



**Tupu kotahi:**  
**We all come from one womb**

Keeping Māori mothers healthy

Dr. Hinemoa Elder

Ngati Kuri, Te Aupouri, Te Rarawa, Ngapuhi

Child and Adolescent Psychiatrist

# Overview: Healthy Māori mothers

- How can we think about this?
- How big is the issue?
- What keeps Māori mothers healthy?
- What undermines Māori mothers' health?
- Examples of thinking differently in action
- Thinking ahead
- Disclaimer

# Disclaimer continued

- Thinking about female mental health is central to my work; mothers, sisters, Aunties, Nannis, carers
- Whanau ora extended family health central to Māori world view
- Increasingly links with maternal and paternal mental illness published in C and A Psychiatry literature
- National evidence that more than half Māori women face mental illness over their lives (*Te Rau Hinengaro 2006*)
- This evidence can be used to support whanau ora
- Māori tamariki are 46% of children in CYPFS care (*draft report Faculty of Child and Adolescent Psychiatry to General Council RANZCP 2008*)

# Thinking

- We all need to pay attention to how we think about Māori mothers
- Internalised stereotypes
- We don't approach all people in the same way
- Clinical example: "They'll never turn up."

# Thinking 2

- What do we know about how we can “think Māori”?
- Definition of Tupuna=Grandparent, ancestor (Williams, Ryan)
- What happens if we regard all people as ancestors, as grandparents?
- Respectful and useful position
- Regarding Māori mothers as grandparents/ancestors
- Mothers carry two generations (ova, sperm)

# What does “mother” mean?

- Whaea, matua wahine, mum, ūkaipō: mother, aunt, nanny (*Ryan*)
- Te Whare Tangata: The house of people, woman, the womb
- Papatūānuku: mother earth
- Mothering
- Mother of...whom?
- Relational focus essential

# How big is the issue?

- Maori population 565,000 (*Census 2006*)
- 51% women
- Median age Māori women 24 years
- 1:4 tamariki under 10
- At 15 yrs 40% no qualifications
- Mean income over 15 years \$21,000
- Life expectancy 8 years below non-Maori

# How big is the issue?

- Birth rates: Māori 2.6 per woman, non-Māori 1.8 per woman (1.8 replacement) (*Statistics NZ 2005*)
- Mean age Māori mothers 26 years, mean age NZ women 30 years (*Statistics NZ 2006*)
- Māori adolescent birth rate almost 5 times higher than non-Māori, pregnant Māori adolescents less likely to have a termination (*NZMJ 2000*)
- Māori adolescent births accounted for 47.5% of all adolescent births in 2003 (*NZHIS 2006*)
- NZ Maternal mortality 7.1 maternal deaths /100,000 live births in 2003, no Māori data in the report (*NZHIS 2006*)

# How big is the issue?

- 1:7 Maori mothers compared to 1:16 non-Maori mothers at 4 weeks post partum, on Edinburgh Depression scale had Post Natal Depression (*Webster et al ANZ J Psych 1994*)
- Maori infant mortality; 6.8/1000 Sept 2006, 4.8/1000 Sept 2006 non-Māori, also quoted as RR 1.7, CI 1.5-1.9 (*MOH website Māori health web page, health status indicators, infant health*)

# How big is the issue?

- Perinatal deaths; 2000-2003 increasing across all ethnicities; Māori 26% compared to 8% New Zealanders of European descent (*PMMRC 2007*)
- 70% perinatal deaths were stillbirths, which decreased in European NZers, increased by 24% in Māori (*PMMRC 2007*)
- Subdural haematoma in infants; Māori 50/100,000, non-Māori 12/100,000 (*Kelly P 2005*)

# How big is the issue?

- 1:9 (11%) Māori were at risk of developing bipolar disorder at some time in their lives
- 1:3 Māori will develop a MDD in their lives
- 1:14 (7%) Māori had MDD in the past 12 months

*(Te Rau Hinengaro 2006)*

# What keeps Māori mothers healthy?

- Related to being Māori:
- Cultural identity is a prerequisite for the good health of indigenous people (*Durie 2003*)
- Poor mental health stems from insecure cultural identity (*Durie 2003*)
- Secure Maori identity is seen as protective for Māori youth mental health in the context of suicide attempts (*Coupe 2006*)
- Clinical outcomes are strengthened when there is a match between Māori mental health and addiction consumers and workers including use of Te Reo (*Huriwai, 2000, 2001 Dyll 1999*).

# What keeps Māori mothers healthy?

- Specific to being a Māori mother?
- I could find no published papers reporting specific outcomes
- Maturanga Māori and Kaupapa Māori research urgently required

# What undermines Māori mothers health?

- Lack of access to activities and experiences that reinforce positive Māori cultural identity and the role of being a Māori mother (grandmother, ancestor)
- Evidence?
- ?Number of still births
- ?Number of tamariki in CYPFS care
- ? Poverty
- ?other

# Examples of thinking and acting differently

- Teen Parenting Units in Sth AK
- IMH FTEs
- Atawhaingia te pa Harakeke

# Navigating beyond the horizon: Matiro whakamua

- Future planning must take account of the enormity of this issue
- 30 % of NZ children will have Māori ancestry by 2021 (*Statistics NZ 2005*)
- Culturally responsive and evidence based imperatives indicate the need to prioritise the needs of mothers, which means the needs of whanau

# Navigating beyond the horizon: Matiro whakamua

- Whanau ora literacy: requires use of policy, matauranga and other evidence
- What have we already got that is useful?
- Why haven't we had more evaluation/research on what works for Māori mothers and whānau?
- Disparity in health mirrored in literature

# One area: The service and workforce issues?

- Māori mothers and whānau health is an issue for all
- How many midwives are there?
- How many Maternal Mental health specialists?
- Services?
- Where?
- Need to build cultural and clinical competency for all
- Who will provide the training?

# How can we use this knowledge/discussion?

- Keeping Māori mothers healthy
- Means keeping whānau healthy
- Prevention of ill health
- Reduction of risk factors
- Promotion of resilience
- Appropriate, timely culturally responsive interventions= effective interventions

# Three wishes

- Start somewhere, but where?... antenatal, post partum checks, adolescent sexual health,
- Start with 0-3 year olds, current mothers (and fathers) and those of the future
- Build parenting capacity from there
- Need Māori specific parenting modules through the school curriculum; who will develop, where is our influence?
- Cultural competency in working with Māori mothers essential

