

# Showcasing Health and Physical Education Scholarship Success 2020



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NCEA 2021

*Showcasing Health and Physical Education Scholarship Success 2020*, by Mackenzie Adams, Bernadette Dykes, Sriya Garamilla, Ashely Huddart, Genevieve Kuan, Andrew Latta, Cameron Senior, Emma Tucker, and Caitlin Wilkinson.

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HPE Scholarship Students	Contributing Schools	Supporting teacher(s)
<b>Mackenzie Adams</b>	Auckland Girls' Grammar School	Tanya Waka
<b>Sriya Garamilla</b>	Diocesan School for Girls	Michelle Ogilvie
<b>Caitlin Wilkinson</b>		
<b>Bernadette Dykes</b>	Napier Girls' High School	Rachel Pollett Caroline Johnson
<b>Ashley Huddart</b>	Rangitoto College, Auckland	Marisse Paterson*, leader of the Scholarship programme (in 2020) with Ryan Borthwick, and teacher mentors Alice Hailstone and Julia Li
<b>Genevieve Kuan</b> <i>(Top Scholar 2020)</i>		
<b>Cameron Senior</b>		
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\* We note that in 2021 Marisse Paterson moved to Otago Girls' High School in Dunedin, and Michelle Cleaver moved to Glenfield College in Auckland to take up an Associate Principal role.

## Artist (cover)

### Vaifoa Lam Sam

Talofa lava,

My name is Vaifoa Lam Sam. I am a former student and Head Boy of Tamaki College (2020) in Auckland and I am now a Communication Design student at AUT.

This artwork is the initial design for a mural for Tamaki College, an adapted version of which is to be painted at the school.

The ideas in the image encompass a diversity of cultural and spiritual elements within the school. To represent these ideas through my art I pictured a beautiful scenery with depth and meaning behind it. Although quite literal, the notion of Māori and Pacific storytelling is highly present within the creation of these ideas that are emphasised through images that portray spiritual beliefs and traditional Māori stories.

In this case, the story, Māui and the Sun is strongly depicted here. I also wanted to capture the 'world' that we live in which explores the wider cultural communities. This brought me to the idea of illustrating Papatūānuku, a mother earth figure. The imagery of paddlers in the ocean is also captured here with flags alongside the waka, not only to represent diversity, but to bring forth the idea that regardless of our differences, we must strive to work together. As this artwork was originally created for a school mural, the Tamaki College monument in the centre is the heart of the artwork and was the first step for creating this piece.

March, 2021



## Other contributors

**Jenny Robertson**, NZHEA Executive and professional learning and development facilitator coordinated the compilation of these student reports and developed the teaching and learning activities accompanying each theme.

**Rachael Dixon**, NZHEA co-chairperson, was the reviewer for this resource.



# Introduction

For the third consecutive year, NZHEA is delighted to be able to publish a selection of HPE Scholarship and Outstanding Scholarship reports. This collection of reports from the 2020 submissions feature health education-related themes which place a strong focus on the wellbeing of young people.

In 2020 all candidates were required to use one of four strategy documents stated in the HPE Scholarship assessment specifications. Candidates were required to critically evaluate one or more aspects of their selected document with most of the health education themed reports using the *New Zealand Child and Youth Wellbeing Strategy* (2019).

Most of the nine student reports featured in this publication are from schools with long-established histories of high levels of Scholarship success.

- For Rangitoto College in 2020, this included the Top Scholar report by Genevieve Kuan, and Outstanding Scholarships gained by Ashley Huddart, a year 11 student, and Cameron Senior, a year 12 student.

However, Scholarship success is also experienced by students in schools with no history of engagement in HPE Scholarship, as was demonstrated in 2019 when Tamaki College student Gloria Tu'itupou gained Top Scholar.

- For Auckland Girls' Grammar School in 2020, their first time engagement with HPE Scholarship resulted in year 12 student Mackenzie Adams gaining Scholarship.

## Themes

For this publication we have grouped the students' reports into three categories reflecting the recurrent themes that were featured. These themes are **the revitalisation of te reo Māori** (as a wellbeing issue), **health and wellbeing-related equity issues**, and **youth wellbeing issues**.

Each theme is accompanied by a small group of teaching and learning activities using ideas from the reports. These activities are not 'levelled' as such – a 'lighter touch' will make some of them suitable for year 11, whereas a more detailed approach (and paying more attention to concepts) will step the activities up for use in year 12 and 13 programmes.

## We intend for this resource to be used by:

- Students preparing HPE Scholarship reports as a guide to the way a report is constructed, the type of writing required and to give a sense of the quality of analysis and evaluation required to meet the judgment statements with each performance descriptor (see below).
- Students in health education who may use the writing of other students as a source of information for their own learning.
- Teachers providing mentoring-type support for students preparing Scholarship reports, and as a source of teaching and learning activity ideas.
- Leaders and community members wishing to showcase what is possible when highly motivated and engaged students have the opportunity to excel.

## Scholarship Health and Physical Education Assessment Schedule

Scholarship is marked in consideration of three performance descriptors – **critical thinking, application of knowledge and communication**, with each section being worth 8 marks (each report is therefore given a score out of a total of 24 marks).

- The minimum score for **Scholarship** is 13/24 although the quality of the reports from year to year may mean this goes up to 14-15/24.
- **Outstanding Scholarship** requires a combination of scores of at least 7, 6, and 6 across the three performance descriptors making the minimum score 19/24. Although, again, the quality of the reports each year may mean this rises to 20/24, or higher. The Top Scholar report is the only one to score 24/24 each year.

Judgement Statement	Commentary
<b>Performance descriptor - critical thinking</b>	
<ul style="list-style-type: none"> <li>• High level, sophisticated, critical response and synthesised report.</li> <li>• Issues, theories, and practices are questioned and challenged with sophisticated insight and perception.</li> <li>• Independent reflection and extrapolation, employing sophisticated insight and perception.</li> <li>• Divergent ideas surrounding the selected topic.</li> </ul>	<p><i>"The candidate is expected to show use of knowledge, critical thinking, and communication to evaluate a HPE learning area context."</i></p> <ul style="list-style-type: none"> <li>• Critical thinking needs to go beyond a synopsis of largely reproduced (or regurgitated) content from a range of sources.</li> <li>• Critical thought may include critical (personal) reflection but it is not an outpouring of unsubstantiated opinion.</li> <li>• As applicable to the topic, the criticality of the ideas in the report is judged on the ability to: explore various perspectives of the issue being evaluated; challenge taken-for-granted assumptions; show understanding of the power dynamics and power imbalances, recognise situations of social (in)justice and what had led to these; explore who benefits and who is disadvantaged in a situation; and what needs to change for social justice and equitable outcomes in relation to the issue and people's wellbeing.</li> <li>• Divergent ideas avoid repeating the same ways of reporting the issue as can be found across multiple sources. An original report has something about it that is convincingly new and unique – a different perspective to that taken by other sources, the inclusion of something local or that is somehow personally relevant, it may contain some own (local) data collection and not be reliant only on other data.</li> </ul>
<b>Performance descriptor - application of knowledge</b>	
<ul style="list-style-type: none"> <li>• Sophisticated integration and abstraction of concepts and ideas. (This is inclusive of, but not limited to, appropriate use of issues, theories, practices, and learning experience.)</li> <li>• Exceptional depth of understanding and a balanced response (theory and practice).</li> <li>• Complex syntheses of highly developed knowledge, concepts, and ideas.</li> <li>• Divergent ideas and independent conclusions related to future actions to enhance well-being.</li> </ul>	<p><i>"Concepts are inclusive of the HPE underlying concepts (hauora, socio-ecological perspective, attitudes and values, and health promotion), and topic-specific concepts. There is an expectation that the candidate draws from their own learning experiences, which may include collection of primary data, and / or personal reflections."</i></p> <ul style="list-style-type: none"> <li>• Reports are grounded in knowledge – with a relevant selection and thoughtful application of the HPE underlying concepts being central to this knowledge.</li> <li>• The report makes clear which strategy document has been selected e.g. <i>New Zealand Child and Youth Wellbeing Strategy</i> (2019), how the selected topic is connected to the document, and makes regular references to the relevant aspects of the document.</li> <li>• Additional content/topic specific knowledge is used with accuracy, and with relevance and meaning, in addition to the HPE underlying concepts.</li> <li>• A variety of material is selected and used for the critical evaluation. Information from popular sources (e.g. newspapers and news websites) is used to give context and make clear the popularly understood aspects of the issue, but this is supported with more substantial evidence from</li> </ul>



	<p>research reports, policy documents and other materials that are important for understanding the selected topic.</p> <ul style="list-style-type: none"> <li>Students may develop their own variation of a model or a framework to help explain and evaluate the issue, or compare and contrast different models or frameworks for their use in relation to the issue being explored.</li> <li>Students may consider different ways of applying theories or concepts to their topic, or explore situations where there are competing concepts and theories saying different things about the topic, etc.</li> </ul>
<b>Performance descriptor - communication</b>	
<ul style="list-style-type: none"> <li>Sophisticated and convincing communication.</li> <li>Supports argument with relevant referenced evidence that provides insight and illumination.</li> <li>Compelling argument that is sophisticated and logically developed.</li> <li>Clear, precise, and / or creative use of terminology.</li> </ul>	<ul style="list-style-type: none"> <li>Scholarship reports are coherent – they don't 'jump around' or contain passages that don't appear to have any connection to what comes before or after.</li> <li>Evidence is used to back up all claims, and references to sources of information use a selected referencing convention consistently.</li> <li>Evidence is used meaningfully – that is, the evidence aligns with the claim being made and deepens the quality of the response.</li> <li>Writing is accurate and largely free of grammatical and spelling errors. Sentences and paragraphs are logical, and easy to follow and understand.</li> <li>Reports have subheadings to help orient the reader and to indicate where the focus shifts to another aspect of the issue.</li> <li>Overall there is a convincing sense of purpose to the report, it makes a clear case about something that is meaningful and important in relation to HPE.</li> </ul>

Further expansion of these ideas is provided in the NZHEA resource *"New Zealand Scholarship Health and Physical Education: A resource to support students preparing a report for HPE scholarship (Health Education)"*. As well as in the annual *Assessment Report* published by NZQA.

### Indicators of success

Observations from professional learning and development provided by NZHEA indicate that schools that support students to achieve success in HPE Scholarship tend to have:

- A school wide culture that values, promotes, and celebrates high levels of academic success.
- Systems level support for middle leaders and teachers who in turn support students e.g. leadership responsibilities and/or (some) timetabled time.
- Succession planning to ensure the HPE Scholarship expertise is not all in the hands of one teacher, which means bringing on newer staff e.g. as student mentors, and providing them with access to PLD.

Teachers who support students to achieve success in HPE Scholarship tend to show a combination of the following practices. They:

- Have time (or make time) to mentor or champion their students, providing supervision and critical friend-type feedback (which includes redirecting students when their ideas stray or lose focus, or directing them to information and knowledge sources when they get stuck for ideas).
- Provide clear guidance about suitable (and unsuitable) topics early in the process of report development.
- Provide ongoing monitoring and feedback at the various stages of report development.
- Help students to manage their time by setting a report development timeline and goals (or milestones), and stay on track.
- Get students underway by early term 2 – at the latest – allowing at least 6 months of time to develop the report.
- Support students to fully understand the assessment specifications and what is expected of them.
- Offer opportunities for students in Year 12 to start the process of developing a Scholarship report the year before it is submitted.
- Engage in professional learning and development (PLD) that has relevance for Scholarship e.g. senior secondary subject-related PLD workshops, using in-school colleagues and out of school educators and PLD facilitators as ‘sounding boards’.

## References:

- Health and Physical Education assessment specification <https://www.nzqa.govt.nz/qualifications-standards/awards/new-zealand-scholarship/scholarship-subjects/scholarship-health-and-physical-education/>
- New Zealand Child and Youth Wellbeing Strategy (2019) <https://childyouthwellbeing.govt.nz/>
- NZHEA resource (the annually updated version is available at <https://healtheducation.org.nz/resources/>) Robertson, J. (2021). *New Zealand Scholarship Health and Physical Education: A resource to support students preparing a report for HPE scholarship (Health Education)*. New Zealand Health Education Association.
- The 2019 Top Scholar report can be accessed through the NZQA website link above or an adapted version can be found in: Tu’itupou, G., O’Donnell, K., & Robertson J. (2020). *Making connections with Pacific ideas in health education: A resource to support teaching and learning in The New Zealand Curriculum*. New Zealand: NZHEA available at <https://healtheducation.org.nz/resources/>

# Theme 1.

## The revitalisation of te reo Māori

- Evaluating the connection between Te Reo Māori and Hauora  
*Andrew Latta, Wellington College*
- How has the position of te reo Māori within Aotearoa today affected the wellbeing of young Māori?  
*Mackenzie Adams, Auckland Girls' Grammar School*

# Evaluating the connection between Te Reo Māori and Hauora

*Andrew Latta, Wellington College*

*Language revival is a journey. The advantages of a language revival movement, from the point of view of Indigenous empowerment and wellbeing, go far beyond the actual native speech results, with ... the journey, being as important as the goals.*

*This journey is simultaneously for the individual and for the collective... with potentially different but complimentary effects on individual and communal identity.<sup>1</sup>*

Ko tōku reo tōku ohooho

Ko tōku reo tōku māpihi maurea

I am Māori. This is not something I have always known, or something I have always understood. However, five years ago I started Te Reo as one of my subjects at my new secondary school. In the time since, I have developed and grown my Māori identity to be unrecognisable from the person I was 5 years ago. I have expanded my knowledge of Te Reo from the incorrect pronunciation of Kia Ora (and perhaps knowing a few of the colours), to being able to confidently stand and deliver a whaikōrero. Not only has my language developed immensely, but my understanding of Māori culture and history has shaped my perspective significantly. Together with my Whānau, we have returned to te Ao Māori after over half a century of distancing ourselves from it. This has been a time of huge significance to our cultural identity, and we are continuing to learn every day the value of Māoridom in modern society. Alongside this, my school recently took the bold step of implementing a compulsory Te Reo Māori course for all incoming year 9 students. This has been accepted to tremendous feedback from parents and students alike. It is therefore with piqued interest that I wish to investigate the many-faceted impacts of Te Reo Māori.

Language is a lens through which we experience life. Language shapes our thoughts, our perceptions, and our emotions. Language connects us to our culture, and our people. Linguist Edward Sapir believed that “the mere fact of a common speech serves as a peculiar potent symbol of the social solidarity of those who speak the language.” We often take for granted the fruits of countless generations of language evolution: the ability Sapir observed to communicate and connect on a deep level with another person despite having never met, the power of mutual understanding of shared ideas, and of ancient knowledge. Even an element such as humour can become an invaluable experience when shared with one who speaks your language. This changes, however, when a language becomes endangered.

Only as some aspects of these unique advantages begin to slip away do we begin to comprehend the true value of a language. UN Under-Secretary-General for Economic and Social Affairs Sha Zukang stated that if the current predictions surrounding native language loss came to bear, ‘That would be a tragedy for indigenous people and indeed the world. More than 4000 of the approximately 7000 languages are spoken by indigenous people’.<sup>2</sup>

We as New Zealanders have a duty to understand the importance of Māori culture and language, and the role of

<sup>1</sup> Sivak, L., Westhead, S., Richards, E., Atkinson, S., Richards, J., Dare, H., ... & Walsh, M. (2019). “Language Breathes Life” — Barngarla Community Perspectives on the Wellbeing Impacts of Reclaiming a Dormant Australian Aboriginal Language. *International Journal of Environmental Research and Public Health*, 16(20), 3918.

<sup>2</sup> United Nations, ‘Implementing Declaration on Indigenous Rights Will Bring “Historical Justice”’, General Assembly, GA/SHC/3954, New York: Department of Public Information, News and Media Division, 2009. (<http://www.un.org/News/Press/docs/2009/gashc3954.doc.htm>, accessed 11 February 2011).

revitalisation in reversing the march of reduced Māori fluency.<sup>3</sup> In this report I will be presenting a range of theories and sources to provide an in-depth understanding of the many faceted impacts of Te Reo Māori. I will explore the true value of language usage through a Māori lens: by investigating its connection to hauora. I will then use this knowledge of hauora to critically evaluate the Child and Youth Wellbeing Strategy documents' proposals.

## WHAT IS THE CHILD AND YOUTH WELLBEING STRATEGY?

At a high level, this Strategy proposes to 'set a long-term direction to unify efforts across government and society to improve child and youth wellbeing.' It is the unification of a variety of past and present actions, by both the Government and NGOs, taken to support young people in Aotearoa. For the purposes of this report, there are 2 key components that are the most relevant: Te Ahu o Te Reo Māori, and the Maihi Karauna Strategy. In generic terms these are strategies focusing on education/school-based, and population/systemic use of Te Reo respectively.

### Te Ahu o Te Reo Māori Framework:

<b>Recommendation 1:</b> Commission a report in order to see the relevant gaps and areas that need to be strengthened in order for Te Ahu o te Reo Māori to succeed.
<b>Recommendation 2:</b> Review and address the systemic issues that exist within the education system.
<b>Recommendation 3:</b> Implement initiatives specifically aimed at improving the language proficiency of teachers.
<b>Recommendation 4:</b> Establish language proficiency competency standards for all teachers.
<b>Recommendation 5:</b> Make a career in teaching more appealing.
<b>Recommendation 6:</b> Form a group of teachers that visit schools to improve teaching with te reo.
<b>Recommendation 7:</b> Establish regional clusters for teachers interested in improving language proficiency.

### The 3 steps in the Maihi Karauna Strategy

<b>WHAKANUI</b> - te reo Māori is valued by Aotearoa Whānui as a central part of national identity
<b>WHAKAAKO</b> - te reo Māori is learned by Aotearoa Whānui
<b>WHAKAATU</b> - te reo Māori is seen, read, heard and spoken by Aotearoa Whānui.

## WHAT IS HAUORA?

Establishing a firm grasp of the concept of hauora and the way it is measured cannot be done without reference to the ground-breaking work of Sir Mason Durie, who has redefined the way we understand hauora, and the actions taken to improve Māori health. Prior to his transformational work, 'discussions about Māori health had dwelt on the rates and consequences of disease, creating a sense of disempowerment and passivity. But by reconfiguring health in terms that made sense to Māori, it was possible for Māori communities to experience a sense of ownership and to balance medical and professional dominance with community involvement and local leadership.'<sup>4</sup> This development centred around a reshaping of the view on Māori health not to focus on the Western concepts of health and wellbeing, but instead the Māori concept of hauora. As perhaps the single most influential individual in the field of measuring Māori wellbeing, and potentially the most well regarded researcher in the development of the hauora framework, Durie provides us with an excellent foundation with which to proceed with our evaluation. In his 2006 lecture series, Mason

<sup>3</sup> [http://archive.stats.govt.nz/browse\\_for\\_stats/snapshots-of-nz/nz-social-indicators/Home/Culture%20and%20identity/maori-lang-speakers.aspx#info](http://archive.stats.govt.nz/browse_for_stats/snapshots-of-nz/nz-social-indicators/Home/Culture%20and%20identity/maori-lang-speakers.aspx#info)

<sup>4</sup> Durie, M. (2003). Quality health care for Indigenous peoples: The Maori experience. *Nga Tini Whetu: Navigating Maori futures*, 275-291.

Durie proposed that there are several perspectives and a number of levels at which to analyse Māori hauora.<sup>5</sup> These being Individual Measures, Whānau Measures, and Population Measures. For the purposes of this report, the Individual and Whānau dimensions will become the lens through which I analyse the impact of language use upon hauora.

The most common wellbeing comparisons between Māori and other groups are made using a less effective tool: Universal Measures. These are built on the notion that “all people have common views about being well and therefore their wellbeing can be measured in similar ways.” While these measures for wellbeing do have their uses for broad comparisons, they do not delve into the complexities of Māori-specific dimensions of hauora, nor are they attuned to Māori realities and worldviews, and thus Durie does not advise their usage in measuring Māori wellbeing.<sup>6</sup> Examples of these Universal Measures include the presence of disease, mortality rates, and life expectancy. These indicators have been thoroughly explored in a variety of contexts, and for this reason I will be focusing on Māori-specific dimensions of hauora for this report.

## HOW DID WE GET HERE?

To attempt this analysis, we must have a solid foundation of understanding of the history and context of Māori language loss, and revitalisation efforts. Prior to colonisation, and up to the beginning of the 19th Century, Māori was the dominant language in Aotearoa.<sup>7</sup> As large numbers of English speakers began to arrive, however, Māori gradually became limited to Māori communities. The economic boom (1935-1966) following the 1935 great depression led to an increase in available work in towns and cities,<sup>8</sup> which, alongside the recommendations of J. K. Hunn’s report on the Department of Māori Affairs in 1961, encouraged Te Hekenga ki Ngā Taone (Urbanisation)<sup>9</sup>. The report concluded that ‘the material benefits brought by urban migration and the loosening of tribal identities considerably outweighed, in the final analysis, any cultural or governance difficulties Maori might face’<sup>10</sup>. It was believed at the time that in order for Māori to become equals to Pākehā in socio-economic progress, they must relinquish their desire for greater political autonomy, and focus on integration into the largely European cities and towns. This resulted in a drastic decrease in Māori fluency across the population. By the 1980s fewer than 20% of Māori knew enough te reo to be regarded as native speakers.<sup>11</sup> As the 20th Century progressed, concerns were raised about the language dying out. A variety of initiatives were sparked to try and reverse this process, including the formation of Ngā Tamatoa, and establishing Te Reo as a national language. The revitalisation movement took many forms: the establishment of the Maori Education Foundation, forming Māori owned Radio stations, the first bilingual school, the beginnings of the kōhanga reo movement, followed by kura kaupapa, and Māori TV.

## INDIVIDUAL

Due to a surprising lack of statistics and research conducted specifically upon Māori hauora and its relation to language use, I will be predominantly using data from Indigenous cultures overseas (particularly Canada, Australia, and America).

Although, as we have observed, it can be difficult to analyse cross-cultural comparisons in a non-biased manner, Durie acknowledges that ‘Comparisons with other indigenous populations who share similar world views, similar histories, and similar positions in society, are more valid.’<sup>12</sup> This factor, in combination with the use of my personal experience in te Ao Māori to frame this research in context, I believe that we can ascertain valid conclusions from this overseas research.

## WAIKUA

Wairua is an element of Māoridom (and of te whare tapa whā) that, in my experience, is often poorly understood by

<sup>5</sup> Durie, M. (2006). Measuring Māori wellbeing. *New Zealand Treasury Guest Lecture Series*, 1, 2007-09.

<sup>6</sup> Durie, M. (2006). Measuring Māori wellbeing. *New Zealand Treasury Guest Lecture Series*, 1, 2007-09.

<sup>7</sup> <https://nzhistory.govt.nz/culture/maori-language-week/history-of-the-maori-language>

<sup>8</sup> <https://teara.govt.nz/en/economic-history/page-9>

<sup>9</sup> <http://shorturl.at/afnAN>

<sup>10</sup> <http://nzetc.victoria.ac.nz/tm/scholarly/tei-HilMaor-t1-body-d5-d2.html>

<sup>11</sup> <https://nzhistory.govt.nz/culture/maori-language-week/history-of-the-maori-language>

<sup>12</sup> Durie, M. (2006). Measuring Māori wellbeing. *New Zealand Treasury Guest Lecture Series*, 1, 2007-09.

non-Māori. When translated simply as Spiritual wellbeing, a Western perspective may view this as intrinsically religious. While this may be true in some contexts, it can have a much broader meaning than is presented through this lens. It can encompass everything from personal and cultural identity, to social cohesion and belief structure.<sup>13</sup> This dimension in particular highlights the inadequacy of Universal Measures of wellbeing as indicators for overall wellbeing, as they do not even begin to explore this element. It is exceedingly difficult to make cross-cultural comparisons with regards to te Taha Wairua due to the varied nature of value systems, however I will attempt to synthesise evidence from research data on Indigenous Canadians and Australians, and frame it using my own knowledge of Māori values and beliefs.

One of the most powerful statistics regarding language use and its impact on wellbeing is the rate of youth suicide. Amongst Canada's First Nations people, native language use decreased youth suicide rates by almost 50%, even after controlling for all other cultural continuity factors.<sup>14</sup> Chandler et. al found that the risk of suicide amongst indigenous youth was strongly associated with the construction of their sense of personal identity, despite being numerically identical under Universal Measures of wellbeing. That is, where under traditional indicators of their wellbeing these young people were indistinguishable, their individual and cultural differences (i.e. Taha Wairua) created dramatic disparities in wellbeing outcomes. They found that language was an essential component in establishing this identity, transmitting ideas, beliefs, and knowledge, and enhancing interpersonal relationships. My personal experience will attest to the value of learning Te Reo as an essential component in securing my cultural identity and enhancing my interpersonal relationships, particularly in Māori contexts. These concepts are imperative to view in a New Zealand wide context, due to the high rates of suicide in Māori communities.

Amongst 15-24 year olds, Māori have a suicide rate almost 3 times higher than non-Māori in NZ.<sup>15</sup> This reduced rate may be explained by viewing it through a Durkheimian lens, with the decreased suicide rate being a direct result of stronger social ties, and a sense of community cohesion.<sup>16</sup> The group identity that is created reduces the risk of social deviance or transgression, which he considered to be the dominant factors in causing suicide.

Sivak et. al came to a similar conclusion in a survey of the Barngarla community in Australia: finding that 'Participants described the impacts of language reclamation in terms of strengthening their connection to culture, noting the interconnectedness of language, and culture.'<sup>17</sup> They noted that traditional languages were a key element of Indigenous peoples' identity, cultural expression, spiritual and intellectual sovereignty and wellbeing. Finally, a report exploring the results of the Second National Indigenous Languages Survey in Australia found that '91% of respondents agreed or strongly agreed the use of traditional language is a strong part of their identity'<sup>18</sup>.

This overwhelming majority is clear evidence that language usage can be foundational in establishing individual and group identities. All of these elements of te Taha Wairua that could be overlooked in discussions of wellbeing can be leading factors in outcome disparity between 'numerically indistinguishable' individuals with regards to their Universally Measured health. The connection to a personal and cultural identity that results from knowledge of Indigenous languages appears to be essential not only in maintaining a healthy sense of Wairua,<sup>19</sup> but in preventing the extended impacts (e.g. youth suicide) that can result from this dimension being neglected.

This conclusion is not universally accepted, however. Edwards et. al argue in direct contradiction to this, claiming that language is not always fundamental in maintaining a sense of cultural identity.<sup>20</sup> They believe that it is possible to experience the loss of a traditional language without losing cultural identity, and highlights the danger of understanding language as the fundamental element of cultural identity, as it 'prevents the acknowledgement of

<sup>13</sup> Hayden Viles, Health and Physical Education teacher

<sup>14</sup> Chandler, M. J., & Lalonde, C. (1998). Cultural continuity as a hedge against suicide in Canada's First Nations. *Transcultural psychiatry*, 35(2), 191-219.

<sup>15</sup> <https://www.health.govt.nz/our-work/populations/maori-health/tatau-kahukura-maori-health-statistics/nga-mana-hauora-tutohu-health-status-indicators/suicide-and-intentional-self-harm>

<sup>16</sup> Sica, A. (2002). Classical sociological theory. *Social Forces*, 81(2), 684-686.

<sup>17</sup> Sivak, L., Westhead, S., Richards, E., Atkinson, S., Richards, J., Dare, H., ... & Walsh, M. (2019). "Language Breathes Life"—Barngarla Community Perspectives on the Wellbeing Impacts of Reclaiming a Dormant Australian Aboriginal Language. *International Journal of Environmental Research and Public Health*, 16(20), 3918.

<sup>18</sup> Marmion, D., Obata, K., & Troy, J. (2014). *Community, identity, wellbeing: the report of the Second National Indigenous Languages Survey*. Canberra: Australian Institute of Aboriginal and Torres Strait Islander Studies

<sup>19</sup> Crawford, J. (1995). Endangered Native American languages: What is to be done, and why? *Bilingual Research Journal*, 19(1), 17-38.

<sup>20</sup> Edwards, J. (1984). Language, diversity and identity. In *Linguistic minorities, policies and pluralism* (pp. 277-310). Academic Press.



aspects such as religion and group customs'. While it is important to acknowledge this contradiction, it must be noted that the foundation of this argument was the lack of empirical evidence regarding the correlation (in any direction) between Indigenous wellbeing and language at the time. Advances in research over the past 40 years have enabled us to collect significant amounts of data, and conclude that while associations between language use and lower-socioeconomic status do exist, they (1) do not find any causal relationship, (2) do not provide an adequate framework for measuring wellbeing, and (3) find that language use has a vast range of benefits across the spectrum of wellbeing.<sup>21</sup> Additionally, the statement that viewing language as fundamental to cultural identity prevents the acknowledgement of other aspects of cultural identity is unfounded, particularly as language itself is strongly associated with increased involvement in traditional activities and values.<sup>22</sup> Therefore we can reject the conclusion made by Edwards et. al, in favour of the vast range of research supporting the positive relationship between Indigenous language use and te Taha Wairua.

The Child and Youth Wellbeing Strategy is well framed with regards to the impact language may have on Wairua. The Strategy proposes both Maihi Karauna and Te Ahu o Te Reo Māori as strategies to support 'a sense of belonging and cultural connections', which we have discovered are highly related. Additionally, the results of their survey align perfectly with the conclusions we have come to that are derived from research, finding that: 'Māori children and young people identified the importance of having a strong cultural identity and connection to whakapapa, and the need for for greater support and services for those not connected to their hapū and iwi. Māori of all ages emphasised the importance of having opportunities to learn and speak te reo Māori.' It is therefore a great success of the Strategy to implement Te Reo usage as a tool to develop cultural connectedness, identity, and social cohesion.

## TINANA

While Tinana literally translates to 'self' or 'body', in the context of Te Whare Tapa Whā, it refers to the physical dimension of wellbeing. This dimension is not limited to health: it can be extended to incorporate other physical indicators such as financial, housing, and access to healthcare. There is much contention in the area of research investigating the impact of indigenous language use upon these indicators. Through exploring 'community level education, labour force, income, and housing conditions' for Indigenous Canadians, Capone et. al concluded that Indigenous language knowledge was negatively associated with these indicators of wellbeing.<sup>23</sup> Additionally, the study found that Indigenous-only language use in the home was associated with decreased access to health care. Are we reinforcing these negative outcomes through language revitalisation attempts? While these conclusions may appear disheartening for the future of indigenous language revitalisation on a superficial level, we must evaluate and analyse the wider context in which these conclusions are found in order to build up our understanding of the topic. Firstly, it is important to note here that this research only produced associations, and not defined causal relationships. We must therefore treat these conclusions with caution, as correlations and causations can often become conflated. A correlation between language use and decreased health care access does not necessarily imply a causal relationship. As we shall later explore, these are instead much more likely to be the results of geographic and historical factors. Secondly, these sources are limited in that they only explore universal indicators of wellbeing, and do not evaluate populations by the standards of their own cultures. They are attempting to make broad statements about the wellbeing of Indigenous people, however they are founded on a wholly incomplete measuring system, with incomplete data. Capone et.al mentions briefly that the Community Wellbeing Index they use 'assesses well-being largely on the basis of economic aspects, which may be deemed problematic and potentially Eurocentric.' Many Indigenous cultures place a lower emphasis on material wealth, causing issues when attempting cross-cultural comparisons using Eurocentric wellbeing indicators.

Through exploration of historical discrimination against Māori, framed with knowledge about the Social Determinants of Health, we can discover the root causes of these negative associations. The Structural shift of governance and policies to favour Pākehā and confine Māori led to widespread economic disparity. Unequal education opportunities, an undervaluing of Te Reo, blatant racism, and a Eurocentric measuring system led Māori to 'fall behind' socioeconomically. The long term impacts of these factors are still not fully understood, and are far from being resolved. It is therefore unsubstantiated to believe that usage of Te Reo is a major factor in these health inequalities,

<sup>21</sup> Capone, K., Spence, N., & White, J. (2010). Examining the association between Aboriginal language skills and well-being in First Nations communities.

<sup>22</sup> Gonzalez, M. B., Aronson, B. D., Kellar, S., Walls, M. L., & Greenfield, B. L. (2017). Language as a Facilitator of Cultural Connection. *Ab-Original: journal of indigenous studies and first nations' and first peoples' culture*, 1(2), 17

<sup>23</sup> Capone, K., Spence, N., & White, J. (2010). Examining the association between Aboriginal language skills and well-being in First Nations communities.

as the role of historical discrimination must first be considered. Due to the ambiguity found in the current research, it is infeasible to make substantiated recommendations for the Child and Youth Wellbeing Strategy with regards to the effect of language upon Te Taha Tinana. This presents an opportunity for further research and investigation into the specific relationship between Te Taha Tinana and Te Reo.

## HINENGARO

Hinengaro can be understood to align with the concept of mental health. Fortunately for both Māori and Pākehā, mental health is becoming a much more widespread and acknowledged aspect of wellbeing amongst Western societies. However, there is again contention between researchers as to the specific impacts Indigenous language use may have on this aspect of hauora. A cross-sectional survey of Indigenous people in Australia found that speaking and understanding an Indigenous language and having an Indigenous language as the main language spoken in the home was associated with increased sadness.<sup>24</sup> Additionally, Capone et. al notes that communities with high language preservation are often isolated geographically, due to the less significant influence of cultural assimilation in these areas.<sup>25</sup> New Zealand is no exception, with Māori being 25% more likely to live rurally than Pākehā.<sup>26</sup> This geographical isolation may be a leading factor in poverty rates, poor housing, and less economic opportunity, which have all been associated with poorer mental health.<sup>27</sup> Indigenous language immersion may correlate with hindered speaking ability in the dominant language, which has been shown to decrease access to healthcare, and increase racial discrimination.<sup>28</sup> These have clear impacts upon mental health.<sup>29</sup> These geographic indicators, in combination with healthcare access and racial discrimination, are just some of a number of Social Determinants of Health that may predispose Māori to have higher rates of mental health issues. It is important to distinguish these geographic indicators from the specific impact of Indigenous language knowledge upon hauora, as they may act as confounding variables (as we shall soon see).

If we were to attempt to restrict our investigation to purely language focused factors, we would discover that Sivak et. al found significantly higher levels of acculturative stress amongst children living in regions with significant Indigenous language loss.

Additionally, Chandler and Lalonde's findings that knowledge of an Indigenous language can decrease youth suicide by up to 50% again provide a strong argument in support of language use.<sup>30</sup> These conclusions conflicting with those with geographic elements are likely the result of the interplay of countless factors particularly that of historical discrimination against Indigenous people which is nigh on impossible to control for. While it is exceedingly difficult to separate the impact of Indigenous language from the impact of historical discrimination upon Te Taha Hinengaro, Chandler et. al and Sivak et. al are the only researchers who attempt this separation. The fact that both of these investigations concluded that language use was positively correlated with Te Taha Hinengaro leads me to believe that we can make a preliminary claim that the positive correlation is substantiated.

Alongside this, the confirmed connection between language, cultural identity, and social cohesion provides further evidence for the positive correlation. Despite the increased rates of mental health issues amongst many Indigenous populations, it appears as though these can largely be attributed to geographic and historical determinants of health. Indigenous language use does not assist this increase, and in fact supports the mental health of Indigenous speakers, thereby indicating a clear incentive to endorse revitalisation efforts.

The benefits of language acquisition and use with regards to mental health do not appear to be recognised by the Child and Youth Wellbeing Strategy. Te Reo use is notably missing from the section titled 'Actions to increase support

<sup>24</sup> Biddle, N., & Sweet, H. (2012). The relationship between wellbeing and Indigenous land, language and culture in Australia. *Australian Geographer*, 43(3), 215-232.

<sup>25</sup> Capone, K., Spence, N., & White, J. (2010). Examining the association between Aboriginal language skills and well-being in First Nations communities.

<sup>26</sup> [http://infoshare.stats.govt.nz/browse\\_for\\_stats/people\\_and\\_communities/maori/census-snapshot-maori.aspx#gsc.tab=0](http://infoshare.stats.govt.nz/browse_for_stats/people_and_communities/maori/census-snapshot-maori.aspx#gsc.tab=0)

<sup>27</sup> Aciri, M. C., Bornheimer, L. A., Jessell, L., Heckman Chomanczuk, A., Adler, J. G., Gopalan, G., & McKay, M. M. (2017). The intersection of extreme poverty and familial mental health in the United States. *Social work in mental health*, 15(6), 677-689.

<sup>28</sup> Capone, K., Spence, N., & White, J. (2010). Examining the association between Aboriginal language skills and well-being in First Nations communities.

<sup>29</sup> Thompson, C. E., & Neville, H. A. (1999). Racism, mental health, and mental health practice. *The Counseling Psychologist*, 27(2), 155-223.

<sup>30</sup> Chandler, M. J., & Lalonde, C. (1998). Cultural continuity as a hedge against suicide in Canada's First Nations. *Transcultural psychiatry*, 35(2), 191-219.

for mental wellbeing'. This may be a result of the ambiguity created by confounding variables such as geographic indicators, or rather a lack of consideration for Te Reo as a means to support mental health. Although mental health benefits may be gained through the emphasis placed by the Strategy upon te Taha Wairua (as a sense of belonging is a key element of both Hinengaro and Wairua), there is a distinct lack of explicit acknowledgement for Te Reo in this capacity. The recommendation from this research is evidently to incorporate Te Reo Māori into the 'Actions to increase support for mental wellbeing' in some capacity. This may be in the form of particularly supporting those in areas of significant language loss, providing incentives for mental health providers to use Te Reo more frequently in their services, or more specific initiatives for NGOs to support those with less knowledge of English.

## WHĀNAU

The concept of Whānau is integral to Māori culture. It is often translated as 'family', however it contains significantly more breadth and depth in meaning than is found in everyday English usage. Whānau encompasses the atomic family unit, extended family, ancestors, community connection, as well as birth itself. Durie believes that an effective measure of Whānau wellbeing is can be derived from 'the collective capacity to perform tasks that are within the scope and influence of whānau'<sup>31</sup>. He separates these into the categories on the following table:

Table 2 *Whānau Capacities*

Capacity	Function	Focus
Manaakitanga	Whānau care	Wellbeing of whānau members
Pupuri Taonga	Guardianship	Management of whānau estate
Whakamana	Empowerment	Whānau participation in society
Whakatakato Tikanga	Planning	Future generations
Whakapūmau Tikanga	Cultural endorsement	Whānau members, whānau protocols
Whakawhānaungatanga	Whānau consensus	Whānau cohesiveness

I will examine the direct impact of Māori language use upon the 3 most relevant of these capacities.

## TE WHAKAWHANAUNGATANGA

Referring in this context to cohesiveness and consensus within Whānau, whakawhānaungatanga can be explored through Albert Bandura's Social Learning Theory: one of the most well regarded frameworks with which to understand the impact of influential individuals upon younger generations. It posits that children adopt behaviours from 'models' (influential individuals) in their formative years through the process of observational learning. The importance of Whānau members as influential models cannot be overstated when considering the encoded behaviour of young Māori children. The many and varied relationships created between members of a Whānau have lasting effects on the behaviour of the rangatahi (younger generation). With regards to language acquisition, knowledge, and use in a Whānau context, the Social Learning Theory remains particularly relevant. Chandler and Lalonde<sup>32</sup> found that the use of indigenous languages to transmit ideas, belief, and knowledge enhanced social support, and interpersonal relationships, resulting in a shared identity. Not only does language use support whakawhānaungatanga, but as Bandura's model highlights, the strong relationships and sense of shared identity that comes with whakawhānaungatanga can aid in the passing down of behaviours (i.e. language), creating a symbiotic relationship. These connections additionally make it easier for Whānau to make decisions and create a shared vision: one of the key elements of Whakawhānaungatanga, and therefore hauora, identified by Durie.<sup>33</sup>

## TE WHAKAMANA

Whakamana in this context refers to the empowerment of Whānau members to participate in Māori activities, as well

<sup>31</sup> Durie, M. (2006). Measuring Māori wellbeing. New Zealand Treasury Guest Lecture Series, 1, 2007-09.

<sup>32</sup> Chandler, M. J., & Lalonde, C. (1998). Cultural continuity as a hedge against suicide in Canada's First Nations. *Transcultural psychiatry*, 35(2), 191-219.

<sup>33</sup> Durie, M. (2006). Measuring Māori wellbeing. New Zealand Treasury Guest Lecture Series, 1, 2007-09.

as wider societal activities, as Māori. A secure wellbeing in this sense refers to members of the Whānau being actively involved in community endeavours while maintaining their cultural values, and supporting each other in various Māori contexts, all while having a secure cultural identity. Gonzalez et. al found that amongst indigenous First Nations people, language proficiency was associated with 'more participation in traditional and spiritual activities, as well as endorsing and living by traditional spiritual values'.<sup>34</sup> This can be observed across a variety of indigenous cultures, and is certainly evident in Māoridom. As time progresses, it is becoming more and more viable for Māori to be involved in both te Ao Pākehā and te Ao Māori, as Māori. Personally, I am finding that as I become more confident in my Māori identity, I am able to incorporate elements of Māoridom into areas that it was previously not present in.

Historically, however, being involved in these activities was incredibly difficult. As the domination of the English language in New Zealand, and eventually urbanisation, led to cultural involvement decreasing amongst Māori, it became complex and problematic to participate in wider society while maintaining an empowered sense of cultural identity. The social degradation of Māori language and activities caused this dimension of Whānau wellbeing to suffer immensely. Over time, through the presence of Māori role-models, the revitalisation of the language, and the push for Māori involvement, this dimension is slowly becoming more present, however it still has a long way to go. There are still only limited contexts wherein Māori can feel secure in their cultural identity while participating in activities. Examples of contexts in which it is difficult to fully express a Māori identity can range from a classroom to a board room.

## TE WHAKAPŪMAU TIKANGA

This capacity refers to promoting language, cultural values, history, and heritage. A Whānau that is secure in this dimension of wellbeing have access to their cultural heritage, are fluent in Te Reo, knowledgeable about Māori culture, and actively support the transmission of cultural knowledge.<sup>35</sup> This can again be understood through the lens of Bandura's Social Learning Theory. As younger Whānau members are exposed to tikanga Māori, they are able to absorb the knowledge and behaviours that they observe around them. Through the promotion and passing on of Māori knowledge, young people understand not only the details of their own culture and heritage, but also the value of teaching and promoting this information to others. The presence of role-models is essential for the development of this dimension. In the words of O'Sullivan when researching Indigenous Australian language use: 'Indigenous languages can be considered a useful tool in transmitting traditional Indigenous knowledge from one generation to the next; as a result, languages can be thought of as a fundamental element of cultural continuity.'<sup>36</sup> This shows the clear and essential role language plays in the development, promotion, and growth of this dimension. In Māoridom the concept of cultural knowledge and whakapapa being 'hetaonga tuku iho' (Treasures that are passed down from one generation to another) is essential universal. Being secure in this capacity allows Whānau members to standstrong in their culture both in te Ao Māori and te Ao Pākehā, and to seek opportunities to pass on cultural knowledge themselves. This is a fundamental element of hauora within a Whānau context as it supports the strengthening of relationships between generations, and provides younger Whānau members with a sense of identity and interconnectedness.

