of New Zealand.

^{vi} There are multiple versions of the Treaty of Waitangi, including the English mistranslation, as cited at footnote ii. However, given that the te reo Māori version (Te Tiriti o Waitangi) is the one the vast majority of Rangatira (Māori chiefs) signed and understood, and given that in cases of ambiguity, international law favours indigenous language text, we are referring to the interpretation of the te reo Māori version throughout this paper.

without Māori consent, in breach of the terms of Te Tiriti o Waitangi. These impositions and confiscations disrupted tikanga (the correct way of doing things in te ao Māori) and involved confiscation of and alienation from whenua,⁵ and suppression of language,⁶ healing practices,⁷ and other aspects of te ao Māori central to identity.

Core features of tikanga, such as the principles of whakapapa,^{vii} whanaungatanga,^{viii} and whānau,^{ix} no longer governed how society was organised,⁸ which fundamentally changed the world in which Māori lived and negatively impacted them.⁹ Māori expression of rangatiratanga was significantly suppressed and Māori rights as equal citizens were compromised, with calamitous consequences still being felt and witnessed today. This experience of intergenerational trauma continues to be reproduced and perpetuated due to continued breaches of Te Tiriti o Waitangi by the Crown.

The Crown/New Zealand governments have not fulfilled their obligations under Te Tiriti o Waitangi, nor done enough to reduce the inequities between Māori and other ethnic groups in Aotearoa New Zealand. This culminates in the present-day experience for Māori: worse health outcomes, including higher rates of poor mental health and suicide, higher levels of poverty, a disproportionate number of Māori in State care, and higher rates of incarceration.^x To begin remedying this, Aotearoa needs to support and enable Māori to exercise tino rangatiratanga, as per Te Tiriti o Waitangi Article Two.

^{vii} Māori lineage, extending not only to human ancestors but also the many other forms of relationships, such as with ngā atua (deities), creation and the natural world. Whakapapa is a means to understand and enhance the complex relationships between all things that together produce hauora ([Rangi, 2017](#)).

^{viii} Whanaungatanga is about building and maintaining such relationships.

^{ix} The basic social unit in te ao Māori, which underpins the whole social system for Māori. Whānau is more than the nuclear family known in Western society, and it was (and is) important for establishing one's identity and sense of belonging ([Metge, 1995](#)).

^x For more detail on how colonisation led to the disparities in health outcomes we see today, refer to Waitangi Tribunal. (2019) [Hauora: Report on Stage One of the Health Services and Outcomes Kaupapa Inquiry: WAI 2575](#);

[Data](#) regarding the disparity and disproportionately in the care and protection system (to June 2023);

[Statistics](#) regarding the overrepresentation of Māori in the criminal justice system.

Enabling Māori to exercise tino rangatiratanga will result in better outcomes for Māori wellbeing

Internationally, studies show that indigenous peoples do better socially, economically and culturally when states respect indigenous peoples' self-determination.

When Native nations make their own decisions about what development approaches to take, they consistently out-perform external decision makers on matters as diverse as governmental form, natural resource management, economic development, health care and social service provision.¹⁰

Tino rangatiratanga is both a marker of, and an important contributor to, wellbeing, and vice versa – you cannot have one without the other.¹¹ For Māori, wellbeing (or 'hauora') is a holistic concept and focusses on the resilience of whānau, hapū, iwi and community, rather than solely the health of the individual.¹² Rangatiratanga implies kaitiakitanga^{xi} of hauora for the betterment of all generations to come.

When Māori are enabled to “live as Māori” or embody Māori values, beliefs, and practices in all spheres of life (including when receiving wellbeing support), they experience more positive and secure identities, less isolation, and better mental wellbeing outcomes overall.¹³ We know improved whānau self-determination results in greater whānau wellbeing.¹⁴ Ngā Manukura (leadership), Te Mana Whakahaere (autonomy at a community level), and Te Oranga (participation in society) are identified as important aspects of Māori wellbeing in Tā Mason Durie's Te Pae Māhutonga framework. At the health and wellbeing system level, it is expected that increasing Māori leadership over policy, strategy and services will improve the system's ability to meet Māori needs and aspirations. This will be increasingly important in future health system design and planning given the growth in the Māori population, with nearly one in five New Zealanders, and one in three younger New Zealanders (under 25), identifying as Māori.¹⁵

Currently, Māori still face many barriers and harms when seeking or receiving wellbeing support, including experiences of systemic racism,¹⁶ clinicians' lack of cultural competence,¹⁷ financial barriers,¹⁸ disproportionately higher rates of

^{xi} Guardianship or effective management ([Royal, 2007](#)).

coercive practices,^{xii} and lack of Māori representation in the health workforce.^{xiii} Alongside the long-term impacts of colonisation, this perpetuates inequitable health outcomes, such as diagnostic inequity¹⁹ and disparities between avoidable hospitalisations and morbidity between Māori and non-Māori.²⁰

While exploring these disparities helps to define the problem, it simultaneously defines indigenous peoples as the problem to be fixed, and consequently falls into the trap of a deficit model of framing.²¹ By recentring the focus on Māori-led health responses, such as kaupapa Māori programmes that incorporate Māori health perspectives and promote cultural identity, we can examine how these approaches have already shown to increase Māori engagement with the health system and improve hauora outcomes.

