

Marae and tribally based health care gets the nod

Marae and tribally based health initiatives run by maori people emerged as one of the major recommendations of the maori health conference held at Hoani Waititi marae in Auckland recently.

The Hui Whakaoranga was organised by the Health Department which has named maori health as a top priority for 1984/85.

But the department stressed that it wanted to hear maori people giving their perspective on existing health services and what changes they felt were needed.

Maori leaders and medical experts from all over the country attended the conference which was opened by the Minister of Health, Aussie Malcolm, and the Minister of Maori Affairs, Ben Couch.

Major recommendations were divided into the four categories which make up the holistic maori view of health — physical, spiritual, mental and family well-being.

They included:

Te Taha Wairua:

— to have the primacy of *Te Taha*

Wairua recognised by institutions throughout New Zealand

— to support and give special status to the *tohunga* and traditional herbal remedies and facilitate use of them in health services

— to encourage the employment of “*minita maori*” in all major hospitals and institutions

— to ensure that employment policies in institutions reflect spiritual qualities of maori people.

Te Taha Hinengaro:

— health and educational institutions recognise maori culture as a positive resource and *Te Taha Hinengaro* as an essential part of it

— establish and support marae-based community-initiated projects to meet needs defined by local people

— rectify imbalance of maori staff in health service agencies

— look at including maori spirituality in

school health education

— help health workers to improve cross cultural understanding by ongoing seminars, workshops, incorporation of maori studies and language in training curricula.

Te Taha Tinana:

— The Department of Health should: — compile a register and guidelines of community health initiatives for use by other maori groups; fund health co-ordinators to marae based projects to help train volunteers; support further regional and tribal health hui; recognise a return to traditional maori methods of treating disease

— priority be given to important diseases amenable to modern medical treatment like diabetes, kidney heart and chest disease, hepatitis, ear disease

— access to use of modern health care service by maori people be improved

— health knowledge of maori patients be improved by using simple non-jargon language and improving cross cultural communication skills

— information on things like smoking, alcohol, drugs, be presented using appropriate cultural, audiovisual facilities.

Te Taha Whanau

— support *matua whangai* and set up *whanau* resource groups in communities where maori people do not have links with a marae

— establish formal links between maori communities and health service organisations to identify local health issues and implement programmes

— support more maori people standing for hospital boards and other executive positions.

Other recommendations were:

— that Department of Statistics and health service agencies record the ethnic/cultural group and tribal affiliations in future data collection systems to help with maori research

— a “maori wellness” measure be developed covering such things as weekly hours of exercise, number of contacts with a marae, hours in spiritual, *whanau*, cultural and language activities.

The Maori Health Committee, headed by the director of the department's priority programme, Dr Pat Ngata, has asked all who attended the conference to evaluate the experience and the recommendations.

They will then be drafted into a report giving priorities and guidelines for action.

Other developments of the hui included:

Hospitals may soon ask maori patients to state their *iwi* and *hapu* on their admission forms. The Director-General of Health, Dr Ron Barker said he would support such a move if maori people wanted it.

New ALAC co-ordinator



Maoris tend to be problem drinkers — but few are alcoholics says Ngamaru Raerino, the new maori coordinator for the Alcoholic Liquor Advisory Council (ALAC).

He says alcoholics destroy themselves while problem drinkers destroy those around them.

Mr Raerino, the first maori co-ordinator was appointed to the council to bring a maori perspective to the area of alcohol problems.

His aim is to create an awareness within the maori community of the need for programmes and projects to combat problem drinking.

He said he tackles the topic side on, rather than head on.

Instead of telling young maoris to stop drinking he asks them how they can breakdance, or play rugby if they are drunk.

Using this technique he feels he has had a very positive response.

His message is not to stop drinking altogether but to drink moderately and responsibly.

He quotes an old maori saying “*Kai i te kai a te rangatira kaua e tukuna ko te waipiro hei rangatira mou*” — “Don't let alcohol be your chief.”