## RECOMMENDATIONS

It is a major oversight of the Child and Youth Wellbeing Strategy to not include a strategy to improve Te Reo Māori use within a Whānau context. We have established that the role of Whānau as significant role-models in the lives of rangatahi, particularly with regards to language acquisition, use, and promotion, cannot be overstated. Limiting the scope of the Strategy's Te Reo related proposals to school and wider community significantly reduces their effectiveness, as we have proven the extensive role Whānau play in language development, retention, and use. While there is potential for members of the school community to develop into such role-models through the mentorship of teachers within the Te Ahu o Te Reo Māori programme, it is a serious omission to overlook the value of Whānau as people who are already influential in the lives of young people due to the interconnectedness explained above. By utilising this powerful tool in the development of young people, a symbiotic relationship could be formed: where language use is aided by the interconnectedness of the Whānau, and in turn the shared language can be used to

<sup>34</sup> Gonzalez, M. B., Aronson, B. D., Kellar, S., Walls, M. L., & Greenfield, B. L. (2017). Language as a Facilitator of Cultural Connection. ab-Original: journal of indigenous studies and first nations' culture, 1(2), 176.

<sup>35</sup> Durie, M. (2006). Measuring Māori wellbeing. New Zealand Treasury Guest Lecture Series, 1, 2007-09.

<sup>36</sup> O'Sullivan, E. (2003). Aboriginal language retention and socio-economic development: Theory and practice. Aboriginal conditions: Research as a foundation for public policy, 136-163.

enhance social support and relationships.

Interestingly, a strategy that utilises many of the necessary Whānau elements to support language use and hauora thereof has been put forward by Te Mātāwai, however it is not incorporated into the Child and Youth Wellbeing Strategy. This appears to be a major oversight in the Strategy, due to the many positive factors we have discussed that relate to the wellbeing of young people through Whānau language use. Therefore a rather clear recommendation is to integrate the Maihi Māori Strategy into the Child and Youth Wellbeing Strategy.

With regards to supporting te whakamana, it is essential that there are many opportunities for Whānau members to BE Māori. This is an area that appears to be significantly underdeveloped within both Te Ahu o Te Reo, and Maihi Karauna.

Although there are suggestions from Maihi Karauna surrounding supporting communities to become bilingual, the strategy that is outlined does not provide incentives or significant infrastructure for this to occur. While it is a step in the right direction, a much more thorough and developed plan that addresses the details of strategies to support bilingualism amongst our communities is imperative. For Te Reo to be sustainable, desirable, and attainable, there must be ample opportunities for it to be spoken, particularly amongst young people. In my experience, there are many tamariki who have the ability to speak Te Reo, but often choose not to, as they feel it is inappropriate/ unnecessary in many situations. This is a cultural shift that must occur across our society if we are to continue to advocate for Te Reo usage, and the first step on that journey is to create a larger range of diverse opportunities for Te Reo to be used. This will not only lead to more widespread use, but it will whakamana (empower) Whānau to be present in all aspects of society, as Māori.

With these additions, I believe the Child and Youth Wellbeing Strategy would be much more effective in its goal of supporting the wellbeing of young people, through further fulfilling the Whānau capacities outlined by Durie.

## **CONCLUSION**

In this report we have investigated the many-faceted impacts of Te Reo Māori upon hauora, framed through Mason Durie's model, in order to provide an evaluation of the Child and Youth Wellbeing Strategy. This has resulted in many diverse conclusions encompassing the long term effects of Te Reo, leading to a variety of recommendations for the Strategy to become more effective in achieving its goal of 'setting a long-term direction to unify efforts across government and society to improve child and youth wellbeing.'

The Strategy is particularly successful in utilising Te Reo as a means to uplift te Taha Wairua of our young people. Through providing insight into the value of Te Reo in building relationships, cultural identity, and celebrating culture, the Strategy aligns itself with most research on this topic. We were unable to reach a solid conclusion surrounding the impact of Te Reo upon te Taha Tinana, due to the divergent and conflicting research, and the exceedingly difficult task of separating the influence of historical discrimination from that of Indigenous language use. This presents an opportunity for further research, answering questions such as 'Is Indigenous language use a Social Determinant of physical health, and if so, in what way?' Te Taha Hinengaro was faced with similar challenges in separating the influence of geographic and historical factors from that of language knowledge alone, however greater success was achieved due to a larger range of existing research. Despite the surface level negative correlation, it appears that Indigenous language knowledge promotes mental health when independent from confounding factors such as geography. With regards to the 3 areas of te Taha Whānau that were explored (Whakawhanaungatanga, Whakamana, and Whakapūmau Tikanga), the Strategy requires significantly more development. The integration of the Maihi Māori model would aid this substantially, along with the creation of an infrastructure to support more opportunities for Te Reo within Whānau, and wider societal, contexts.

Additionally, the development of more opportunities for Māori to participate in activities as Māori is essential to improving the hauora of young people in Aotearoa.

As we look to the future of Te Reo in Aotearoa, the Strategy takes a bold step in the right direction. Te Ahu o Te Reo Māori and the Maihi Māori Strategies provide a solid foundation to expand and diversify the number of speakers, and the contexts in which Te Reo is spoken. This, as we have explored, will have many broad and varied impacts upon the multi-dimensional hauora of not only young people, but all of Aotearoa.

# How has the position of te reo Māori within Aotearoa today affected the wellbeing of young Māori?

## *Mackenzie Adams, Auckland Girls' Grammar School*

Ko Mauao te maunga,  
Ko Takitimu te waka,  
Ko Tauranga te moana,  
Ko Huria te marae,  
Ko Ngāti Ranginui te iwi,  
Ko Ngāi Tamarāwaho te hapū,  
Ko Tamatea Arikinui te tangata,  
Ko Mackenzie Adams tōku ingoa.

The purpose of my report is to answer the question, “How has the position of te reo Māori within Aotearoa today affected the wellbeing of young Māori?” In order to investigate this, I will first look at how Māori presently have been affected by the past actions involving te reo Māori which relates to my first sub question, “What are the effects of the changes to the position of te reo Māori in Aotearoa today?” In this part of my report, I will be talking about the statistics and evidence regarding the number of people who have been negatively affected. I will then look at the history of te reo Māori in order to answer my second sub question, “How has colonisation affected te reo Māori and the wellbeing of Māori?” The effect of colonisation on te reo Māori is important to look at because it is the past of te reo Māori in Aotearoa that has led to its place today. Another point of my report will be the actions we should take in relation to this issue answering my last sub question, “What actions could be taken to revitalise te reo Māori and improve Māori wellbeing as a result of the past actions toward te reo Māori?” I will then detail how this will affect the wellbeing of Māori and use health models such as the model of Te Whare Tapa Whā (Durie, 1994), in order to determine the suitability of these actions.

My question of how the position of te reo Māori within Aotearoa today affects the wellbeing of young Māori, as well as the actions we should take in response is relevant to the Child and Youth Wellbeing Strategy (Department of the Prime Minister and Cabinet, 2019) document. This is because I am researching an issue relevant to young Māori in Aotearoa and the effects it has had on their wellbeing. It is important to consider the effects of the position of te reo Māori on young people because according to the Child and Youth Wellbeing Strategy (Department of the Prime Minister and Cabinet, 2019), Māori are a youthful population; the median age is 24 years (half are younger and half are older than this age)<sup>1</sup>. I am also going to be looking into how the Government and the Ministry of Education could take action in order to improve the wellbeing of young Māori. This also relates because another focus in the Child and Youth Wellbeing Strategy (Department of the Prime Minister and Cabinet, 2019) is that Children and young people are accepted, respected, and connected<sup>2</sup>. This is relevant to my topic because language is a huge part of feeling accepted and secure in your culture. A quote from the New Zealand History website in a page about the history of te reo Māori week states, the Māori language was an essential expression and envelope of Māori culture, important for Māori in maintaining their pride and identity as a people<sup>3</sup>. In this quote, past tense is used as though te reo Māori is no longer important or it has already been forgotten or moved on from. Te reo Māori is still important and relevant today because not only is te reo Māori important for Māori as a connection to their culture, but it also connects them to their iwi in the different dialects, kīwaha (sayings) and whakataukī (proverbs). My topic is also relevant to this document as another main point in the document was that Children and young people are involved and empowered<sup>4</sup>.

<sup>1</sup> Department of the Prime Minister and Cabinet. Child and Youth Wellbeing Strategy. New Zealand: Department of the Prime Minister and Cabinet, 2019. <https://childyouthwellbeing.govt.nz/sites/default/files/2019-08/child-youth-wellbeing-strategy-2019.pdf> (accessed November 11, 2020)

<sup>2</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*.

<sup>3</sup> Page 2 – History of the Māori language,” Te Wiki o Te Reo Māori - Māori Language, New Zealand History, accessed November 11, 2020, <https://nzhistory.govt.nz/culture/maori-language-week/history-of-the-maori-language>

<sup>4</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*.

This relates to my topic because having the Māori language spoken in school has positive effects on Māori because it means they are more related to the learning.

This topic is also of importance to me because as a young Māori woman, I feel that te reo Māori is not as valued as it should be and more respect needs to be given to the first language of Aotearoa.

As well as playing a big part in the wellbeing of young Māori, the revitalisation of te reo Māori is a matter of social justice. Social justice is when a society enables all its members to participate in and have access to the social, cultural, political and economic resources that define a normative way of life for that society<sup>5</sup>. Social justice is not being upheld in Aotearoa as Māori were the first people of this whenua (land) and they should be given the respect that this status should entail. This includes giving back what has been stolen which is the right to learn te reo Māori and have their language and culture respected and treated with respect as promised by the Treaty (Te Tiriti o Waitangi [Māori version], 1840).

## Background

I have selected this topic because I think it is an important issue that needs to have more attention. As a young Māori woman, I feel disheartened that te reo Māori, a huge aspect of Māori culture is not being treated with the respect it deserves. I believe that if more time is spent with no significant or helpful action, it could lead to te reo Māori becoming extinct and if it did, New Zealand society would be losing a huge part of Māori culture and what makes Māori, "Māori". The actions that have been taken so far, such as having Māori language week have only been minimally helpful as there is not very much long-term commitment to the reo involved.

This topic is relevant to health and physical education because te reo Māori is an important part of Māori culture and a person's culture has a big impact on their wellbeing and self-identity. If we were to lose te reo Māori, there could be many negative effects on the wellbeing of Māori because it might mean that there would be a disconnect with their culture. Not having te reo Māori in a prominent position in Aotearoa and especially in schools could cause young Māori to disconnect with the education system because it is through appreciation of culture that students are often able to form strong relationships with teachers and peers. Research has shown, students learn best when they enjoy positive relationships with their fellow students and teachers<sup>6</sup>. If young people are not able to determine their culture and where they come from it could lead to isolation in school because students do not feel valued in school. The selected document, The Child and Youth Wellbeing strategy (Department of the Prime Minister and Cabinet, 2019) is helping to shape my report by showing what indicators of youth wellbeing will help me determine the actions that I come up with in order to support the topic of te reo Māori revitalisation and wellbeing. This topic is also relevant to one of the goals that is stated in the Child and Youth wellbeing strategy, they are connected to their culture, language, beliefs and identity including whakapapa and turangawaewae<sup>7</sup>. This report will cover how the position of te reo Māori has affected the wellbeing of young Māori and their connection to their culture as well as providing strategies for revitalising the reo.

As part of my report, I have interviewed people from my school in order to gain understanding of some different perspectives (See Appendix 1 for questions)<sup>8</sup>. The people I interviewed were some of my peers, a mainstream (English-medium) dean, the Kahurangi (Māori unit) dean and my school principal. From these interviews, I gathered information about their perspectives on the position of te reo Māori within the New Zealand curriculum (Ministry of Education, 2007) and the actions that have been or need to be taken in order for te reo Māori to be revitalised at my school and the effect both of these things have on the wellbeing of young Māori. This helped me to look at the issue from a socio-ecological perspective by showing how the community around these people and society have affected their views toward the revitalisation of te reo Māori.

<sup>5</sup> "Social Justice," The Salvation Army, accessed November 11, 2020, <https://www.salvationarmy.org.nz/research-policy/positional-statements/social-justice>

<sup>6</sup> "Putting student relationships first," Te Kete Ipurangi, accessed November 11, 2020, <https://nzcurriculum.tki.org.nz/Curriculum-resources/NZC-Online-blog/Putting-student-relationships-first>

<sup>7</sup> Department of the Prime Minister and Cabinet, Strategy on a Page Youth Wellbeing Sept 2019, New Zealand: Department of the Prime Minister and Cabinet, 2019. <https://childyouthwellbeing.govt.nz/sites/default/files/2019-08/strategy-on-a-page-child-youth-wellbeing-Sept-2019.pdf>

<sup>8</sup> Interview answers also edited for clarity



## How are te reo Māori revitalisation, Māori youth and hauora (wellbeing) connected?

Te reo Māori revitalisation, Māori youth and hauora (wellbeing) are all connected through three main concepts:

1. Tuakiritanga - Identity<sup>9</sup>
2. Kiritau - Self-worth
3. Whakapapa - Connection to ancestors<sup>10</sup>

Tuakiritanga (identity), a concept talked about in the Ministry of Education Ka Hikitia document (Ministry of Education, 2020)<sup>11</sup> is connected to te reo Māori revitalisation, Māori youth and hauora (wellbeing) because language is a big part of Māori culture and plays a huge role in identity. This is because culture makes up a huge part of who we are as people and how we see ourselves. If a main part of someone's culture is absent it could cause a person to feel as though they are lost in who they are and to lose their self-worth. This also connects to the idea of 'Kiritau' (self-worth). How young Māori see themselves is also related to 'Tuakiritanga'. The revitalisation of te reo Māori, Māori youth and hauora is also related to whakapapa. This is because if we lose te reo Māori, young Māori will be losing the language of their ancestors which is a way to stay connected to them and the tikanga of the past. This can also affect Māori wellbeing in the way that it can affect tuakiritanga and kiritau.

In connection to the concepts that relate to te reo Māori revitalisation and the well-being of young Māori, there are also concepts that are relevant to the well-being of young Māori in school that are important for teachers. When reading *Te Kōtahitanga* (Bishop et al., 2003), there were a few vital concepts that stood out to me. These were; Tino Rangatiratanga (Relative Autonomy/ Self-Determination), Tāonga Tuku Iho (Cultural Aspirations) and Ako (Reciprocal Learning)<sup>12</sup>. I think these concepts are also relevant to the kaupapa of te reo Māori revitalisation because it is important for teachers to recognise the cultural significance of te reo Māori and support Māori students' culture within school by allowing them to express themselves through their culture. This is important because if teachers are not actively working to promote te reo Māori revitalisation then there will likely not be a change in the well-being of young Māori in the school environment. This aspect of health is significant because it relates to the concept of tuakiritanga (identity) because it must be shown that te reo Māori has an important place within the education system in order to improve Māori wellbeing in relation to school and help them feel their identity is being valued<sup>13</sup>.

In my experience, being in a mainstream (English-medium) school environment, there are many cases where teachers cannot even pronounce basic Māori words or do not make an effort to learn Māori greetings or simple Māori kīwaha (sayings). This can lead to a disconnect between education and culture for some students. For example, in one leadership role I was involved in at my school, a group of students were asked to come up with a statement as a part of the school's future mission statement. We were told that there would be five representatives from each year level (Year 9 -13) for a focus group, with no consideration of having a Kahurangi (the Māori unit) focus group. It was only when I suggested the idea of having a Kahurangi focus group that including a Māori perspective was even considered. I think it is situations like this which are some reasons why there needs to be more focus on the Māori perspective because Māori are the tangata whenua, meaning when there are decisions being made within schools, the Māori perspective must be considered. In addition to this with the same mission statement, another Kahurangi student representative and myself were asked if they should replace the words 'young women' with 'wāhine' and we suggested using the word kōhine (young women) instead and the response from the senior staff member was them saying that we already had three Māori words in the statement so "that would be enough". I think that it is this kind of attitude that needs to change as well in that just because a few actions have been taken, the work is not over yet. For example, just having Māori language week once a year is not enough to revive the language after the years of damage and neglect that have occurred.

<sup>9</sup> Ministry of Education, Ka Hikitia – Ka Hāpaitia The Māori Education Strategy (English), (New Zealand: Ministry of Education, 2020), <https://www.education.govt.nz/our-work/overall-strategies-and-policies/ka-hikitia-ka-hapaitia/ka-hikitia-ka-hapaitia-the-maori-education-strategy/>

<sup>10</sup> Garth R. Harmsworth and Shaun Awatere, "Indigenous Māori knowledge and perspectives of ecosystems" in *Ecosystem services in New Zealand – conditions and trends*, ed. Dymond J.R. (Lincoln: Manaaki Whenua Press, 2013), 274-286. [https://www.landcareresearch.co.nz/uploads/public/Discover-Our-Research/Environment/Sustainable-society-policy/VMO/Indigenous\\_Maori\\_knowledge\\_perspectives\\_ecosystems.pdf](https://www.landcareresearch.co.nz/uploads/public/Discover-Our-Research/Environment/Sustainable-society-policy/VMO/Indigenous_Maori_knowledge_perspectives_ecosystems.pdf)

<sup>11</sup> Ministry of Education, Ka Hikitia – Ka Hāpaitia The Māori Education Strategy (English).

<sup>12</sup> R. Bishop et al., *Te Kōtahitanga, The Experiences of Year 9 and 10 Māori Students in Mainstream Classrooms* (New Zealand: Ministry of Education, 2003).

<sup>13</sup> Ministry of Education, Ka Hikitia – Ka Hāpaitia The Māori Education Strategy (English).

## How is the position of te reo Māori in Aotearoa linked to the wellbeing of Māori today?

The current position of te reo Māori in New Zealand currently is having many negative effects on the wellbeing of young Māori. Student relationships with school and peers and the self-identity of Māori can be disrupted as a result of te reo Māori not being valued in Aotearoa. As well as this, the negative attitude towards learning te reo Māori that some people have in New Zealand have, has led to a lack of respect for the Indigenous language of Aotearoa.

One way the position of te reo Māori in Aotearoa has affected the wellbeing of young Māori is it can disrupt their relationships in school and with their peers. Te reo Māori is a huge part of Māori culture. It is how Māori communicate on marae and it is the native language of tangata whenua (people of the land). Te reo Māori not being respected in Aotearoa can cause issues with Māori well-being as it can affect student relationships with their teachers and school. An example of this can be when teachers frequently mispronounce Māori names. Many Māori children have Māori names and because of the minimal time that is given to te reo Māori within the education system today, many teachers go through teacher training not knowing basic te reo and Māori pronunciation. This means that when they become teachers, they are not able to, or do not care to pronounce Māori names correctly. This can have a negative effect on the relationship between teacher and student because it can cause some students to feel that they as a person and their culture are not important enough to have the respect of the teacher. The teacher mispronouncing the name of a student can also role model the behaviour to the rest of the class that using the proper pronunciation for someone's name does not matter and they may make fun of the student's name or not make an effort to pronounce the student's name correctly<sup>14</sup>. As well as possibly causing Māori students to not have a good relationship with their teachers, the position of te reo Māori in New Zealand today may also cause them to feel disconnected with their peers. Māori students who have gone through a mainstream (English-medium) education and have not had the chance to connect with their culture may not be able to form strong relationships with their Māori peers as a result. They may feel that because they have not had the same opportunities to be involved in learning te reo Māori and being immersed in their culture. Not feeling "Māori enough" might cause some Māori to disconnect from taking te reo Māori as a subject or participating in kapa haka because they do not feel comfortable in that environment. This can cause the problem of te reo Māori becoming less valued due to Māori disengaging from their language and culture very early on.

The effects that this issue has on relationships at school for young Māori not only affects the relationships they have at school but it can also impact their feelings and attitudes toward school. This is because not having good relationships at school with teachers and peers may cause students to feel isolated and depressed because they may feel as though their ideas, opinions and culture do not hold any significance. Beliefs Māori students hold in relation to their culture may also change negatively as a result of the effects to the relationships at school and the feelings caused by this. The student may decide to change their values and the importance of their culture and may cause them to abandon some aspects of their culture. This could affect achievement in school because they may feel that the teacher has negative feelings toward them causing them to disengage from lessons and refrain from seeking guidance or feedback from teachers. This could have a negative effect on the achievement of Māori because if students feel that their teacher does not care about their achievement it could cause the student(s) to think that their engagement in class does not matter.

Another way the wellbeing of young Māori in Aotearoa has been affected by the position of te reo Māori is it affects the self-identity of Māori. This is because language is a huge part of identity and culture. A whakataukī that speaks on the value of te reo Māori in Māori culture is this, "*Ko te reo te mauri o te mana Māori*" - The language is the heart and soul of the mana of Māoridom. One study about Inuit learning Inuktitut (Indigenous language) shows the deep connection between the identity of a person and their culture. One participant in the study said, "I have a deeper understanding of self..."<sup>15</sup>. This quote shows that by beginning to learn their native language, the participant had become more connected to their culture and have begun to understand who they are and have a stronger connection to their identity and self-worth.

The effects of not having te reo Māori as a priority in schools are not being considered. Not having te reo Māori as a priority in schools means that Māori students may feel that their subject is being overlooked or they are not receiving as many resources available for te reo Māori as there are for other subjects. For me personally, I have felt that not

<sup>14</sup> Lauren Barack, "Correct name pronunciation matters to students," Education Dive, accessed November 11, 2020 <https://www.educationdive.com/news/correct-name-pronunciation-matters-to-students/539697/>

<sup>15</sup> Sylvia Moore, "Language and identity in an Indigenous teacher education program," International Journal of Circumpolar Health 78 no. 2 (2019) <https://www.tandfonline.com/doi/full/10.1080/22423982.2018.1506213>

being fluent in te reo Māori means that my Māori culture is not as appreciated as others who have been brought up speaking te reo Māori because I do not know the language well. This could lead to students disengaging from the subject or seeing it as a lower priority compared to other subjects. This issue of the position that te reo Māori holds today in New Zealand society must begin to be repaired, starting with actions at a societal level.

Te reo Māori being less valued than English is an issue for New Zealand society and is not just relevant to Māori. This is an issue for our society because New Zealand likes to promote itself as a multicultural country, but does not necessarily give Indigenous people the respect they deserve by teaching te reo Māori in schools. It is accepted for rugby players to haka at rugby games to intimidate international teams, but te reo Māori is not valued enough to have a prominent place in the New Zealand curriculum (Ministry of Education, 2007) from early childhood. As well as this, many people cannot be bothered to pronounce Māori place names correctly. Instead there is not enough respect given to the reo to pronounce simple place names such as “Manukau” correctly. In order to revitalise te reo Māori, everyone needs to play a part. Everyone in Aotearoa needs to participate by learning te reo Māori and proper pronunciation. They should also be encouraging their children to learn te reo Māori in order to ensure the future generations of Aotearoa are able to speak te reo Māori. There is often the attitude that there is not an issue and that te reo Māori is not a dying language. When speaking on this topic previously, I have been told that the revitalisation of te reo Māori is not important because te reo Māori is already compulsory in primary school and intermediate. This attitude is not helpful because it details how people are only willing to do the bare minimum for te reo Māori. Te reo Māori is not compulsory in primary and intermediate schools and is not taught as a core subject, so is not given an equal amount of time to other subjects such as English. This contributes to the idea that knowing te reo Māori is not relevant and means that te reo Māori is put behind other “more important” subjects.

One of the main impacts the position te reo Māori in New Zealand has today is the effect it has on the identity of Māori. There are many Māori students who often feel like they are not “real Māori” if they are not able to speak the reo and as a result of this may feel disconnected from their culture. The result of the treatment of te reo Māori in New Zealand also means that there are not as many teachers or support in learning te reo Māori, making it very hard to become fluent while learning te reo in a mainstream (English-medium) school. Personally, as a young Māori woman, this has made it hard for me to try to learn te reo Māori in school even though I have taken te reo Māori as a subject since Year 9. This is partly because of the way NCEA assessments work. When assessments are done in class, there is rarely support in learning appropriate sentence structures and we are left to work on translating tuhi (writing) and kōrero (speaking) assessments using the limited resources we have such as Māori Dictionary. This means that you could complete Level 3 NCEA and still not be able to speak fluently in te reo Māori because we are only taught certain parts of te reo without gaining a broader knowledge of te reo Māori. The system in which te reo Māori is taught in New Zealand has had negative effects on my sense of identity because it has caused me to feel as though I am disconnected with my Māori culture. Because I did not start learning te reo Māori until I was at intermediate, I feel I have been stuck at a level of knowledge where I can complete the assessments but would not be able to speak te reo Māori without preparation from what I know off the top of my head. Some of my peers have also had this issue with feeling a sense of disconnect from their culture as a result of a lack of fluency.

Not only does te reo Māori being treated as an insignificant subject affect Māori students, but the disengagement it causes in school can also cause negative effects on the futures of Māori students. This issue can affect Māori futures because the treatment of te reo Māori in schools with what may seem to some people as minor things such as mispronouncing a Māori word can cause negative effects on many aspects of wellbeing. This is stated in the Child and Youth Wellbeing Strategy (Department of the Prime Minister and Cabinet, 2019) as well and details issues that may arise such as significant periods of unemployment, low levels of education, multiple interactions with the justice system... and long-term health needs, including mental health needs<sup>16</sup>. These effects can be due to the effect that losing te reo Māori has had on the identity (te tuakiritanga) of Māori. If people feel they have lost their identity or their identity is not valued in schools, it can cause them to become disengaged or feel as though they are not appreciated. This issue is important for all the people of Aotearoa not just because it is a significant taonga (treasure) but also because of the negative effects the loss of te reo Māori will continue to have on the young tangata whenua of Aotearoa. The Maihi Karauna Strategy (Te Puni Kōkiri, 2018)<sup>17</sup> for 2018-2023 talks about how the revitalisation of te reo Māori could affect wellbeing. It could also contribute to lifting Māori educational achievement and wellbeing in English medium settings by further validating Māori identity, language and culture.

<sup>16</sup> Department of the Prime Minister and Cabinet, Child and Youth Wellbeing Strategy.

<sup>17</sup> Te Puni Kōkiri Ministry of Māori Development, Maihi Karauna, (New Zealand: Te Puni Kōkiri, 2018), <https://www.tpk.govt.nz/docs/tpk-maihi-karauna-en-2018-v2.pdf>

If te reo Māori gains a more prominent position in Aotearoa, it could have many positive effects on the wellbeing of Māori. One positive effect it could have is helping Māori students to become more engaged in school. This is because seeing their culture being appreciated will mean that they will feel their identity and culture is of value to other people. As well as this, they will also be more connected to their Māori culture. It is these effects on Māori wellbeing like these that Ka Hikitia (Ministry of Education, 2013) is working towards. Their goals are to enable Māori to have their identity, language and culture valued and included in teaching and learning in ways that support them to engage and achieve success, know their potential and feel supported to set goals and take action to enjoy success, have experienced teaching and learning that is relevant, engaging, rewarding and positive, and have gained the skills, knowledge and qualifications they need to achieve success in te ao Māori, New Zealand and the wider world<sup>18</sup>.

## Māori Models of Health and Wellbeing

There are some models that represent wellbeing from a Māori point of view. Two of these models are Te Whare Tapa Whā (Durie, 1994) and Te Wheke (Pere, 1997).

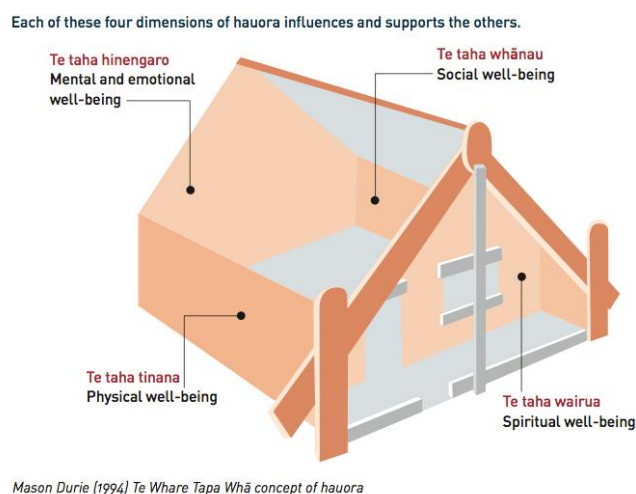


Figure 1. Mason Durie's Te Whare Tapa Whā concept of hauora. (1994)<sup>19</sup>

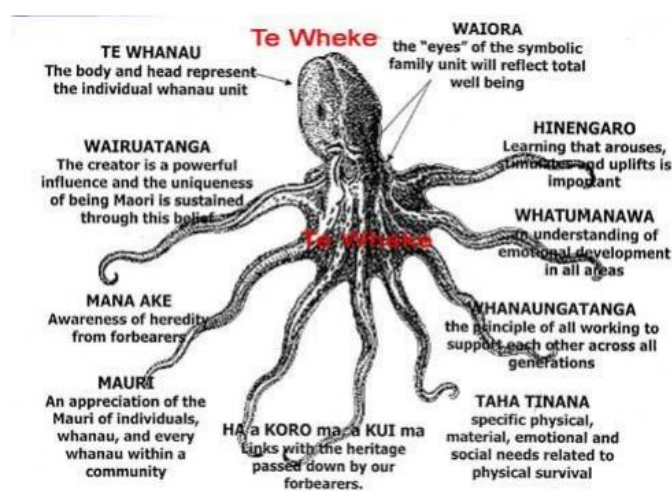


Figure 2. Rangimarie Pere's Te Wheke model hauora. (1997)<sup>20</sup>.

The idea behind the Te Whare Tapa Whā (Durie, 1994) model is that if one part of a person's wellbeing is affected then as a consequence, other aspects of their wellbeing will be negatively affected. The four aspects of this model are te taha hinengaro (emotional wellbeing), te taha wairua (spiritual wellbeing), te taha whānau (social wellbeing) and te taha tinana (physical wellbeing)<sup>21</sup>. This model is a quite simplified model for holistic wellbeing. This can have both positive and negative effects. One positive effect is the model is quite easy to understand and the model being a whare is a suitable representation of the idea of the aspects of wellbeing being connected because if one of the walls of the whare were to become weakened or damaged, then the rest of the whare could collapse. One negative effect of the simple nature of this model is that it does not go to the level of depth that the model, Te Wheke (Pere 1994) goes to. For example, Te Wheke (Pere 1994) goes into more detail about other aspects of Māori wellbeing such as having a strong connection to your ancestors before you (Hā a koro ma, a kui ma) and being able to express emotions (Whatumanawa)<sup>22</sup>. Although both of these models somewhat applied to the aspects of te reo Māori revitalisation, I felt there was a need for a model that I felt would be more relevant to te reo Māori revitalisation.

<sup>18</sup> Ministry of Education, The Māori education strategy: Ka Hikitia - Accelerating Success 2013 -2017, 2013, New Zealand: Ministry of Education <https://www.education.govt.nz/our-work/overall-strategies-and-policies/ka-hikitia-accelerating-success-2013-2017/introduction-to-ka-hikitia-accelerating-success-2013-2017/the-vision/>

<sup>19</sup> Fig 1. Mason Durie's Te Whare Tapa Whā Model, Diagram by Mason Durie, "Te Whare Tapa Whā concept of hauora," from Health Promotion Forum of New Zealand, accessed November 11, 2020. <https://hauora.co.nz/te-whare-tapa-wha-mason-durie/>

<sup>20</sup> Fig 2. Rangimarie Pere's Te Wheke Model, Diagram by Rangimarie Pere, "Te Wheke," from Ngā Pae O Te Māramatanga, accessed November 11, 2020. <http://www.maramatanga.co.nz/sites/default/files/Liberating%20Psychologies%20Maori%20Moving%20Forward.pdf>

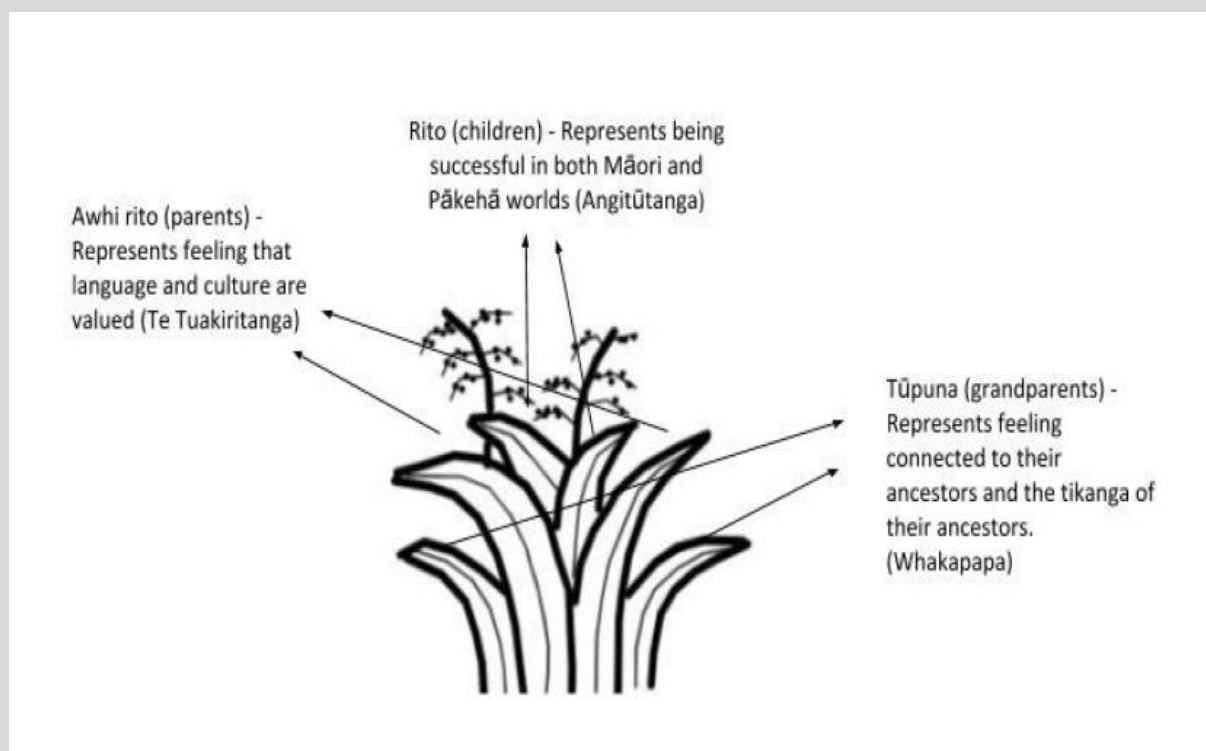
<sup>21</sup> "Well-being, hauora," Te Kete Ipurangi, accessed November 11, 2020, <https://health.tki.org.nz/Teaching-in-HPE/Health-and-PE-in-the-NZC/Health-and-PE-in-the-NZC-1999/Underlying-concepts/Well-being-hauora>

<sup>22</sup> "Māori health models – Te Wheke", Ministry of Health, accessed November 11, 2020, <https://www.health.govt.nz/our-work/populations/maori-health/maori-health-models/maori-health-models-te-wheke>



## My Model for Māori Wellbeing - Whakatipuranga Ora

In my model for wellbeing in relation to te reo Māori in New Zealand, I have come up with a model for Māori wellbeing called Whakatipuranga Ora. In this model, I included aspects that were not covered in the two models, Te Whare Tapawhā and Te Wheke such as the idea of how the generations of the whānau (families) of young Māori could be applied to the concept of te reo Māori revitalisation and wellbeing in the way the grandparents come first, parents next, and then the children after.



I used the concept of the rito (children), awahi rito (parents) and tūpuna (grandparents) of a harakeke bush to represent the three concepts I feel are important for Māori wellbeing. When you are gathering flax, the rule that you must follow is that you take the flax from the outside of the bush (the tūpuna) and never the rito (children) from the middle of the bush. My model of Māori wellbeing is similar to this idea in that there are three “generations” of concepts that must be fulfilled and you start from the tūpuna.<sup>23</sup>

The first concept in my model is that young Māori must be connected to their ancestors (whakapapa)<sup>24</sup> and the tikanga of the past. This is represented by the tūpuna of the harakeke bush because this is extremely important in understanding your identity. If you do not know where you come from then you will not be able to know your true identity. Once this has been fulfilled then you move on to the next concept represented by the awahi rito of the harakeke bush. This concept is feeling that Māori language and culture are valued and important (te tuakiritanga)<sup>25</sup> as detailed in the Ka Hikitia (Ministry of Education, 2020) document. This concept is important for wellbeing because if a person does not feel that their culture is being valued then this could have negative effects on their wellbeing and how they view themselves. The third concept represented by the rito of the harakeke bush is being able to be successful in both the Māori and Pākehā worlds (angitūtanga). This concept is represented by the rito of the harakeke bush because

<sup>23</sup> “Harakeke Plant,” Te Ara The Encyclopedia of New Zealand, accessed November 11, 2020, <https://teara.govt.nz/en/diagram/13162/harakeke-plant>

<sup>24</sup> Harmsworth and Awatere, “Indigenous Māori knowledge and perspectives of ecosystems,” 274-286

<sup>25</sup> Ministry of Education, Ka Hikitia – Ka Hāpaitia The Māori Education Strategy (English).

if young people are not secure in who they are it can be difficult for this criteria of being successful in both worlds to be fulfilled because they may feel that they are not accepted by either the Pākehā world or the Māori world.

At present, in the New Zealand Curriculum (Ministry of Education, 2007) there is a principle called the 'cultural diversity principle'. It is stated within this principle that the curriculum teachers deliver to their students:

- reflects our linguistically and culturally diverse nation
- affirms students' different cultural identities
- incorporates students' cultural contexts into teaching and learning programmes
- is responsive to diversity within ethnic groups
- helps students understand and respect diverse viewpoints, values, customs, and language<sup>26</sup>

At this point in time, I feel that these criteria are not being met. At my school we are rarely greeted in Māori let alone taught in a way that incorporates te reo Māori or Māori culture into the New Zealand curriculum (Ministry of Education, 2007). Tikanga Māori (Māori customs) are also commonly ignored such as not sitting on tables where you eat food. This is why more cultural awareness should be taught when teachers are being trained because tikanga Māori being ignored can have negative impacts on the wellbeing of young Māori because it can lead to feelings that their culture is not appreciated, which can then lead to disengagement in school.

### **What is the history of te reo Māori and how has colonisation affected the position of te reo Māori in Aotearoa?**

Colonisation has affected the position of te reo Māori in many ways. One way is how the school system works in Aotearoa as a result of this. ... in many cases the education system has negatively affected te reo Māori indirectly through aspects of Eurocentric education<sup>27</sup>. This quote is from an article written by Rachael Ka'ai-Mahuta which relates to how the education system in Aotearoa has affected te reo Māori because of the ... assimilation, cultural subordination, language domination ... the curriculum, class structures, racism ... intelligence testing and negative teacher expectations<sup>28</sup>. This is an effect caused by the cultural assimilation Māori faced as a result of the arrival of Pākehā to Aotearoa. Actions such as the Native Schools Act (1867) meant that Māori was no longer to be spoken in schools and this has meant that generations of Māori have grown up not being taught te reo Māori as their first language. This continues to affect Māori today because the language has still not recovered from the damage that has been done since it was discouraged to speak te reo Māori and English was instead encouraged. This has meant for my family, that my grandmother was able to speak te reo Māori, but the knowledge of the reo was not passed down to my mother or to me. This has continued to affect me today because it has meant that I am not confident in holding conversations in te reo Māori or speaking te reo Māori in formal settings. The effect of actions such as the Native Schools Act (1867) meant that I did not learn te reo when I was younger and instead have had to try and learn it while being restricted by the school curriculum (Ministry of Education, 2007) and required assessments.

In the early years of Pākehā settlement in Aotearoa, many Pākehā spoke te reo Māori and te reo Māori was used as a way to communicate for the purpose of trading with Māori. As more people arrived in Aotearoa, Professor Samuel Lee was helped by Hongi Hika who was a chief to make te reo Māori a written language. This way of writing te reo Māori was then taught by missionaries to Māori who then taught each other. In this period of time, many Pākehā in positions such as government officials spoke te reo Māori as well. In the 1860s, te reo Māori became less common than English. This was caused by the population of Pākehā in Aotearoa in the 1850s increasing to become greater than the Māori population. Around this time, new words were added to the Māori language to adapt to the new things Pākehā brought to Aotearoa. An example of this is the word kete, which is a transliteration for the word 'kit'. After Māori became the language less frequently spoken, it became commonplace for Māori to be punished for speaking te reo Māori in schools. This is because of the Native Schools Act (1867) starting to be enforced<sup>29</sup>. The purpose of this Act was to make sure that Māori children would only be learning English in schools. This was part of the attempt of Pākehā to assimilate Māori and eliminate te reo Māori in Aotearoa. This meant that many Māori began to have different viewpoints about their language and began to see it as not being relevant, which led to Māori parents not wanting

<sup>26</sup> Ministry of Education, "Cultural diversity principle," The New Zealand Curriculum Online. Updated July 24, 2020 <https://nzcurriculum.tki.org.nz/Principles/Cultural-diversity-principle> (accessed October 26, 2020)

<sup>27</sup> Ka'ai-Mahuta, "The impact of colonisation on te reo Māori: A critical review of the State education system," 195.

<sup>28</sup> Ka'ai-Mahuta, "The impact of colonisation on te reo Māori: A critical review of the State education system," 195.

<sup>29</sup> "Māori Language History," 2020 Human Rights Commission, accessed July 16, 2020, <https://www.hrc.co.nz/your-rights/your-rights1/maori-language-history/>

their children to speak te reo Māori. Many Māori parents encouraged their children to learn English and even to turn away from other aspects of Māori custom. It was thought that not learning te reo Māori would lead to their children being more successful. This idea is one of the reasons that many Māori today cannot speak te reo Māori fluently. After World War 2, the number of Māori speaking te reo Māori was still decreasing. After the war, 60% of Māori moved closer to the city which influenced the number of Māori speaking te reo Māori to decrease again because English was more regularly spoken near the city as well. As Māori and Pākehā had to communicate more commonly, more people also began speaking English instead of te reo. This eventually led to only 20% of Māori being native speakers in the 1980s<sup>30</sup>. This could have had negative effects on the wellbeing of Māori because it was likely to have caused many to feel disconnected from their culture because Pākehā decided that te reo Māori was not a significant part of New Zealand.

The attempts by Pākehā to get rid of te reo Māori went on until the 1970s, when some groups of Māori including Ngā Tamatoa and Te Reo Māori society brought up the issue, and in 1972 the Māori language petition was sent to Parliament with 30,000 signatures<sup>31</sup>. The purpose of this petition was to try and bring the teaching of te reo Māori and Māori culture back into schools. The petition stated that this would be achieved through the training of fluent te reo Māori speakers to enable them to be able to teach te reo Māori. The government did not want to organise the training for these teachers, so Ngā Tamatoa organised the training at first. After this, the government decided to pick up the training after seeing how Ngā Tamatoa organised the training cost effectively. The result of this though, was that the government undermined the aim of the petition which was to teach te reo Māori at all levels in school. The government decided that the teachers would be trained for secondary school. As well as this, in order to qualify for the course, their entry was decided by factors such as having 'a good level of general education' meaning they would have had to have gone through the Pākehā school system which would have meant some fluent te reo Māori speakers would have been prevented from teaching te reo Māori in schools<sup>32</sup>. In 1975, after the Māori language petition, a bilingual school was established at Rūātoki. This bilingual school was the first official one in Aotearoa. After the first bilingual school opening, te reo Māori was starting to be brought back and the first Māori radio station owned by Māori was started in 1983. The effect of this is the wellbeing of young Māori would have begun to improve as they would have had more connection to their culture and identity as there were actions starting in order to try and revitalise te reo Māori.