Upholding tino rangatiratanga in the health and wellbeing system

Māori best understand what Māori want and need, and therefore should be leading health responses firmly grounded in tikanga Māori and tailored to the aspirations of hapū and whānau. The Crown and tāngata Tiriti^{xiv} have an obligation to support Māori to activate tino rangatiratanga. Additionally, the key principles of what works for Māori benefit everyone, and so are in our collective interest to progress.

Tino rangatiratanga at a system level can look like:

- An independent Māori health authority and/or other Māori-focussed departments and entities that are given equitable funding and decision-making power, can exercise Māori system leadership and oversight and monitor and influence the responsiveness of the whole health system towards improving hauora Māori.

^{xii} When accessing specialist services, Māori experience higher rates of coercive practices that are restrictive and can cause harm – including community treatment orders and solitary confinement (seclusion) ([Te Hiringa Mahara, 2022](#)).

^{xiii} 2021 data shows that Māori are noticeably under-represented compared to their proportion of the population. Māori make up 16.5% of the population, but only 4.3% of doctors ([Medical Council of New Zealand, 2022](#)).

^{xiv} Refers to people who belong to this land by right of Te Tiriti o Waitangi, i.e. non-Māori. This includes everyone who do not whakapapa to a Māori ancestor ([Network Waitangi Ōtautahi, 2023](#)).

- Ensuring Māori voices are effectively heard at all levels of decision-making in the health system, such as by empowering an independent Māori health authority or other Māori-focussed entity to engage with Iwi-Māori Partnership Boards and be the conduit between the health system and whānau, hapū, iwi, and Māori community organisations.
- Incorporating mātauranga Māori^{xv}, and hauora Māori solutions, into all aspects of the system (based on evidence this improves Māori mental health and other hauora outcomes).²² This could include implementation of Toiora Māori/Māori health promotion approaches that are based upon well-known models such as Te Whare Tapa Whā, Te Pae Māhutonga, Te Wheke, and Kia Uruuru Mai a Hauora.^{xvi}
- Equitably funding and supporting kaupapa Māori services and responses which are designed and led by Māori, for Māori – for example, Whānau Ora and whānau-centred approaches.²³
- Commissioning models, contracts and funding requirements having the flexibility to meet the holistic needs of whānau and create collaborative, rather than competitive, relationships between Māori providers.²⁴
- Continued investment in kaupapa Māori health promotion campaigns and physical health-related activities (see footnote for examples).^{xvii}

^{xv} Mātauranga can be described as the pursuit of knowledge and comprehension of Te Taiao (the natural environment) following a systematic methodology based on evidence, and incorporating culture, values and world view ([Hikuroa, 2017](#)). It is shown to have an empirical basis, and is as valid as, but different from, other knowledge systems, including science ([Te Mana Rauhi Taiao, the Environmental Protection Authority, 2020](#)).

^{xvi} Toiora Māori is the process of enabling Māori to increase control over the determinants of health and strengthen their identity as Māori, and thereby improve their health and position in society ([Ratima, 2001](#)).

^{xvii} Examples include a [Māori cervical screening campaign](#), an [indigenous smoking cessation media campaign](#), the [Māori Community Suicide Prevention Fund](#), the [Māori COVID-19 vaccination response](#), and the [More Than Just a Jab](#) Māori influenza vaccination programme. Māori-managed physical health kaupapa are also evidenced to contribute to positive wellbeing, such as [Waka Ama](#), [Mahi a Atua](#), [Iron Māori](#), and the role of [Māori Wardens](#) in alcohol harm reduction.

- Funding kaupapa Māori research to determine what Māori need and how to respond to this.
- Ensuring Māori are active partners in mainstream services so these can also tailor to the needs and aspirations of Māori.

We acknowledge that upholding tino rangatiratanga in the health and wellbeing system within the current context of Aotearoa comes with challenges and practical considerations. These include:

- Aotearoa New Zealand's small population that has limited health infrastructure, inadequate investment in mental health and wellbeing, and operates within resource scarcity,
- a health system that traditionally undervalues mātauranga Māori and can be misaligned with Māori ways of understanding wellbeing,
- a need to build the necessary capacity and capability for the whole health system to work in partnership with Māori to support improvements in hauora,
- a need for a national health plan and system that optimises the balance between mainstream services that are responsive to Māori and dedicated kaupapa Māori services and approaches,
- the increasing polarisation of indigenous rights and world views in politics and Aotearoa's contemporary society and
- current constitutional and institutional arrangements that do not reflect the intention of Te Tiriti o Waitangi.

Do you want to learn more?

[Report of Matike Mai – the Independent Working Group on Constitutional Transformation](#) which sets out recommendations on how to develop and implement a model for an inclusive Constitution for Aotearoa based on tikanga and kawa, He Whakaputanga of 1835, Te Tiriti o Waitangi, and other indigenous human rights instruments which enjoy a wide degree of international recognition.

[Maranga Mai!](#) Published by Te Kāhui Tika Tangata – the Human Rights Commission outlining the impact of colonisation, racism, and white supremacy on tangata whenua in Aotearoa New Zealand.

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