It was in the 1980s when there was starting to be a big focus on revitalising te reo Māori. In 1982, the first kōhanga reo (early childhood centre where children are taught in te reo Māori) was established in Lower Hutt. Despite the efforts to revitalise te reo Māori gaining traction, some people were not welcoming to the idea of Māori having a more prominent position in Aotearoa. This was shown when a phone operator, Naida Glavish, was greeting the people who phoned in with "Kia ora". When she was told to only speak in English, she refused and continued greeting people in the same way until she was demoted<sup>33</sup>. Although there were some people who agreed that that Māori greeting should not be used, other people were in support of using Māori greetings and eventually Naida Glavish was promoted to an international position. Her using Māori greetings also led to pilots greeting passengers in te reo Māori more commonly. In this period of time of revitalisation, a claim was made to the Waitangi Tribunal that te reo Māori was a taonga (treasure) that should be protected under the Treaty (Te Tiriti o Waitangi [Māori version], 1840). This was one of the words that was mistranslated in the Treaty (The Treaty of Waitangi [English version], 1840) because to Pākehā taonga represent physical things, such as the land and homes of Māori, whereas to Māori taonga has a deeper meaning which does not just include physical belongings, but also includes language and culture.

After this claim, the Māori Language Act 1987 was put into place and te reo Māori was declared an official language of Aotearoa<sup>34</sup>.

In 1997, there were 675 kohanga reo, 54 kura kaupapa (Māori medium schools) and three whare wānanga (universities)<sup>35</sup>. At this time, it meant that many more younger people were able to go to school and learn te reo Māori.

<sup>30</sup> New Zealand History, "Page 2 – History of the Māori language."

<sup>31</sup> 2020 Human Rights Commission, "Māori Language History."

<sup>32</sup> Ngā Tamatoa and C.A.R.E., "Te Reo Māori? Not if the Education Department Has its Way," Victoria University Student Newspaper, April 3, 1974 <http://nzetc.victoria.ac.nz/tm/scholarly/tei-Salient37051974-t1-body-d26.html>

<sup>33</sup> New Zealand History, "Page 2 – History of the Māori language."

<sup>34</sup> New Zealand History, "Page 2 – History of the Māori language."

<sup>35</sup> Kim Knight, "He tangata whai kupu," Stuff.co.nz, August 28, 2009, <http://www.stuff.co.nz/sunday-star-times/features/2672404/He-tangata-whai-kupu>



...more than 32,000 students receiving Māori-medium education, and 55,399 students learning te reo<sup>36</sup>. In 1998, the government began funding Māori media such as Māori television and they put money aside for other actions to help revitalise te reo Māori. These actions taken meant that in 2001, a survey showed that there were around 136,700 people who could speak te reo Māori. After an act was passed in Parliament in 2003 called the Māori Television Service Act, Māori television was shown on television in 2004<sup>37</sup>. Even though these actions were taken to revive te reo Māori over this time, there was still a decreasing number of people who could have a conversation in te reo Māori. Data from the 2013 Census showed that since the 2001 Census 25.15% of Māori could hold a conversation in te reo Māori, the amount of Māori who could hold a conversation in te reo Māori had decreased so only 21.31% of Māori in 2013 could<sup>38</sup>. The history of actions taken toward te reo Māori taken since Pākehā colonised Aotearoa have shown that in order to revive te reo Māori, more action must be taken to push more people to speak it in order to make sure it is not lost. If the actions are not consistent, then it can lead to an increase for a short amount of time, but ultimately the numbers of te reo Māori speakers will end up decreasing again.

### Te Reo Māori Revitalisation and Wellbeing

There are many actions that could be taken in order to help revitalise te reo Māori in relation to improving wellbeing. I believe, one of the most important action that must be changed in order for the goal of the revitalisation of te reo Māori to be achieved is to try and change the attitudes of people who believe they do not have a role to play in the revitalisation of te reo Māori. This is especially needed for public figures who have spoken out against making te reo Māori more prominent in Aotearoa for ultimately racist reasons. There have been many examples of politicians who should be leading the country in a way that supports all races in New Zealand displaying blatant racism when talking about te reo Māori getting more attention in New Zealand. One example was in 2015 when a student from Waiuku college asked Sir John Key, whether he would consider extending Māori language week to a month of recognition for te reo Māori. Key immediately dismissed this idea saying people would “find it boring” and caused the student to feel as though her opinion was not valid<sup>39</sup>. This is an appalling response from a former Prime Minister of New Zealand because not only did he speak to a 16 year old student in a demeaning way, but he refused to acknowledge te reo Māori which is an official language of New Zealand. Sir John Key in this situation, showed a blatant lack of respect for te reo Māori by saying that te reo Māori was not important enough for one month when in fact te reo Māori should be celebrated and recognised year round. In an interview with the mainstream (English-medium) dean at my school, the topic of Māori Language Week was talked about, she said, “I’ve always had great difficulty with te reo Māori placed into a week because when we do that we’re placing a week ... in that multicultural approach and so you know might come after Tongan Language Week and before Samoan Language Week and vice versa and so while we continue to give te reo Māori a week, people continue to treat it like that and they think that if they, if they speak that for one week then they’ve done a really good job<sup>40</sup>.” This shows how people think that if they commit to just one week of te reo Māori it will mean that they’ve done their part in ‘revitalising’ te reo Māori when really there is much more to revitalising te reo Māori than that.

Another politician, David Seymour also believes that making te reo Māori compulsory would mean that more students would be leaving school without a good level of literacy even though many kura kaupapa which are taught fully in Māori have NCEA pass rates over 90%<sup>41</sup>. These opinions of non-Māori politicians undermine the revitalisation of te reo Māori and ignore the fact that te reo Māori will be lost if consistent and effective actions are not taken to stop it. This can cause an example to be set that it is okay to show a lack of respect for te reo Māori. There are some people in Aotearoa who are so against te reo Māori that they refuse to acknowledge the original name of New Zealand, Aotearoa, making statements such as, “The name of this country is NEW ZEALAND. And I tell you what ACT ... if you

<sup>36</sup> "Part 3: Historical and current context for Māori education", Controller and Auditor-General, accessed November 11, 2020, <https://oag.parliament.nz/2012/education-for-maori/part3.htm>

<sup>37</sup> 2020 Human Rights Commission, “Māori Language History.”

<sup>38</sup> Stats NZ, Māori language speakers. New Zealand: NZ Government, (n.d.), [http://infoshare.stats.govt.nz/browse\\_for\\_stats/snapshots-of-nz/nz-social-indicators/Home/Culture%20and%20identity/maori-lang-speakers.aspx](http://infoshare.stats.govt.nz/browse_for_stats/snapshots-of-nz/nz-social-indicators/Home/Culture%20and%20identity/maori-lang-speakers.aspx). Accessed 7 Nov. 2020.

<sup>39</sup> Josh Fagan and Simon Day, “John Key leaves girls in tears after saying Māori language month would bore people,” Stuff.co.nz, August 2, 2015, <https://www.stuff.co.nz/national/politics/70747364/john-key-leaves-girl-in-tears-after-saying-maori-language-month-would-bore-people> (accessed October 26, 2020)

<sup>40</sup> Interview with mainstream (English-medium) dean, October 30, 2020.

<sup>41</sup> Leonie Hayden, “Cheat sheet: Compulsory te reo Māori in schools,” The Spinoff, July 19, 2019, <https://thespinoff.co.nz/atea/19-07-2019/cheat-sheet-compulsory-te-reo-maori-in-schools/> (accessed October 26, 2020)

mention this made-up name just one more time ... I won't be voting for you ... CAPICE?"<sup>42</sup>. Yet they will happily take pride in embracing the "kiwi culture" not seeming to realise "kiwi" is also a Māori word. These examples show that in order to make sure te reo Māori is revitalised, the racist attitudes of people who believe te reo Māori is a useless language or is not relevant need to change.

One of the students I interviewed talked about the attitudes of people in New Zealand towards te reo Māori and said, "I feel like too many people are against it and they're just slowing down the process. They're just being too stubborn and racist and they just need to ... let things happen"<sup>43</sup>. This quote showed how some young people today feel that they feel that people in Aotearoa are not doing enough for the revitalisation of te reo Māori. This is why the change needs to start with the people we see in power because if they are portraying these anti-Māori viewpoints, how is the position of te reo Māori in Aotearoa going to get to a place where it is valued as the taonga it is? The action of people appreciating te reo Māori in Aotearoa will have a positive effect on the wellbeing of Māori because it will mean that they will feel that their culture is more accepted and they will feel that they are valued. This is because once the leaders and influential people in Aotearoa begin to appreciate te reo Māori there will be a new attitude in Aotearoa for the appreciation of te reo Māori. This is similar to the idea of the whakataukī, "Mā mua ka kite a muri, mā muri ka ora a mua - Those who lead give sight to those who follow, those who follow give life to those who lead."

This action of changing the attitude toward te reo Māori relates to the Child and Youth Wellbeing Strategy because one of the measures of success mentioned in the strategy document is the distinctive and unique heritage, cultures and identities of New Zealanders are celebrated and built on<sup>44</sup>. This example talks about how a measure of success for the strategy is the culture of all New Zealanders being appreciated. This relates to the topic of te reo Māori revitalisation because the attitude of people towards te reo must be changed in order to begin appreciating Māori culture, the indigenous culture of New Zealand. This action of changing the attitude towards te reo Māori will also mean that more people will start learning te reo because the perception of te reo Māori will be changed and it will be viewed as a priority for New Zealand in order to preserve the Indigenous culture of Aotearoa.

Another action that needs to be taken for the revitalisation of te reo Māori in Aotearoa is te reo Māori having a prominent position in the school curriculum (Ministry of Education, 2007) from the beginning of school. This action involves te reo Māori being considered a core subject. This means that te reo Māori will be treated with the same respect as other subjects that are taught as core subjects in school such as English and maths. Checkpoints that should be met by students by a certain point in their schooling for their fluency of te reo Māori. Having te reo Māori in a prominent position in the school curriculum will ensure that students at schools in Aotearoa will have te reo Māori as a compulsory subject at least until Year 11 and hopefully all students in New Zealand will be fluent in te reo Māori by the end of their schooling.

In February 2019, Jacinda Ardern stated, "We want by 2040 a million New Zealanders to be able to kōrero with confidence in te reo Māori, so we've got a lot of work to do to get there"<sup>45</sup>. This statement was made more than a year ago and so far there has been almost no action taken in order to meet this goal. In my interview with the principal of my school, she talked about how this action had been considered but, "it would take too many resources" and "students come into school after years of not doing te reo"<sup>46</sup>. I can accept that making te reo Māori compulsory will take a lot of effort and resources, but I will not accept it being used as an excuse for not even trying when there are ways around these issues mentioned. Not only are these reasons irrelevant, but there are people within the school who have been calling for this action to be taken. It is essential that te reo Māori is given more attention in the school curriculum (Ministry of Education, 2007) of Aotearoa. The excuses for taking minimal or no action cannot continue when there are many simple ways te reo Māori could be incorporated into the school system. These could include doing the bare minimum such as having the teachers greet the students in Māori correctly during Māori language week. One of the students I interviewed was talking about Māori language week and said "...even during te reo Māori

<sup>42</sup> NZ Herald, "Act supporters outraged after David Seymour calls NZ 'Aotearoa' in MAGA slogan," NZ Herald, January 20, 2020, <https://www.nzherald.co.nz/nz/act-supporters-outraged-after-david-seymour-calls-nz-aotearoa-in-maga-slogan/FJIMWNCQAC2K3TTNYU27EFHHDA/>

<sup>43</sup> Peer interview, October 27 2020.

<sup>44</sup> Department of the Prime Minister and Cabinet, Child and Youth Wellbeing Strategy.

<sup>45</sup> Radio New Zealand, "Plan to have 1 million people speaking te reo Māori by 2040", Radio New Zealand February 21, 2019, <https://www.rnz.co.nz/news/te-manu-korihi/383063/plan-to-have-1-million-people-speaking-te-reo-maori-by-2040> (accessed October 26, 2020)

<sup>46</sup> Interview with principal, October 30, 2020.

week ... barely any teachers spoke te reo<sup>47</sup>.” Another student said in response to this, “And the ones that did, didn’t even put in effort to actually pronounce the words on the paper, it’s literally written down, people were saying it everywhere and they weren’t even putting in the effort to pronounce it properly<sup>48</sup>.” These are just a few examples that show the frustration of young Māori with people who do not even bother to put minimal effort into speaking basic te reo. To not even be greeted by teachers in te reo Māori during Te Wiki o te Reo Māori just shows how little te reo Māori is prioritised in some schools in Aotearoa at present.

Although, there are many actions that the school should be taking in order to contribute to the revitalisation of te reo Māori, there must also be action taken at a higher level by the government and specifically the Ministry of Education. The recent changes to the Education and Training Act 2020: Te Tiriti o Waitangi, states “The government is taking practical steps to promote the growth of te reo Māori capability in the education workforce through initiatives such as Te Ahu Māori o te Reo Māori, Te Aho Ngārahu and the TeachNZ Scholarship programme.” These changes are going to be implemented in January 2021 to the New Zealand curriculum. If there were more changes made at this level, then the goal of te reo Māori revitalisation in schools could be made significantly more achievable. This is because the government could take actions like providing an incentive for fluent speakers of te reo Māori to become teachers which would enable more schools to make te reo Māori a compulsory subject.

In order to revive te reo Māori, the collective action of everyone in Aotearoa will be required. This is not a matter of whether everyone believes te reo Māori is useful, it is a matter of restoring the taonga that was stolen from Māori despite the promises made in the Treaty (Te Tiriti o Waitangi [Māori version], 1840). If Māori are not able to embrace their culture and language in Aotearoa, where will they? There are many countries that speak English, but te reo Māori is unique to Aotearoa and Māori culture. This is why it is so important that te reo Māori is revitalised because if te reo Māori is lost in Aotearoa, there will be no place in the world for te reo Māori to exist.

This action of revitalising te reo Māori will be extremely beneficial for the wellbeing of young Māori. The Ka Hikitia (Ministry of Education, 2020) document states one of their outcome domains is identity, language and culture matter for Māori learners (Te Tuakiritanga)<sup>49</sup>. This outcome will be met if this action is carried out because it will cause Māori to feel that their culture is significant in school and their beliefs are valued. This is because language is a significant part of any culture and by making it have an important position in the school curriculum (Ministry of Education, 2007), it will mean that Māori students also feel their culture and identity is important leading them to feel they are of value. Another outcome domain of the Ka Hikitia (Ministry of Education, 2020) document is Māori are free from racism, discrimination and stigma in education. (Te Tangata)<sup>50</sup>. This action will also help in part for this outcome to be fulfilled because in making te reo Māori compulsory in schools it will mean more Māori (and non-Māori) will be able to learn te reo Māori without feeling as though they will be disadvantaged because of the lack of attention given to te reo Māori at present.

Having te reo Māori as a compulsory subject also means that resources must be made to support students in this subject. At the moment I feel there are not very many NCEA-related resources to support students in te reo Māori compared to other NCEA subjects. I know that when I have needed support in te reo Māori, many places that make textbooks such as ESA publications and Study Time do not offer resources for support in te reo Māori. This makes it even harder for students to learn te reo Māori as a subject because sometimes students need additional support in other forms outside of the classroom. The lack of availability of resources for NCEA te reo Māori also leads to more students not wanting to continue with the subject because they are not able to access the resources that are available in other subjects to support their learning.

Another action that needs to be taken if te reo Māori is going to be made compulsory is when new teachers are being trained, they need to be taught to be able to teach te reo at least at a basic level. This will mean that there will not be too much pressure on Māori teachers to take responsibility for the teaching of te reo. In schools at the moment it is common for te reo teachers to be given a lot of responsibility meaning not only are they in charge of all the teaching of te reo Māori, but they are also in charge of organising the kapa haka and are sometimes given classes for other subjects such as social studies. This means that te reo Māori teachers are often put under a lot of stress and have to

<sup>47</sup> Interview with peers, October 27, 2020.

<sup>48</sup> Interview with peers, October 27, 2020.

<sup>49</sup> Ministry of Education, Ka Hikitia – Ka Hāpaitia The Māori Education Strategy (English).

<sup>50</sup> Ministry of Education, Ka Hikitia – Ka Hāpaitia The Māori Education Strategy (English).

deal with a huge workload. This is why te reo Māori needs to be taught to all new teachers as well otherwise there will just be more pressure put on te reo Māori teachers who already have a big workload to start with.

### Te Reo Māori Revitalisation and Health Promotion

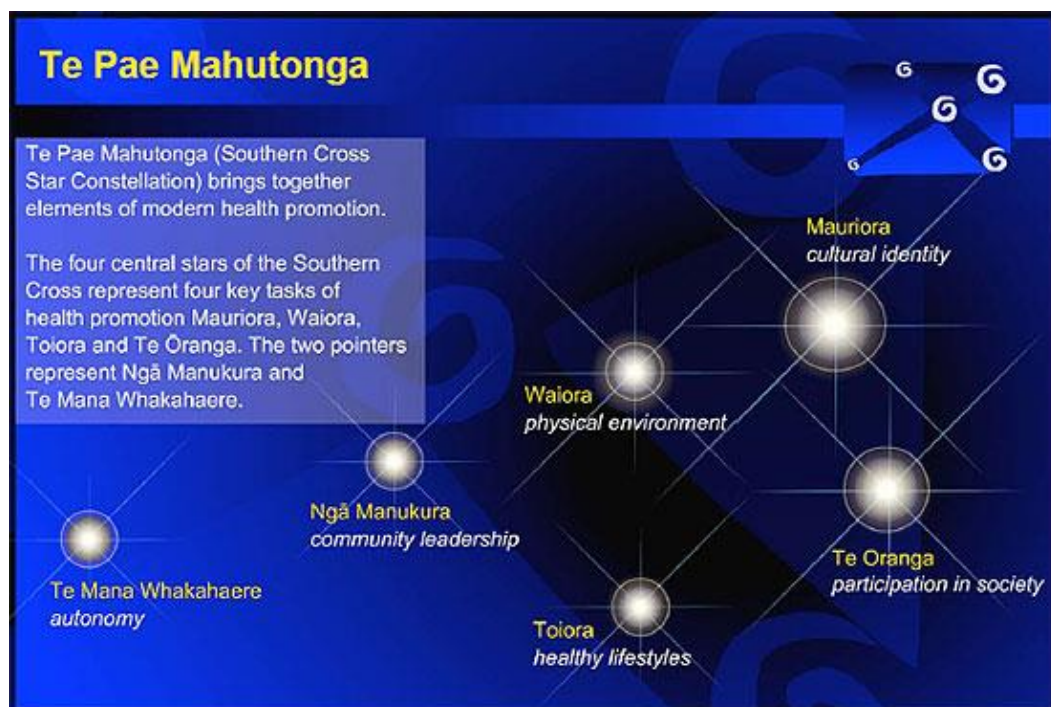


Figure 3. Mason Durie's Te Pae Mahutonga Model (1999)<sup>51</sup>.

The model of Te Pae Mahutonga (Durie, 1999) is a model that represents the different aspects that health promotion should be benefiting. I decided to look at how this model would fit with te reo Māori revitalisation as Te Pae Mahutonga (Durie, 1999) is a model that includes Indigenous concepts for wellbeing and could be helpful for framing an approach to te reo Māori revitalisation.

The concepts included in this model are Mauriora (cultural identity), Ngā Manukura (community leadership), Te Oranga (participation in society), Toiora (healthy lifestyles), Waiora (physical environment), and Te Manawhakahaere (autonomy)<sup>52</sup>. Te reo Māori revitalisation can be seen as a part of the health promotion aspect "Mauriora". This is because the revitalisation of te reo Māori is an action or campaign that will improve cultural identity for Māori. This is because te reo Māori revitalisation will improve the cultural identity of Māori as it will ensure that the Māori language is not lost, meaning that a huge part of Māori culture will also not be lost. Te reo Māori revitalisation would also be relevant to Te Oranga (participation in society) because having te reo Māori be revitalised would enable more Māori to feel appreciated in their culture and feel they have a voice in our society. As well as relating to these two aspects, te reo Māori revitalisation also relates to the aspect of Ngā Manukura (community leadership) because it would promote more Māori speaking up in their community in order to promote the reo. Although the campaign of te reo Māori revitalisation relates to some of the aspects of the health promotion model of Te Pae Mahutonga (Durie, 1999), it does not fit with enough of the aspects of the model for the model to be applied to the campaign of te reo Māori revitalisation. I think this is because the model also relates to a lot of physical aspects as well which te reo Māori revitalisation does not really fit with.

### Overall Recommendations

A whakataukī that represents this issue and how we should be approaching it is "*I orea te tuatara ka patu ki waho*" (A problem is solved by continuing to find solutions). This whakataukī relates to how we should be approaching this issue because it is not an issue that can be solved with just one action; there will need to be multiple strategies that involve

<sup>51</sup> Fig 3. Mason Durie's Te Pae Mahutonga, Diagram by Mason Durie, "Te Pae Mahutonga," from Ministry of Health, accessed November 11, 2020.

<sup>52</sup> "Māori health models – Te Pae Mahutonga", Ministry of Health, accessed November 11, 2020, <https://www.health.govt.nz/our-work/populations/maori-health/maori-health-models/maori-health-models-te-pae-mahutonga>

all the people of Aotearoa in order to make sure we do not lose te reo Māori. This issue will not be resolved by having one off campaigns such as te reo Māori week because although these types of actions are helpful in raising awareness of te reo Māori, it is not a long-term solution and ultimately leaves Aotearoa in the same position it was before. The appreciation of te reo Māori should be year round not just a period of a week, but an ongoing conscious effort to make considerable strides forward. This whakataukī also means that you need to adapt the actions taken if they are not working to help the issue. This is important because we cannot continue to have the same actions being taken if they are not making a difference in the position of te reo Māori in Aotearoa.

The concepts that connect te reo Māori revitalisation to wellbeing in relation to the goals of the Child and Youth Wellbeing strategy (Department of the Prime Minister and Cabinet, 2019) of Tuakiritanga (Identity)<sup>53</sup>, Kiritau (Self-worth) and Whakapapa (Connection to ancestors)<sup>54</sup> must also be considered in order to improve the wellbeing of young Māori. If we are able to use these concepts and take actions that follow these concepts, the wellbeing of young Māori will be significantly improved as a result of Māori culture and language being promoted with the preservation of the Indigenous language of Aotearoa.

### Appendix 1

Interview questions for peers, mainstream (English-medium) dean, Kahurangi dean and the principal

1. How do you think the position of te reo Māori in New Zealand at present affects the wellbeing of young Māori?
2. How do you think the attitude of people in New Zealand toward te reo Māori has affected the revitalisation of te reo Māori?
3. What do you think some of the benefits of te reo Māori revitalisation are for the wellbeing of young Māori?
4. What actions do you think [Name of School] has taken to help with the revitalisation of te reo Māori?
5. What further actions do you think could be taken at [Name of School] to help with the revitalisation of te reo Māori and what effect do you think these will have on the wellbeing of Māori students at [Name of School]?

<sup>53</sup> Ministry of Education, Ka Hikitia – Ka Hāpaitia The Māori Education Strategy (English).

<sup>54</sup> Harmsworth and Awatere, "Indigenous Māori knowledge and perspectives of ecosystems," 274-286.

## Activity 1.

# Introducing te reo Māori health and wellbeing kupu (words)

### Overview

Language alone may not constitute 'knowledge' but it can open a doorway to knowledge, especially when learning about the world views of different cultures.

Within and across languages there are a range of terms that have related meanings, *but not the same meaning*. This activity invites students to learn about the different meanings of health and wellbeing related terms in English and te reo Māori. The activity can be extended to include other home languages of students in the class. The artefacts produced are intended to be shared among the members of the class. See also Activity two for another approach to organise and present these words and meanings.

Use this activity in the introductory unit of the learning programme as foundational ideas and understanding of HPE underlying concepts are being developed.

### Curriculum considerations

**Learning intention:** Students will demonstrate understanding of health education related terms in English and te reo Māori (applies across all levels and strands).

**Key competencies:** Using language, symbols and text; Participating and contributing.

**Digital fluency:** Digital literacies – being discerning and critical; able to locate, understand, organise, evaluate, and adapt digital content.

### Resources

- Access to an online dictionary (e.g. Te Aka Māori dictionary <https://maoridictionary.co.nz/>) and/or print sources of terminology, and/or te reo speakers in the school community where possible, for explaining te reo Māori kupu (words) and aroro (concepts).
- Access to pen and paper based materials or a digital application to create an A4 page of information that can be curated into a single resource and shared.
- Access to the Scholarship reports on the revitalisation of te reo Māori (as a wellbeing issue) may also be useful for students to read in full or in part.

### Teaching and learning process

Ask the class for a range of terms related to 'health' and 'wellbeing' – in English and te reo Māori (and other home languages of students in the class). As needed, provide prompts with ideas like those below. Ask students what they understand to be similar and different about the terms, or where meanings might be confused because of the different ways terms are used.

**Word list (ideas only, do not be limited by this list):**

- Health, wellbeing, hauora, oranga, waiora;
- Physical wellbeing, spiritual wellbeing, mental and emotional wellbeing, social wellbeing, taha tinana, taha wairua, taha hinengaro, taha whānau (taha ~ side, so this is about the dimension or side of hauora);
- Mauri, mana;
- Resilience, manawaroa;



- *Identity, tuakiri;*
- *Whanaungatanga, manaakitanga, kotahitanga.*
- Instruct the students that they are going to produce an artefact that helps to develop understanding of words that (seem to) have similar and different meanings. This will be shared with the class.
- Working in small groups students select a group of related words (4-5 are suggested). Ensure that a variety of words are covered, with some overlaps between groups.
- They need to design an A4 sized artefact that contains the following information:
  - Words/kupu in English and Māori (or other language), and the meanings of these, noting any (slight) differences in meaning – as best these can be understood from the information sources.
  - Any guidance around pronunciation.
  - Any visual cues if useful (thumbnail sketches, symbols etc), especially where it might help to distinguish between similar terms.

### Student learning artefact(s)

The A4 sized artefact from each group is collected and compiled into a single resource and shared with the class.

### Teacher pedagogical and/or content knowledge

For further information about the Ministry of Education te reo Māori strategy see Tau Mai Te Reo, the Māori Language in Education Strategy <https://www.education.govt.nz/our-work/overall-strategies-and-policies/tau-mai-te-reo/>

For education sector policy and strategy see Ka Hikitia – Ka Hāpaitia : The Māori Education Strategy <https://www.education.govt.nz/our-work/overall-strategies-and-policies/ka-hikitia-ka-hapaitia/ka-hikitia-ka-hapaitia-the-maori-education-strategy/>

### Teacher evaluation and reflection

How confident are you to use and pronounce te reo Māori terms? What professional learning support is there at your school to help teachers to continue to implement current Ministry of Education strategies, including the revitalisation of te reo Māori? How can you make use of this PLD support for teaching and learning in health education?



## Activity 2.

# Te reo Māori - kupu (words) and concepts/aroro for (health) education

### Overview

As kupu (words) from te reo Māori become ever more popularly and widely used in English-based text and conversation, what may or may not accompany the use of these terms is their deeper meaning, especially some of the more conceptual meanings, or the particular meaning of some terms in specific contexts. This activity invites students to develop understanding of some widely used terms, why some similar terms might be used over others, and how some of these terms may be used more as concepts or big ideas to frame some overall thinking. A teacher reference for this activity is to think of the cultural capabilities in Tātaiako for example – *Wānanga*, *Whanaungatanga*, *Manaakitanga*, *Tangata Whenuatanga*, and *Ako* and the broad application these are given as they are unpacked as behavioural indicators in teacher and leadership practice.

Where possible (and as needed), engage the expertise of te reo speakers in the school or community to support this activity, especially for local and regional variations on kupu use, in-text spelling, and meanings.

After an initial introductory exercise finding out meanings of a selection of kupu, students analyse the meaning of some widely used terms being that are used to frame the Netsafe digital citizenship principles (this could be replaced with other similar resource material as required). These principles were chosen for this activity because of the framing using te reo Māori kupu, and also because of the relevance of digital citizenship for young people and learning in health education. Another possible example could be Te Pae Mahutonga as a model for health promotion and the representation of the stars in this model.

Use this activity in the introductory unit of the learning programme as foundational ideas and understanding of HPE underlying concepts are being developed.

### Curriculum considerations

**Learning intention:** Students will explore the use of te reo Māori kupu in documents that link to wellbeing.

**Key competencies:** Using language, symbols and text; Participating and contributing.

**Digital fluency or citizenship:** Digital literacies – being discerning and critical; able to locate, understand, organise, evaluate, and adapt digital content; *exploring the principles of digital citizenship*.

### Resources

- Access to an online dictionary (e.g. Te Aka Māori dictionary <https://maoridictionary.co.nz/>) and/or print sources of terminology, and/or te reo speakers in the school community where possible, for explaining te reo Māori kupu (words) and aroro (concepts).
- Extract on Principles of digital citizenship from: Netsafe. (2018). From literacy to fluency to citizenship: Digital citizenship in education (2nd ed.). Wellington, NZ: Netsafe. Page 5 [https://www.netsafe.org.nz/the-kit/wp-content/uploads/2018/07/From-literacy-to-fluency-to-citizenship\\_July-2018.pdf](https://www.netsafe.org.nz/the-kit/wp-content/uploads/2018/07/From-literacy-to-fluency-to-citizenship_July-2018.pdf) - see *Copysheet with this activity*.
- Access to the Scholarship reports on the revitalisation of te reo Māori (as a wellbeing issue) may also be useful for students to read in full or in part.

## Teaching and learning process

### Introductory activity

- Ask the students what they call their various teachers around school. Is it by first or last name, or is it **whaea or matua**? What do these terms mean? [Where applicable] How is it some teachers come to be known as whaea or matua at the school?
- Are te reo kupu used to refer to 'students' or 'learners' at the school? Is the term **akonga or tauira** used? What's the difference between these terms?
- Are teachers known as **kaiako** – or some other term?
- What is the relationship between the kupu **ako, ākonga and kaiako**? What does the prefix or suffix 'ako' mean?
- **What about the term used for the principal – are they known as tumuaki** – or some other term?
- What titles are on the office doors of senior leaders and other staff?
- What do the terms **kaiako, kaiwhakahaere, kaitiaki, kaiārahi** refer to? What does the prefix 'kai' mean in these contexts?
- The terms **whanaungatanga, manaakitanga and kotahitanga** are often seen in education situations, and sometimes seen together. What do they mean and what's the difference? How could they relate to each other?
- What other te reo Māori kupu feature around your school, in school documentation (etc)?
- In what way(s) could the visibility of te reo Māori around the school support a sense of belonging and connectedness?

### Main activity

- Provide students with the copy sheet (the selected source material, in this case from Netsafe) can be exchanged for other similar materials if required).
- Ask students to recap previous learning about digital citizenship in health education or other courses at school. *If not sure – access the full statement (see link in resources section) and define what digital citizenship means.*
- Provide further instructions as needed to help the students complete the task as described on the copy sheet.

### Debrief:

- Ask students if they can think of other examples of materials they come across where te reo Māori kupu are used like this – where terms are used more as concepts or ideas, rather than for their literal word meanings.

## Student learning artefact(s)

The completed copy sheet recording the ideas discussed by groups is filed in the student's learning journal.

## Teacher pedagogical and/or content knowledge

**'Tanga':** A suffix used to make verbs into nouns, sometimes called derived nouns. These nouns usually mean the place or the time of the verb's action. [*Te Aka Māori Dictionary*] e.g. manaakitanga, tuakiritanga.

**'Whaka':** As a prefix - to cause something to happen, cause to be - prefixed to adjectives, statives and verbs that do not take a direct object, including reduplicated forms. Used with a few verbs of perception that take a direct object e.g. Whakawhanaungatanga.

## Teacher evaluation and reflection

What other health education related terminology is relevant to add into an activity like this? Where can you access do you have to printed/digital te reo Māori subject glossaries and/or local te reo speakers? If not sure, who can you ask?

## Copysheet

## Principles of digital citizenship

Source: Netsafe. (2018). From literacy to fluency to citizenship: Digital citizenship in education (2nd ed.). Wellington, NZ: Netsafe. Page 5 [https://www.netsafe.org.nz/the-kit/wp-content/uploads/2018/07/From-literacy-to-fluency-to-citizenship\\_July-2018.pdf](https://www.netsafe.org.nz/the-kit/wp-content/uploads/2018/07/From-literacy-to-fluency-to-citizenship_July-2018.pdf)

“Netsafe defines a digital citizen as someone who can fluently combine digital skills, knowledge and attitudes in order to participate in society as an active, connected, lifelong learner.”

<p><b>Netsafe advocates for the following six principles to underpin approaches to the development of digital citizenship:</b></p>	<p><i>Look up the meaning of the kupu used to name the principles.</i></p> <ul style="list-style-type: none"> <li>• <i>State the dictionary meaning of the term.</i></li> <li>• <i>Describe how you think Netsafe are using these ideas as ‘principles’. That is, how are they using them in a more conceptual way – as ideas - and not literally for their word meanings.</i></li> <li>• <i>How do you think these kupu and ideas relate to digital citizenship and being safe online?</i></li> </ul>
<p>1. <b>Ako</b>   Young people are “active agents” in the design and implementation of digital citizenship, including approaches to online safety</p>	
<p>2. <b>Whānaungatanga</b>   An unbounded, coherent home-school-community approach is central to the development of digital citizenship and online safety management</p>	
<p>3. <b>Manaakitanga</b>   Approaches to digital citizenship are inclusive, responsive and equitable in design and implementation</p>	
<p>4. <b>Wairuatanga</b>   Digital citizenship in action positively contributes to wellbeing and resilience development enabling safer access to effective learning and social opportunities</p>	
<p>5. <b>Mahi tahi</b>   Digital citizenship development and online safety incident management are fostered through partnership approaches, coherent systems and collaboration</p>	
<p>6. <b>Kotahitanga</b>   Evaluation and inquiry underpin the ongoing design of digital citizenship approaches, based on rich evidence from young people and their whānau.</p>	

### Activity 3.

# Linking the socio-ecological perspective with kupu (words) from te reo Māori

## Overview

The New Zealand Government *Child and Youth Wellbeing Strategy* (2019) <https://childyouthwellbeing.govt.nz/> under 'actions to support a sense of belonging and cultural connections' identifies Māori language revitalisation as a way and a means to achieving better wellbeing outcomes. Students are firstly asked to think about the ways Māori language revitalisation can be linked with wellbeing (through ideas like connectedness and belonging), to then produce a socio-ecological diagram containing a range of terms in English and te reo Māori related to a selected health education topic or theme. The artefacts produced are intended to be shared among the members of the class. See also Activity three for other approaches to using models, frameworks and visual symbols and imagery to present ideas (such as words and meanings).

Use this activity in the part of the learning programme where understanding of the socio-ecological perspective, as a HPE underlying concept, is being developed.

## Curriculum considerations

**Learning intention:** Students will develop understanding of health education topic or theme specific kupu (words) and meanings (applies across all levels and strands).

**Key competencies:** Using language, symbols and text; Participating and contributing.

**Digital fluency or citizenship:** digital literacies – being discerning and critical; able to locate, understand, organise, evaluate, and adapt digital content.

## Resources

- Digital or print copy of the *Child and Youth Wellbeing Strategy* (2019) – Strategy on a page (this is a 2 page A3 format) <https://childyouthwellbeing.govt.nz/sites/default/files/2019-08/strategy-on-a-page-child-youth-wellbeing-Sept-2019.pdf>
- Access to an online dictionary (e.g. Te Aka Māori dictionary <https://maoridictionary.co.nz/>) and/or print sources of terminology, and/or te reo speakers in the school community where possible, for explaining te reo Māori kupu (words) and aroro (concepts).
- Access to pen and paper based materials or a digital application to create a page of information that can be curated into a single resource and shared.
- Access to the Scholarship reports on the revitalisation of te reo Māori (as a wellbeing issue) may also be useful for students to read in full or in part.

## Teaching and learning process

- Guide students to find the *Child and Youth Wellbeing Strategy* (2019) – Strategy on a page document. Ask them to browse the document and find the reference to the revitalisation of te reo Māori. Ask students to explain how they see the revitalisation of te reo Māori is linked with young people's wellbeing in this strategy statement. Prompt if need be to make connections with prior learning about having a sense of belonging and connectedness and how that links with the concept of hauora.

- Explain to the students that working in small groups they will select a health education topic or theme that they know something about (but avoid choosing a topic that is very specific and narrowly focused) Suitable examples include: alcohol and other drugs, sexuality, relationships, resilience, wellbeing and (social) media, healthy eating, etc.
- They are then going to identify:
  - about 10 words in English that have something to do with the personal (self/individual) considerations of the topic *OR alternatively students fluent in te reo Māori (or other home language) can start from their chosen language;*
  - another 10 words related to how that topic has something to do with interactions and relationships with others; and
  - a further 10 words related to wider community or societal considerations of the topic.
- Add these words into a socio-ecological model (3 concentric circles) leaving space for adding te reo Māori kupu/words that have similar meaning (or English words if starting with terms from another language). If the circles are too problematic to write in (if using a digital application) consider redesigning the model for ease of formatting, but not losing the intent of the SEP.
- Use an online dictionary (or other information sources) to find terms in te reo Māori or English that have approximate meaning. Add these terms to the model.
- Once completed, compile these into a single resource and share with the class.

#### **Debrief:**

- Ask the class what it says about which language has the power or authority when approaching this activity from an English language perspective versus a te reo Māori perspective.
- If some students were able to start from te reo Māori terms and not English terms (perhaps with a different model to the SEP), what's similar or different about the models produced?
- What messages might be given depending on which language is used to start this activity? Think about this in relation to the wellbeing ideas at the beginning of this activity. Does it matter as long as we are all learning?

#### **Student learning artefact(s)**

The SEP word model from each group is collected and compiled into a single resource and shared with the class.

#### **Teacher pedagogical and/or content knowledge**

This activity uses the discipline subject knowledge of health education – in this case the SEP - to frame the activity and to introduce students to subject specific te reo Māori terms and meanings. One of the tensions that arises with activities like this is whether or not they support mana motuhake (self-determination), or whether activities like this encourage a form of assimilation (or a form of ongoing colonisation). The best intentions are that students are learning te reo Māori, but when this language is framed and organised in relation to disciplined subject knowledge (in this case the HPE SEP model) *which way do you lean – self-determination or assimilation?* It depends on your perspective and it's something of a 'glass half full-glass half empty' debate which is not readily resolved. Be aware of tensions like these in learning activities where discipline subject knowledge (and the language associated with this) is being brought together with indigenous and other cultural languages and knowledges.

#### **Teacher evaluation and reflection**

If you have fluent te reo speakers in your class, what other adaptations or additions could you add to this approach to flip this over? That is, what is a broadly focused Māori model/concept that serves a similar function in te ao Māori to what the SEP does in health education discipline subject knowledge? What are the opportunities available for doing this activity the other way around – starting with te reo Māori terminology and concepts, and a topic/context that is relevant to the students, and then attaching English terms and subject knowledge to the Māori kupu?

## Activity 4.

# Cultural models, frameworks and symbolic representations

### Overview

Students in health education have been introduced to models (containing both words and imagery), like te whare tapa whā, to explain the concept of hauora. They may have also encountered te wheke as another model of health and wellbeing, Te Pae Mahutonga as a model for health promotion, and a diversity of Pacific health and health promotion models. Learning within health education and across the curriculum, students may have also been introduced to symbolic representation of te ao Māori perspectives through imagery like harakeke (flax), korowai (cloak), and raranga (weaving). Furthermore, meanings in whakataukī or whakatauākī (sayings attributable to a named person), karakia, or waiata may add layers of meaning to learning contexts.

This activity invites students to think about the symbolism associated with the way ideas are represented in models and frameworks and how these ideas might then link with wellbeing, especially as they link with ideas about identity, having a sense of belonging and connectedness, and other understandings related to spiritual wellbeing.

NB. This activity is related to and extends the activities in the NZHEA resource *Making connections with Pacific ideas in health education: A resource to support teaching and learning in The New Zealand Curriculum* (2020) – see designing students' own models of wellbeing (Activity 2) and the personal tapa cloth (Activity 3). The activities about cultural appreciation or appropriation (Activity 18) and 'We belong here' – investigating visual cultural artefacts in the community (Activity 19) may also link here.

Use this activity in the introductory unit of the learning programme as foundational ideas are being developed, and connections are being made between concepts.

### Curriculum considerations

**Learning intention:** Students will explore symbolic representations of te ao Māori (or other cultural ideas) to consider how the way ideas are presented may contribute to a sense of wellbeing (*applies across all levels and strands*).

**Key competencies:** Using language, symbols and text; Participating and contributing.

**Digital fluency or citizenship:** Digital literacies – being discerning and critical; able to locate, understand, organise, evaluate, and adapt digital content.

### Resources

- Online access to a range of New Zealand education, health and social sector wellbeing reports and strategy statements, education resources, and other similar materials that feature a form of diagrammatic model or framework, symbolic representation, in logos and 'branding' (etc) that reference or acknowledge te ao Māori ideas (e.g. Ka Hikitia - Ka Hāpaitia, Tātaiako, Te Marautanga o Aotearoa, the 1999 HPE curriculums statement, Child and Youth Wellbeing Strategy, various Te Puni Kokiri frameworks etc). Pacific and other cultural resources may be used in addition or as an alternative to these suggestions.
- Note that students will not need to read or understand these materials, the purpose is to look at a selection of documents where imagery reflecting Māori ideas are represented.
- Access to pen and paper based materials or a digital application to create a drawn or photographed image.
- Access to the Scholarship reports on the revitalisation of te reo Māori (as a wellbeing issue) may also be useful for students to read in full or in part.



### Teaching and learning process

- Present students with the idea that visual and symbolic representations of te ao Māori (or other cultural ideas) may contribute to a sense of wellbeing. Why do they think this could be the case? Link students' ideas with the relevant dimensions of hauora drawing attention to ideas about belonging and connected (linked with an understanding of spiritual wellbeing).
- Provide guidance for students to explore a number of resources where Māori symbolism is used (see resources section above for ideas). Students may have other examples they know of. Ask what it is about (some of) this imagery that links back to the previous questions about wellbeing. Why do government agencies and other organisations for example often invest in design work like this?
- If not previously used, Activity 18 'We belong here' in the NZHEA Pacific resource (see overview section) could be done in brief to look at imagery and motifs, artworks etc around the school to ask questions about the value they add to the school. Do students think artefacts like this help students to feel a sense of belonging and connectedness at school? Why or why not?
- The main activity is for students to develop their own symbolism.
  - If in past activities they have designed their own model of health (or used the tapa cloth activity - Activity 3 in the Pacific resource), they may already have some ideas about this.
  - Explain that they are going to design a form of 'brand', or logo for themselves. This symbolism is to be captured as a visual image.
  - Students need to think about where this imagery will be used e.g. as a type of digital letterhead used on documents they produce, as a screensaver or 'wallpaper' on their digital devices, it could be a European style coat of arms, or even a design for a piece of jewellery, a tattoo or other body adornments, etc.
  - The imagery needs to have cultural relevance and meaning for the student. They need to keep in mind the idea that when symbolism somehow represents the things that give us a sense of belonging and connectedness, they could be said to have an (in)direct link with wellbeing. Use the processes in the NZHEA Pacific resource for Activities 2 and 3 if needed to give students ideas for the sort of imagery or symbolism they could select for themselves.
  - Discuss the means by which this image is to be created – hand drawn, collaged, digital design or drawing, photographed (maybe a composition of objects that is then photographed) etc. Produce the imagery as an artefact that is ready to use.
  - Allow time for artefacts to be produced.

### Debrief:

Revisit the earlier question about how or why visual and symbolic representations of cultural ideas may contribute to a sense of wellbeing.

- What were they thinking about as they selected their image(s) and designed their artefacts?
- What were they connecting with?
- What is their selection of imagery and their artefact saying about what they feel a sense of belonging to?

### Student learning artefact(s)

Artefact depicting the imagery selected by the student, with evidence that it has been used e.g. as wallpaper on their phone.

### Teacher pedagogical and/or content knowledge

As many people in business have found out, just taking (or 'appropriating') the cultural imagery and artefacts of cultures other than their own for their own branding (etc) can result in conflict and sometimes legal proceedings. Even when we use Māori (or other cultural) symbolism in the most well intended ways, do we have permission to do this, and who can give that permission in our local community? How effectively does your school engage with iwi, hapū and whānau over such matters?

**Teacher evaluation and reflection**

How well did students make the connections between wellbeing and the use of cultural symbolism and artefacts? If the idea was (as yet) too abstract, what other learning may help them make these less direct connections about the things that help to feel a sense of connection and belonging? Would an activity such as using FIMO or other modelling clay to make 3D artefacts that have symbolic and personal meaning that are then displayed in the classroom offer a way to approach some of these abstract ideas? See also Activity 11 in this resource.

# Theme 2.

## Equity Issues

- **The Implications of Aotearoa's Perception of Mental Health on Adolescents**  
*Genevieve Kuan, Rangitoto College*
- **Systemic Racism and Sport in Aotearoa New Zealand**  
*Emma Tucker, Westlake Girls' High School*
- **Modern Day Poverty how does it affect children?**  
*Sriya Garamilla, Diocesan School for Girls*
- **New Zealand's greatest battle : Food insecurity**  
*Bernadette Dykes, Napier Girls' High School*

# The Implications of Aotearoa's Perception of Mental Health on Adolescents

*Genevieve Kuan, Rangitoto College*

Top Scholar report

Now is the time to transform the way we understand mental health in Aotearoa. The context of what it means to be a young person in Aotearoa has changed immensely over the recent decades, creating a multitude of poorly understood yet critical pressures that present challenges to youth wellbeing. As such, 20% of young people are likely to experience a mental health issue<sup>1</sup>, and 75% of all lifetime mental illness cases start by age 24 in Aotearoa<sup>2</sup>. With New Zealand youth facing “more challenges growing up today than they did in the past,”<sup>3</sup> The political accountability, goal of tangible change, and commitment for child and youth wellbeing is undoubtedly a step in the right direction for our adolescents. As positive life experiences in the early stages of life affect one's adaptive skills, the early focus on mental health improves one's development into a resilient adult<sup>4</sup>.

While Aotearoa's youth experience an unprecedented pace of sociological and technological change, they face a much greater challenge to the improvement of their mental wellbeing: battling Aotearoa's misconceptions of mental health. These collective perceptions are understood through robust suggestions from health professionals, young people, and the framework through which the strategy proposes its actions to improve mental wellbeing in Aotearoa. As explained by the World Health Organisation, these social determinants decisively affect the nature of health and health outcomes for Aotearoa's adolescents as they account for the inequities within our health system<sup>5</sup>. The creation of social conditions influences poor wellbeing outcomes, indicated strongly by the Youth 19 Survey of 7890 secondary students finding that many youth in Aotearoa see their futures to be bleak, feeling that their generation is “inheriting a broken world.”<sup>6</sup> It is unfeasible that this changes if we do not address the immense difficulties youth face when trying to improve their mental wellbeing from the root of their cause. Foundational to our ever-present perceptions of mental health are binarism, stigma, stoic mentality, and cultural inequities which provide barriers to our supportive understanding of mental health. In turn, an amended underlying framework for the strategy would inform a truly effective healthcare sector and strategy for better health outcomes.

*“The perspective from which stories are told, or how they are framed, is a powerful influence in assigning responsibility for an issue or problem.”<sup>7</sup>*

New Zealand's first Child and Youth Wellbeing Strategy omits a crucial part of making Aotearoa “the best place in the world for children and young people,” especially within the goal that “children and young people are happy and healthy.” This strategy neglects the ways in which we can, and should, actively dismantle our preconceived notions of mental health resultant from the media, history, and socio-cultural factors which give rise to mental health stigma, binarism, intergenerational barriers, stoical culture, and eurocentrism. The risk factors that manifest in mental health issues among New Zealand adolescents, then, are exacerbated by a failure to acknowledge and change our collectively misinformed perceptions of mental health which are encapsulated by the strategy and exercised both in private and public spheres. While Aotearoa's perceptions of mental health are less clearly indicated than self-harm, for example,

<sup>1</sup> Mental Health Foundation, “Are our Kiwi kids all right?”

<sup>2</sup> Child and Youth Wellbeing Strategy, 44

<sup>3</sup> Mental Health Foundation, “Are our Kiwi kids all right?”

<sup>4</sup> Centre of the Developing Child, Harvard University, “Applying the Science of Child Development in Child Welfare Systems”

<sup>5</sup> World Health Organization, “Social determinants of health”

<sup>6</sup> The Youth19 Research Group, “Youth Voice Brief”

<sup>7</sup> Lochner, “Framing youth issues for public support”

the promotion of mental wellbeing among adolescents without eradicating the pressures youth will continue to face due to the expectations perpetuated by New Zealand culture and society, is unsustainable; Expanding the availability of support services and forensic services is futile with a youth population who are afraid to seek help.

### 1.1 Binarism in 'Mental Health' and Positive Mental Health

*“Unfortunately, general society has tended to be more binary in its understanding of mental health. We usually put the individual in either of these two categories: mentally ill or mentally well.”<sup>8</sup>*

Mental Health Speaker, Jimi Hunt

In order to create positive mental wellbeing outcomes for adolescents, families, and communities, it is imperative that Aotearoa firstly reframes the term 'mental health' to mean a positive state of functioning.<sup>9</sup> An anonymous report to the Mental Health Foundation of New Zealand explains that the distressed individual “really didn’t think[his mental state] was bad enough to do anything about it,” adding that he was “still functioning - just not as well as [he] used to.”<sup>10</sup> This corroborates with Hunt’s assertion that in the past, individuals who were recognised to be ‘mentally unwell’ were relegated to psychiatric wards, and those who seemingly did not meet that severity of illness misperceived themselves to be ‘mentally well.’ Although the intricacies of this language may seem inconsequential, they serve to represent Aotearoa’s general, but detrimental perception of mental wellbeing.

Improving national mental health starting in adolescent stages of development requires our collective acknowledgement that the mere absence of mental illness or disease does not imply the presence of mental health.<sup>11</sup> Conversely, I would suggest that the presence of illness or diagnosis is not enough to advise that an individual is not able to still be experiencing aspects of mental health in conjunction with illness. It is clear that, with the World Health Organisation’s definition aligning with such ideas, the global understanding of mental wellbeing is progressing past binarism; however, New Zealand’s Child and Youth Wellbeing strategy remains behind in this sphere. While the strategy shows a loose awareness that mental health is a spectrum in its vague phrasing, “good mental wellbeing,” it is evident that it is not promoting this message to New Zealanders in its action areas. The strategy, as part of creating *happy and healthy* outcomes for adolescents, aims to increase support for mental wellbeing through funding to expand access to support, improve forensic mental health services, and increase wellbeing resources; however, the only indicator for progress in these fields, of 36 total indicators, measures “high or very high levels of psychological distress.” By exclusively measuring the percentage of young people who have experienced extreme mental distress “at some stage over a four-week period,”<sup>12</sup> the strategy reinforces Aotearoa’s false perception that the absence of mental illness constitutes one’s mental wellbeing.

As a result, the illusionary statistics produced oversimplify the nature of mental wellbeing, and thus, perpetuate the understanding that undiagnosed, or non ‘mentally ill’ individuals do not struggle with poor mental health, or require help. This is supported by a multitude of psychoanalytical research on dichotomous or ‘black and white’ thinking which suggests that many people have a tendency towards rejecting ‘grey’ areas in response to mental health and wellbeing amongst other topics such as sexuality and morality. The human mind’s strong tendency toward categorical simplicity - that of mental illness or mental wellness - stems out of the cognitive distortion of simplicity-seeking. Professor Geher underscores the danger of overlooking the nuances and complexities that underlie topics such as mental health, suggesting that these false social perceptions “can be the basis of major problems” in our world.<sup>13</sup> As such, the commonly cited World Health Organisation statistic states “one in four people in the world will be affected by mental disorders,”<sup>14</sup> dangerously allowing the interpretation that 75% of the world’s population do not experience any mental health problems at all. Parental figures who have this perception embedded in their psyche may contribute to a child or young person’s build up in mental health issues, causing the quality of mental health in adolescents to stagnate or worsen rather than improve. With the inclusion of a mental health spectrum model, issues can be identified early, thus, increasing the potential for the adolescent to develop healthy coping strategies and

<sup>8</sup> Hunt, *Inside Out*,

<sup>9</sup> Keyes, “Promoting and protecting mental health as flourishing: A complementary strategy for improving national mental health”

<sup>10</sup> Mental Health Foundation, “Men & Depression”

<sup>11</sup> Keyes, “Promoting and protecting mental health as flourishing: A complementary strategy for improving national mental health”

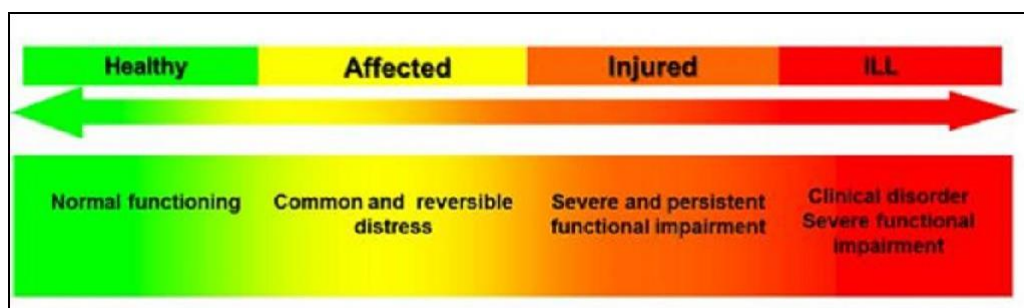
<sup>12</sup> Child and Youth Wellbeing Strategy, 81

<sup>13</sup> Geher, “Black-and-White Thinking in Our Social Worlds”

<sup>14</sup> World Health Organization, “Mental Disorders affect one in four people”

resilience.<sup>15</sup>

By framing mental wellbeing as a spectrum that every individual is on, Aotearoa's perception of mental health can become more supportive towards its adolescents, but also progress toward destigmatisation. Instead of a 'black and white' question detailing whether or not one has experienced "psychological distress," the statistics derived from a spectrum-framed question on the New Zealand Health Survey would better inform the state of mental wellbeing amongst targeted youth. The New Zealand Defence Force proposes the following continuum and explains that one's place on it shifts depending on "cumulative level of stress, levels of resilience, and levels of support."<sup>16</sup>



I do question if 'Healthy' should be modified to 'Complete Mental Health & Flourishing' to indicate a high-functioning state of well-being that would replace the unambitious and stagnant 'normal functioning' state, and suggest that this continuum be included in the framework of the Child and Youth Wellbeing Strategy to reduce the misperception of mental wellbeing commonly shared by New Zealanders and perpetuated by the Child and Youth Wellbeing Strategy. In this way, individuals can be encouraged to seek guidance for mental health issues they are facing, regardless of whether wider society deems them to be worthy or in need of such services.

This spectrum model is about moving the entire Aotearoa youth population towards greater mental health as the majority of youth have moderate mental health, while others are experiencing optimal or most detrimental mental health.<sup>17</sup> It allows children and young people, and their families, to engage with the positive side of mental health as a way of decreasing the risk that an individual will encounter frequent and severe problems with mental health; thus, serving to combat high levels of mental illnesses such as addiction, depression, and anxiety. Under our unhelpful binary understanding of mental health and our pervasive use of the term 'mental health' as a euphemism for mental illness lies a comprehension of mental health as a positive resource of one's general wellbeing, healthy relationships, and ultimate quality of daily life. This negative bias is most prevalently observed with workplaces that put mental health on the agenda as a liability to be minimised rather than a positive resource to be nurtured. Instead of a reactive concern in the safety realm, shifting Aotearoa's perception towards mental health as psychological flourishing will encourage outcomes of increased happiness, optimal mental wellbeing, better social interactions, and efficiency with learning.

### 1.11 The Individual Experience of Mental Wellbeing and Physical Health

For different people, depending on the body one occupies and their socio-economic background, adolescents will have different experiences with whether or not they are labelled with mental illness. These can be in terms of the stressors of mental health that may promote illness for an individual, the level of surveillance they are under, their willingness to seek help, and likelihood of coercion.<sup>18</sup> The common perception that mental illness or poor mental health is characterised by certain visible and unchanging symptoms is incredibly harmful to the improvement of mental wellbeing in adolescents as they serve to invalidate the experiences of struggling youth. In fact, depression, for example, affects various different personalities and "can look very different in various people."<sup>19</sup> In high-functioning individuals, depression may not inhibit their desire for activity and action as they "tend to forge ahead in an effort to succeed with goals."<sup>20</sup>

<sup>15</sup> New Zealand Defence Force, "The Mental Health Continuum"

<sup>16</sup> New Zealand Defence Force, "The Mental Health Continuum"

<sup>17</sup> Huppert et al, "The State of Wellbeing Science"

<sup>18</sup> Williams, "The Social Context of Mental Health and Illness: Defining Mental Health"

<sup>19</sup> Healthline, "Depression has many faces"

<sup>20</sup> Ibid



As Aotearoa places strong emphasis on sporting and physical activity, especially as an essential component of a child's development in school, it is necessary to examine the over-emphasised connection that we have forged between physical and mental health. These are frequently written and discussed in conjunction with each other; for example, the strategy underscores evidence that shows how "sport and physical activity can improve confidence, self-esteem and body image" as well as "improve overall cognitive and mental health in young people."<sup>21</sup> I do acknowledge this ideology as exercise can aid the encounter of mental health stressors; however, as with high-functioning and low-functioning individuals who suffer with depression, this connection is a false binary that is entrenched in the strategy and wider society. This has supported our tendency to view highly active individuals as 'healthy', both physically and mentally. Conversely, injured, overweight, or health compromised individuals are more commonly associated with poorer mental health outcomes.<sup>22</sup> For children and young people, this binary becomes dangerous when used as the basis of assumption for their mental wellbeing and flourishing, and can create false perceptions of good mental health.

Although it is common in compulsory junior health education for the Hauora Whare to be taught, the structure of the Health and Physical Education curriculum has represented an emphasis on *Taha tinana* (physical wellbeing) over *Taha hinengaro* (mental wellbeing). While Hauora is one of four interrelated concepts that is claimed to be foundational to junior health courses, young people are merely taught the sentiment of the 'equally important' and interconnected spiritual, social, physical, and mental dimensions of Hauora; Instead, they experience a significantly disproportionate emphasis on physical education. In speaking to a year 9 student about her compulsory health curriculum, I gained insight that mental wellbeing is discussed "only in five to six lessons for the year" and in those, there is a strong suggestion that physical health is intrinsic to mental wellbeing to the point where "you can't be mentally well without fitness." This immense focus on physicality proves detrimental to Aotearoa's adolescents with the high possibility of developing, but suppressing, mental health issues out of misunderstanding their wellbeing. In turn, their education can be severely impacted due to a loss of focus and motivation when in a poor mental state, leading to low self-esteem in an age where high academic achievement is stressed for the conventional tertiary education pathway.

This said, the connection and separation between mental and physical health has emerged in definitions to clarify this binarism. I turn to Manderschied's "Evolving definitions of Mental Illness and Wellness" which discusses 'wellness' as an individual's positivity about life, management of one's feelings and behaviours, realistic assessment of limitations, autonomy, and ability to cope with stress.<sup>23</sup> Here, the emphasis on self-efficacy is independent of one's physical health. While this research, conjured in the United States, is relatively embedded in assumptions about rationality and healthism that reflect the cultural context wherein it was written, I suggest that it holds usefulness to the Child and Youth Wellbeing Strategy as it makes the specific distinction that mental illness refers to the presence of mental disease, separate from that of physical illness. Following this ideology, physical wellbeing is a tool that can be used to improve mental wellbeing, but either poor mental or physical wellbeing is not necessarily indicative of the nature of the other. Correctly perceived as two different, but connected dimensions, young people and their families must understand the importance of both for the enhanced wellbeing of themselves, other people, and society.

## 1.2 Stigma, Discrimination, and Social Exclusion

For years, New Zealand's health and support services have been fighting the stigma attached to mental health issues, often perceived by the public as emotional weakness and invalidated as an over exaggeration or temporary fluctuation of emotion, especially among adolescents. Most frequently, the terms 'disturbed,' 'psycho,' and 'spastic' are used to stigmatise people with mental illness,<sup>24</sup> and even in medical communities, children and young people are stigmatised as "diagnostic and therapeutic orphans."<sup>25</sup> In a survey conducted in New Zealand in 2004 by the Mental Health Foundation over 84 per cent of people with lived experiences of mental illness reported they had experienced discrimination, and even today, rangatahi in New Zealand express a constant battle with stigmas leading to discrimination and social exclusion. At the Aotearoa Youth Declaration conference in 2019, rangatahi aged 13 to 19 years old discussed and drafted focus areas to be considered at the government level. Of the

<sup>21</sup> Child and Youth Wellbeing Strategy, 46

<sup>22</sup> Te Pou, "The physical health of people with a serious mental illness and/or addiction

<sup>23</sup> Manderschied et al, "Evolving Definitions of Mental Illness and Wellness"

<sup>24</sup> BMC Health Services Research, "250 labels used to stigmatise people with mental illness"

<sup>25</sup> Rosenberg, "How seeing problems in the brain makes stigma disappear"

Wellness Rōpū objectives, my group members and I emphasised that mental health needed “to be taken as a serious and legitimate health concern,” stating that we experience “a negative stigma attached to mental health issues.”<sup>26</sup> In discussing the need for educational programmes to teach rangatahi and their whānau how to recognise and support symptomatic individuals, youth shared their frequent battles with others’ perceptions that they were less than human, incapable of improvement, and a burden to their communities, leading to a higher risk of social exclusion.

Remarkably, despite these experiences and statistics, the acknowledgement of stigma and subsequent initiatives to eradicate this mentality in Aotearoa is absent from the Child and Youth Wellbeing Strategy. Aotearoa’s ‘Like Minds, Like Mine’, programme of 2014-2019 was instrumental in increasing the widespread awareness of mental illness and its commonality in New Zealand society. In particular, its nationwide media campaign was the main initiative through which it sought to counter stigma and discrimination associated with mental illness and distress, with television advertisements of both famous and laypeople disclosing their struggles with poor mental wellbeing. Starting to be screened throughout 2000 and 2001, names like Winston Churchill and Audrey Hepburn were interspersed with local celebrities such as All Black John Kirwan and designer Denise L’Estrange-Corbet who revealed their experiences with severe depression. The closing voiceover said “these people were affected by mental illness... one in five New Zealanders is affected by some degree of mental illness... How much they suffer depends on you.”<sup>27</sup> Research shows that 48% of surveyed New Zealanders felt that mental health discrimination had decreased over the previous 5 years of this programme, and gave modest but clear and positive indications of progress.<sup>28</sup>

This is not to mean that the strategy rightfully omits further commitments to destigmatisation. These initiatives have ceased, and the funding given to its affiliated community education projects such as ‘Rākau Roroa’ and ‘Education Two + Rethink’ conclude in late 2020.<sup>29</sup> If Aotearoa fails to continue the success of prior de-stigmatisation campaigns such as ‘Like Minds, Like Mine’, children and young people will continue to face discrimination from their communities, families, friends, and employers because general society has stereotyped views about mental illness including those affected being violent or harmful. If we fail to actively dismantle this stigma with correct information and encouraging stories, stigma and discrimination can worsen a young person’s mental health problems. When the process of seeking help is impeded, their recovery is delayed, and social exclusion grows into an immensely isolating factor of daily life. The internalization of these negative stereotypes, or self-stigmatisation, can cause low self-esteem and shame, exacerbating the risk of being excluded from social groups, school activities and positive interactions that are crucial to a young person’s development.<sup>30</sup>

The alternative is for the Child and Youth Wellbeing Strategy firstly to acknowledge the prevalence of our harmful perceptions of mental health in our community, not exclusively in “non-stigmatising universal services,” and implement funded initiatives to continue the process of destigmatisation. Condemning stigma in all areas surrounding mental wellbeing will allow Aotearoa, as a society, to seek equitable outcomes for our adolescents and help them overcome one of the most significant barriers to recovery. This requires the promotion of mental health services, not just for the severely distressed as indicated in the strategy, but for each adolescent in need of guidance. In this way, we can achieve an Aotearoa that is truly the best place in the world for young people to develop; that is, adolescents are free from derogation and the assumption that their struggles are less valid than those of their elders.

### 1.21 The Biopsychosocial Perspective on Mental Health

The Child and Youth Wellbeing document makes brief reference to a biological understanding of wellbeing as “a child or young person’s brain biology and behaviours have higher adaptive capacity during pregnancy through the first five years of life.” While this correctly informs the necessity of their early focus on mental health, unfortunately, the incorporation of the biopsychosocial perspective into the understanding of adolescent mental wellbeing and recovery is limited to this. New Zealand’s health agencies have made few developments regarding the relationship between psychological, biological, and social factors that often correlate with mental illness diagnoses, where unrecognised by the Ministry of Health’s ‘models of health’ and last mentioned in their ‘Building on Strengths’ approach of 2002.<sup>31</sup> Since early research was conducted on animals and only suggestive, but not definitive, of human

<sup>26</sup> The Aotearoa Youth Declaration,

<sup>27</sup> The Australia and New Zealand School of Government, “Like Minds, Like Mine: the campaign against stigma and discrimination”

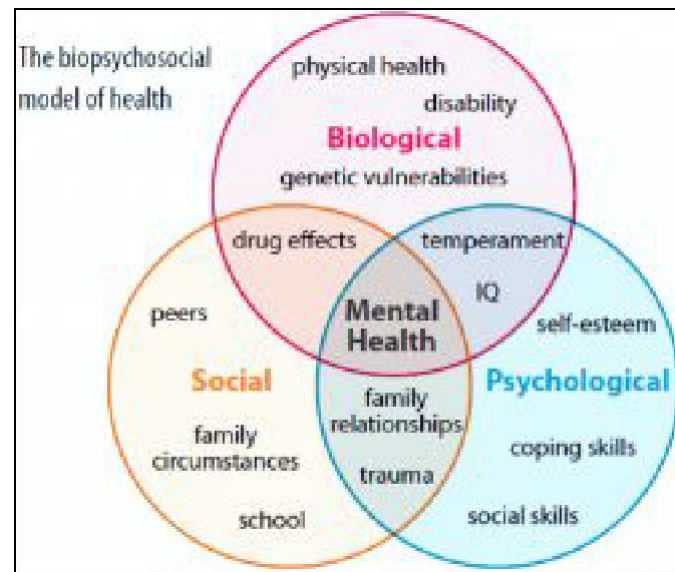
<sup>28</sup> Australian & New Zealand Journal of Psychiatry, “Impact of the LMLM campaign”

<sup>29</sup> Like Minds, Like Mine, “Community Education Projects”

<sup>30</sup> The Voices of Hope, “The stigma of mental illness in NZ”

<sup>31</sup> Ministry of Health, “Building on Strengths”

behaviour, a multitude of recent studies have shown that an individual's experiences in the biopsychosocial sphere, and especially the challenges that they face, change their cells and communication pathways making them increasingly susceptible to mental changes



As represented by the Auckland Physiotherapy model<sup>32</sup>, the biopsychosocial perspective on mental health suggests that the interactions between genetics, physical factors, and the social environment creates the possibility of mental illness through structural changes to the brain. As such, negative experiences such as violence and trauma in childhood and adolescent years undermine pathways in the brain, causing them to shut down, while environmental enrichment, exercise, medication, and positive learning experiences can significantly improve mental wellbeing. This gives rise to the theory that these neurological pathways can be restored to facilitate an individual's recovery process from mental disorders, including treatments such as electroconvulsive therapy, exercise, and deep brain stimulation.<sup>33</sup> To avoid the suggestion that this line of research accelerates biological determinism, and instead has relevance to the biopsychosocial perspective, it is important that the strategy illuminates the complexities of causality and that successful anti-stigma strategies in the future must be multiplexed.

*“When I show families their child’s MRI brain scans, they often tell me they are relieved and reassured to be able to see it”*

Psychiatrist David Rosenberg<sup>34</sup>

While it has been found internationally that conceptualising mental illness biologically can segregate those who suffer with it as physiologically ‘abnormal’, and can decrease empathy from clinicians,<sup>35</sup> I wonder if this would be the case for empathy towards adolescents, and if the incorporation of a biopsychosocial perspective would reduce the stigma associated with adolescent mental illness in Aotearoa. This research has pointed towards the possibility that these accounts of psychology can exacerbate perceptions that people with mental illness are abnormal; however, the unintended consequence of worsening stigma and encouraging pessimism surrounding one's recovery can be avoided. In reviewing literature by Kvaale, Gottdiener, and Haslam, 2013, biology is incorrectly portrayed to be fixed when these factors and neurological pathways have mechanisms for adaptations in different environments.<sup>36</sup> Research on neuroplasticity shows a disordered brain to be capable of change depending on the individual's exposure to stress, medication, and diet; thus, patients must understand that genetic predispositions to mental illness are treatable. By encouraging the understanding of this to adolescents and their families, it is likely that self-inflicted blame would decrease, given access to a clear and evidenced answer to one's negative experiences with mental health.

<sup>32</sup> Smith, “Physiotherapy and Mental Health with Chris Smith”

<sup>33</sup> Williams, “The Social Context of Mental Health and Illness: Applying the biopsychosocial perspective”

<sup>34</sup> Rosenberg, “How seeing problems in the brain makes stigma disappear”

<sup>35</sup> Lebowitz et al, “Effects of biological explanations for mental disorders on clinicians’ empathy”

<sup>36</sup> Bateson et al, “Developmental plasticity and human health”

### 1.3 New Zealand Culture: The Number 8 Wire Ethos and Stoicism

*“You don’t tell someone who’s mentally ill or struggling, who’s having a low time in their lives, to harden up, because it doesn’t work.”*

All Blacks Rugby Player, John Kirwan

Institutional and systemic changes to culture have focussed exclusively on minority ethnic groups, with the Child and Youth Wellbeing Strategy detailing plans for family violence prevention within Maori communities and kaupapa Maori services. But does the culture in which dominant Pakeha society operate under *promote* youth wellbeing? Is the contribution of ‘kiwi ingenuity’ to our national identity significant enough to outweigh its implications on mental health? Attitudes heavily influenced by healthism are deeply entrenched within our national psyche; that is, Aotearoa holds the general perception that the health of an individual is predominantly their responsibility. This individualistic mindset works in conjunction with stigma around mental illness equating one’s weakness, and our stoic mentality to worsen mental health outcomes for adolescents who delay processes of seeking help.

Epitomised by Inventor Burt Munro, the ‘Number 8 Wire’ phrase from 1976 has come to represent Kiwi ingenuity and resourcefulness; a willingness to take action and think laterally can solve any problem. New Zealanders took it in their *stride to fix their problems without professional help, and out of years of hardship grew the myth of the Number 8 Wire mentality. While this messaging has taken different forms, most prevalently in the ‘stoic kiwi’ identity, the fundamentals remain the same: New Zealanders have long been accustomed to prevail through hardship without expressing their emotions or complaining. For this, Aotearoa’s adolescents are enduring the consequences.*

It is necessary to understand the longevity of stoicism in New Zealand society as a pillar of our national identity starting from emotionally reticent settler societies. The deliberate dismissal of ‘unmanly emotion’ practiced stoical resolve in the face of adversity to demonstrate egalitarian male sociability.<sup>37</sup> Hence, the stoic phenomenon constituted the originating culture of Pakeha society, continuing to Prime Minister Jacinda Ardern’s COVID-19 messaging, “don’t be a stoic Kiwi,” in reference to getting a test. This was extended by the heroic portrayal of New Zealand’s World War I soldiers who contrasted sentimentality with a rational control over passion and self-sufficient stoicism.<sup>38,39</sup> When exposed to headlines such as “Stoic Kiwi Firefighters nominated for Aussie Award,” and “All Blacks: Stoic Cowan battles with wounded knee,” Aotearoa’s male adolescents who find themselves cast out of this stereotype face increasing susceptibility to suppressing their mental health issues. UNICEF’s Dr. Prudence Stone adds that “there definitely is an added stoicism in the New Zealand psyche... which you might not experience as much in other countries,” in reference to affected individuals working around their problems themselves; however, this leads to adolescents suppressing their emotions. As a result of their reluctance to seek assistance, the path of recovery becomes stunted, meaning they cannot improve their productivity, social interactions, motivation, and life expectancy.

Verbal expressions cannot be the only indicators of grief. Indeed, experiencing intense emotion and having a rational control over passion are not mutually exclusive. With the men’s suicide rate being three times that of women, and those aged between 15 and 24 having the highest rate,<sup>39</sup> It is evident that Aotearoa’s male youth population is approaching a vulnerable future. Dr Andrew Dickson explains that “Kiwi blokes don’t much like calling on health professionals... they tend to stop talking, rather than talking more,” and draws on Freud’s theory of repression. Dickson suggests that stoic behaviour is unconscious; it is an “excuse” to not “deal with the hard stuff in a productive way.”<sup>40</sup> While employment, alcohol/drug consumption, and physical health problems are inextricably linked to such statistics, I suggest that Aotearoa’s perception that mental health issues in men should be repressed, or at the very least, the perception of what a New Zealand male should embody, compounds one’s mental health issues and sets affected adolescents up for a thorny path of recovery. This is exemplified by the New Zealand Health Survey which illustrates that among children, boys, at 11 per cent, have a higher rate of being likely to have emotional and/or behavioural problems than girls at six per cent.<sup>41</sup>

<sup>37</sup> Phillips, A Man’s Country?, “The Image of the Pakeha Male - a History”

<sup>38</sup> Gilderdale, “Stoic and Sentimental”

<sup>39</sup> Greene, “Mental Health”

<sup>40</sup> Dickson, “Opinion: Why Kiwi blokes need to talk about their anxieties”

<sup>41</sup> Ministry of Health, “The New Zealand Mental Health Survey: Summary”

### 1.31 New Zealand Culture: Cyberspace is Not Clean, Green, and Safe

Given the proliferation of technology and social media into the lives of children and young people, their immersion into the digital atmosphere of heightened drama is more accessible than ever before. In 2015, those aged between 16 and 29 had the highest social networking usage, at more than 90 per cent.<sup>42</sup> Youth subcultures, defined as “dynamic entities characterised by the specific lifestyle... and behaviours of young people,”<sup>43</sup> have since facilitated the hidden discussion of adolescents’ mental health issues from most adults: on Instagram, there are more than 2 million posts with the hashtag #kms (kill myself) and 578,000 with #hatemyself. Although larger social media platforms have censored or “hidden posts to protect [their] community,” the availability of discrete youth subcultures and platforms has transcended media efforts to support those “going through something difficult,” as written on Instagram’s content advisory pop-up. Further, adolescents have resorted to cryptic messaging, for example, using code names such as ‘Annie’ for anxiety and groups such as ‘secretsociety123’.<sup>44</sup>

*“Parents are allowing kids to go in their room, close the door, and live a whole other life in cyberspace. Not every place online they turn to encourages them to get better.”*

Adolescent Psychiatrist, Daniel Bober

Adolescents commonly turn to the internet with the understanding that their parents and elders would fail to understand their experiences. The stigmatisation of mental health reduces the transparency of the topic between generations. As such, one resorts to “venting to another teen who has no background or education to counsel [them],” suggests Nicole Yedra, a teen empowerment workshop coordinator at the Broward Youth Leadership Institute Summit.<sup>45</sup> These intergenerational barriers regarding technology enhance a young person’s ability to access dark poetry, images, and posts that encourage their rumination on dark thoughts of romanticised self-harm and suicide. In sharing despondent messages to express their emotions, adolescents find connection with others facing similar issues; however, young people have been found to become extremely susceptible to a state of languishing when exposed to the harmful social vortex that normalises and romanticises mental health issues. 16-year-old Martina Valesquez reports “after a while, you start thinking, I should give into this. I should feel sad,” commenting that she was “feeding off of it and getting worse.”<sup>46</sup> This is supported by The National Center for Biotechnology Information (NCBI) who inquired successfully that adolescents with excessive internet usage (EIU) and had an affiliation to youth subculture(s) suffered an increased risk of poor mental health and low self-esteem.<sup>47</sup>

Venting one’s feelings online about their deteriorating mental wellbeing has become a part of adolescent culture in Aotearoa. As a Rangitoto College counsellor points out, we are in “a new era of mental health and increased pressures on young people who don’t really feel like their parents get it.” When teenagers feel like it is up to them to figure it out, we are shown the detrimental effects of stigma, both internally, communal, and intergenerationally within households. Nathan Wallis makes a connection between a common leniency with social media use within Aotearoa’s parents with our common idea “that New Zealand is this wonderful, clean, green, beautiful nation that is a wonderful place to raise children.” Indeed, the dangers of cyberspace, exposure to coercion, and uncensored graphic posts “paints a different picture.”<sup>48</sup> I suggest that the Child and Youth Wellbeing Strategy sets forward plans to reduce unhealthy social media consumption, as this is crucial to the happiness and health of children and young people. It must also encourage stories to be shared intergenerationally to facilitate the destigmatisation that must occur on the personal level, and cumulatively in the societal sphere.

<sup>42</sup> Sandys, *Connectivity at a cost: Adolescents’ use of social media and its effect on their mental health*, 7

<sup>43</sup> Filakovska Bobakova et al., *What Protects Adolescents with Youth Subculture Affiliation Excessive Internet Use?*

<sup>44</sup> Goodman, “Hiding in plain sight: Inside the online world of suicidal teens”

<sup>45</sup> Ibid

<sup>46</sup> Goodman, “Hiding in plain sight: Inside the online world of suicidal teens”

<sup>47</sup> Filakovska Bobakova et al., *What Protects Adolescents with Youth Subculture Affiliation from Excessive Internet Use?*

<sup>48</sup> Wallis, “NZ has highest death rate for teenagers in developed world”



## 1.4 Inequity in Māori and Pasifika Communities

*“It’s quite hard to be Māori and have high self-esteem in this country”*

Neuroscience educator, Nathan Wallis<sup>49</sup>

The New Zealand Government has exponentially increased its distance from the entrenched anti-Māori prejudices dominant in the psyche of its Pakeha citizens, and in its Child and Youth Wellbeing Strategy places careful attention on tamariki and rangatahi Māori. The Strategy uses Te Tiriti o Waitangi (The Treaty of Waitangi) to inform a whānau, hapū and iwi centred approach; however, Aotearoa still maintains a notably Eurocentric view of mental wellbeing. Implicit in Aotearoa’s roots of British colonialism is the unspoken proposition that Māori required British influences of literacy, knowledge, and trade.<sup>50</sup> Whether or not this has benefitted Māori in the long-term, it has certainly contributed to “a prevailing view that Māori are inferior,”<sup>51</sup> which bleeds into media, healthcare, education, and the workforce. Wallis links this to a theory of social Darwinism, suggesting that in the past 100 years, Pakeha New Zealand has been immersed in a culture wherein one can justify racist mentality and social inequality by contending “survival of the fittest.”<sup>52</sup> That is, the suggestion that Māori are disenfranchised as a fault of their own. Present at least in the subconscious mind, especially as New Zealand youth are yet to undertake compulsory New Zealand history lessons, this mentality has manifested itself not only in detrimental racism towards these minority ethnic groups, but in Eurocentric policy.

Under a framework that does not serve Māori and non-Māori proportionally comes implications that are detrimental to the future of mental wellbeing for Māori adolescents. The Mental health 2016/17 survey deduced that Māori children were 1.5 times as likely, or 0.5 times more likely to have emotional or behavioural problems compared to that of non-Māori children.<sup>53</sup> This statistic occurs in an Aotearoa that continues to prioritise its Eurocentric understanding of mental health, although it continually dislocates Māori and Pasifika adolescents. Kia Uruuru Mai a Hauora, or Māori health promotion, is not sufficiently incorporated in this strategy. Despite the published requests for culturally tailored health services from New Zealanders,<sup>54</sup> the strategy’s key actions are to fund the expansion and access to primary mental health support and resources which omit the necessity for culturally affirming health and public policy as advocated for under Kia Uruuru Mai a Hauora. Although there seems to be a commitment to collaborate with these priority groups to design the choice of mental health services, such as with Brainwave, the budget of \$455 million over four years from Budget 2019 has yet to see tangible change in this area.<sup>55</sup> For example, funding would have extreme value in training and incentivising more Māori health professionals to work within youth sectors and schools. Tailored mental healthcare services within schools are essential to the ‘happy and healthy adolescents’ outcome for the access to a choice of suitable counsellors and professionals often determines a child’s willingness to seek help. In ‘Under the Korowai’, Wiremu NiaNia, a kaupapa Māori mental health service provider, combines a tohunga-led spiritual and cultural therapy with widespread clinical methods to help tamariki and rangatahi Māori understand their culturally-specific hallucinations, family dynamics, and mental illnesses. He explains that the Western paradigm that has dominated our understanding of health has restricted the use of *taha wairua* (spiritual wellbeing) or the cultural perspective in diagnosis. The crucial difference lies in traditional psychiatry “discouraging an individual from responding to their forces,” in comparison to the guidance tamariki and rangatahi Māori must receive to work on their mana and relationship with the spiritual realm.<sup>56</sup>

Furthermore, aboriginal status is a marker of identity that in Aotearoa, corresponds to significant mental health disparities. It is important for Aotearoa to understand that it is not the identity that is associated with poorer health and poorer health outcomes, but the oppression, discrimination, and social exclusion that is associated with Māori and Pasifika identities that determines these inequities. It is not by mere coincidence that these groups are in circumstances that undermine their mental health and wellbeing. This is one of the ways that Aotearoa’s perception of mental health harms the improvement of such in disadvantaged groups: through social exclusion, Māori and Pasifika groups are cut off from help and opportunities to promote health. The Child and Youth Wellbeing strategy,

<sup>49</sup> Ibid

<sup>50</sup> Trotter, “Racism and colonisation are inseparable twins”

<sup>51</sup> Wallis, “NZ has highest death rate for teenagers in developed world”

<sup>52</sup> Ibid

<sup>53</sup> Ministry of Health, “Mental health 2016/17: New Zealand Health Survey”

<sup>54</sup> Child and Youth Wellbeing Strategy, 44

<sup>55</sup> Department of the Prime Minister and Cabinet, “Monitoring of Strategy Implementation 1 July 2019- 30 June 2020,”

<sup>56</sup> The Spinoff, “Under the Korowai: a look at Māori mental health practice”



in its goals of creating outcomes wherein *children and young people are happy and healthy*, as well as *respected and connected*, writes in race as a social determinant of wellbeing. This is welcomed where clearly linked to sexual violence, disparities in education, and situations of poverty; however, laypeople can make the mistake of thinking that the suggestion is that being Māori or Pakeha predispose those individuals to ill mental health. The strategy does not necessarily communicate the point that being socially excluded, threatened, or persecuted on a regular basis because one occupies those identities is the determinant that results in poor health outcomes. This is significant as the over-representation of these communities in crime and punishment have led to a misperception that poor mental health is intrinsic in Māori and Pasifika identity.

## 2.1 Final Thoughts and A Way Forward

**“Ahakoa te momo mate, whakanuia tangata.**

***Regardless of illness or disease, people deserve dignity and respect and the opportunity to become well again.”***

**Māori whakatauki - an expression of hope<sup>57</sup>**

“New Zealand is the best place in the world for children and young people.” Who says? With such a dynamic context in which mental health exists, it is imperative that each individual in Aotearoa is more engaged in the prioritisation of mental health amongst our most vulnerable, developing youth population. Extending paid parental leave, adding the Best Start Payment, extending free GP visits, and the introduction of the Child Poverty legislation creates tangible and crucial change; yet, the Child and Youth Wellbeing Strategy is taking an opportunity to transform our perceptions of mental health for granted. While changes to these social determinants, or the culture of mental health, is hard to enact, such a key document to the flourishing of Aotearoa’s adolescents must transcend widespread and unhelpful perceptions of mental health. Our misconceptions must change

### 2.11 Putting the Onus on Every Individual

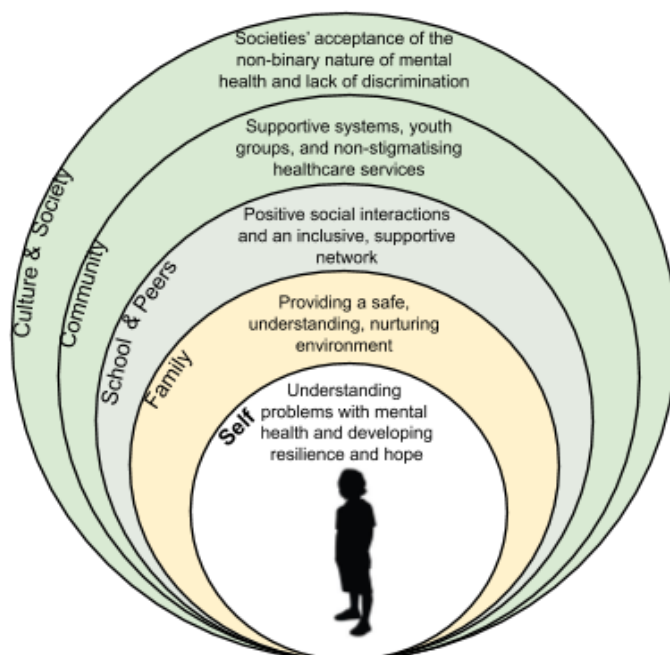
The Child and Youth Wellbeing Strategy acknowledges that the improvement of child and youth wellbeing requires multi-faceted, collective action, that from “individuals, organisations, iwi and hapu, communities and government.”<sup>58</sup> Furthermore, it proposes that the strategy sets out a framework “that can be used by anyone.” This said, in order to achieve the vision that *children and young people are happy and healthy*, I suggest that the strategy becomes more accessible and explicit about the actions that the individual, their families and peers, community, and the wider society can do to promote the “collective action” that “is needed to support each child and young person in the here and now,”<sup>59</sup> as acknowledged in the strategy. In order to increase the accountability of both the communal and personal sectors and encourage action, I suggest that a possible amendment to the Child and Youth Wellbeing Strategy includes a visual representation of the responsibilities each individual holds in creating a positive ‘happy and healthy’ outcome for the youth of Aotearoa.

<sup>57</sup> Ministry of Health, “The New Zealand Mental Health Survey: Summary”

<sup>58</sup> Child and Youth Wellbeing Strategy, 29

<sup>59</sup> Ibid, 27

### Children and Young People are Happy and Healthy



To minimise the ambiguity within this, I suggest that actions be detailed alongside the diagram. A whānau-centred approach does not have to be limited to Māori models of wellbeing. Te Whare Tapa Whā and Te Wheke advocate for this to be applied to policy, the design of mental health services, and emphasise both the collective and individual.<sup>60</sup> Indeed, policy is able to create rapid changes to the ways young people live their daily lives; for example, adolescent mental health specialists want social networking sites to do more to hide or ban content that exacerbates suicidal thoughts or triggers self-harm. If the content advisory message on social media platforms were changed to prevent users from accessing graphic images, rather than just warning them, this would change the way young people use such platforms to discuss their poor mental health. I suggest that policy driven change by itself, however, is unsustainable. Teen Social Media use Researcher, Megan Moreno states that “no amount of searching” picks up the “cryptic messages” posted online.<sup>61</sup> Instead, encouraging the breakdown of intergenerational barriers and a positive culture of speaking out about one’s despondent peers through a family centered approach will progressively, yet crucially, change our misconceptions of mental health. Individuals then, whether in the family, school and peers, community, or culture and society sphere can become protective factors to strengthen the resilience of adolescents in the face of inevitable adversity and encounters with mental health issues.

<sup>60</sup> Ibid, 68

<sup>61</sup> Goodman, “Hiding in plain sight: Inside the online world of suicidal teens”

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# Systemic Racism and Sport in Aotearoa New Zealand

*Emma Tucker, Westlake Girls' High School*

The killing of George Floyd on May 25th this year [2020] outraged millions of people and sparked a powerful resurgence of the Black Lives Matter movement all around the world. It was a shocking example of the ways in which systemic racism is still an issue in the United States of America (U.S.). While I was grappling with the stark injustice of Floyd's death, a racist snapchat from a student at my school was leaked on social media. Someone in my own year had painted her face black and sent a selfie with a racial slur to a friend. I had never even heard of blackface and initially, I didn't even know why it was so offensive, which clearly revealed my privilege and ignorance as a Pakeha. The blackface incident in New Zealand and police killings in the U.S. both highlight the reality of racism in our world today.

This report focuses particularly on the presence of systemic racism within sport in Aotearoa New Zealand. Sport is a critical, major part of society. Sport New Zealand (NZ) credits sport and physical activity with producing "*happier healthier people, 'better-connected communities,' and 'a stronger Aotearoa New Zealand'*"<sup>1</sup>. In its *Sports Integrity Framework*, therefore, Sport NZ declares that "every Kiwi has the right to participate in sport ... within a welcoming and inclusive environment and to be treated with respect, empathy and positive regard, irrespective of ... ethnicity ... national origin, race ... or socio-economic status"<sup>2</sup>. This raises some important questions. Does systemic racism exist within the structures of sport in our country? If it does, what are the causes? What are the consequences? And what is the cure? What actions are needed to eradicate racism within sport in this country? New Zealand is committed to upholding this right outlined in the *Integrity Framework*, but how is that going to be possible, if the very system on which our sport is built, involves racism?

## A positive diagnosis: equality within sport

There is positive data to suggest the inclusion and affirmation of minority cultures and ethnicities within New Zealand sport. Rugby Union in Auckland is now a Pasifika majority sport and Rugby League has also reflected this demographic for many years. Over 70% of the New Zealand Warriors squad are of Maori or Pasifika descent, and overall, more than 45% of National Rugby League (NRL) players have Pasifika Island heritage<sup>3</sup>. Rugby Union is the national sport of New Zealand and Rugby League is also very popular. Hence they are well-funded and provide high-paying careers for players. Many Maori and Pasifika people can benefit from being involved in rugby and their prominence in the teams could hopefully encourage further people to join. Moreover, both Rugby Union and Rugby League have embraced Te Reo Maori commentaries which conveys an effort that has been taken towards biculturalism in our country. One must acknowledge that having predominantly English commentaries may reveal ingrained racism within New Zealand sport. However, Sky TV has recently been providing Maori commentaries for certain games, such as in 2019 for All Blacks and Black Ferns matches<sup>4</sup>.

Rugby is also a sport that arguably embraces Maori culture through the haka. In the 1980s, former All Black, Wayne Shelford, revitalised how it was performed. It had previously been performed half-heartedly and out of rhythm. He stated, "*unless we're going to do it properly, we just don't go near it*"<sup>5</sup>. Shelford, along with Hika Reid, helped to implement the performing of the haka before national matches, as well as international ones, ingraining it into our culture. In 2004 the relevance of the haka to the All Blacks was questioned and the team had to consider its significance

<sup>1</sup> Sport New Zealand, *Every Body Active* (Wellington: New Zealand Government), 2019

<sup>2</sup> Sport New Zealand, *Sport Integrity Framework* <https://www.nzqa.govt.nz/assets/SportNZ-SportIntegrity-Framework.pdf>

<sup>3</sup> Talei Anderson, "Understanding Pasifika culture pivotal for rugby league success," RNZ, 12 August 2020, <https://www.rnz.co.nz/international/pacific-news/423314/understanding-pasifika-culture-pivotal-for-rugby-league-success>

<sup>4</sup> Michael Neilson, "Sky bringing Māori commentary to All Blacks and Black Ferns games," NZ Herald, 16th August 2019, <https://www.nzherald.co.nz/nz/sky-bringing-maori-commentary-to-all-blacks-and-black-ferns-games/5VFQXMH5LIRSCJWZXGJXQHPBY4/>

<sup>5</sup> Cameron Carpenter, "The Evolution of the All blacks haka," New Zealand Herald, 22 September 2015, <https://www.nzherald.co.nz/sport/the-evolution-of-the-all-blacks-haka/MU5DUKPORSK2QXJS52VLAKZCXA/>

to them and our nation<sup>6</sup>. A new haka was created - Kapa o Pango - specifically for the All Blacks, to be performed alongside Ka Mate. More than a year was spent carefully creating the dance so that it was appropriate and “celebrated the land of New Zealand, the silver fern and its warriors in black”. Now both the new and old haka is performed by the All Blacks as well as many other teams from various sports. The high profile of the All Blacks and their haka has led some Pasifika teams to use dances from their own cultures before games. Its prevalence in elite sport helps to celebrate and maintain Maori culture and heritage. In doing so, Maori players may feel more included as their culture is embraced as an integral part of the game. Moreover, children now learn the significance of the haka and how to do it when participating in social sport from a young age, which furthers the awareness of Maori culture, language and beliefs. The prevalence of the haka conveys an aspect of biculturalism in sport, where equality can be seen. Nevertheless, if we evaluate the overall system of sport in New Zealand, a negative diagnosis may be inevitable.

## Patterns of participation

Participation in sport is a good indicator of whether racism is somehow ingrained in the New Zealand sporting world and a way to see if it is an inclusive environment for all ethnicities. This must be examined on both an elite and popular level.

### *Elite level participation*

It is well known that many Maori and Pasifika play Rugby Union and Rugby League. However the high proportion of their populations in those sports, has distracted people from the fact that they are not well represented in other elite sports. A 2005 analysis of carded athletes found only 5% and 7% Maori and Pasifika involvement in elite athletics and 0 per cent involvement in canoeing, equestrian sports, gymnastics and yachting which is significantly below their proportion of the general population<sup>7</sup>. This under-representation of ethnic minorities in elite sports was further noted in the 2016 New Zealand Olympics team, when they were called out for their apparent lack of diversity. One-fifth of the New Zealand population identified as being of Maori or Pasifika descent, but in the team “outside of the sevens, you (could) count the number of Maori or Pasifika on your fingers”<sup>8</sup>. Kereyn Smith, secretary-general of the New Zealand Olympic Committee, responded to accusations of whitewashing, saying, “we’re focused on inclusion, we want everyone to be part of our success and aspirations. That’s what we stand for”<sup>9</sup>. Thus, if New Zealand supposedly supports diversity in what is arguably the most elite sporting competition in the world, why is that not reflected in practice? Is there something else within New Zealand society that is hindering Maori and Pasifika from participating at an elite level?

The disproportionate numbers in the Olympic team could be partially explained by looking at the nature of the sports that New Zealand has heavily invested in. Three major ones are rowing, sailing, and cycling, which are sports commonly undertaken by schools and clubs in affluent areas. The representatives for these sports made up a large portion of who was going to the Olympics and they were typically white. Participation in these sports is notoriously expensive, especially at an elite level. This excludes many Maori and Pasifika people, who are disproportionately represented in lower socioeconomic areas. One 2013 study by the Ministry of Health showed that in all socioeconomic indicators, Maori were worse off than non-Maori. For example: 10.4% of Maori were unemployed compared to 4% of non-Maori; in housing overcrowding was an issue of concern with 18.6% of Maori living in overcrowded homes compared to 7.7% of non-Maori<sup>10</sup>. This, in turn, affects one’s ability to participate in an expensive sport as there is a correlation between low economic status and low participation in sport. Sport NZ has confirmed this through their 2018 Active NZ study which reveals that “people living in high deprivation areas have below-average levels of participation” in sport<sup>11</sup>. Thus we need to address inequalities within wider society to hopefully see this barrier removed and more Maori and Pasifika people playing elite level sport.

<sup>6</sup> “All Blacks considered retiring the haka in 2004 due to ‘serious reservations’ about the tradition,” Fox Sports, November 7th 2014, <https://www.foxsports.com.au/rugby/all-blacks-considered-retiring-the-haka-in-2004-due-to-serious-reservations-about-the-tradition/news-story/2532e660a139472caf8bb18b60a19dc1>

<sup>7</sup> Greg Ryan and Geoff Watson, *Sport and the New Zealanders* (Auckland: Auckland University Press, 2018), 259.

<sup>8</sup> Dylan Cleaver, “We need to talk about how white the NZ Olympic team is,” NZ Herald, 13 Jul, 2016, [https://www.nzherald.co.nz/sport/news/article.cfm?c\\_id=4&objectid=11673656](https://www.nzherald.co.nz/sport/news/article.cfm?c_id=4&objectid=11673656)

<sup>9</sup> “Lack of diversity in Kiwi Olympic team? NZOC respond,” NZ Herald, 13 Jul, 2016, <https://www.nzherald.co.nz/sport/lack-of-diversity-in-kiwi-olympic-team-nzoc-respond/XGLV24EB72TRLX7AVC67XTECNQ/>

<sup>10</sup> “Socioeconomic indicators,” Ministry of Health, 02 August 2018.

<sup>11</sup> Sport New Zealand “Sport NZ releases new participation survey,” 28 June 2018 <https://sportnz.org.nz/about/news-and-media/media-centre/sport-nz-releases-new-participation-survey/>



## Popular level participation

There is not only an unequal balance between ethnicities participating in elite sport but also in popular sport. A Sport NZ study (2019) shows that young and adult Europeans have the highest weekly participation rate overall. Adult Maori are 5% less likely to participate in sport in any given week. When looking specifically at youth, young Maori do spend the most time in weekly participation at 12.2 hours, however, this same study presented a 7% drop in participation by young Maori<sup>12</sup>. This reflects results from the Maori Participation in Community Sport study (2017) conducted by Sport NZ which “confirms that Maori participation in physical activity has, and continues to, decline”<sup>13</sup>. Thus, Maori do not seem to participate in sports to the same extent as Pakeha and this divide is not improving. It is becoming apparent that there is an element of systemic racism at work, preventing ethnic minorities from participating in sport to the same extent as Pakeha.

Similarly to a cause of low elite sport participation amongst ethnic minorities, the economic situation can be a contributing factor for low popular participation rates. The 2017 study, referenced earlier, showed that young Pasifika people are more likely to identify obstacles such as cost, transport, lack of equipment, and accessibility of spaces and resources than young Europeans as determining factors to participation<sup>14</sup>. Although I am only one person, my personal experience supports this research. My rationale for restricting my physical activity has always been not having enough time. I haven’t had to worry about whether doing multiple sports of netball *and* distance running *and* tennis places an economic burden on my family so I have participated in them freely. This seems to contrast the experiences of some other Pasifika and Maori people my age. However, another possible cause may be cultural values. Bourdieu’s social theory of cultural capital elaborates on the effect of different cultures established through social classes. Cultural capital can be defined as institutionalised cultural signals used for cultural and social exclusion<sup>15</sup>. Bourdieu believed that cultural capital is a major source of social inequalities because certain forms of it are valued over others. Thus it can contribute to decreased participation as people may find that they don’t have the necessary understanding of social etiquette of the dominant culture to participate in sports easily. Sports that come from New Zealand’s colonial past and are typically competed in by Pakeha, like rowing, cricket, equestrian, may have developed a very European-based culture that hinders ethnic minorities from joining and thriving. Furthermore, Bourdieu’s concept of habitus relates to the various habits, skills, and dispositions that we possess due to our life experiences. If sport in New Zealand identifies largely with the dominant Pakeha culture, then the habitus of minorities could affect their ability to access it easily. The *Integrity Framework* states that “providers and organisations have the duty to ensure that their participants enjoy a safe and fair environment”<sup>16</sup>. However, if cultural capital is discriminating against ethnic minorities, then I would argue that this is corroding the safe and fair environment of New Zealand sports, but this is not acknowledged in their framework. Overall, both low economic and social status can decrease popular participation amongst ethnic minorities, acting as a primary factor of systemic racism.

## Impact of low participation

Physical activity and sport are crucial elements of one’s wellbeing. The Hauora model highlights the important role mental and emotional health, spiritual health, physical health, and family or wider social systems all have on one’s wellbeing.<sup>17</sup> If one of these ‘walls’ is neglected, then the overall wellness of ‘the whare’ is affected. Thus, if someone is not participating in physical activity, the Maori philosophy of health states that the other aspects of wellbeing will be negatively impacted.<sup>18</sup> It is of paramount importance therefore to counter the decline in Maori youth participation rates, as well as to increase diversity amongst elite athletes. It is significant to note that these two levels of participation are intrinsically linked. If there are more people of ethnic minorities competing in professional sport, then could this encourage people to participate at a popular level? This increased physical activity, in turn, will improve the physical health aspect of one’s hauora and one’s overall wellbeing. In the past, Sport NZ has put the majority of funding into creating elite Olympic medal winners with the excuse that it will inspire participation through a top-down

<sup>12</sup> Sport New Zealand, *Active NZ 2018 Participation Report*, (Wellington: Sport New Zealand), 2019

<sup>13</sup> KTV Consulting, “Maori Participation in Community Sport Review,” Sport New Zealand, January 2017  
<https://sportnz.org.nz/media/1436/maori-participation-review-report.pdf>

<sup>14</sup> Sport New Zealand, *Active NZ 2018 Participation Report*.

<sup>15</sup> Carl Stempel, “Adult participation sports as cultural capital: A Test of Bourdieu’s Theory of the Field of Sports,” *International Review for the sociology of sport* 40, no.4 (2005): 411-432

<sup>16</sup> Sport New Zealand, *Sport Integrity Framework*

<sup>17</sup> “Wellbeing Hauora,” Ministry of Education: Te Kete Ipurangi, <https://health.tki.org.nz/Teaching-in-HPE/Health-and-PE-in-the-NZC/Health-and-PE-in-the-NZC-1999/Underlying-concepts/Well-being-hauora>

<sup>18</sup> Ibid.

approach. They argue that “when Kiwis win, it unites us as a nation and inspires participation”<sup>19</sup> but specifically in whom does it inspire participation? I would expect that it would mostly encourage those who are white; those who can see themselves in the white majority Olympic team. Therefore much needs to be done to increase ethnic diversity amongst the elite sportspeople to hopefully increase popular participation amongst ethnic minorities which will help improve the holistic wellbeing of many. The funding of elite sports over general participation is negatively impacting the popular participation rates of ethnic minorities. So does the *Integrity Framework* go far enough? In Sport NZ’s *Integrity Framework* they claim that the participation rates in New Zealand “are amongst the highest in the world”<sup>20</sup>. However it is apparent that our participation rates are not equal or high amongst all ethnicities, so should the *Integrity Framework* outline even further work to “maintain fairness and equity?”<sup>21</sup> Anti-discrimination is only mentioned briefly in their document and I would argue that they discuss it only in relation to singular racist behaviour, not in regards to a corrupt system ingrained with racism. This could be a fatal flaw when trying to maintain integrity and increase participation.

## Practices of selection

Many sports have been accused of a racist process called ‘stacking’. Stacking is racial segregation by position according to a player’s perceived athleticism or intellectual ability<sup>22</sup> which then excludes them from competing for other positions<sup>23</sup>. This has been particularly noted in the U.S., in regard to American football. In the 1960s as desegregation occurred in the U.S., racist views took a new, more ingrained form. A study conducted, using player data from 1960 - 1985 found that the percentage of white quarterbacks increased from 85.5% in 1960 to 97.1% in 1985. It was also found that the percentage of black wide receivers increased from 55.3% in 1960 to 61% in 1985<sup>24</sup>. Thus, it appears that stacking became more prominent in the U.S after desegregation, which restricted the positions that athletes could occupy and often limited their subsequent careers. This tendency to place white athletes in the more strategically demanding positions and black athletes in the positions that require greater speed or strength persists today. In 2019, of the National Football League’s (NFL) 90 quarterbacks currently active or on injured reserve, 21% were black which shows that they remain underrepresented in strategic positions<sup>25</sup>. Stacking is not solely an American issue. A 2017 study looked at ‘the influence of skin tone on playing position in the Premier and English Football Leagues’ and produced results quite consistent with previous studies. They suggest that, although athletes with darker skin tones may occupy central roles, those with lighter skin tones still dominated the types of positions traditionally associated with organisation and communication. As with American football, players with darker skin tones appeared to primarily fulfil positions linked to athleticism<sup>26</sup>. This trend continues throughout sport including in Rugby Union where a connection between skin tone and placement on the field was made. Two thirds of athletes with darker skin tones were found to be playing on the wing - a position that emphasises speed over decision making and team strategy<sup>27</sup>. More specifically, when an American sociologist investigated stacking in New Zealand rugby, he concluded that, Pakeha tended to occupy positions considered by coaches to be most valued<sup>28</sup>. Auckland University academic, Jermima Tiatia-Seath, states that a lot of Rugby Union and Rugby League clubs come to Pasifika communities trying to recruit for positions like “the explosive wingers, the big props or the forwards”<sup>29</sup>. She also says that stacking can be seen in Super Rugby where there is a “browning of first-fives...but still they aren’t getting as much game time as non-Pasifika first-fives”<sup>30</sup>. Stacking is a real presence both in New Zealand sport, and global sport in particular. However, it is easily overlooked as a form of racism. Teams are often racially diverse which makes people think that sport is just a mechanism of overcoming that racial divide, rather than a way of reinforcing it as seen with stacking.

<sup>19</sup>“Lack of diversity in Kiwi Olympic team? NZOC respond,” NZ Herald.

<sup>20</sup> Sport New Zealand, *Sport Integrity Framework*

<sup>21</sup> Ibid

<sup>22</sup> Charles Coleman and Jason Scott, “Sports are not Colorblind: The Role of Race and Segregation in NFL Positions,” *Journal of Emerging Investigators* (2018): 1-6

<sup>23</sup> Anthony Laker, *The Sociology of Sport and Physical Education* (Abingdon: Routledge, 2002), 97.

<sup>24</sup> Charles Coleman and Jason Scott, “Sports are not Colorblind.”

<sup>25</sup> Patrick Hruby, “‘We’ve come so far’: how black quarterbacks defied a racist past to become the NFL’s future,” 20 September 2019, <https://www.theguardian.com/sport/2019/sep/20/black-quarterbacks-history-stereotypes>

<sup>26</sup> John Mills et al., “Examining the Influence of Skin Tone on Playing Position in the Premier and English Football Leagues.” SportRxiv. August 22. doi:10.31236/osf.io/h9f35.

<sup>27</sup> Martin Polley, *Moving the Goalposts: A History of Sport and Society since 1945* (London: Routledge, 1998), 154–155.

<sup>28</sup> Chris Collins and Steve Jackson, *Sport in Aotearoa/New Zealand Society* (Palmerston North: Dunmore Press, 2000), 315.

<sup>29</sup> Paul Cully, “Mental health and rugby: How ‘beast’ stereotypes can harm Pacific Island men,” 02 May 2019, <https://www.stuff.co.nz/sport/rugby/all-blacks/112372347/mental-health-and-footy-how-beast-stereotypes-can-harm-pacific-island-men>

<sup>30</sup> Ibid.

## Racist stereotypes

Common, irrational stereotypes have evolved over time as a result of racial differences. They are deemed to be one of the primary causes of racial stacking in sports teams. Stereotypes can be defined as widely held, oversimplified labels placed on groups of people<sup>31</sup>. Ron Noades, an English businessman known for his investment in English football clubs, notoriously stated, “The black players at this club lend the side a lot of skill and flair, but you also need white players to balance things up and give the team some brains and common sense”<sup>32</sup>. This sums up the typically held beliefs that black athletes are to be valued for their natural athletic ability, while white players are considered more intelligent and hardworking. This was echoed by ex-All Black, Grant Fox, who in 1993, stated “Polynesian players were naturally superior to us in talent, but a lot of them aren’t there now because they didn’t have the discipline...They lacked the right kind of mental attitude”<sup>33</sup>. In making such a generalisation, Fox is condoning and perpetuating these stereotypes. Furthermore, it isn’t just individual athletes who hold stereotypical beliefs. The media has also been seen to reinforce them by “describing black athletes in terms of natural ability and strength, while white players are more likely to be described through the prism of intelligence and effort”<sup>34</sup>. The media plays a significant part in the world of sports, influencing which sports are followed through coverage choices and which players are followed through commentary and interviews, therefore impacting society’s perceptions. The increase of Maori and Pasifika playing rugby in recent years has led to a bias narrative that New Zealand teams now combine the best qualities of Maori and Pasifika physicality and spontaneity with European tactical acumen<sup>35</sup>. When both individuals and the media accept this racial stereotype or when presumptions that black or brown-skinned people are more suited to the more physically demanding positions, stacking as a symptom of systemic racism within sport continues. The presence of stereotypes could be said to affect the “organisational culture” of sport and contradict the “anti-discrimination” focus area that Sport NZ strives for in their *Integrity Framework*<sup>36</sup>. It is a form of discrimination because it judges people based on their skin colour, opposed to their skill. It is not a very overt cause and I wonder how many people are willing to acknowledge that they need to address these beliefs that have such a significant impact on their actions. I know, for myself, that I am sometimes shocked by the preconceptions I place on people because of their ethnicity or appearance.

## Personal and societal consequences

Stacking, brought about by stereotypes, has serious implications for the wellbeing of both individuals and society. From a young age, many people feel pressured to follow societal expectations and self-select their position in sport. This could be linked directly to the stereotype threat theory. Stereotype threat is the name given to a situation where people feel at risk of conforming or not conforming to a stereotype<sup>37</sup>. They may alter their own performance, depending on which sport they feel they are expected to excel in. This may be intentional, so as to fit in, or unconsciously because they believe the stereotypes are true. For Maori and Pasifika, in particular, the stereotype can harm their wellbeing. Racial stacking effectively places them in a position where they feel they have to be “the beast” or “the warrior” on the playing field<sup>38</sup>. A 2017 study by University of Auckland masters student, Caleb Marsters, was conducted among Pasifika male rugby players in New Zealand and showed that this affects their mental wellbeing and limits their ability to ask for help<sup>39</sup>. Moreover, when their mental wellbeing is impacted, other aspects of their health suffer as well. The Fonofale health model is a holistic approach to health, held by many Pasifika people. Aspects of culture, family, mentality and spirituality are all dimensions that contribute to their overall wellness. In particular, if the community sees athletes to be someone or something that they are not, then they feel unseen and are unable to reach out for help or support when they need it. The Fonofale Model also includes the connection between community wellbeing and individual wellbeing<sup>40</sup>. If an individual athlete is struggling with their mental wellness, there are interpersonal factors that cause multiple negative ‘knock-on’ effects. Thus, the impact of negative mental health and

<sup>31</sup> Pedro Bordalo et al., “Stereotypes,” *Quarterly Journal of Economics* 131, no. 4 (2016): 1753-1794.

<sup>32</sup> Daniel Horsfield et al., “The Sports Monograph: Critical Perspectives on Socio-cultural Sport, Coaching and Physical Education.” *Colour, who cares?* (2014): Chapter 24, pp. 207-220

<sup>33</sup> Timothy Hyde, “White Men Can’t Jump: The Polynesianisation of Sport,” *Metro* (1993): 62-69.

<sup>34</sup> Patrick and Ferrucci and Edson Tandoc, “The Spiral of Stereotyping: Social Identity Theory and NFL Quarterbacks,” *Howard Journal of Communications*, 29:2, (2018): 107-125

<sup>35</sup> Greg Ryan and Geoff Watson, *Sport and the New Zealanders*

<sup>36</sup> Sport New Zealand, *Sport Integrity Framework*

<sup>37</sup> “Stereotype Threat Widens Achievement Gap,” American Psychological Association, July 15, 2006, <https://www.apa.org/research/action/stereotype>

<sup>38</sup> Paul Cully, “Mental Health and Rugby: How ‘Beast’ Stereotypes can Harm Pacific Island Men.”

<sup>39</sup> Caleb Marsters, “Young Pacific Male Athletes and Positive Mental Wellbeing” (master’s thesis, University of Auckland, 2017).

<sup>40</sup> Fuimaono Karl Pulotu-Endemann, “Fonofale Model of Health,” 2001, [https://www.actionpoint.org.nz/pacific\\_health\\_models](https://www.actionpoint.org.nz/pacific_health_models)

the interconnectedness around Pasifika health values suggests that it is vital that stacking, caused by stereotypes, are addressed.

In addition, the repercussions of stacking can include a lack of social harmony. This can be particularly explored by looking at the functionalist approach. The functionalist approach believes that everyone has an important role to play in ensuring the maintenance and smooth functioning of society. Functionalists believe that society has a functional unity, so it is structured to maintain the values and norms that most people agree are important<sup>41</sup>. From a functionalist perspective, sport has an integration function as it allows for the harmonious incorporation of individuals who are different into a large acceptable societal group<sup>42</sup>. However, which people in society consider this an acceptable group? It is likely to be those who make up the majority; those in power. Thus, in reality it may not be an integration that suits all people and does not allow for the harmonious incorporation of individuals. Moreover it is commonly believed that sport is a method of bringing people together which corresponds to this functionalist theory. Yet while a sports team may be seen as a 'socially acceptable group', it may not be equal. For when practices like stacking are ingrained in sport, it suggests that sport does not bring people together, instead it deepens the divide because it perpetuates racial stereotypes. This suggests that we must evaluate the effects of a flawed sporting world on a deeper level to see the effects that it is having on wider society.

### Positions of power

Racial inequality is not only seen on the playing field, but also in regards to those who manage and govern sports. In 2013, Massey PhD student, Ryan Holland, conducted New Zealand's first formal review of Maori and Pasifika people in sports management<sup>43</sup>. It revealed some alarming statistics: "across 90 national sports organisations there [were] 613 board members, but just 33 [were] Maori and only four [were] Pasifika"<sup>44</sup>. Five years after that study, an imbalance in proportions of Polynesian players and management leaders could still be seen. In 2018, according to Auckland Rugby Statistics, for every 100 senior rugby players in Auckland, 65 are Polynesian<sup>45</sup>. One would *hope* then, though not necessarily *expect*, that roughly two-thirds of Auckland rugby management roles be occupied by Polynesians. This was not the case. A collaborative action research project, *Navigating Two Worlds*, was started in 2016 to investigate this relationship between demographics on and off the playing field. They concluded that "there was a great disparity between the number of Pasifika rugby players and those involved in non-playing roles at the grassroots level in Auckland"<sup>46</sup>. Despite high Maori participation in rugby at a grassroots level, this is not reflected at the management and governance level.<sup>47</sup>

Racial stereotypes reappear as a cause of lack of racial diversity, not in terms of stacking now, but concerning sports governing and management. Has the stereotype that Maori or Pasifika only have physical talent, opposed to intellectual talent helped to create a situation where leadership roles are dominated by Pakeha? Holland reflects on his results, saying, "Maori and Pasifika are...thinkers as well. But we don't tend to recognise that"<sup>48</sup>. Society often normalises this imbalance of ethnicities on the basis that Pakeha are the 'intellectual ones' suited to management and governing roles. Certainly, those who are 'white' may find it suits them to accept this stereotype because they are the ones who are benefited. When I reflect on these findings it becomes apparent that it is people like me who don't need to work as hard to potentially reach senior leadership positions in sport, because the entire system has been designed to fit my culture. New Zealand Europeans make up 70% of New Zealand's population<sup>49</sup>. They are the majority and are overrepresented in positions of power. It is commonly the case that those in power are content to leave it that way;

<sup>41</sup> Social Science Libre Texts, s.v. "1.3B: The Functionalist Perspective," accessed October 4th, 2020, [https://socialsci.libretexts.org/Bookshelves/Sociology/Book%3A\\_Sociology\\_\(Boundless\)/01%3A\\_Sociology/1.03%3A\\_Theoretical\\_Perspectives\\_in\\_Sociology/1.3B%3A\\_The\\_Functionalist\\_Perspective](https://socialsci.libretexts.org/Bookshelves/Sociology/Book%3A_Sociology_(Boundless)/01%3A_Sociology/1.03%3A_Theoretical_Perspectives_in_Sociology/1.3B%3A_The_Functionalist_Perspective)

<sup>42</sup> Mooney, Knox, and Schacht, "The Three Main Sociological Perspectives," *Understanding Social Problems*, 5th edition (2007) pp.1-2

<sup>43</sup> Ryan Holland, "Governance of New Zealand National Sport Organisations: Pasifika and Maori Voices," (master's thesis, Massey University, 2012).

<sup>44</sup> Ibid.

<sup>45</sup> "Participation Analysis 2008 - 2019," New Zealand Rugby, <https://app.powerbi.com/view?r=eyJrIjoizjUzNWQ1OWEtNTcwMC00OTM2LWE5MDQ0ODk5ZjYjU0liwidCI6IjBiYmQzNGNiLTkxYTgtNGI4ZS1hNDgzLTAzNGExNTVmZjQ3YiJ9>

<sup>46</sup> Vinnie Wylie, "Pasifika overlooked in NZ Rugby leadership - study," RNZ, 24 December 2019, <https://www.rnz.co.nz/international/pacific-news/406151/pasifika-overlooked-in-nz-rugby-leadership-study>

<sup>47</sup> Chris Collins and Steve Jackson, *Sport in Aotearoa/New Zealand Society*.

<sup>48</sup> "Lack of Maori and Pacific in sports management — study," Newshub, 30 April 2013, <https://www.newshub.co.nz/general/lack-of-maori-and-pacific-in-sports-management-study-2013043017>

<sup>49</sup> "New Zealand's population reflects growing diversity," Statistics NZ, 23 September 2019, <https://www.stats.govt.nz/news/new-zealands-population-reflects-growing-diversity>



thus perhaps this is why it took so long for an investigation to take place into the demographics of sporting management positions and stereotypes are still present.

Could wider issues of racism also be a root cause of this inequality? By looking at New Zealand's colonial history, one can see that there has been an imbalance with Maori being virtually excluded from all positions of power in society. One example is shown through a States Service Commission report released in 2018 which revealed that Maori, Pasifika and Asian ethnicities are still under-represented in the top three tiers of public service management. They also stated that "non-European ethnicities are also under-represented at lower levels of management"<sup>50</sup>. A study done in 2014 by the same organisation showed that the percentage of Maori, Asian and Pasifika people in management roles did not match their percentage in the general public service workforce. At 12% in senior leadership, Maori were underrepresented as they made up 16.6% of the public service workforce. Most concerning was the lack of increase in Pasifika senior leaders who made up 1.8% of leadership despite making up 8% of the public service workforce<sup>51</sup>. The disparity illustrated here reflects the general lack of representation for minority ethnicities in New Zealand leadership roles. In 2019, Kiwi barrister and researcher Cat MacLennan, worked alongside others in a study which revealed that the boards of the top 100 publicly listed companies are still overwhelmingly male and Pakeha.<sup>52</sup> Therefore could a lack of ethnic diversity in management and governing roles in sport be caused by the issues creating this problem at large in society? If so, it is likely that this symptom of systemic racism will not be cured easily, so most importantly, what are the impacts of it?

### ***Impact on leadership and participation***

Lack of racial diversity in positions off the playing field has resulted in a Eurocentric style of leadership. An AUT professor who was involved in the *Navigating Two Worlds* project, Lesley Ferkins, examines the impact of this in terms of rugby. A Pakeha dominated governance and management team mean they lead in a way that suits them and not necessarily people from other cultures. Ferkins explains that the prevailing western perspective, "sees leadership as the person - which has often been the white man in charge"<sup>53</sup> and this leads to a hierarchical approach. Gramsci's concept of hegemony relates to the way the western leadership style has become the norm in our society. Hegemony is essentially the dominance or power of one group over another, by "winning them over"<sup>54</sup> Pakeha, as the dominant group, is able to use this 'privileged' position to exert power over others in sport. *Navigating Two Worlds* is one example of counter-hegemony as they challenge Pakeha western-style beliefs around leadership and push for more diverse practices<sup>55</sup>. The Pasifika perspective is completely different to the western-style. Leadership is viewed as collective, with multiple contributions by many people and a strong emphasis on relationships. *Navigating Two Worlds* found a lack of understanding around Pasifika culture in rugby and at clubs and outlined several changes that need to intentionally occur to address this<sup>56</sup>. The *Sport NZ Integrity framework* maintains that 'player welfare' is one of their focus areas and that it should be at the "front of mind for all those who deliver sport"<sup>57</sup>. They acknowledge that management, officials, coaches, and others have a role to play in supporting the health of those involved both on and off the field. However, the results of the *Navigating Two Worlds* show that this is not possible while the "management, officials and coaches" do not embrace the various cultures of players. Is it enough for them to just state what should happen? Or must Sport NZ embrace some of the practical advice that has come out of this recent study?

Furthermore, the lack of racial diversity in governing positions and hierarchical style leadership contribute to the low participation rates among ethnic minorities. Positions of power being dominated by Pakeha has typically led to a 'like-for-like' network which has restricted those of minority races from being included in high-level sports. Leadership styles determine the culture of a team or a community, so when these become more inclusive, the hope is that diversity in popular participation will increase. In Sport NZ's *Every Body Active* plan, they are focused on increasing

<sup>50</sup> State Services Commission, *Our People: Public Workforce Data*, (Wellington: State Services Commission), 2018.

<sup>51</sup> State Services Commission, *Human Resource Capability*, (Wellington: State Services Commission), 2014.

<sup>52</sup> Jessica Tyson, "Lack of Ethnic Diversity in NZ companies 'shocking,'" Te Ao Maori News, 18 November, 2019

<https://www.teaomaori.news/lack-ethnic-diversity-nz-companies-shocking>

<sup>53</sup> "Diversity of Athletes Not Reflected In Sports Management," RNZ Nine to Noon, 21 July 2020,

[https://www.rnz.co.nz/audio/player?audio\\_id=2018755870](https://www.rnz.co.nz/audio/player?audio_id=2018755870)

<sup>54</sup> Valeriano Ramos, Jr., "The Concepts of Ideology, Hegemony, and Organic Intellectuals in Gramsci's Marxism," *Theoretical Review* No. 27 (1982).

<sup>55</sup> AUT Sports Performance Research Institute New Zealand, "Navigating

Two worlds: Pacific Island Experiences and Contribution to Non-playing Participation in Rugby," *Report to New Zealand Rugby*, November 2016

<sup>56</sup> Ibid.

<sup>57</sup> Sport New Zealand, *Sport Integrity Framework*

participation among all New Zealanders. To do this, they too acknowledge that as leaders they must “actively promote diversity and inclusion of all cultural...backgrounds within (their) areas of influence”<sup>58</sup>. Thus, it can be seen that those in governing or management roles have a significant impact on participation rates. We have seen that a lack of racial diversity in sporting positions of power often lowers participation rates amongst ethnic minorities; but in turn, this link can be used to make a positive difference. To increase popular participation in sports amongst ethnic minorities, white-dominated positions of power need to be challenged. As a result, will a new push to incorporate Pasifika and Maori cultural practices motivate them to keep coming through so that traditional hegemonic structures can be undermined?

### **The reality of white privilege and sport**

It has become clear that there are specific causes relating to certain symptoms of systemic racism. However, one overarching cause is white privilege. Has the unconscious bias behind white privilege created these hegemonic structures which contribute to the inequality we see today, both within sport and society? White privilege can be defined as, “the set of social and economic advantages that white people have by virtue of their race in a culture characterized by racial inequality”<sup>59</sup>. In the 1980s, Peggy McIntosh wrote about white privilege receiving widespread praise for the clarity and tangible examples her discussion provided. She states “I was taught to see racism only in individual acts of meanness, not in invisible systems conferring dominance on my group”<sup>60</sup>. This is what makes white privilege so difficult to pinpoint: most people who experience it are oblivious because they tend to look through the world with a ‘white lens’. When society functions to suit you, you may not notice that the benefits that you receive, cause disadvantages to others. ‘The Treaty Resource Centre,’ a New Zealand website, outlines some examples of Pakeha privilege evident in the 1800s and 1900s. These included being able to: buy or lease Maori land cheaply; learn and speak in their own language at school; be paid the full unemployment benefit and old age pension from their introduction. These privileges still have an impact today, not least because they normalised racial hierarchy, but also because they disadvantaged those who were not white. Examples of white privilege evident today include: being able to use health, education, justice, and social services geared to one’s cultural values; having one’s culture and values reflected in the main institutions and goals of society; and having freedom from ongoing surveillance and critique based on one’s ethnicity<sup>61</sup>. As a Pakeha, I often do not consider the fact that the culture of my ancestors is the dominant culture in New Zealand society, which neglects the culture of other ethnic groups including Maori. Due to this ingrained racism, I am benefited daily.

White privilege is a controversial concept, even as it is increasingly becoming a topic of greater discussion. Many people dislike the term because they feel that it: undermines the challenges and hard work that white people have had to undertake to reach where they are now<sup>62</sup>; or because they believe it makes too big a generalisation<sup>63</sup>. One journalist, Kenin Malik, stated, “the stress on ‘white privilege’ turns a social issue into a matter of personal and group psychology”<sup>64</sup>. It may be true that in certain cases, people wrongly emphasise their personal feelings of shame and therefore try to personally take action to make themselves feel better. But white privilege must be acknowledged in a greater sense so that it can be addressed and actively challenged by society. The purpose of greater reflection is not to wallow in guilt, but to recognise white privilege, so you can work to change the societal structures that revolve around some individuals while disadvantaging others.

### **Activism within sport**

Sport can simultaneously be a problem as well as a prescription for health. While sport is a place where we see the impacts of white privilege and systemic racism, we are also seeing it being increasingly used as a tool for social change within wider society. Jesse Owens, one of the greatest athletes in track and field history, once stated that “there is no

<sup>58</sup> Sport New Zealand, *Every Body Active*

<sup>59</sup> Merriam-Webster, s.v. “White Privilege,” accessed 1 November, 2020, <https://www.merriam-webster.com/dictionary/white%20privilege>

<sup>60</sup> Peggy McIntosh, “White Privilege: Unpacking the Invisible Knapsack,” 1988 <https://www.racialequitytools.org/resourcefiles/mcintosh.pdf>

<sup>61</sup> “Examples of Pakeha Privilege,” Treaty Resource Centre, <https://trc.org.nz/examples-p%C4%81keh%C4%81-privilege>

<sup>62</sup> Brando Simeo Starkey, “Why do so many white people deny the existence of white privilege?” *The Undeclared*, 1 March, 2017, <https://theundeclared.com/features/why-do-so-many-white-people-deny-the-existence-of-white-privilege/>

<sup>63</sup> Rav Arora, “The fallacy of white privilege — and how it’s corroding society,” *New York Post*, 11 July, 2020, <https://nypost.com/2020/07/11/the-fallacy-of-white-privilege-and-how-its-corroding-society/>

<sup>64</sup> Kenin Malik, “‘White privilege’ is a distraction, leaving racism and power untouched,” *The Guardian*, 14 June, 2020, <https://www.theguardian.com/commentisfree/2020/jun/14/white-privilege-is-a-lazy-distraction-leaving-racism-and-power-untouched>

place in the athletic world for politics”<sup>65</sup>. However, many athletes have disagreed with him and used their high profile platform to protest against issues of racism. TJ Perenara, an All Black halfback, is one such ‘activist athlete’. Through social media, he has spoken out in support of athlete boycotts happening in the United States<sup>66</sup>. He also once wore a wristband in the Bledisloe Cup game at Eden Park with the word ‘Ihumatao’ printed boldly to show solidarity with those protesting at the site<sup>67</sup>. When a high-profile athlete makes a political statement, they can raise more awareness than if it was any ordinary person which makes their actions even more significant. Kareem Abdul-Jabbar, the American basketball player, also integrated activism with his career and justified it by saying, “this is how I take my stand - using what I have. And I stand here”<sup>68</sup>. This statement illustrates what I believe may be a common reasoning behind many of the actions that athletes take. However, while they bring attention to the wider issues of racism in society as desired, activism also can reveal the systemic racism within the sporting world.

One of the most famous recent examples of activism within sport is Colin Kaepernick’s act of kneeling during the national anthem at NFL games. In 2016 he sat down to speak out against racial injustice and police brutality in the U.S., but since then has changed to kneeling. His actions drew the attention of many and sparked others to follow in his footsteps. Yet there were negative impacts as well which shows the limitations of sport as a vehicle for change. In 2017, Kaepernick opted out of his contract after being told that his team planned to release him. Since then, he has remained unsigned, despite other players ranked lower than him being picked up by various NFL teams. This has led to many accusations that he was being blackballed for his political activism. Kaepernick filed a grievance and this claim has since been settled, but the fact remains that he is still unsigned. It is outrageous to me that clubs are more concerned with their reputation than supporting his fight for racial equality. Following his actions, the NFL went as far as to force players to stand when listening to the national anthem before games, otherwise they were expected to remain in the locker room while it played. Kaepernick’s actions unintentionally revealed the systemic racism that is hidden within sport. I wonder if the extent to which sport can be used for change depends on one’s ethnicity. Was Kaepernick treated so harshly for his actions because he was Black? If he had been a white person protesting against racism, would the NFL have blackballed him? In New Zealand, we have also seen activism reveal the systemic racism that appears to exist. Rugby Union has traditionally been intolerant of player’s activism. All Black captain David Kirk refused to join the Cavalier’s tour to South Africa in 1986, due to the issues around Apartheid, and subsequently lost his position as Captain when the team returned. More recently in 2014, Kane Hames was admonished for “wearing a wristband that supported the Native American protest against an access pipeline at Standing Rock”<sup>69</sup>. So we are shown that the effect of activism is limited when it is carried out by an individual.

However, in contrast, recent activism by collective groups of athletes has proven to be more successful. In the last few months, the Black Lives Matter has been positively brought to global attention through a labour-based movement that went beyond symbolism<sup>70</sup>. The U.S saw a mass athlete boycott of professional games, first started in the NBA by the Milwaukee Bucks. Athletes in various sports, including the American baseball league, American soccer league, and women’s basketball league refused to play. The NBA season only resumed after the players agreed with some proposed changes around social and racial injustice in the United States<sup>71</sup>. When examining the impacts of this type of activism compared to what happened to Kaepernick, one could argue that the collective voice and action of many players is stronger than that of individuals. On the 6th June 2020, NFL Commissioner Roger Goodell released a video apologising for not listening to players about Black Lives Matter protests. Instead of punishing players who speak up about issues, Goodell says the NFL now “encourages all to speak out and peacefully protest”<sup>72</sup>. This is a clear example of change that has come about due to pressure from athletes. Athletes have used their platforms to instigate change. Now that activism is accepted by a major sport, there will be even more opportunities for sports people to protest. Yet how much will change within the system of sport? While players may be able to protest without punishment, it is clear that clubs still have much freedom to do what they want, such as continue to blackball Kaepernick, without facing

<sup>65</sup> Duchess Harris and Cynthia Kennedy Henzel, *Politics and Protest in Sports*. (Burnsville: Essential Library, 2019)

<sup>66</sup> Joel Kulasingham, “The evolution of athlete activism: All Blacks and Hurricanes halfback TJ Perenara speaks out on player protests,” NZ Herald, 31 August 2020, <https://www.nzherald.co.nz/sport/the-evolution-of-athlete-activism-all-blacks-and-hurricanes-halfback-tj-perenara-speaks-out-on-player-protests/3GQYTUX2MHPAVEB3Y6627X4WM/>

<sup>67</sup> Joel Kulasingham, “Ihumātao, TJ Perenara and how the All Blacks became protectors,” NZ Herald, 21 August 2019, [https://www.nzherald.co.nz/sport/news/article.cfm?c\\_id=4&objectid=12260516](https://www.nzherald.co.nz/sport/news/article.cfm?c_id=4&objectid=12260516)

<sup>68</sup> Duchess Harris and Cynthia Kennedy Henzel, *Politics and Protest in Sports*.

<sup>69</sup> Gregor Paul, “BLM: Time to Speak Out.” NZ Herald, September 2nd, 2020.

<sup>70</sup> Joel Kulasingham, “The evolution of athlete activism.”

<sup>71</sup> Joel Kulasingham, “The evolution of athlete activism.”

<sup>72</sup> NFL, “We, the NFL, condemn racism and the systematic oppression of Black People...,” Twitter, June 6, 2020, <https://twitter.com/NFL/status/1269034074552721408?s=20>



consequences themselves. There are still hegemonic structures in place at the expense of ethnic minorities, so people must continue to employ sport to further address systemic racism within sport and the wider world.

### Does the *Integrity Framework* address systemic racism?

Ultimately, systemic racism is apparent in Aotearoa New Zealand and also seen globally. Though there is some inclusion and affirmation of minority cultures, institutionalised racism can still be observed through low participation rates, selection issues, and lack of diversity in leadership. White privilege, stereotypes, unequal economic levels, and varying cultural values have caused these symptoms of systemic racism and are perpetuating its continuance with devastating consequences. Sport in itself has been used as a tool for addressing this racism which has created positive change, while simultaneously revealing its presence in sport. Thus, activism is a way to confront systemic racism. This involves raising awareness because systemic racism within sport is hardly visible and rarely addressed. Consequently, is it about greater education? Imagine if the girl at my school who sent the racist snapchat had understood the offensive nature of her actions. If our school had greater emphasis on diversity reflected in their actions, our environment would be more inclusive and equal for all ethnicities. When people grow in their understanding, they are able to challenge the status quo. In particular, education in school is important so that more youth will grow up conscious of ingrained racial inequality and have the mindset and skill set to address such issues. This aligns with the behavioural change model which is a preventative approach and focuses on lifestyle behaviours that impact health. It is based on the belief that we need to educate and transmit knowledge so that individuals are persuaded to take action. The often moralistic tones in this approach may lead people to change beliefs, attitudes, and behaviour, which in turn can hopefully change the systems around sport. However, this model may also imply 'victim-blaming.' Even if individuals of ethnic minorities are encouraged to act against the stereotypes, and feelings of white privilege are challenged amongst Pakeha, there will still be systems of racism in place which means it is not as simple as educating on an individual level. The behavioural change model may often affect an individual, but not a whole community, which is what is needed to address institutionalised racism within sport. I would argue that this is one of the issues with Sport NZ's *Integrity Framework*. Not only do they skim over the issue of overt racism, but they largely ignore the systemic barriers currently in place which are hindering the ability for people of certain ethnicities to participate within a "welcoming and inclusive environment"<sup>73</sup>.

Therefore a collective approach is also needed. After examining different examples of activism within sport and the respective impacts, it appears clear that a mass group action is more effective than individual changes. The collective action model encompasses the idea of community empowerment. This requires people individually and collectively to acquire knowledge, skills, and commitment to improve the societal structures that have such a powerful influence on people's health status. This model is important because it acknowledges the interrelationship between the individual and the environment. This means that health is determined largely by factors that operate outside the control of individuals, which is very true when looking at the effects of systemic racism. The *Integrity Framework* seems to ignore these different determinants of health that can affect people's wellbeing and ability to participate. It is true that the *Integrity Framework* is only a basic outline. However, it appears to address some specific factors affecting integrity while not going in deep enough in regard to discrimination to admit there are multiple factors outside of one's control that could affect New Zealanders' "right to participate"<sup>74</sup>. On the other hand, they positively embody an aspect of the collective action model when they emphasise empowerment for all participants. The *Integrity Framework* states, "it is important that everyone within our sector continues to work hard to maintain the safety and integrity of...sport in Aotearoa New Zealand"<sup>75</sup>. It is crucial that the next steps taken to address systemic racism are collective. Nevertheless, I would argue that the *Integrity Framework* side steps an integral part of integrity in sport which limits their ability to address the issue. By not acknowledging that institutionalised racism is an issue, how are they supposed to take a holistic approach? They want to "maintain" integrity, but that integrity first needs to be built up to a higher standard. The *Integrity Framework* wants to "support diversity" but that cannot be done until they address the authentic need for a system free of racism. Therefore, alongside "ensuring fair and honest competition and performance,"<sup>76</sup> and "ensuring positive conduct by all who participate and in and support sport,"<sup>77</sup> the *Integrity Framework* could include a core aspect of "ensuring fair and equal practices and systems of sport." This results in them going further than just addressing singular racist behaviour, but challenging the very systems on which sport in New Zealand is built. To

<sup>73</sup> Sport New Zealand, *Sport Integrity Framework*

<sup>74</sup> Ibid.

<sup>75</sup> "Sport NZ Integrity Measures – Our Path to Today," Sport New Zealand, <https://sportnz.org.nz/resources/sport-nz-integrity-measures-our-path-to-today/>

<sup>76</sup> Sport New Zealand, *Sport Integrity Framework*

<sup>77</sup> Sport New Zealand, *Sport Integrity Framework*

further embody the collective action model, this adapted *Integrity Framework* should be promoted on multiple levels, including various sports organisations, clubs and schools, so that it begins with a top down approach and moves to work with others in society.

In order to achieve desired results from this revised *Integrity Framework*, Sport NZ should employ a community approach, similar to one displayed in the *Navigating Two Worlds* investigation. This should focus on increasing participation rates among ethnic minorities, education to debunk stereotypes, create fair selection processes, and increase diversity in management and governing positions of the field. On Sport NZ's website they have already begun providing educational resources like an online course called 'Inclusion: A Response to Discrimination.'<sup>78</sup> This is a good beginning, however, it would be beneficial to also educate in areas that specifically address the symptoms of systemic racism. *Navigating Two Worlds* has made some important steps, such as a Pasifika leadership and mentoring programme within rugby so that there is greater equity off the playing field<sup>79</sup>. They found that the catalyst to increased participation in rugby is making clubs more welcoming to Pasifika members and their families; encouraging, supporting, and shoulder tapping Pasifika people to come forward; and creating opportunities for both sides to connect and learn together through conversations, workshops, and mentoring<sup>80</sup>. If there is greater diversity within management and governing positions, then traditional hegemonic structures are less powerful and other issues around systemic racism are more likely to be addressed, in particular, participation rates. Sport NZ already has a strategic framework designed to encourage 'every body' to participate in sport and physical activity. However, as systemic racism in sport is disadvantaging various ethnic minorities, is Sport NZ realistic in creating one general plan for everyone? Are they giving all New Zealanders an equal opportunity to increase participation in sport, without addressing the systemic racist barriers that stop those who arguably are the most in need of increased involvement? Increased focus and urgency is required.

## Conclusion

Fundamentally, systemic racism is an almost indiscernible reality of New Zealand sport. While this is currently the case, the presence of activism has shown that it does not always have to be. There are direct actions that can be taken and should be taken by everybody, especially key groups like Sport NZ in a collective approach. Because, ultimately, "if sport is considered a 'good'—something that has intrinsic value, in forming character or in expressing creativity, or in some other way yet to be defined"<sup>81</sup> then ingrained racism, that places negative stereotypes upon people and deters certain groups from sport, must be confronted. The wellbeing of both individuals and society greatly depends upon it. Systemic racism must be challenged if we want our sport to be integrity-driven.

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<sup>78</sup> "Inclusion: A Response to Discrimination," Sport New Zealand, <https://sporttutor.nz/pages/description.jsf?menuId=1745771#/users/@self/catalogues/1834747/courses/1890525/description?menuId=1104&locale=en-GB#/?dashboardId=1815579>

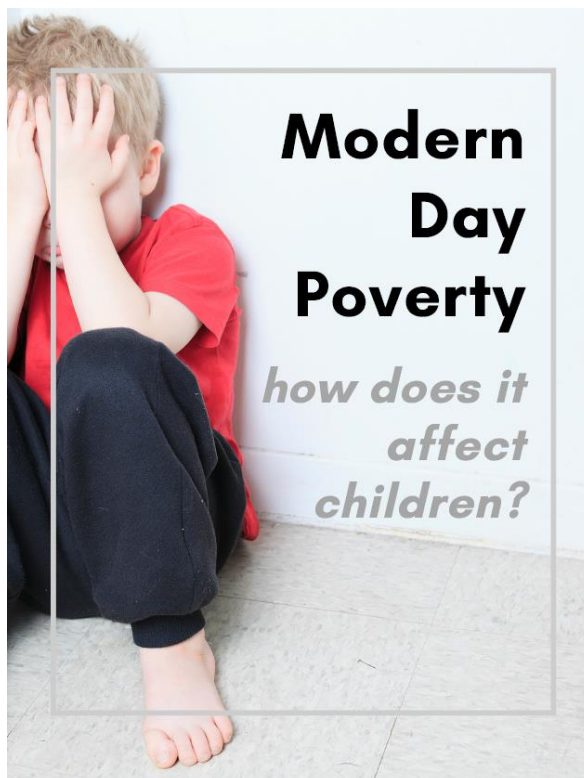
<sup>79</sup> "Pacific Leadership and Mentoring Programme," AUT Sports Performance Research Institute New Zealand, [Pacific Leadership and Mentoring Programme - SPRINZ - AUT](#)

<sup>80</sup> AUT Sports Performance Research Institute New Zealand, "Navigating Two worlds."

<sup>81</sup> Robert Ellis, *The Games People Play*, (Eugene: Wipf and Stock, 2014)

# Modern Day Poverty how does it affect children?

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This year's general election wasn't quite the cosmic battle of the Trump-Biden debate in the US, however, the claws were certainly out when Jacinda Ardern and Judith Collins went head to head on New Zealand's poverty crisis. From the beginning of the year, poverty and inequality was set to dominate the political debate with the impact of the Covid-19 pandemic profoundly worsening health inequalities and the economy<sup>1</sup>, and parties promoting various policies they say will reduce the gap between the rich and poor. Despite this, Ardern vs Collins across all of the public debates to me, were like a pair of dodgem cars forcefully bumping into each other; with constant interruptions, insignificant bickering and little accomplished - poverty being one of the many real issues within New Zealand, tossed out of both carts. This analogy of out of control conveyances trying to knock the other out of the way illustrates a lot of what is wrong with the delivery of our countries issues from political leaders, and reflectively, what is wrong with the countries approach to significant health, economic, housing, and educational issues that are rooted in the systematic problem of poverty and child poverty within New Zealand today.

This report aims to discuss, inform and invigorate the debate of poverty in modern day New Zealand. Specifically, it aims to explore the definitions, underlying concepts and attributes of it that not only inform our own understanding of poverty, but our understanding in how it negatively impacts the wellbeing of children and families as of 2020. As you will see throughout this report, people in New Zealand develop their own ideas of poverty by many different influences and routes. However, the ultimate purpose of this paper is to disburden the assumptions we all carry of low socio individuals and grow our knowledge enough to be able to have more appropriate discussions about what poverty is and what we can collectively do about it in order to improve children's wellbeing and livelihoods in New Zealand. I will achieve this by analysing the current strategy towards child wellbeing, 'The Child Youth and Wellbeing Strategy' (2019) and form my own conclusions and recommendations of alternative concepts to help reduce child

<sup>1</sup> "COVID-19 and Māori health – when equity is more than a word." 10 Apr. 2020, <https://blogs.otago.ac.nz/pubhealthexpert/2020/04/10/covid-19-and-maori-health-when-equity-is-more-than-a-word/>. Accessed 10 Nov. 2020.

poverty within New Zealand. Irrespective of the status and position of parents and the career they hold, I believe all children should be entitled to the best possible support from their families and all of New Zealand society. This means while poverty services and/or charities have massive contributions in assisting children and families experiencing financial and/or resource stresses, it cannot solve the problem of poverty, and it is in our shared responsibility to ensure children receive sufficient support. This solution requires collective action from families and communities, and above all, requires a commitment from the Government to make investing in our children the highest priority. As a result, this paper will cover a wide range of issues affecting New Zealand children in poverty including incomes, health, housing, education, parental support, social hazards, and a lack of job opportunities. All of these issues apply to the problem of poverty in New Zealand, and an inclusive and coordinated approach is required to reduce child poverty and improve the wellbeing and opportunities for all children. Without such an approach, children will unfairly suffer and New Zealand will be economically, culturally and socially affected.

### **Defining Child Poverty**

In New Zealand, poverty is viewed as relative, whereby individuals suffering deprivation are often found living in insecure circumstances, struggling to feed their children and unable to enjoy a satisfying social life. As a result, family members' health suffers and children fail to reach a sound level of education. Despite this, as of 2020, New Zealand doesn't have an official poverty definition or line. This means we lack a common purpose and likewise, are less able to develop solutions to child poverty or evaluate their success in achieving specific poverty reduction targets. It can be argued that governments have neglected the rapid growth of poverty, relying on a sole political belief that getting a job will reduce it. Some politicians have even stated that there is no poverty present in the country, like the previous ACT party leader, Jamie Whyte in 2016, who attempted to define poverty by following the third world indicator of abject poverty<sup>2</sup>, as opposed to considering the face of poverty and material hardship in just New Zealand. This raises the important question about how we measure and understand poverty in NZ and how important it is in order to tackle this issue.

There are many faces to poverty and in its complexity, no one measure is sufficient - different measures tell different stories and serve different purposes. While we see heartbreaking images of empty lunch boxes, sick children and families struggling with substandard housing, we cannot solely define poverty as a lack of material items. New Zealand Children's Commissioner's Expert Advisory Group proposes what defines child poverty and explains the true realities of it in Aotearoa:

*“Children living in poverty are those who experience deprivation of the material resources and income that is required for them to develop and thrive, leaving such children unable to enjoy their rights, achieve their full potential and participate as equal members of New Zealand society. (EAG, 2012, p. 2)<sup>3</sup>”*

This definition outlines that both material resources and income are key attributes of child poverty. Material hardship is a concept where a person or family has inadequate consumption items that are deemed minimally necessary for human functioning, because they cannot afford them. Income refers to disposable income and applies to poverty as for most low income families with dependent children, the current level of income is a clear indicator of the level of resources they can use for current expenditure. This definition also identifies the socioeconomic rights of children and affirms that children should be given the opportunity to achieve their full potential and participate as equal members of New Zealand Society. According to the United Nations Convention on the Rights of the Child (UNCROC)<sup>4</sup>, children's rights include social security and a standard of living adequate for a child's mental, physical, moral, spiritual and social development. Equally, children should be able to maximise their opportunities for their future well-being, as well as for the economic and social well-being of society, and to enjoy an equitable standard of living that provides them with a sense of belonging in the community.

<sup>2</sup> (2016, January 15). Ross Henderson: Defining poverty is not the point | Stuff.co.nz. Retrieved November 5, 2020, from <https://www.stuff.co.nz/taranaki-daily-news/opinion/75929800/ross-henderson-defining-poverty-is-not-the-point>

<sup>3</sup> (n.d.). Measuring Child Poverty in New Zealand - Office of the...Retrieved November 5, 2020, from <https://www.occ.org.nz/assets/Uploads/EAG/Working-papers/Statistics-NZ-Measuring-Child-Poverty-final.pdf>

<sup>4</sup> (2020, August 19). UN Convention on the Rights of the Child - Ministry of Justice. Retrieved November 5, 2020, from <https://www.justice.govt.nz/justice-sector-policy/constitutional-issues-and-human-rights/human-rights/international-human-rights/crc/>

## **Does Poverty Exist in Aotearoa New Zealand?**

With an abundance of mixed messages from politicians and government policies, to charities against poverty, it is a fair question to ask ourselves as Kiwi's, does poverty exist at all in New Zealand? In Aotearoa, there are many 'urban myths' that are constantly recycled about low socioeconomic class and those who are poor, however, poverty is in fact, strongly present and very much in the midst of prosperity in NZ, whether we define or measure it following a certain income threshold or social disadvantage.

As it appears, many New Zealand citizens still cling to the idea that we are an egalitarian, classless society, even though, the reality is, we are incredibly stratified. The gap between the rich and poor is wider than we like to admit and it is possible - depending on where we live and work - to avoid seeing poor families. Living in central Auckland for example, it is unlikely to witness the true realities of deprivation that many New Zealanders face. Travel into the urban slums of New Zealand however, the conditions of poverty are revealed. Here, houses can be small, damp and moldy and often hold eight or so people, young children can walk the streets mid-winter with no shoes and gummy eyes, and looming over polluted streams and rubbish strewn parks can be a number of liquor stores and brewery's<sup>5</sup>. Much of New Zealand doesn't understand this divide, nevertheless, how fortunate they are to have spun a luckier life than those stuck in the crisis of poverty.

What is standing in the ultimate way of New Zealand's clearer understanding of the nature, extent and causes of poverty, and the solutions to combat it, is ultimately an underwhelming public discourse. In New Zealand, our knowledge of poverty and the impacts of low socioeconomic class are profoundly shaped by what we read in newsletters, see on television and hear echoing in parliamentary chambers. Some of us grieve the injustice of hearing that one in four NZ children are suffering poverty<sup>6</sup>, while others contest that poverty exists at all. Some anguish that families are living in cold, damp and crowded housing, and others are enraged at reports of beneficiaries 'abusing' the system. Nevertheless, these perspectives cause a commotion of challenges and are all riddled with a conjunction of distortions and misrepresentations that often obscure as opposed to illuminate the complex reality of poverty in New Zealand today. Yes, New Zealand may not mirror the vastness and in-your-face reality of poverty overseas, however it is not immune to the issues of poverty that plague such countries and it is important to understand, define, measure and act on poverty, particularly in a developed country like NZ, where it appears to be proving difficult to solve.

## **The causes of Child Poverty**

Child poverty is in all ways dynamic and multidimensional, and as a result, the causes are widespread. While some children experience a brief period of poverty, others experience it repetitively, and some live and breath it for years. Different life circumstances and trigger events lead families into and out of poverty, and with that, comes multiple challenges with negative outcomes. This means in analysing the nature and causes of poverty within New Zealand, it is also important to consider the factors in association to and that arise due to poverty.

The significant factors that contribute to child poverty include but are not limited to: low household incomes, a low skill level and education or limited expertise, labour market conditions, social and health issues, housing costs, government policies and spending priorities.

Low household income in New Zealand, is caused by low pay, insecure employment and even unemployment. This is because low socio individuals frequently have low educational attainment and limited job experience and are restricted by a mismatch between skills and the labour market, as well as the general performance of the domestic and global economy. The labour market is also demanding and can exclude low-socioeconomic workers by discrimination through gender, race, ethnicity or religion, and disregard family-friendly policies, such as leave to take care of a sick child. In addition, for parents to be supported to work, they also require before and after school care for children, further preventing low socio individuals from earning a higher income and being able to lift themselves

<sup>5</sup> "New Zealand's most shameful secret: 'We have normalized...'" 15 Aug. 2016, <https://www.theguardian.com/world/2016/aug/16/new-zealands-most-shameful-secret-we-have-normalised-child-poverty>. Accessed 10 Nov. 2020.

<sup>6</sup> (n.d.). New Zealand's dismal record on child poverty and the... Retrieved November

5, 2020, from <https://www.wgtn.ac.nz/news/2019/05/new-zealands-dismal-record-on-child-poverty-and-the-governments-challenge-to-turn-it-around>



out of poverty.<sup>7</sup>

Lower educational achievement also contributes to child poverty<sup>8</sup> because it is one of the sole root causes of material hardship and lack of income. Education and poverty are directly linked whereby if an individual doesn't have skills or knowledge, they can't apply themselves to work, and earn a living. Likewise, if individuals have increased access to education, they are able to work to gain a higher income, and eventually equalize communities and improve the overall health and longevity of a society. This means education is a major cause and route out of poverty, however in present day New Zealand, there is a strong pattern of poor educational attainment by children from lower socioeconomic backgrounds<sup>9</sup>. This is seen through lower participation rates in early childhood education, lower levels of skills assessed in early childhood education and lower rates of achievement in both compulsory and tertiary education. This causes poverty because it follows 'the cycle of poverty' which will be discussed later within this report.<sup>10</sup>

Social and health issues can also lead to children living in poverty<sup>11</sup>. These issues can include sole parenting from parental separation, being born from a teen parent, families with debt or a problem with gambling, families with a member of illness such as a mental or physical chronic problem or disability, family violence, drug and alcohol abuse, having a parent in prison, as well as issues faced by refugees or migrant families. Another social issue can include the high cost of housing in New Zealand. Most low income families in New Zealand are unable to afford their own home and as a result rely on rental housing. Market rents however, especially in large cities, can be very costly in proportion to a household's income, and in turn lead to overcrowded housing. This can be seen in statistics from June 2019 where close to 31 percent of households within New Zealand spent more than 30 percent of their income on housing costs.<sup>12</sup> In addition to high accommodation costs leading to overcrowded homes, housing in New Zealand tends to be of lower quality compared to that of relative countries, posing many health issues on children within poverty.

How families decide to spend their money also influences their state of poverty and as a result, hinders children's wellbeing. Poverty can take a massive toll on a parent's mental health and inhibit their ability to manage their emotional stress. As a result, parents in poverty-stricken positions can start to rely on alcohol, drugs, or gambling as a coping mechanism, and form an addiction. This in turn, creates an additional burden on poor people, as they have a higher pressure of costs on their income.

Finally, government policies and spending priorities can significantly affect child poverty as it impacts household incomes, particularly for families dependent on benefit payments. The government can positively or negatively contribute to the access and value of benefit payments and tax incentives for working families as well as child support.<sup>13</sup>

### **The Consequences of Child Poverty**

Situations of deprivation and social and economic insecurity ultimately have a serious impact on the mental health and general well-being of children within New Zealand. It is important to note however, that the consequences I do discuss are an outline of the effects of poverty on children's wellbeing, and are not limited to just them.

Poor quality rental housing including situations of overcrowding, and cold, damp and mouldy buildings is one of the aspects of poverty recognised to negatively impact the well-being of children. This is because it can impact health,

<sup>7</sup> <https://www.health.govt.nz/system/7> (n.d.). Solutions to in New Zealand - Scoop. Retrieved November 5, 2020, from [https://img.scoop.co.nz/media/pdfs/1212/Child\\_Poverty\\_Report\\_Web.pdf](https://img.scoop.co.nz/media/pdfs/1212/Child_Poverty_Report_Web.pdf)

<sup>8</sup> "The impact of poverty on educational outcomes ... - NCBI - NIH." <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2528798/> . Accessed 10 Nov. 2020.

<sup>9</sup> (December 2012) The Children's Commissioners Expert Advisory Group : Solutions to Child Poverty in New Zealand: Evidence for Action [https://img.scoop.co.nz/media/pdfs/1212/Child\\_Poverty\\_Report\\_Web.pdf](https://img.scoop.co.nz/media/pdfs/1212/Child_Poverty_Report_Web.pdf)

<sup>10</sup> (n.d.). Solutions to in New Zealand - Scoop. Retrieved November 5, 2020, from [https://img.scoop.co.nz/media/pdfs/1212/Child\\_Poverty\\_Report\\_Web.pdf](https://img.scoop.co.nz/media/pdfs/1212/Child_Poverty_Report_Web.pdf)

<sup>11</sup> "The Social, Cultural and Economic Determinants of Health in " [files/documents/publications/det-health.pdf](https://img.scoop.co.nz/media/pdfs/1212/Child_Poverty_Report_Web.pdf). Accessed 10 Nov. 2020.

<sup>12</sup> (2020, February 17). Household income and housing-cost statistics: Year ... - StatsNZ. Retrieved November 5, 2020, from <https://www.stats.govt.nz/information-releases/household-income-and-housing-cost-statistics-year-ended-june-2019>

<sup>13</sup> (n.d.). Solutions to in New Zealand - Scoop. Retrieved November 5, 2020, from [https://img.scoop.co.nz/media/pdfs/1212/Child\\_Poverty\\_Report\\_Web.pdf](https://img.scoop.co.nz/media/pdfs/1212/Child_Poverty_Report_Web.pdf)

educational achievement, emotional well-being, ability to take up work and overall life chances.<sup>14</sup> Firstly, overcrowded housing can make children more vulnerable to infectious organisms, disturb children's sleep and mean there is a lack of quiet space for children to successfully do homework. Secondly, cold and damp housing, with little heating can directly weaken the lungs and immune system and worsen allergic reactions. Thirdly, insecure housing and shifting rental houses frequently can also impact stress levels and lead to poor health outcomes for many aspects of children's mental and physical health. These three factors massively affect the emotional wellbeing of children and pose significant worry as they suffer from inadequate space and privacy for close interpersonal relationships, too many people living in a small space, being forced to live with unfamiliar people they don't feel safe or comfortable with, insufficient washing and cooking facilities, chronic ill health and inadequate toilet and bathroom space. On top of this, children may suffer from little motivation to attend school because their home conditions make studying and concentration difficult, and potential movement between temporary accommodation make them nervous about entering new schools and meeting new people. This provides an increased chance of children developing mental health and behavioural problems, as well as being more likely to suffer from bullying, unhappiness and stigmatisation. This is supported by the NZ Child Poverty Action Group who found in a study that children within low socioeconomic families were frightened, insecure or worried about themselves, their family and their future as a result of homelessness. In the future, bad housing can adversely affect children's work and life chances because they may have developed permanent physical damage or lifelong mental health problems from chronic stress, which make it difficult for them to take up or sustain paid work, particularly if they have inadequate educational experiences and qualifications due to poverty as well.

Food insecurity as a result of poverty also has multiple adverse effects on children's mental and physical well-being as it imposes problems with growth, anaemia, poor academic performance and psychological problems<sup>15</sup>. This is supported by a study on low income families in the United States who discovered that children experiencing frequent hunger were more likely to have emotional, behavioural and academic problems compared to those who did not suffer from food insecurity. This suggests that inadequate nutrition may also play a significant role in the development of children and their health outcomes in the future. According to "Nutrition and Health in Children and the Role of the Healthcare Worker", malnutrition can be detrimental to the development of their cognitive abilities and psychosocial skills as undernutrition causes children to have less energy and interest for learning, which negatively influences academic performance and social development. Under-nutrition can also affect physical growth and maturation, thus affecting the growth rate, body weight and ultimate height of children<sup>16</sup>.

Low socio-economic parents can impact children's wellbeing, as being under the stress of the demands of poverty can prevent parents from being able to provide the emotional support children require. A report on Child Poverty and Mental Health by Child Poverty Action Group supported this statement and said:

*"In a review of the effects of child poverty on mental health in the US, Bringewatt and Gersho (2010) conclude that poverty can limit parents' ability to provide the necessary emotional support children require, with implications for the development of attachment, cognitive and behavioural problems. In the same review notes, parents in poverty also have a higher rate of depression and substance abuse than parents not affected by poverty, which can also impact the mental health of children."*<sup>17</sup>

From this we see that poverty comes with economic pressures that can cause emotional distress on parents and in turn disrupt the developmental outcomes for youth. This is because stress as a cause of poverty can cause poor mental health and relationship conflict that influences parenting behaviours and leads to low nurturing and uninvolved parenting. Many researches have claimed that stressful circumstances affect the cognitive functioning of adults and their decision-making abilities, and as poverty places greater demands on adult cognitive functions, children can be adversely affected. This consequence is important because it contributes to our understanding of the effects that living in economically difficult times have on children and later children development. When economic pressure is high, parents are at increased risk of emotional stress and developing depression or anxiety, leading to disrupted

<sup>14</sup> (2015, September 23). 23/09/2015 1 How is housing related to child poverty .... Retrieved November 5, 2020, from <https://www.cpag.org.nz/assets/HousingCampaign/150923HousingCampaignFAQ.pdf>

<sup>15</sup> (2017, May 5). Child poverty and mental health - Child Poverty Action Group. Retrieved November 5, 2020, from [https://www.cpag.org.nz/assets/170516%20CPAGChildPovertyandMentalHealthreport-CS6\\_WEB.pdf](https://www.cpag.org.nz/assets/170516%20CPAGChildPovertyandMentalHealthreport-CS6_WEB.pdf)

<sup>16</sup> (03 November 2016) James Graham : Nutrition and Health in Children and the role of the healthcare worker <https://www.ausmed.co.nz/cpd/articles/nutrition-for-children>

<sup>17</sup> 2017, May 5). Child poverty and mental health - Child Poverty Action Group. Retrieved November 5, 2020, from [https://www.cpag.org.nz/assets/170516%20CPAGChildPovertyandMentalHealthreport-CS6\\_WEB.pdf](https://www.cpag.org.nz/assets/170516%20CPAGChildPovertyandMentalHealthreport-CS6_WEB.pdf)



family relationships. This in turn can result in an increase in inconsistent or harsh parenting. These harsh parenting practices often cause children to internalize or externalize behaviours, thereby threatening the wellbeing of children.

Lastly, limited access to health services to improve mental health is recognised to negatively impact children's wellbeing. Although it has a tax funded health system, there are barriers to access mental health services for children. This is because there is often a long wait list for funded appointments for children to be seen, and requires additional costs of parents for transport, childcare and the ability to receive time off work. This makes it incredibly difficult for families experiencing economic hardship to access these services, especially in comparison to families with economic resources, who have access to a wide range of private mental health intervention support, not available to those in poverty.

### **The Cycle Of Poverty**

The ultimate outcome of these consequences is that New Zealand falls into the cycle of poverty. The cycle of poverty is the phenomenon where poor families become impoverished through generations and generations<sup>18</sup>. This means when a child in New Zealand is born into a poor family, this family has limited resources to create opportunities to advance themselves, and leaves the child stuck in the poverty trap. This is the biggest impact of poverty on children in New Zealand, as children are dependent on their guardians for their own survival and future, meaning if they are born into poverty, they are unlikely to be able to pull themselves out, because of their young age and lack of resources and education, malnutrition, inadequate health care and poor housing - all consequences that were determined earlier in this report. The intergenerational aspect of child poverty also influences children's ability to overcome low socioeconomic circumstances because they know no difference in the way of life and hold lower aspirations because their parents and grandparents have not necessarily achieved high levels of education, as example.

### **Perspectives on the causes and consequences of child poverty**

Overall this array of causes and consequences to poverty can complicate our understanding and search for solutions to child poverty, as it generates much debate. It is understandable for our political beliefs, experiences, values, upbringing and worldview to influence our perspective on the causes of child poverty, however it is important that we don't get misled by the urban myths of the issue within New Zealand.

Children are focused in this report as they are the most vulnerable, powerless and innocent. From examining statistics, the future of our nation is at risk and we must understand and acknowledge the inherent right for all children of Aotearoa to be able to participate and grow to their full potential. By focusing on child poverty however, New Zealand also creates a climate where children are separated from their families, where society can see parents in poverty as guilty and deem them 'bad' for abandoning their parental responsibilities. What is seriously at the heart and sole of poor outcomes for children in poverty is a lack of resources in a family and an environment created around stress, and this stigma is exactly what is stopping more of New Zealand tackling this issue at stake.

We may provide free breakfast to schools for children, but Weetbix is certainly not going to fix their problems in the vulnerable positions they are stuck in. We may discuss and follow through with providing minimum standards for children in housing, however, families are still struggling to find, access or afford decent accommodation for their children. It is evident that we are ignoring the true causes of poverty, and feeding into the stigma within New Zealand that parents are the problem. In reality it is family stress and limited resources that conspire to determine children's wellbeing, showing us that children in poverty do poorly not because of unmotivated, irresponsible parents, but because they live in families under intense pressure who want to do better but independently, financially and possibly even mentally and emotionally, cannot. As a result, this report will analyse the current approach to child wellbeing and poverty in NZ, that being 'The Child and Youth Wellbeing Strategy of 2019' and discuss and determine possible strategies that could solve our poverty crisis for good.

### **The Child and Youth Wellbeing Strategy**

The Child and Youth Wellbeing Strategy is a scheme developed on the 29th of August 2019 that sets out a shared understanding of what's important for child and youth wellbeing, what government is doing and how others can

<sup>18</sup> (08 June, 2020) Alicia Dubay: What is the cycle of poverty? <https://www.worldvision.ca/stories/child-sponsorship/what-is-the-cycle-of-poverty>

help<sup>19</sup>. Based on the philosophy that “we want New Zealand to be a place where all children and young people are loved, confident, happy and healthy, and are empowered to reach their full potential”<sup>20</sup>, the strategy follows a unifying framework that includes six wellbeing outcomes to outline what youth want and need for a good upbringing. To help the strategy achieve these outcomes and visions, there is a current programme of action that consists of 75 actions and 49 supporting actions led by 20 government agencies, setting out policies and initiatives. These actions all in which were supported by roughly \$3.5 billion in funding to improve the child well-being in Budget 2019<sup>21</sup>. The Child and Youth Wellbeing Strategy scheme plans to be a living document and was designed to develop and change in response to new needs and requirements of youth in New Zealand. In respect to the issue of Child Poverty, as one of their three main priorities, the strategy aims to “mitigate the impacts of poverty and socio-economic disadvantage”<sup>22</sup> and focuses on the six interconnected well-being outcomes in order to outline the policies the government needs to implement, to drive government policy in a unified and holistic way, harness public support and community action and increase political and public sector accountability for improving wellbeing that will reduce the issue of child poverty<sup>23</sup> in New Zealand. The six wellbeing outcomes that influences the strategies approach to child poverty are for young people to be “loved, safe and nurtured, have what they need, are happy and healthy, are learning and developing, are accepted, respected, connected and are involved and empowered”<sup>24</sup>. This approach to poverty is pleasing to see as it has meant actions to promote well-being and reduce low socioeconomic disadvantage for children in New Zealand have included implementing funding for children to go to the doctor and attend school, building more state housing, improving learning support and educational outcomes, providing welfare benefits, increasing access to mental health services for children, and investing in family violence prevention activities etc.

### **The Child and Youth Wellbeing Strategy: Limitation**

One key limitation of this proposed document however is that initiatives to prevent, reduce and respond to Child poverty in New Zealand may not take into account the underlying causes that may underpin the issue of child poverty. If we look beyond the obvious issues of poverty, we can identify that youths' wellbeing is heavily rooted in the attitudes and values, health and competence of parents. Although the child and youth strategy could argue that they indirectly improve parents health and ability to raise children by providing welfare benefits, thereby improving the upbringing and well-being of youth, the strategy fails to take into consideration the drastic impact parenting roles, practices and styles have on the happiness of children. According to “the effects of poverty on parenting young children” by Ann P. Kaiser & Elizabeth M. Delany there is a strong association between poverty and poor cognitive, social and academic outcomes for children as a result of changes in parenting styles and practices. This is supported by ‘the family stress model’ which suggests poverty contributes to emotional distress and family dysfunction, that in turn links to less effective parenting which involves insufficient surveillance, a lack of control over children's behaviour, lack of warmth and support, inconsistency and displays of aggression or hostility by parents or older siblings<sup>25</sup>. This therefore, disrupts a child's foundation for support and negative influences there mental health. From this little information we can easily justify that low socioeconomic disadvantage on parenting has a significant impact on the wellbeing of children, raising the question of whether the youth and wellbeing strategy truly targets the factors that underpin child poverty and poor wellbeing outcomes in New Zealand?

There are two key theories that highlight the impact of low socio parents on the health of youth and challenge the Child and Youth Wellbeing Strategy's actions in reducing poverty and wellbeing of children within New Zealand

### **The Stress Theory**

The stress model suggests that low-income parents are less likely to be nurturant or to supervise their children

<sup>19</sup> (Wednesday 01 April) DPMC- NZ: Child and Youth Wellbeing Strategy <https://dPMC.govt.nz/our-programmes/child-and-youth-wellbeing-strategy>

<sup>20</sup> Ibid.

<sup>21</sup> Ibid.

<sup>22</sup> (n.d.) Ministry of Justice: New Zealand's Child and Youth Wellbeing Strategy <https://www.justice.govt.nz/about/news-and-media/news/new-zealands-child-and-youth-wellbeing-strategy/>

<sup>23</sup> (Thursday 29 August 2019) Government Launches Child and Youth Wellbeing Strategy <https://nzfvc.org.nz/news/government-launches-child-and-youth-wellbeing-strategy>

<sup>24</sup> (18 August 2019) Strategy on a Page: Child and Youth Wellbeing Strategy 2019 - A3 <https://childyouthwellbeing.govt.nz/sites/default/files/2019-08/strategy-on-a-page-child-youth-wellbeing-Sept-2019.pdf>

<sup>25</sup> (n.d.) Zahid Shabad Ahmed : Poverty, Family stress and Parenting <https://www.humiliationstudies.org/documents/AhmedPovertyFamilyStressParenting.pdf>

adequately, and more likely to use inconsistent, erratic and harsh discipline (Elder et al., 1985; Larzelere and Patterson, 1990; Harris and Marmer, 1996; Ghate et al., forthcoming)<sup>26</sup>. This adversely affects the wellbeing of children because parents who are stressed are less likely to be able to provide optimal home circumstances and are more likely to use harsh methods of discipline. While the Child and Youth Wellbeing Strategy would proclaim that their action in providing a welfare benefit would minimise parental stress and therefore the negative outcomes of poverty on child wellbeing, recent research has shown the positive impact of income is small, and a much larger role is played in parents own health and the events in their early life. This is supported by an experiment in the United States that studied parents who were middle class farmers caught in a severe economic downturn in the 1980's. The study found that the behaviour and wellbeing of children was affected, but that was mainly due to disruptions in parenting as opposed to the direct effects of economic hardship. The results showed parents who fell into poverty suffered from a conjunction of stress and depression, and their material relationship deteriorated. As a result, their parenting practices were disrupted and immediately caused the deterioration of their children's wellbeing. This suggests that disruption to parenting is the main mechanism affecting children's wellbeing, and that although an increase in income could prove to eliminate stress, the implications of relationship and mental health issues, as well as the development of potential coping mechanisms (like addictions to drugs or alcohol) could continue to prevail out of poverty and adversely affect children's wellbeing.

Evaluations in welfare benefits have also found limited evidence on the positive impacts of children with results suggesting that welfare to work programmes that did not provide extra resources such as parental support, mental health services for adults or childcare, had little educational and health outcomes for children<sup>27</sup>. This could be because parents' attitudes and values about education, how they budget and spend their money, or care and support children remains unchanged. According to NCBI "Income Level and Drug Related Harm among People Who Use Injection Drugs" 2013, individuals of low income tend to consume unhealthy goods like illicit drugs or alcohol and form poor health and behaviours in order to cope with their lifestyle positions<sup>28</sup>. They also have limited education, employable skills and attainment levels. This suggests that with higher income alone, low socioeconomic parents are unlikely to manipulate their welfare benefit to their advantage and use it to help support their children and stabilize themselves. This prevents the wellbeing of children to be improved as parents will still have poor mental health, despite an increase in income or opportunities, and may use the money to fund any addictions or habits they have developed to cope with poverty, instead of putting it towards material resources e.g. clothing or appointments for themselves or children. This means children's wellbeing is still negatively affected, as with actions such as welfare benefits or higher job opportunities that the Youth and Wellbeing Strategy provides, parents still haven't received funded mental health services or parenting programmes to help support themselves in providing their children with the best future possible. In addition, long term educational attainment of children has even been negatively associated with parents full time employment (Ermisch and Francesconi, 2000), proving that in addition to welfare benefits and higher job opportunities, parents need adequate support services to maintain good wellbeing and find a lifestyle and parenting formality that helps left them out of poverty and care for their children.

### **The Culture Theory**

This theory suggests the culture of parents and their attitudes and values persists poverty, and prevents children from emerging from it. Materially deprived parents often have "low expectations for children, harsh or inconsistent punishment, an emphasis on conformity rather than individual attainment and the use of physical rather than verbal methods of discipline". This often creates barriers for children to emerge from poverty as they receive little support or encouragement to do well or achieve from their parents, which is thus transmitted through generations. This means reducing parental stress by raising income or improving the environments of poor parents e.g. state housing through the Child and Youth Wellbeing strategy, will do little to produce positive outcomes for children. In reality, one of the aims of the Child and Youth Wellbeing strategy should be instead, is to break the culture of poverty and change the attitudes and parenting styles of materially deprived children, however the principles and wellbeing outcomes it follows fails to show much focus on the health and welfare of parents.

Children in poverty are not only less likely to be poorer in resources, but also to have fewer opportunities for success.

<sup>26</sup>(2007) Ilan Katz, Judy Corlyon, Vincent La Placa and Sarah Hunter: Joseph Rowntree Foundation: The relationship between parenting and poverty <https://www.jrf.org.uk/sites/default/files/jrf/migrated/files/parenting-poverty.pdf>

<sup>27</sup> (2007) Ilan Katz, Judy Corlyon, Vincent La Placa and Sarah Hunter: Joseph Rowntree Foundation: The relationship between parenting and poverty <https://www.jrf.org.uk/sites/default/files/jrf/migrated/files/parenting-poverty.pdf>

<sup>28</sup> (2014 May 25) Cathy Long, Kora De Beck: Income level and Drug Related harm among people who use drug injection drugs in a Canadian setting <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4040344/>

This is because for example, low socioeconomic families often have lower expectations of work and education embedded in their culture. In relation to the Youth and Wellbeing Strategy, this suggests that their actions such as increasing funded education for children will be less successful without actions for parental change, because children will be less motivated at school due to the attitudes and values they have developed from their parents. This is supported by Shain Yacub in a 2002 study<sup>29</sup> who found in analysed data on persistence of poverty in several countries that children's class, education and health correlate strongly with that of parents, siblings and even wider family. Furthermore, this is supported by 'Child behaviour and parental attitudes' in 2012 by Michael Zurich from the University of Southern Illinois that stated "parental attitudes constitute the main social influence a child experiences during his earliest years...these attitudes with the frustrations they impose, the techniques of control, and the provocative they offer serve as originaive forces on the child's behaviour, especially during the formative years". The influence low socio parent's attitudes have on their children can worsen their children's wellbeing as another facet of the culture of poverty suggests that most parents appear to replicate the same parenting style they developed as children (Chen and Kaplan, 2001)<sup>30</sup>. This feeds into 'the cycle of poverty' discussed earlier in this report, as how individuals think, behave and ultimately use or manipulate the opportunities they are given will determine their position in poverty or not.

These two theories question how effective the actions this strategy is undertaking to improve child poverty and wellbeing and whether it targets all people facing poverty within New Zealand. The Ministry of Health NZ outlines that in Aotearoa, people have differences in health that are not only avoidable but unfair and unjust, however, acknowledges that equity is an essential foundation in order to acquire health and wellness throughout the country. The ministry defines equity as "recognising different people with different levels of advantage require different approaches and resources to get equitable health outcomes"<sup>31</sup>. Therefore, we could argue that a one size fits all approach for reducing child poverty and poor wellbeing outcomes may require more in depth research, as how could this approach achieve equitable health outcomes? Even more importantly, how would these actions to prevent and reduce poverty actually address the underlying cause of the problem? The true reality is, whether or not New Zealand funds schooling, welfare benefits or mental health services for children, parent's attitudes and values, parenting capabilities, personal characteristics, and access to support services for themselves will all challenge and influence children's ability to have good wellbeing. While one family may be motivated to learn and find funded education useful, another may not, and while one family may use the welfare benefit to help improve their families health, another may use it on drinking habits or force their children out of school, as it is not enough income to live off. Finding equity in strategies is ultimately a challenge and as you should be beginning to realise, poverty is very personal, and makes a strategy very hard to be successful, if it does not acquire to different individuals' needs.

### **An equitable solution**

Health promotion requires a comprehensive social and political process that strengthens the skills and capabilities of individuals and directs action towards changing social, political, environmental, and economic conditions that influences the public and their health and wellbeing. The aim of this process is to enable people to increase control over their determinants of health and thereby improve their overall health and happiness. This means by following the collective action model of health promotion, that considers the interrelationship between the individual and the environment and encompasses ideas of community empowerment<sup>32</sup>, strategies can enforce people individually and collectively to acquire the knowledge, understanding, skills and commitment to improve the structures that influence poverty today.

As a result, I would propose a three way partnership between individuals, people and society in order to create a 'health for all' approach. This is a suitable strategy to the issue of child poverty in New Zealand because while actions must meet the needs of individuals living in poverty by improving availability and access to supports and essential needs such as food and shelter. Action is also required to address the underlying causes of poverty and disrupt the intergenerational legacies of it; by supporting both children and families, addressing mental wellness and addictions,

<sup>29</sup> (2002 November 02) Shain Yacub: 'Poor Children Grow into poor adults' <https://onlinelibrary.wiley.com/doi/abs/10.1002/jid.951>

<sup>30</sup> (2007) Ilan Katz, Judy Corlyon, Vincent La Placa and Sarah Hunter: Joseph Rowntree Foundation: The relationship between parenting and poverty <https://www.jrf.org.uk/sites/default/files/jrf/migrated/files/parenting-poverty.pdf>

<sup>31</sup> (n.d.) John Whaanga, Deputy Director General Maori Health : Achieving Equity <https://www.health.govt.nz/about-ministry/what-w><sup>32</sup> (n.d.)

<sup>32</sup> Ministry of Education: Models of Health Promotion <https://health.tki.org.nz/Key-collections/Curriculum-in-action/Making-Meaning/Socio-ecological-perspectiv e/Defining-health-promotion/Models-of-health-promotion>

investing in education and social development and creating opportunities for individuals to reach their full potential and contribute positively to the community. Many of these actions cannot and have shown to be unable to be the full responsibility of NZ government alone, and therefore it is critical for all of the community to recognise our central role in the reduction of poverty, and work together to find a shared understanding of both the deep and broad actions we need to address in order to eliminate it.

The goal to reduce and eliminate poverty is a bold vision, however it is one that I believe can only be achieved by the coordinated and collaborative effort of individuals, groups and society. This is because by openly working together, our processes and goals to poverty reduction can become more aligned, abolishing any stigmas and ultimately leading New Zealand to a higher success rate of achieving lower poverty rates and a higher wellbeing and health status of children within the country. Implementing this strategy and strengthening coordination for improving child poverty in New Zealand will require working with those vulnerable to analyse the issues of poverty according to the determinants of health and engaging with a wide range of individuals and groups, both government and non-government lead, to determine the needs, actions, policies and support structures to address the issue and provide support for identified groups. Although there are already government programmes and community based initiatives in place to support children in poverty, like demonstrated by the Child and Youth Well-being Strategy, there is no coordination of these activities that effectively produce greater outcomes for wellbeing. This shows we need a broad group of solutions following the same framework to address the issue of poverty, including actions that in the short term will support children in poverty today and in the long term, substantially reduce child poverty in the future. Poverty is ultimately multifaceted and as a result, solutions to alleviate it must be multifaceted too.

These solutions or aims of action could include:

- Supporting parents to navigate family life and providing stability despite stress related factors by increasing access and participation to prenatal education programmes, healthy family programs and rehabilitation services, providing collaboration at all levels of education and improving health and social service delivery models to make a positive difference to early childhood experiences.
- Improving access to mental health services through continuing to provide funded child and youth counsellors, but by increasing the amount of funded government and non-government counsellors accessible to both children and parents and evaluating the implementation of them and adapt as needed.
- Providing support and training to organizations within the community such as programs for children and youth in order to improve mental and physical health and resiliency, and develop lifelong healthy choice practices.
- Supporting New Zealand schools to take a whole school approach to student wellbeing that prepares students for a world where inequalities and injustices are present. This can be done by working with child wellbeing and poverty programs.
- Improving programs and services to enable parents to have the knowledge, skills and attitudes and values for employment success by improving access to education programs that meets the needs of an array of learners.
- Making improvements to both adult and post-secondary education and skills training programs and employment gaps by increasing the labour markets participation by removing barriers to employment.
- Government agencies working with businesses, the training sector and communities to form support for parents in the workforce with limited skills by providing pathways to education and training and thereby job progression opportunities.
- Continuing to provide state housing, however, developing a program that removes individuals and families from homelessness.
- Government to address the undersupply of state housing
- Assessments of the quality of rental housing and the implementation of a warrant of fitness for rental housing at a local community level

By improving the collaboration and coordination of services and policies including ones I have discussed, children, adults and families will receive a multi sectoral array of services according to their needs. This means however, that these suggested government and non-government programs will need to collaborate and work together to provide support services for both youth and parents, and strengthen child and family services in New Zealand with united parenting programmes, mental health services and addiction treatments, housing, income assistance etc. An example of a three way partnership strategy in New Zealand that has been successful, is the Tūturu strategy, which collaborates students with schools and service providers in preparing students with a world of drugs and alcohol. The approach aims to help students engage in education and improve their wellbeing, and has been involved with 11 schools, five



local providers, more than 100 health and education expert reviewers, four crown agencies and used independent evaluation by the New Zealand Council for Education Research to create advice that effectively supports student wellbeing through a conjunction of networks of experienced professionals. This collaborative approach to drug and alcohol use and student wellbeing has proven to be constructive as it has helped schools within New Zealand be able to take action using Tūturu resources and as a result increased achievement, attendance and engagement in extracurricular activities. This suggests that by aligning government and non-government organisations efforts, sharing best practices, adopting data driven processes and increasing culturally specific and responsive practices, New Zealand can ensure that every community within the country has access to the resources they need to thrive and contribute to social change.

### **Strategy Effectuality and Limitation**

This approach to poverty is ultimately effective because it undertakes the principles of the collective action model and is thereby able to positively affect the health inequalities that persist poverty within New Zealand today. According to the World Health Organisation, “inequalities arise from, and are maintained by, the unequal distribution of the determinants of health, such as income, employment, education, housing, health care and social support. It is the privileging of some people and groups over others – by factors such as ethnicity, class, gender, geography or ‘ableism’ – that generates social inequalities.” Collaboration as a part of my strategy however is an essential part of making equity real, and enforces people individually and collectively to acquire the same understanding, knowledge, skills and commitment to improve the societal structures that shape poverty and the detrimental impacts it has on children’s and families health status. This means through my suggested strategy, schools, government agencies and services, non-government services, foundations and charities are all enabled to work towards the same equitable outcome and through this provide public services for fair treatment, target action for particular disadvantaged groups, provide social protection and challenge embedded power imbalances as a result.

One potential limitation of my strategy that could influence its effectiveness however is that community governments, non-government organisations, community service providers, and the private sector don’t all follow the same framework to reduce poverty in New Zealand. In order to overcome this limitation and ensure my intervention does reduce health inequalities I could apply my strategy to a live document that outlines collaborative, shared knowledge about poverty reduction and prevention, sets shared priorities and is aligned with the actions or ‘dreams’ I discussed earlier within this report.

This way, we could ensure there is consistent and open communication about the reduction of poverty within New Zealand and identify and track activities occurring in the community. The Tūturu strategy is an example that is also committed to rigorously overseeing and evaluating the progress of their initiative and supports this concept to ensure my intervention reduces inequalities and the hardships of child poverty in NZ. The strategy has a governance group to oversee Tūturu that includes representatives from the police, Health Promotion Agency and Ministries of health and education, as well as the New Zealand Council for Educational Research to continually evaluate the development of it<sup>33</sup>. To ensure the continued collaboration between governments, non-government organisations and the private sector by using a live document, we could then also have annual updates that shows the statistical progress of income, wages, unemployment, housing, food insecurity and health indicators in New Zealand. Another measure I could suggest to control this limitation and improve the reliability of my strategy is by institutionalizing an official measure or definition of child poverty within New Zealand. I believe that a framework is necessary to drive a significant reduction in child poverty and that a legislation should be enacted to establish a three way partnership strategy. This is because it ensures we access our progress to child poverty as a country due to ensuring the regular and accurate measurement of poverty, potential government targets to reduce child poverty, child poverty indicators and annual reporting to parliament to determine how government and non-government groups are collectively reducing child poverty and/or improving child welfare. This is supported by the United Nations Children Fund who suggested that if you don’t measure, monitor or report on goals, you don’t make significant progress : ‘It is monitoring that makes possible evidence-based policy, political accountability, informed advocacy and the cost-effective use of limited public resources. The availability of timely data is therefore in itself an indicator of whether the commitment to protecting children is being taken seriously or not’<sup>34</sup>

<sup>33</sup> (n.d.). Tūturu | Tūturu | Helping NZ schools improve wellbeing. Retrieved November 5, 2020, from <https://www.tuturu.org.nz/>

<sup>34</sup> (n.d.). Solutions to in New Zealand - Scoop. Retrieved November 5, 2020, from [https://img.scoop.co.nz/media/pdfs/1212/Child\\_Poverty\\_Report\\_Web.pdf](https://img.scoop.co.nz/media/pdfs/1212/Child_Poverty_Report_Web.pdf)

## **Conclusion**

To conclude, New Zealand can be the best place for children; where they can enjoy their rights, achieve their full potential and thrive as equal members of society. However, it is in our power to believe in justice and compassion, address the problem of child poverty and moreover the costs on wellbeing that it imposes.

Children do not choose to be poor, nor do they select their parents or family members. They are often born in a systematic cycle of poverty and as minors lack a democratic voice and the choices available to adults. Thus we as a society must take responsibility for protecting the powerless and vulnerable. Children deserve our collective action to provide them with a safe, loving upbringing and a future that is bright and full of opportunity. Without it, not only children's rights and wellbeing are violated, but New Zealand's future is threatened as it drives a gap between those who grow up in hardship and those who grow up with plenty, forms social exclusion and forms large social costs, lower productivity growth and poor economic performance<sup>35</sup>.

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<sup>35</sup> (n.d.). child poverty in New Zealand - Office of the Children's Retrieved November 5, 2020, from <https://www.occ.org.nz/assets/Uploads/Reports/Poverty/A-fair-go-for-all-children.pdf>



# New Zealand's greatest battle : Food insecurity

*Bernadette Dykes, Napier Girls' High School*

All through my life, I have been fortunate enough to live in a stable family with a stable income, and with a consistently stably stocked pantry of food. I have never had to experience the fear of possibly not having breakfast, lunch or dinner from day to day, month to month, and year to year. Due to only attending schools that are above decile 6, many of my friends were in the same situation as me and were not aware or concerned about this feeling either. Until studying Home Economics this year, I was ignorant of how prevalent this fear is and how commonly it is actually felt among so many children in New Zealand.

This report will investigate an important aspect from the 'New Zealand Child and Youth Wellbeing Strategy of 2019', a government plan formulated in 2019 to improve the wellbeing of youth in New Zealand.<sup>1</sup> The goal of this study is to have 'children in New Zealand hav[ing] what they need.', and I choose to investigate this aspect of 'need' in relation to youth food insecurity in New Zealand. The general term 'need' covers a spectrum of 'subneeds' for children and adolescents, including the regular access of nutritious food in their homes, with parents that have good standards of material wellbeing, living in stable, warm, dry, housing, and access to a parent or caregiver that is able to provide education for that individual's future. This will ensure children and young people are happy, healthy, learning and developing. All these aspects will be investigated within this report.

This is significant as food insecurity and inadequate nutrition is a large problem in our society. Food insecurity is defined by the New Zealand Ministry of Health as "a limited or uncertain availability of nutritionally adequate and safe foods or limited ability to acquire personally acceptable foods that meet cultural needs in a socially acceptable way."<sup>2</sup> Good nutrition is essential as explained by the World Health organization: "Nutrition is a critical part of health and development. Better nutrition is related to improved infant, child and maternal health, stronger immune systems, safer pregnancy and childbirth, lower risk of non-communicable diseases (such as diabetes and cardiovascular disease), and longevity."<sup>3</sup> Therefore this report aims to answer the question - what factors contribute to food insecurity and what impact does this have on children's health, development, learning and wellbeing? Hauora (Wellbeing) is a Maori concept that visualises the wellbeing of a person into a house - the Te Whare Tapa Wha model. This house consists of four walls: social, mental & emotional, physical, and spiritual. Without the strength of all the walls, the wellbeing of that person is in jeopardy.<sup>4</sup> By maintaining these four dimensions of hauora, individuals are able to sustain a healthy and well balanced lifestyle. It is crucial to understand that our Hauora (wellbeing) is holistic, affecting more than just the physical, and these aspects are interlinked. The definition of wellbeing by the World Health organisation "is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."<sup>5</sup> - 'Feeling good and functioning well.' The New Zealand Health survey of 2015/16 found that approximately one in five children (which equates to 20%), lived in severely to moderately food-insecure households and within the Child and Youth Wellbeing strategy it was found that 40,000 children report food running out often.<sup>6</sup> But how did this happen?

Food insecurity primarily starts at home. For the first five years of a child's life, they are dependent on their caregiver / parents for their knowledge, learning, and what to consume on a daily basis. The following are social determinant aspects of how food choices are determined: The family's cultural values and beliefs, practices of food preparation and eating, the attitude of eating within an individual and family.<sup>7</sup> For example; the food that is available at home plays a huge role in these choices and is influenced by the household income which the parents receive. The Household economic survey in 2009/10 showed that the average New Zealand household spends \$177.70 on food

<sup>1</sup> <https://childyouthwellbeing.govt.nz/resources/child-and-youth-wellbeing-strategy>

<sup>2</sup> <https://www.health.govt.nz/publication/household-food-insecurity-among-children-new-zealand-health-survey>

<sup>3</sup> <https://www.who.int/health-topics/nutrition>

<sup>4</sup> <https://www.health.govt.nz/our-work/populations/maori-health/maori-health-models/maori-health-models-te-whare-tapa-wha>

<sup>5</sup> <https://www.who.int/about/who-we-are/constitution>

<sup>6</sup> <https://www.health.govt.nz/publication/household-food-insecurity-among-children-new-zealand-health-survey>

<sup>7</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2531152/>

per week.<sup>8</sup> At this time the survey suggested that 20% of New Zealand children were living in poverty. This is the same in June 2019 where it is found that 20.8% of children live in households that have less than 50% of the median equalized disposable household income after housing costs are deducted and approximately 170,000 children have less than 40%.<sup>9</sup> This therefore shows there is a clear lack of income available for nutritionally adequate food for children that live in the poverty line as families need to cover other fixed expenses such as education, clothing and footwear, transportation and health, which are all basic requirements for any child. A study done by the Ministry of Health in 2006, found that a greater proportion of the low income households budget is spent on food, although less money is overall spent on food a week compared to high income households.<sup>10</sup>

The New Zealand Food Cost survey carried out by the University of Otago shows that in Wellington a 'basic' healthy food cost for a family of four was approximately \$246 a week.<sup>11</sup> The Regional Public Health of New Zealand has calculated for a family of four whose parents work a minimum wage job, to afford a 'basic' healthy diet would result in 50% of their budget (after paying rent) being spent on food cost a week (shown in figure 1).<sup>12</sup> Therefore, for most families in this position that are in poverty, this would be an unrealistic budget due to those other fixed expenses in the household having to be covered as well. This puts a large stress on both children and parents mental and emotional wellbeing which creates a physiologically stressful environment in the household. As a result of this, individual behaviours of both generations can become affected which in turn negatively affects the whole family's mood and attitudes. This can lead to children having behavioural problems/issues at school, becoming unmotivated or even developing long-term mental disorders such as depression or anxiety.<sup>13</sup> A study done by the Department of Nutritional sciences at Michigan University showed that across 149 countries food insecurity is heavily associated with poor mental wellbeing, contributes to common mental disorders and broad social implications.<sup>14</sup>

**Figure 1:**

Table 2.2 Food costs of a 'basic' balanced diet in Wellington [16]

Weekly Food costs of a 'basic diet' [16]	Prior to 1/10/10	+ GST from 1/10/10 <sup>1</sup>
Male adults	\$61.00	\$62.35
Female adults	\$58.00	\$59.29
Boy 13 years	\$77.00	\$78.71
Girl 10 years	\$50.00	\$51.11
Total weekly food cost	\$246.00	\$251.46

Table 2.3 Percentage of income required for healthy a diet

Total weekly food cost	\$246.00	\$251.46
Total net income (prior to rent)	\$725.79	
Total net income (after rent)	\$ 489.78	\$507.75
Percentage total net income (prior to rent) to purchase a 'basic' balanced diet	\$33.9 %	
Percentage of total net income (after rent) required to purchase a 'basic' balanced diet	50.2%	49.5%

As low-income families are so sensitive to changing food prices, it creates an economic determinant of health. This contributing factor has resulted in many affected families relying on food that is often ultra-processed, of poor

<sup>8</sup>[http://archive.stats.govt.nz/browse\\_for\\_stats/people\\_and\\_communities/Households/HouseholdExpenditureStatistics\\_HOTPYeJun16/Commentary.aspx](http://archive.stats.govt.nz/browse_for_stats/people_and_communities/Households/HouseholdExpenditureStatistics_HOTPYeJun16/Commentary.aspx)

<sup>9</sup><https://www.stats.govt.nz/information-releases/child-poverty-statistics-year-ended-june-2019>

<sup>10</sup><https://www.msd.govt.nz/documents/about-msd-and-our-work/publications-resources/monitoring/household-income-report/2017/2017-incomes-report-wed-19-july-2017.pdf>

<sup>11</sup><https://ourarchive.otago.ac.nz/bitstream/handle/10523/9819/Food%20Costs%202019.pdf?sequence=1&isAllowed=y>

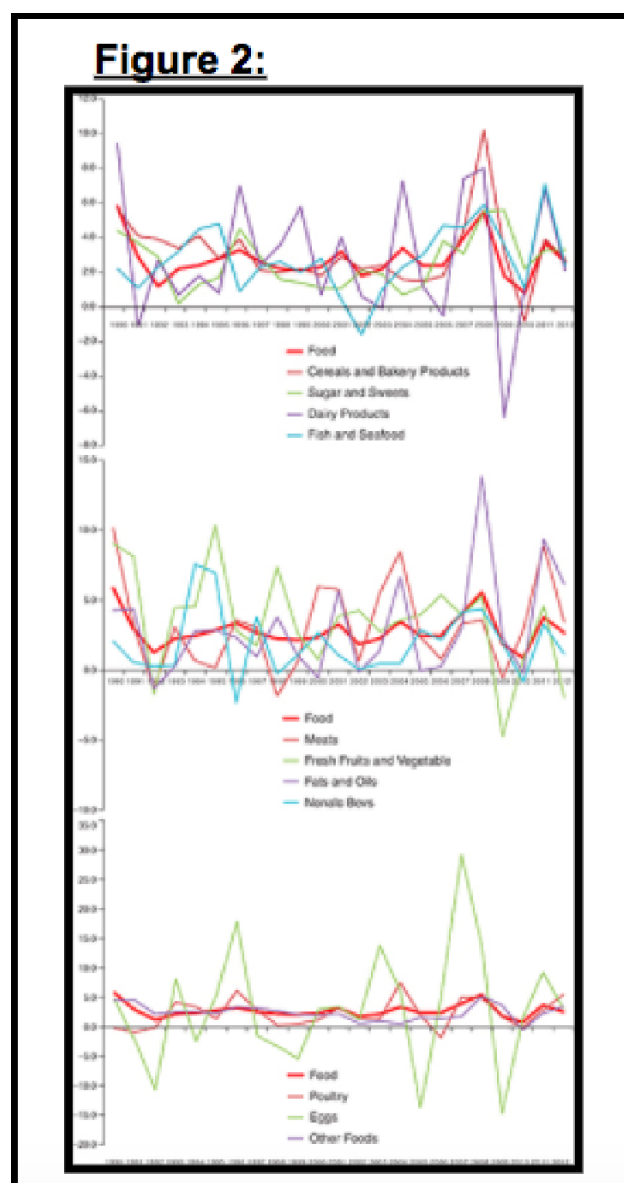
<sup>12</sup><http://www.rph.org.nz/content/ccfb2dc8-4129-4d02-b1ff-ab29f82472b9.cmr>

<sup>13</sup><https://news.psu.edu/story/396365/2016/03/08/research/parental-stress-and-child-behavior-health-impacts>

<sup>14</sup><https://www.sciencedirect.com/science/article/pii/S074937971730243X>

nutritional quality and very energy dense as they are almost always marketed at a sustainable price, which rarely varies. This includes products such as muesli bars, packets of chips and crackers. The constant price sustainability is due to the United States government subsidising the producers of corn and wheat, which is often the primary ingredient in these types of food that New Zealand imports. By doing this it helps keep the crop prices and the product prices low.<sup>15</sup> Food prices are a major influence on an average New Zealand's household food purchases<sup>16</sup> particularly when the budget of a family is limited. With a reduced price allocated to food this often results in increased risk to food insecurity.<sup>17</sup> This includes a large physiological effect, especially to adolescents. A study done by Harvard medical school with 6,483 adolescent participants (13-17 years old) measured factors of low socioeconomic status that may affect the mental health of the participants. These factors included food insecurity, parental education, household income, relative deprivation, community-level inequality, and subjective social status. The study concluded that food insecurity increased the risk for mental health disorders within the food insecure individuals more than any other factors that were measured. These mental health disorders include mood disorders, anxiety, behavioral disorders and an increased risk of substance abuse.<sup>18</sup>

Figure 2 shows fluctuating food prices for individual food groups and is from a study from the US bureau of Labor statistics. On reflection, what becomes apparent is the price stability of the foods that are ultra-processed like "cereals" and "sugar and sweets" compared to the large variation in prices over the same period of time, of things such as "fruit and vegetables" and "eggs" which are more nutritious in nature.<sup>19</sup> Due to most vegetables and fruit being seasonal products, these prices are to be very similar and comparable in New Zealand. Therefore the correlation between families who have a limited budget for food and the purchasing of more stably priced items can be observed as a trend. This was observed by a study done by the Heart Foundation of New Zealand in 2013 on the affordability and accessibility of healthy foods for children in New Zealand, which showed that foods that were more 'convenient' and 'satisfying' (energy dense and nutrient poor), were favoured. This is because there would be no food waste as children tend to find these foods 'tastier'. Therefore, there is also no money wastage - good value for money. For example, breakfast foods such as white bread and chocolate cereal are cheap and parents know their children will eat all of the food. However, these foods often do not contain the essential nutrients which children require for growth, development and maintaining healthy bodily functions. For example, calcium helps strengthen bones and teeth, protein builds muscle and is used for cell and tissue repair, and carbohydrates provide energy, and if plain white bread is compared to a mixed grain wholemeal bread, these observations are evident.



<sup>15</sup> <https://www.sharecare.com/health/eating-and-society/why-processed-foods-cheaper-fresh>

<sup>16</sup> <https://pubmed.ncbi.nlm.nih.gov/21742702/>

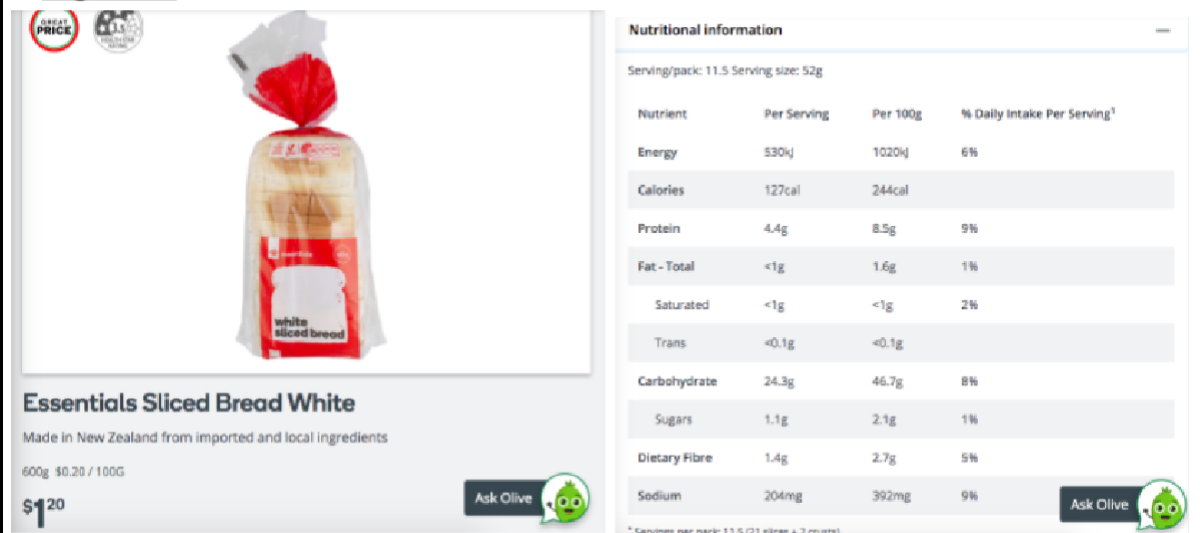
<sup>17</sup> <https://journals.sagepub.com/doi/10.1177/0017896910364837>

<sup>18</sup> <https://pubmed.ncbi.nlm.nih.gov/23200286/>

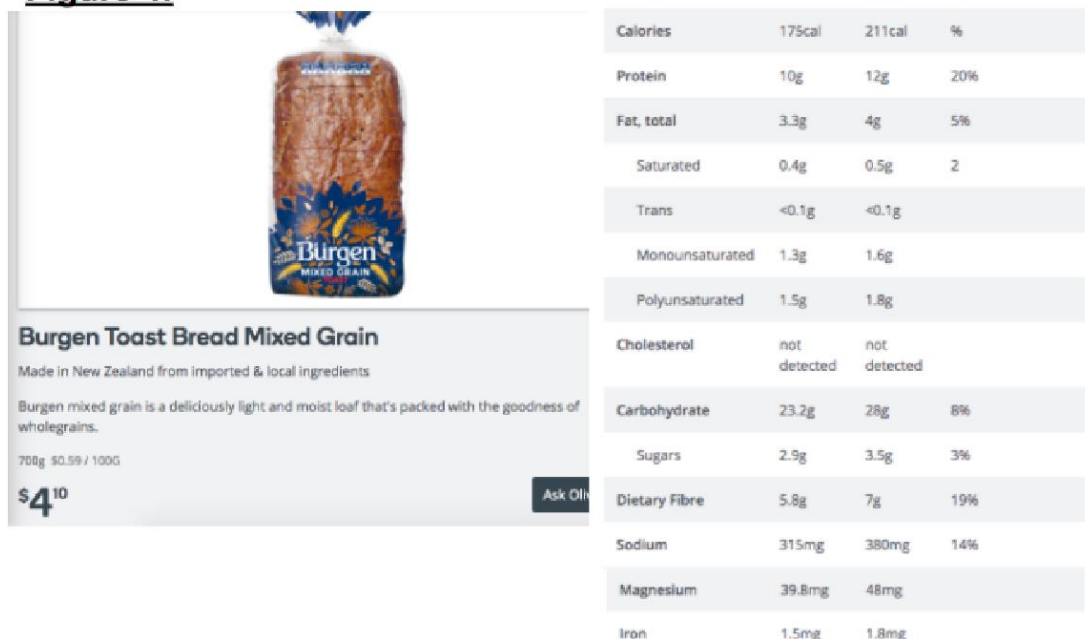
<sup>19</sup> <https://www.ncbi.nlm.nih.gov/books/NBK189804/>

Essentials brand White bread (figure 3)<sup>20</sup> retailed for \$1.20, as one of the cheapest options for bread on the market can be compared to the Burgen brand mixed grain bread (figure 4)<sup>21</sup> which is retailed for \$4.10 which is one of the more expensive options. If the nutritional information of each bread is analysed we find that the Burgen bread contains 5.6g more protein than the white bread per serving. This is similar to Dietary fibre which is essential to maintaining healthy bowel movements.<sup>22</sup> The Burgen bread contains 4.4g more dietary fibre than the white bread per serving. It can also be observed that the Burgen bread also contains other vitamins and minerals which aid strength and development such as Magnesium, which is used for nerve and muscle function and iron, which is used to maintain healthy blood flow. These nutrients are not present in the white bread.

**Figure 3:**



**Figure 4:**



<sup>20</sup> <https://shop.countdown.co.nz/shop/productdetails?stockcode=683365&name=essentials-sliced-bread-white>

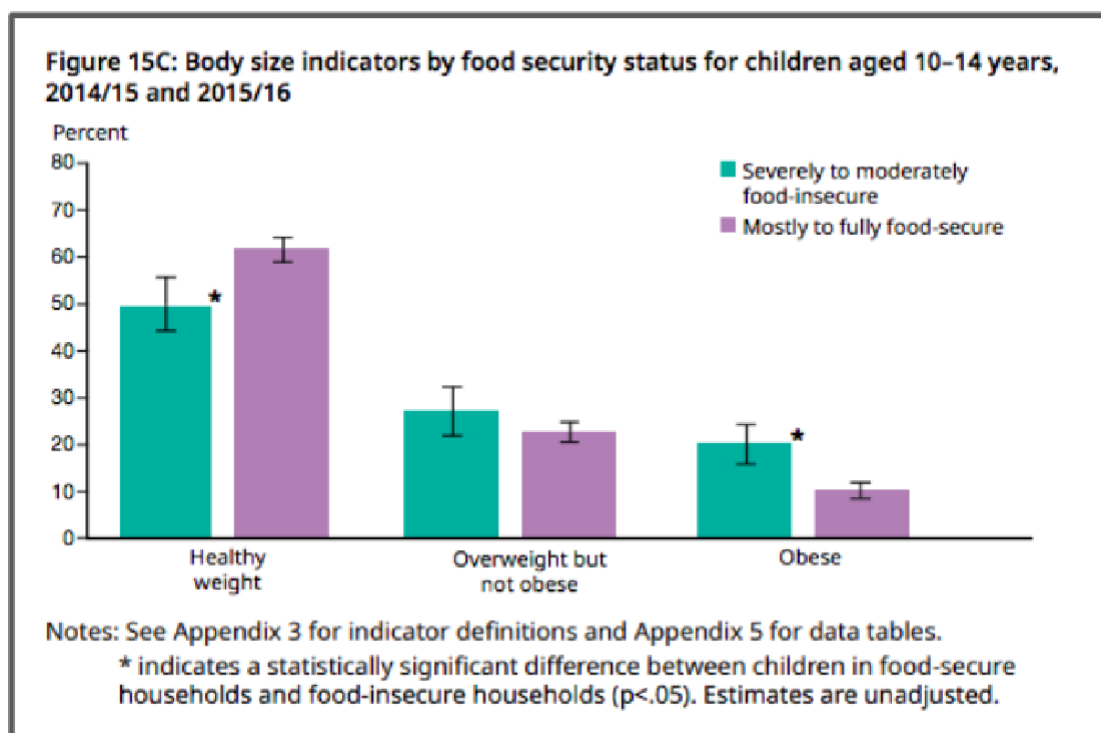
<sup>21</sup> <https://shop.countdown.co.nz/shop/productdetails?stockcode=275385>

<sup>22</sup> <https://www.nestle.co.nz/nhw/nutritionfactsheets/dietaryfibre>

Dr Louise Mainvil, a registered dietitian, notes that, “Families on low incomes are likely to have a poorer diet. In order to ensure their children are not hungry, they are more likely to limit healthy foods, which cost more, and replace them with less healthy foods that “fills their bellies” and costs less - It’s cheap to get calories, but in reality it’s expensive to get the nutrients.”<sup>23</sup> The concept that defines this idea is a ‘false economy’<sup>24</sup>. This outlines that although purchasing these foods is cheaper in the short term, it will have expensive health costs in the future. The ‘fills their bellies’ for a cheaper price idea is further emphasised by a study done by The APPLE project, which shows that 45% of parents of 5-12 year olds in New Zealand said the cost of food prevented them from buying healthy foods for their children.<sup>25</sup> This is clearly a catch 22 problem, whereby parents in low income families have short term priorities such as feeding children and stopping hunger inhibit them. This in itself can be a huge relief for a parent with other stressful concerns, and nutritional guidelines are of limited importance to them. If they try to feed their children more nutritious meals it may result in inadequate meal sizes, but if we do not pay attention to nutrition it has long term effects. Poverty once again plays an integral part in lowering the standards of parents that want to do the right thing for their children.

Although it sounds counterintuitive, one of the key effects of these energy-dense, ultra-processed foods on children’s health, is the correlations made with child obesity. The New Zealand House survey from 2016 shows that only 50% of children aged 10-14 were a healthy weight in food insecure households<sup>26</sup> (shown in figure 5).

**Figure 5:**



Children who are obese are the most likely to be obese when they reach adulthood (due to a reluctance to exercise and the difficulty of doing it) and are at risk of developing serious health problems. These include high blood pressure and cholesterol which are leading causes for cardiovascular disease. This is due to saturated fats which are tightly packed with hydrogen molecules making them difficult for the body to process. These triglycerides circulate through the bloodstream back to the heart. This increase in fat in the main arteries raises an individual's cholesterol.<sup>27</sup> The

<sup>23</sup> <https://www.otago.ac.nz/news/news/otago689077.html>

<sup>24</sup> <https://www.theguardian.com/commentisfree/2017/nov/27/economy-cuts-austerity-legal-aid-disability-benefits>

<sup>25</sup> <https://journals.sagepub.com/doi/10.1177/001789690606500204>

<sup>26</sup> <https://www.health.govt.nz/system/files/documents/publications/household-food-insecurity-among-children-new-zealand-health-survey-jun19.pdf>

<sup>27</sup> <https://medlineplus.gov/ency/patientinstructions/000838.htm>



high intake of sugary foods also increases the risk of impaired glucose tolerance, insulin resistance and type 2 diabetes.<sup>28</sup> This is because excess sugar intake can cause artery walls to become inflamed, grow thicker and become stiff. This prevents efficient blood flow and puts pressure on the heart, leading to cardiovascular disease. Excess sugar also is stored as fat (energy that the body can use).<sup>29</sup> Obesity also contributes to the risk of developing breathing problems (asthma and sleep apnea) along with joint problems, fatty liver disease, gallstones and heartburn.<sup>30</sup> All of these health problems have both short term and long term effects on children's health which in turn has a negative effect on children's physical wellbeing. Obesity in New Zealand is extremely prevalent in today's society as the country is ranked to have the third highest adult obesity rate in the OECD.<sup>31</sup> Therefore the negative effect on children's physical wellbeing is an ongoing problem for their future also.

The correlation between ultra-processed foods and obesity has been established due to most of these foods being high in fat, sugar and salt. These are known as HFSS foods.<sup>32</sup> A study done by the US National institute of health found that a diet made up of 80% ultra-processed foods resulted in a 0.9kg increase over a month period vs a 0.9kg loss in individuals who did not have a diet made up of ultra-processed foods.<sup>33</sup>

Another factor that compounds this obesity problem is the rise in technology. It is more common now to see children spending a large amount of time sitting on their computers or television, but this is problematic in two ways. A study done by the American Kaiser Family foundation found that half of all advertising time on children's television is devoted to food advertising, none of which feature fruit and vegetables.<sup>34</sup> This can lead to pressure on parents to purchase HFSS foods and encourages children to want to eat them. Studies have also shown that children spend at least two hours a day staring at a screen.<sup>35</sup> This correlates with children nowadays not achieving the guidelines of at least 60 minutes of moderate to vigorous physical activity a day.<sup>36</sup> More children spending excessive time engaging in sedentary behaviours such as playing computer games and watching TV is a contributing factor in the child obesity epidemic. It is found that children who watch TV for three or more hours a day have a 65% higher chance of being obese compared to children who watch for less than an hour.<sup>37</sup> This is a result of these children with static lifestyles (who eat a diet with a large amount of HFSS products) being unable to maintain a healthy balanced diet. The unfavourable nutrients of fat, sugar and salt will not be able to be metabolised at a sufficient rate, in a sedentary lifestyle. This causes the accumulation of excess fat in the body from the excess sugar that is not needed by the body and the large intake of saturated fats from these ultra-processed foods. This creates a negative effect on a child's physical wellbeing as usually a lifestyle that is active with regular exercise would not typically result in this accumulation of fat. The Brazilian National School Health survey investigated the link between sedentary behaviours and ultra-processed food consumption, and found that children who spend more than two hours a day on a screen were more likely to have a lower consumption of healthy foods such as fruit and vegetables. It was also found these children have a 42.8% higher consumption of energy dense and ultra-processed foods such as juices, sugar sweetened beverages, sweets, desserts and salty snacks, compared to those children who have less than two hours on a screen per day.<sup>38</sup> Therefore by parents purchasing these HFSS products it is becoming detrimental for children's health if they do not live up to the 'expected healthy lifestyle with a well-balanced diet.' A combination of the future and immediate health effects of childhood obesity prevent children from being able to live with a wellbeing positive in all four dimensions of hauora.

In the physical dimension, child obesity will mean that children are unable to get into a healthy active lifestyle as they will be fixed in their sedentary ways. Children who are obese often have lower self-esteem and are more likely to be the target of bullying<sup>39</sup> increasing the insecurity they feel both in their family home and socially. Bullying can result in children not wanting to come to school and their thoughts of low self-esteem can affect their willingness to

<sup>28</sup> <https://www.who.int/dietphysicalactivity/childhood/en/>

<sup>29</sup> <https://www.health.harvard.edu/heart-health/the-sweet-danger-of-sugar>

<sup>30</sup> <https://www.cdc.gov/obesity/childhood/causes.html>

<sup>31</sup> <https://www.health.govt.nz/our-work/diseases-and-conditions/obesity>

<sup>32</sup> <https://www.health.harvard.edu/blog/what-are-ultra-processed-foods-and-are-they-bad-for-our-health-2020010918605>

<sup>33</sup> <http://www.fao.org/3/ca7349en/ca7349en.pdf>

<sup>34</sup> <https://www.kff.org/other/food-for-thought-television-food-advertising-to/>

<sup>35</sup> <https://www.stuff.co.nz/business/industries/100570809/most-nz-children-spend-at-least-2-hours-a-day-screenstaring>

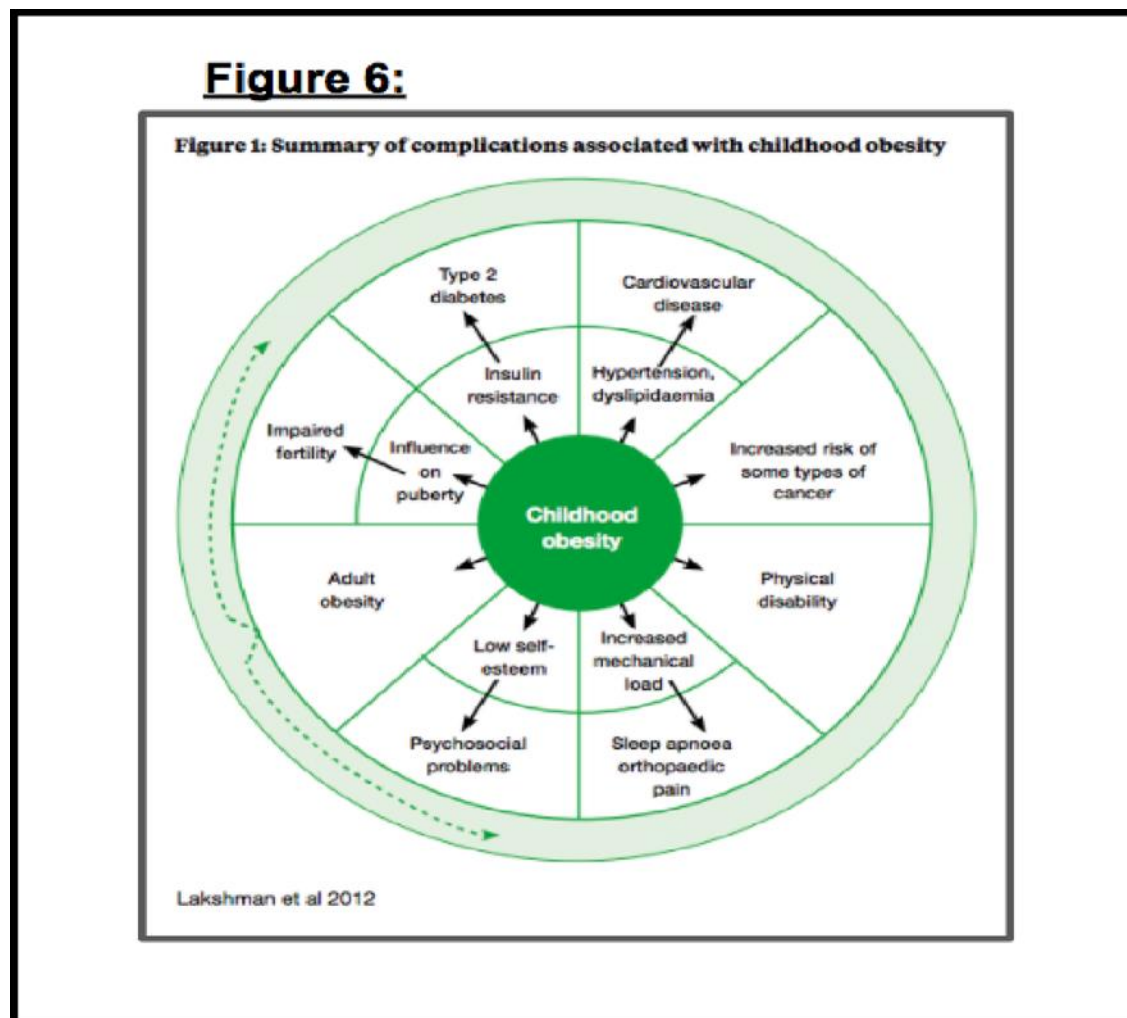
<sup>36</sup> <https://www.health.govt.nz/your-health/healthy-living/food-activity-and-sleep/physical-activity/how-much-activity-recommended>

<sup>37</sup> <https://activelivingresearch.org/sedentaryreview>

<sup>38</sup> <https://www.semanticscholar.org/paper/Sedentary-behavior-and-consumption-of-foods-by-Costa-Flores/03bfa67dc12d1b775cc611d3fb34f49b68d2ec77?p2df>

<sup>39</sup> <https://www.health.govt.nz/system/files/documents/publications/clinical-guidelines-weight-management-nz-children-young-people-dec16.pdf>

learn and concentration. This ties into a child's spiritual wellbeing as their beliefs and values that they feel for themselves can be negatively affected as a result of bullying. Emilia Hagman of the Karolinska Institutet theorised: "If you are being bullied at school, you are feeling all this stigmatisation, you don't really want to go to school so maybe school absences could be one reason."<sup>40</sup> Therefore the child's whole social wellbeing (or psychosocial wellbeing as the diagram notes - see fig.6) is also affected as this creates trust issues with friendships and relationships.<sup>41</sup> All these hauora-building factors are disrupted as a result of child obesity as demonstrated in figure 6.



Families in extremely food-insecure households can be forced to rely on food grants and food banks.<sup>42</sup> For example Sue Chappell, the Hawkes Bay Food Banks Depot coordinator, explained that the organisation distributed 1565 food parcels in 2019, and 1528 children were fed from this. Chappell also said that the food they provide in the parcels give four days of food supplies - however, these are emergency food parcels so they do not provide a balanced diet in most cases.<sup>43</sup> Therefore although they are relieving the immense pressure on the families that are food-insecure, children are still not provided with the essential nutrients required for them to develop and grow and maintain a strong physical dimension of Hauora. In 2019, the Foodbank project run by the Salvation Army filled 8441 food parcels. Due to the COVID-19 pandemic in 2020, the implications of food insecurity became even more extreme for those at risk, with the unemployment rate increasing to 4.2%.<sup>44</sup> The New Zealand Government predicted that 500,000 individuals were at risk of becoming food insecure over the lockdown period.<sup>45</sup> This has therefore resulted in the organisation preparing for the high demand of families needing extra help<sup>46</sup> and distributing 46,397 parcels in

<sup>40</sup> <https://www.nzherald.co.nz/lifestyle/obese-kids-less-likely-to-finish-school-research/5X536UZDPR7LETM2OM44JIYOWI/>

<sup>41</sup> <https://www.salliance.health.nz/UserFiles/SouthIslandAlliance/File/PDFs/Health%20of%20CH%20and%20YP%20with%20Chronic%20Conditions%20and%20Disabilities/A%20Determinants%20of%20Overweight%20and%20Obesity.pdf>

<sup>42</sup> <https://www.otago.ac.nz/wellington/otago020409.pdf>

<sup>43</sup> Personal communication : 10/3/20

<sup>44</sup> <https://tradingeconomics.com/new-zealand/unemployment-rate>

<sup>45</sup> <https://www.tvnz.co.nz/one-news/new-zealand/govt-reveals-500-000-more-kiwis-could-face-food-insecurity-due-covid-19>

<sup>46</sup> <https://www.rnz.co.nz/news/national/412593/food-banks-face-covid-19-lockdown-issues-demand-high-supplies-low>



the first nine months of the year.<sup>47</sup> Thus the pandemic only influenced this stress on the requirement of basic food for both parents and children.

It can also be observed in the 2019 Child Poverty statistics that Maori (23.3%) and Pacific (28.6%) children were more likely to live in a household environment with material hardship and low income compared to European (9.8%) children.<sup>48</sup> The New Zealand Health Survey 2019, revealed that 29% of Maori children (68,000 children) and 37% (46,000 children) of Pacific children were living in food insecure households. This is compared to only 15.4% (approximately 100,000 children) living in food insecure households.<sup>49</sup> This coincides with median weekly earnings per week with Maori and Pasifika families earning over \$100 less per week compared to European families.<sup>50</sup>

The current great inequalities that we see in New Zealand between Maori / Pasifika and Pakeha are a direct result of the imperial beginnings of Aotearoa.<sup>51</sup> A Post-Colonial lens helps us to see these statistics in a new light. European colonisation left Maori stripped of their culture, language, and approximately 95% of their land from the 19th century onwards, and the implementation of the western class system in society directly after this meant that Maori were marginalised to the bottom tier of society even with treaty reparations. People most at risk to the dangers of food insecurity are of course those who cannot afford to feed themselves or their families. Due to the historical hegemony of European settlers over our indigenous people, and the fast rate at which the middle and lower classes have been falling under the poverty line in general, Maori have been particularly badly affected in terms of their food security, social and health outcomes.<sup>52</sup> Thus, for generations, Maori have experienced disproportionate issues of food insecurity, increasing the normality of such an insecurity among communities and individuals.

Within the Maori and wider Pacific communities, there is seen to be a deeper appreciation and emphasis on whanau / agia (family) in comparison to many other ethnic demographics in New Zealand. This is described as being 'relational rather than individual'<sup>53</sup> and a completely different set of holistic values that differs from the Western ideal. For example, remittance payments from Pacific families living in New Zealand to their relatives on the Islands are described as being 'a major feature of the Pacific Island economies.'<sup>54</sup> The prioritisation of family and extended family in terms of monetary spending shows us that there is a difference in how these groups (compared to others) place emphasis on different aspects of Hauora. Within the framework of a western social democracy like New Zealand, this familial emphasis can cause a greater deprivation of money and food for families that are obligated to make remittance payments, and causes an increased workload and demand on parents. These deeply ingrained cultural differences are potentially creating negative effects on individuals, especially children, in Maori and Pacific households.

Another factor contributing to this issue in New Zealand is the lack of education of basic life skills which also influence how this problem is generational. Often parents of families in this position are uneducated in basic life skills such as cooking. This therefore in turn has an impact on the children's diet and food choices. As most food choices made by food-insecure families are low in nutritional content it also means they are pre-prepared or processed enough so parents only have to put in minimal effort for the meals they provide to the family. This is all to do with convenience. A lack of food literacy skills - i.e. cooking, means that although parents may have time to cook, they do not, as it is easier for them to purchase food that is quick and easy that they know their children will love.

The New Zealand Health survey found that children in food insecure households eat breakfast at home fewer than 5 days per week.<sup>55</sup> A study done by the Health promotion agency of New Zealand showed that caregivers/parents with lower levels of education are less likely to consume breakfast compared to those who obtain higher levels of education. Out of individuals who have no formal education only 56.9% consume breakfast on a daily basis,

<sup>47</sup> <https://www.foodbank.org.nz/pages/how-it-helps>

<sup>48</sup> <https://www.stats.govt.nz/information-releases/child-poverty-statistics-year-ended-june-2019>

<sup>49</sup> <https://www.health.govt.nz/system/files/documents/publications/household-food-insecurity-among-children-new-zealand-health-survey-jun19.pdf>

<sup>50</sup> [https://www.wgtn.ac.nz/cpf/publications/working-papers/working-paper-pdfs/WP09\\_2014\\_Indicators-of-Inequality.pdf](https://www.wgtn.ac.nz/cpf/publications/working-papers/working-paper-pdfs/WP09_2014_Indicators-of-Inequality.pdf)

<sup>51</sup> [https://www.academia.edu/8171211/Food\\_insecurity\\_and\\_post\\_colonialism\\_in\\_New\\_Zealand](https://www.academia.edu/8171211/Food_insecurity_and_post_colonialism_in_New_Zealand)

<sup>52</sup> <https://ana.org.nz/wp-content/uploads/2019/08/Exploration-of-Maori-household-experiences-of-food.pdf>

<sup>53</sup> [https://www.educationcounts.govt.nz/publications/special\\_education/understanding-special-education-from-the-perspectives-of-pasifika-families](https://www.educationcounts.govt.nz/publications/special_education/understanding-special-education-from-the-perspectives-of-pasifika-families)

<sup>54</sup> <https://www.adb.org/sites/default/files/publication/28799/remittances-pacific.pdf>

<sup>55</sup> <https://www.health.govt.nz/system/files/documents/publications/household-food-insecurity-among-children-new-zealand-health-survey-jun19.pdf>

compared to those that have a university or postgraduate degree in which 83.2% consume breakfast everyday.<sup>56</sup> Thus, children whose parents / caregivers consume breakfast every day are more likely to also follow this example. In the case of those parents with the lower level of education, and the lower chance of eating breakfast, their jobs and their income from those jobs may prevent them from eating breakfast and setting an example for their children. A 'Literature Review', performed by the Canterbury District Health board in 2014 on the determinants of adolescent's breakfast consumption suggests that the presence of a parent or caregiver at breakfast time often establishes the importance of breakfast in the child's mind for life. Also mentioned in the review was the Health sponsorship council survey in 2011 completed by Maori and Pacific parents of schoolaged children. The survey distinguished several values and beliefs which highlight this issue around breakfast consumption. These include: "having heard that eating breakfast was important, but not knowing why, or not believing that it was true, not eating breakfast themselves, purchasing breakfast foods based on price, rather than nutritional value, believing that children from around 8-9 years of age should be responsible for making their own breakfast, and not encouraging children to eat breakfast if they, the parent, did not think that it was important."<sup>57</sup> This shows the importance of parents' views on breakfast to their children from childhood up until late adolescence as they can have a significant impact on breakfast consumption on their children.

Children not consuming breakfast at all, moreover, is not providing the body with any form of nutrient source. Thus energy is not able to be sustained through the morning. A study done on the effect of breakfast composition on cognitive processes in primary school children showed that participants were able to perform better academically compared to when they did not consume breakfast.<sup>58</sup> This shows how breakfast causes a positive impact on the cognitive ability, concentration and memory of children, leading to better academic performance. A study done by the College of Natural and Health Sciences, Zayed University, Abu Dhabi, U.A.E on the academic performance of students who eat and do not eat breakfast found that 50% of students who did have breakfast, gained an A grade on the exam whereas only 30% of the students that did not eat breakfast got an A. Physically the body must be provided with nutrients to break down into energy to use for various life processes, and to keep that person engaged and active. Thus, by not eating breakfast, young people are affecting their physical wellbeing and their mental wellbeing, which in turn could have serious repercussions for their spiritual and social wellbeing too. Not eating breakfast is detrimental for the entire wellbeing of an individual.

These factors provide evidence to encourage a significant stakeholder to help change the poor choices of breakfast for young people in New Zealand. The Kickstart breakfast in schools program, by Fonterra and Sanitarium, which started in 2009 to 1-4 decile schools, feeds 30,000 children over 1000 different schools.<sup>59</sup> Since the programme began, it has served more than 30 million breakfasts. In 2013, the program got further support by the government as they recognised the extent of this issue and the effects on children's wellbeing. They therefore increased the amount of days it serves breakfast, instead of two days a week, the club ran five days a week. This was due to the demand increasing in the club as more children relied on it. We can see that this issue, as it increases, puts a strain on our society as a whole. The issue has become so extreme that our tax dollars must account for the lack of nutritional resources within poverty-stricken homes.<sup>60</sup> Sanitarium's General Manager Pierre van Heerden states "Forcing schools to take up the programme would create dependency and take away from parental responsibility"<sup>61</sup> showing that Sanitarium have come up with a temporary solution to this problem, and that the real issue of children not eating breakfast is an issue that needs to be dealt with at its root - that is to say, at home.

Furthermore, food insecurity also has a detrimental effect on children's accessibility to health care. With a limited budget often parents will wait till children meet a compromised health status before actually taking children to a doctor. This comprises children's health and may limit their ability to participate in a range of activities and possibly compromising future opportunities. The New Zealand health survey from 2014-2016 found that 40% of households that were food insecure had experienced one of these barriers in the past year (refer to figure 7), compared to that of 20% in food secure households. This coincides with the visits to an emergency department per year with a 12.4% likelihood in food insecure households versus Food secure households at 8.7%. Therefore food insecurity is putting children's health in a compromised position. This is not only a mental, emotional and physical stress on both

<sup>56</sup> <https://www.hpa.org.nz/research-library/research-publications/demographic-and-parental-influences-on-breakfast-consumption-rates-in-fact>

<sup>57</sup> <https://www.cph.co.nz/wp-content/uploads/schoolbreakfastliteraturereview.pdf>

<sup>58</sup> <https://www.ncbi.nlm.nih.gov/pubmed/16085130>

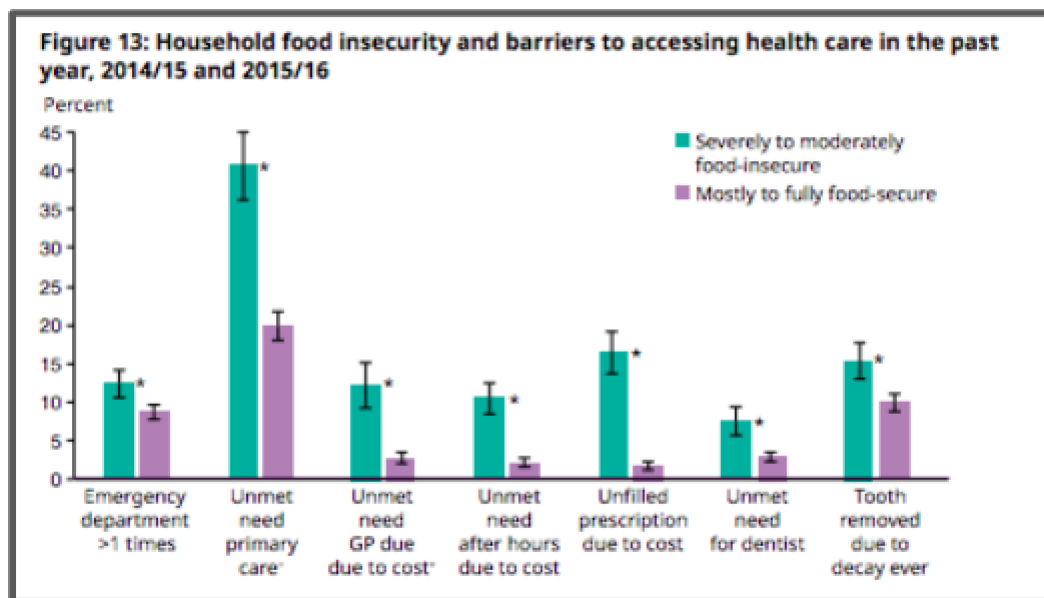
<sup>59</sup> <https://kickstartbreakfast.co.nz/about>

<sup>60</sup> <https://www.sanitarium.co.nz/social-purpose/tackling-hunger/good-start-breakfast-club/good-start-breakfast-clubs>

<sup>61</sup> <http://www.stuff.co.nz/dominion-post/news/8744856/Is-free-breakfast-in-schools-working>

a child and a parents wellbeing but it also puts pressure on children's social wellbeing as it prevents them from living an active lifestyle and living a positive childhood. A study done by the Ministry of Social development in 2018 on the Kickstart breakfast programme showed that the schools that were serving more breakfast meals per student per week had a lower rates of hospital outpatient visits for dental surgery.<sup>62</sup> Furthermore, this demonstrates the impact of food insecurity on children's health as by the Government and Sanitarium providing these nutritious breakfast meals children are able to decrease the effects of the implications in which this issue causes.

**Figure 7:**



The best solution for this issue of food insecurity seems to be education. If parents are shown the evidence of how important maintaining a food secure household is for their children in the present and in the future, it may help to prioritise this as an essential thing to do rather than an option. This would help prevent all of these detrimental implications on children's health and wellbeing. Sue Chappell from the Hawke's Bay food bank stated she is still seeing the same families, both parents and children, years later applying for food parcels. Chappell says, generations struggle to break out of poverty. The biggest issue being observed is learning how to budget and spend the household income in an efficient way. It highlights that no education is present on how a cheap and convenient meal that is completely lacking in nutrients is not always the best option. Jackie Clarke, founder of the 'Aunties' charity, an organisation which works with families in poverty, states; "The flow-on effects of this financial strain are that people become emotionally under-resourced too. The constant anxiety of not being able to pay your bills and worrying about relationships and all those other things, it turns your mind to a soupy mush. You're absolutely fearful and fretting and panicking about the future. You're only able to look three or four days ahead to "when's my next payday", trying to make things stretch out."<sup>63</sup> This clearly shows that education on budgeting needs to be taught as early as possible to remove this fear and stress. A possible solution would be to implement this in high schools, when students are of an appropriate age to learn about monetary issues within the context of a working adult's worldview. This will help a wide range of students going to university, or leaving home and managing a student loan or wage. By learning fundamental financial skills and being able to understand things such as the importance of savings, debt and investment for some people can mean the difference between prosperity or poverty. In today's society in New Zealand, these skills are taught somewhat by the parents or caregivers in the household that young people are brought up in. By this factor being the main driver, it is causing this generational problem of lack of true understanding. Thus, this needs to be changed as it could lead to a better outcome in the future of New Zealand's society.

<sup>62</sup> <https://www.msd.govt.nz/documents/about-msd-and-our-work/publications-resources/evaluation/kickstart-breakfasts/kickstart-breakfasts-and-indicators-of-child-health.pdf>

<sup>63</sup> <https://www.stuff.co.nz/business/116012184/heres-why-poverty-has-nothing-to-do-with-how-well-you-manage-your-money>

This is a start. However, it is important to not only implement educational change upon our youth but also acknowledge that real practical change must be made to feed New Zealand's most vulnerable. It is not enough to simply put words into the mouths of children - food is the more important alternative. Starting first with arguably the most innocent and at risk demographic in the entire food-insecure spectrum, I would implement an optional paid-for breakfast and lunch in low decile schools for primary, intermediate, and secondary students. Fueling these children so that they have energy and enthusiasm to learn is imperative to ensure their future success as adults. As a collective, the responsibility of New Zealanders in helping people that struggle with food security is vital and this should be included in an official government budget, funded by the taxpayer. It should not be the responsibility of individuals who the system has failed to survive food insecurity in New Zealand. Starting with the youth who are particularly at risk in the context of this issue should also be thought of as only the start of an ongoing battle - we should also look towards the future and plan on an expansion of government food packages for many more people who are suffering from a lack of essential foodstuffs in their home. Practical action must be undertaken in New Zealand.

In conclusion, it is evident that there is a clear, systemic problem of food-insecurity in New Zealand, a problem which is having a negative impact on children in particular. From the evidence observed, we may see that there are significant contributing factors affecting this issue hugely, ranging from historical, environmental, political, and economical, or cultural. All these factors combine for a simple outcome: the prevention of children from consuming enough nutritious food on a daily basis to keep them engaged and active in their homes, classrooms and community. We can see the detrimental effects that these childhood issues have on food insecure adults within New Zealand society, and the vicious cycle that it develops into from generation to generation. However, it is extremely encouraging to see those stakeholders from different places around the community, like Kickstart, local food banks, local and national government bodies who are trying to help the issue of food insecurity within New Zealand. It is important to recognise that this issue is an overarching problem within society that must be combatted from all sectors by different methods such as the implementation of free meals in at-risk schools and an education system that focuses on money management in relation to food. This, and other implementations to aid the growing population of food insecure peoples within New Zealand will allow for the breaking of cycles and the educational prosperity that comes with nutritional security. This also would ensure the four dimensions of Hauora (wellbeing) to stay strong throughout an individual's life, as this education being provided a fundamental base of understanding, which can be passed on through generations to come. As said by the World Health Organisation "Healthy children learn better. People with adequate nutrition are more productive and can create opportunities to gradually break the cycles of poverty and hunger."<sup>64</sup> It is important that we as society need to face our greatest battle yet.

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<sup>64</sup> <https://www.who.int/health-topics/nutrition>

## Activity 5.

# Mental health as an equity issue

### Overview

This activity provides an initial scoping discussion in preparation for a detailed investigation into a mental health issue. The 'mental health' focus here leans more toward the clinical use of the term (mental health conditions or 'problems', disorders, or illnesses), although for health education purposes this is still considered as part of a broader understanding of mental and emotional wellbeing, and in context of a holistic model of health and wellbeing, such as hauora.

Students are invited to explore the nature of 'the issue(s)' and why it is a wellbeing issue, beyond just the experience of the mental health condition. This is with a view to developing understanding of how and why many of these situations involve consideration of inequity – people being treated unfairly or excluded in some way. This includes situations such as youth access to mental health, mental health and poverty, stigmatisation of mental health, and substance use as mental health issue not a criminal issue.

Use this activity during the initial stages of framing an investigation into a (mental) health issue for a specified population.

### Curriculum considerations

**Learning intention:** Students will identify the nature of 'the issue' /the cause for concern on matters related to mental health conditions.

**Key competencies:** Thinking critically; Participating and contributing.

**Digital fluency or citizenship:** Digital literacies – being discerning and critical; able to locate, understand, organise, evaluate, and adapt digital content; digital principles – demonstrating values when working digitally; being an ethical, respectful, and responsible digital citizen.

### Resources

- Access to reputable online sources of information about mental health issues, e.g. Ministries of Health and Social Development reports, the NZ Mental Health Foundation, NZ Drug Foundation (and international equivalents of these).

### Teaching and learning process

- Provide some context for the investigation the students are embarking on and the purpose of the discussion that follows. If prior learning has already surfaced some of these mental health inequity issues, reference these as well.
- Revisit the concept of inequity – ask students to (re)explain the difference between (in)equity and (in)equality. If useful, source online cartoons that illustrate these ideas and use these as the basis for explaining the difference.
- Assign one of the focus areas to small groups or pairs either by self-selection or allocation (adapt or add to this list as required – expect some overlap among the ideas):
  - youth access to mental health,
  - mental health and poverty,
  - Māori or Pacific mental health,
  - stigmatisation of mental health, and
  - substance use as mental health issue not a criminal issue
- Provide some initial guidance for students to key New Zealand mental health-related websites and recommend that other links suggested by these are used (see resources list above).

- Assign the task of answering the following questions:
  - What is the equity issue – how are people being treated fairly or unfairly in this situation?
  - What are 2-3 main websites where useful information can be found?
  - What are 2-3 interesting, troubling, or concerning) things you found out about the issues as you were searching?
  - (If applicable to the issue) How has this issue appeared in the news media in recent times?
- Once complete, provide the opportunity for the class to share their responses with a view that individuals, pairs, groups or the whole class will select a topic for the investigation to give focus to the learning to follow. Curate all of the information collected into a central site for use by the whole class
- Signal next steps for learning and how students will select a topic for investigation (which may not be the one they have focused on in this scoping activity).

#### **Student learning artefact(s)**

Students file any discussion notes and links to useful websites in their portfolio for ongoing reference and add to these.

#### **Teacher pedagogical and/or content knowledge**

Ideas for student learning activities developing from this scoping discussion can be found in the NZHEA resources, *Mental Health & Resilience* 2<sup>nd</sup> ed (2021) and *Alcohol and Other Drugs for NZC Levels 4-8* 2021, both available at <https://healtheducation.org.nz/resources/>.

#### **Teacher evaluation and reflection**

How well do students grasp the differences between (in)equity and (in)equality? Does this idea need to be developed further, or revisited in other context (if so which topic(s) in the learning programme will be useful for this?

How well did the students appear to understand the inequities in situations involving mental health conditions? What sort of language will help them maintain a focus throughout their investigation on the broader wellbeing aspects of the issue related to inequity and being treated unfairly and excluded, rather than focusing on the details of the mental health condition?



## Activity 6.

# The impact of racism and wellbeing

### Overview

The current and ongoing focus on matters involving racism nationally and internationally, and the negative impacts racist acts have on individuals, communities and nations, provides very real opportunities for learning to understand how racism is a form of discrimination. With a health education lens on the issue racism can be investigated with consideration of the ways it impacts wellbeing, not just for the people who are victims of racism but their friends and family and their communities, as well as the ripple effect this can have nationwide.

This activity makes use of recent and current news items featuring acts of racism (inter)nationally to analyse why or how it is that racism prevails globally, how it impacts people's wellbeing, and what needs to happen for a fairer and more inclusive and just society.

Use this activity in the learning programme where ideas about injustice and discrimination are being developed.

### Curriculum considerations

**Learning intention:** Students will demonstrate understanding of factors that contribute to racist attitudes, values and behaviours, how these impact wellbeing, and the action necessarily to create a fairer and more inclusive and just society.

**Key competencies:** Thinking critically; Participating and contributing.

**Digital fluency or citizenship:** Digital literacies – being discerning and critical; able to locate, understand, organise, evaluate, and adapt digital content.

### Resources

- Access to the NZ Human Rights Commission webpages on racial discrimination  
<https://www.hrc.co.nz/your-rights/racial-discrimination/>
- Access to the specific aspect of the Human Rights Act 1993 on Racial disharmony – clause 61  
<https://www.legislation.govt.nz/act/public/1993/0082/latest/DLM304643.html>
- Access to online national and international news sources featuring articles on racism.
- Access to the Scholarship report on racism in sport may also be useful for students to read in full or in part.

### Teaching and learning process

#### Setting the scene

- Reconnect students with prior learning about discrimination and how at the most basic level “*Discrimination occurs when a person is **treated unfairly or less favourably** than another person in the same or similar circumstances.*” (NZ Bill of Rights Act 1993). Racism (in law) is a form of discrimination.
- In what ways are people treated unfairly and less favourable based on their race and ethnicity? Make a class list of examples.
- How do you think being treated like this makes people feel?
- Connect students with the Human Right commission webpages on racial discrimination. Assign pairs or small groups of student just one or two questions to find answers to from this site e.g.:
  - What is ‘racial harassment’?

- In what situations is racial harassment unlawful?
- Which Act of parliament (ie what law) does racial harassment come under?
- What is the role of the Human Rights Commission?
- What can a person do if they are racially harassed? (see HRC pdf)
- From the Human Rights Act website – what does New Zealand law have to say about ‘racial disharmony’?
- Share the findings from these questions with the class.

### **Discussion**

- What do we understand about the reasons why some people think they can treat other people unfairly or less favourably – based on their race and ethnicity?
- What are the values and beliefs of people who commit racist acts? Where do these values and beliefs come from and why are they sustained over time?
- How are these values and beliefs of perpetrators similar to other forms of victimisation like harassment and bullying for example?
- What do you understand the terms ‘institutional racism’ and ‘casual racism’ mean (give examples)? (*Look these up if the class is not sure*).

### **Main activity**

- Support students to locate recent news items from New Zealand and/or international news sites that feature racism.
- Working students in pairs assign the task of ‘analysing’ their news item for insights into how racism impacts people’s wellbeing. This information won’t necessarily be immediately apparent, so consider modelling an example of how to extract meaning related to, mental and emotional wellbeing harms, social harms, spiritual wellbeing harms (think of the victims own identity related matters, belonging and connectedness, values and beliefs) as well as the more obvious physical wellbeing harms where the racism also includes violence.
- Provide opportunity for pairs to share their news items and analysis with other groups, or the whole class as time allows.

### **Debrief**

- Shift the focus to whole communities or whole nations. Ask students what they think the impact on the wellbeing of whole communities (even whole countries) can be when there is a highly publicised instance of racism in the news. How do communities – where acts of racism occur – feel in the aftermath of such events? What is the impact on the national psyche?
- What will it take to eliminate racism? Think about your school; New Zealand; countries like the USA where there have been many acts of racism in the news for global viewing. What actually needs to change and how do we do that? When the issue seems so huge, where do we target actions that will have impact?

### **Student learning artefact(s)**

Students file their analysis of their new items in their learning journal along with any other notes from the scene setting, discussion and debrief discussion activities.

### **Teacher pedagogical and/or content knowledge**

What whole school approaches to the promotion of student wellbeing (in relation to elimination of racism and other forms of discrimination at school) could be utilised to reinforce the learning?

### **Teacher evaluation and reflection**

How readily did students grasp the idea that the reason some people think they can treat others unfairly or less favourably because of their race is based on often deeply held values and beliefs, some of which have persistent in families and communities and some cultures over generations? Could they identify the sorts of actions that need to occur and shifts that need to happen, and what it will take to achieve this? Could they see any hope for the future? What other learning contexts will provide opportunities for to revisiting these ideas in future?

## Activity 7.

# Poverty cycle and health

### Overview

Learning to develop understanding of the complexities of poverty takes time. This activity assumes some prior learning about the social determinants of health and the nature of poverty.

This activity extends some of the ideas underpinning Activity 4 around the use of a model and framework. In this case, the visual representation of the poverty cycle may offer some support for students as they build understanding of the complex ways that the factors contributing to and sustaining poverty inter-relate.

Use this activity in a learning programme where ideas about the social determinants of health and poverty are being developed.

### Curriculum considerations

**Learning intention:** Students will explain the inter-related factors that cause and sustain poverty through the use of a poverty cycle diagram.

**Key competencies:** Thinking critically, Participating and contributing

**Digital fluency or citizenship:** Digital literacies – being discerning and critical; able to locate, understand, organise, evaluate, and adapt digital content.

### Resources

- Access to online sources of poverty cycle diagrams – these are numerous and readily sourced through an online search of ‘poverty cycle diagrams’.
- Access to the Scholarship reports on poverty and food security may also be useful for students to read in full or in part.

### Teaching and learning process

- Connect students with prior learning about the social determinants of health and poverty.
- Explain that working in pairs they are going to source one poverty cycle diagram online and use it as the basis for the activity. Consider having a few examples to show, or guide them in their search to identify diagrams that use many of the ideas and terms already used by the class.
- Once each pair has sourced a suitable diagram, instruct the class that they need to ‘annotate’ the diagram using ideas they have learned from previous lessons. This can be done by printing out the diagram onto an A3 page or copying and pasting it into a Word doc – in a way that leaves space to write 2-3 sentences for each part of the diagram.
- Explain that the need to draw on ideas from their learning that helps to explain how each part of the cycle leads to the next.
- Allow time for students to complete this and provide support as required.
- Provide opportunity for sharing with other pairs and for students to have access to 2-3 other versions of this task for their learning journal.

### Debrief:

- Ask students if these poverty cycle diagrams helped them to make connections between all of the factors that cause and sustain poverty.
- Ask if they can identify any aspects that are still not connecting for them and are not yet making sense to help identify next steps for learning.

**Student learning artefact(s)**

Students note taking in relation to their selected poverty cycle is filed, along with copies of 2-3 others shared by other members of the class.

**Teacher pedagogical and/or content knowledge**

Poverty is a very complex idea to understand given the many inter-related aspects of it and how 'cause and effect ... leading to another cause and effect' become an endless cycle. It is worth teachers completing this activity for themselves as a check that what has been covered in the learning programme is sufficient for developing student knowledge, especially in situations leading to NCEA assessment.

**Teacher evaluation and reflection**

In what ways did the use of a poverty cycle diagram appear to deepen student understanding of the many inter-related factors that cause and sustain poverty? Which factors (or specific aspects of the social determinants of health) that cause and sustain poverty appear better understood by students? Which factors need to be developed further? What's the evidence for this? What teaching and learning strategies appear to be more useful for helping students to understand these complex connections and what's your evidence for this? ie Visual (diagrams and video)? Written (various texts)? Oral (presentations and discussion)?

## Activity 8.

# Food security

### Overview

In brief, food security is about having reliable access to a sufficient quantity of affordable, nutritious food. Historically a lot of the focus on food security has been in relation to under-developed or developing countries where many people or most of the population live in chronic and perpetual poverty. However, food security is now a widely reported issue for developed and wealthy countries, such as New Zealand.

This activity requires students to develop a clear understanding and definition of food security and then make links with prior learning about poverty and the social determinants of health.

Use this activity in a learning programme where ideas about the social determinants of health and poverty are being developed.

### Curriculum considerations

**Learning intention:** Students will demonstrate understanding of factors contributing to food insecurity and impacts of food insecurity for people's wellbeing.

**Key competencies:** Thinking critically, Participating and contributing.

**Digital fluency or citizenship:** Digital literacies – being discerning and critical; able to locate, understand, organise, evaluate, and adapt digital content.

### Resources

- Access to a range of online sources featuring food security and digital device for compiling and curating ideas.
- Access to the New Zealand Ministry of Health (2019) *Household Food Insecurity Among Children: New Zealand Health Survey* <https://www.health.govt.nz/system/files/documents/publications/household-food-insecurity-among-children-new-zealand-health-survey-jun19.pdf> - pre-select sections that align with prior learning.
- Access to recent online news items featuring food security issues.
- Access to the Scholarship report on food security may also be useful for students to read in full or in part.

### Teaching and learning process

- Connect students with prior learning about the social determinants of health and poverty.
- Working individually or in pairs, instruct students to find online (1) definitions of food security (or insecurity) from three reputable NZ and international sites (e.g. Ministry of Health, World Health Organisation); and (2) two diagrammatic representations of food security. Make a copy of these definitions and diagrams (use the snipping tool/screen grab function) along with the URL of the source.
- Instruct the student to organise their selected material into a useable (shareable) page of information. Using ideas from their definitions and diagram, instruct students to write a summary statement describing food security using their own words. *Ask them to imagine that they had to explain the concept to another student in their year group who wasn't taking health education.* Add this to the page.
- As far as possible, collect and curate this information into one site where it can be viewed by the class.
- Discussion - ask students:
  - How much of an issue they think food (in)security is in New Zealand. What evidence are they using to say this?
  - What health and wellbeing issues do they think food insecurity leads to? Again, what is their evidence for this?

- Use a preferred literacy technique (e.g. expert jigsaw) and allocate to groups a selection of 1-2 page extracts from the Ministry of Health *Household Food Insecurity Among Children: New Zealand Health Survey*. Suggested extracts are the key findings from page x; pages 7&8; pages 9-10 (to the end of the Fig 2 table); pages 10-11 (from after the Fig 2 table to the beginning of the Fig 4 table). After that select with sensitivity sections about living in rented houses and food insecurity in relation to ethnicity (each is about a page). OR, depending on the prior learning this is building on, later sections of the survey may be more useful to use. Instruct students to summarise the text to 4-5 main points and share these with the other groups in accordance with the literacy strategy.
- Once summaries have been shared, guide the students through a discussion to:
  - Make connections with prior learning about the social determinants of health to explain what causes food (in)security.
  - Understand how food security is a key feature of poverty.
  - How food (in)security is a health issue and a wellbeing issue.
- [Optional] If food security issues have been in the news recently, direct students to these articles with the instruction to analyse their article with questions such as:
  - Which country(ies) does the article refer to? What sector of the population (all people or a specific group e.g. children)?
  - Why is it in the news? What has happened that has meant the article is 'in the news'? (e.g. a new research survey or report, increased numbers of people using foodbanks, new social support services for people in poverty, etc)
  - What are the main points the news story is reporting?
  - Is it a story of hope or despair? Have the media treated the issue sensitively (and what's your evidence for this)?
  - How does this news story link to other learning (1) specifically about food security, (2) poverty in general, and (3) the bigger picture of the social determinants of health?
- Signal next steps for learning such as critiquing strategies that aim to achieve more equitable outcomes e.g.
  - Is getting people growing their own vegetables or keeping chickens for eggs the answer if the social determinants of health are not being addressed?
  - How realistic are the Ministry of Health pamphlets on healthy eating for diverse populations?
  - How achievable and realistic are the lunchbox ideas some schools provide as guidance for parents?
  - Would removing GST on fresh fruit and vegetables result in more of these foods being eaten?
  - Similarly, would adding a tax on 'unhealthy' foods result in less of these foods being eaten?
  - To what extent does fundraising or donating to food banks (to add to their supply to handout to those in need) result in sustainable change more equitable outcomes?

### Student learning artefact(s)

Students add any artefacts from the activity to their learning journal to use as evidence for later NCEA assessment.

### Teacher pedagogical and/or content knowledge

Teachers are encouraged to browse the New Zealand Ministry of Health (2019) *Household Food Insecurity Among Children: New Zealand Health Survey*. Other useful New Zealand sources include the Child Poverty Action Group (CPAG) – see the 2019 'Aotearoa, land of the long wide bare cupboard: Food insecurity in New Zealand' <https://www.cpag.org.nz/news/new-paper-series-aotearoa-land-of-the-long/>

And international organisations like the World health Organisation have large volumes of material on food security see for example <https://www.who.int/publications/m/item/state-of-food-security-and-nutrition-in-the-world-2020>



**Teacher evaluation and reflection**

Food security can be a challenging concept for students to understand. How readily did students make the connections between prior learning about the social determinants of health, poverty and food security? Which aspects of understanding need to be further developed? What is your evidence for this?

# Theme 3.

## Youth wellbeing issues

- Cultivating Critical Consciousness in New Zealand Youth  
*Ashley Huddart, Rangitoto College*
- Exploring Social Connection and Belonging in Children and Young People  
*Cameron Senior, Rangitoto College*
- NCEA stress on students  
*Caitlin Wilkinson, Diocesan School for Girls*

# Cultivating Critical Consciousness in New Zealand Youth

Ashley Huddart, Rangitoto College

The youth of today are digital natives, indigenous to the information age. This “information age” reflects a pattern of globalisation and, as a generation, this globalised world defines us. Even so, committing to a particular definition for Generation Z is difficult - we could go by age alone, labelling us the young people born from the late 1990s to the early 2000s<sup>1</sup>, or we could go by the attitudes and values that have been moulded by our media consumption. On a cellphone, laptop or tablet, we see the world’s events unfold in what feels like real-time. Only recently, we’ve seen more voices speak up for The Black Lives Matter Movement, with news articles, television segments and lives on social media documenting advocacy as it occurs. It is no surprise, then, that so many young people have such a firm focus on social justice; 73% of Generation Z have asserted the importance of political and social engagement to their identity<sup>2</sup>.

*“Our society has been having a long-overdue conversation about racism, prejudice and unity. Many voices have been heard. By and large, young people have not.”<sup>3</sup>*

NZ Racial Unity Youth Statement.

Excluding young voices from this “long-overdue conversation” prevents them from feeling “involved and empowered.” It is not as if many of our young people do not experience oppression, in fact, a study that investigated the educational experience of 70,000 rangatahi (Māori youth) showed that placing students into streamed classes based on unfair cultural or historical perceptions “severely limits” employment options<sup>4</sup>, perpetuating social inequality. This form of hegemony, which influences a person’s outcomes in life, is therefore a health issue. For this reason, *The Child and Youth Wellbeing Strategy*<sup>5</sup> identifies feeling “involved and empowered” as an outcome needed for health.

The youth of today will inherit the world. Whether this is the institutions that uphold systemic inequality, or the worst impacts of global warming, which, according to the Scientific American magazine, will “define the health of an entire generation,” youth desire a voice in the issues that impact them. But if youth are unable to have their voices heard, feeling unheard becomes one of the most significant health issues we face. If Māori youth are unfairly streamed and their academic outcomes are impacted, they cannot be “learning and developing,” which is another outcome that *The Child and Youth Wellbeing Strategy* suggests is critical for health. The intersectionality of these issues is also shown by Dr Mason Durie’s Whare Tapa Whā model<sup>7</sup>, which suggests that the four dimensions of Hauora represent the four walls of a whare. Feeling empowered is inexplicably linked to *Taha Wairua* (spiritual wellbeing) because it enables young people to find meaning and purpose in their lives. Without *Taha Wairua*, the whare, and a young person’s overall wellbeing is compromised. It is impossible to feel “involved and empowered,” when we are not involved in discussions of policy and activism. Thus, *The Child Wellbeing Strategy* should be focusing on listening to youth voices, as well as encouraging youth to speak up on the issues we care about.

Understanding the socio-cultural factors that determine a young person’s ability to express their voice effectively, and then have that voice heard, is a critical step in allowing youth to feel “involved and empowered.” The intersectional nature of youth voice demands multi-faceted critical evaluation and action, which this report will offer through the context of the education system and young people’s lives - according to the Racial Unity Youth Statement, “education is one of the most important and effective tools for eradicating racism and building unity.” Our ability to, first, lever education and our experience with media to develop and support young people’s voices will

<sup>1</sup> Who is Gen Z and How Will They Impact the Workplace?, (2019) Western Governors University.

<sup>2</sup> The Irregular Report: Gender, Activism, and Gen Z. (2019). *Irregular Labs*.

<sup>3</sup> Youth Statement On Race Relations in Aotearoa. (2019). *Race Unity Speech Awards*. <https://raceunity.nz/hui-2019>

<sup>4</sup> O’Callaghan, J. (2020). Māori high school students unfairly streamed in low-ability classes, report finds. *Stuff.co.nz*.

<sup>5</sup> New Zealand Government. (2019). *Child and Youth Wellbeing Strategy*. <https://childyouthwellbeing.govt.nz/>

<sup>6</sup> Wiggins, B. (2020). *New Zealand’s Schools to Teach Students How to Take Climate Action and Tackle Eco-Anxiety*.

<sup>7</sup> Ministry of Health. (2017). *Māori health models – Te Whare Tapa Whā*.

determine the effectiveness of health outcomes labelled in the *Child and Youth Wellbeing Strategy*.

Before we begin to understand how we can leverage education to empower youth, we first have to understand what the true value of youth voice is. This serves as a critique of the stereotype that youth voice has little relevance or tangible value. Then, we must understand where and why youth are facing barriers that prevent their voices from being heard. As intersectional theory suggests, some youth experience this doubly, as part of their race, class, or other factors. This limits the accessibility of spaces for political and social justice, and affects young people's spiritual and, therefore, overall wellbeing.

### **So, what is the value of youth voice?**

The reason young people have to fight to feel “*involved and empowered*” in the first place is because they have to prove that their voices need to be heard. One of the most common ways that youth voice is disregarded is with the argument that young people aren't mature enough, informed and connected enough, or experienced enough for their voices to be valuable<sup>8</sup>. A key aspect that this argument fails to realise is that when we deny youth their voices, we limit the potential for change in the societal structures that directly impact youth. Consider the example of Māori youth receiving unequal educational outcomes. Young people, particularly those who are marginalised, are often attuned to the consequences of the unjust forces that operate in their communities, societies, and schools. When these rangatahi are able to have their voices heard, those that do not experience the same hegemonic forces may be able to understand a new perspective, and this has the potential to unify youth, creating the potential for collective action. Likewise, youth can begin to overcome the limitations that determine their health outcomes, which, in this case, exists in the education system. This is also supported by *The Child and Youth Wellbeing Strategy*, which states that “young people are experts in their own lives and need to be heard on matters that affect them. Feeling a sense of value and belonging is a powerful motivator to contribute at home or in communities.”<sup>8</sup> Thus, increasing autonomy and mobilising youth voice into action can be an effective means of not only promoting youth wellbeing at an individual level, but also at an interpersonal and societal level.

The value of youth voice at a societal and interpersonal level can be attributed to youth being at a unique vantage point. Compared to previous generations, youth dominate social media, and the majority of young people have access and skill across a wide array of media platforms. This can be seen in the nearly seventy-five percent of teenagers aged thirteen to seventeen who report having at least one active social media profile, while fifty-one percent report visiting at least one social media website per day<sup>9</sup>.

For this reason, the argument that young people aren't informed or connected enough has little weight. I know that, for me, my access to social media has broadened my perspective, enabling me to see the diverse impacts that policy, institutions and communities have on a person's wellbeing. In other words, social media has enabled me to see issues from both a socio-ecological and an intersectional perspective. For example, @soyouwanttotalkabout released a post on The Green New Deal<sup>10</sup>, which systematically unpacked how this policy would help to achieve “greater racial and economic equity” at a community and interpersonal level. In the comments, this post inspired interaction and conversation, which is an example of how media platforms can be used by youth to learn about issues, and then express their own voices.

Connection and interaction is the value of youth voice, both through media and personal interactions. From young person to young person, youth voice can help to achieve collective action. The same sense of unity is visible online, where easy access to information can spark motivation and a desire to change, which supports *Taha Whanau* (social wellbeing), by increasing a sense of community, and contributes to *Taha Wairua*, by giving youth the confidence and motivation to fight for social justice.

### ***What is preventing these valuable youth voices from being heard?***

While social media can help to generate collective action, involvement and empowerment is not achieved if some voices are being left out. For example, Māori teenagers are on average, less likely to be confident in their digital

<sup>8</sup> Ministry for Culture and Heritage. (2020). *Events: Should the voting age be lowered to 16?* <https://nzhistory.govt.nz/classroom/contexts-activities/events-should-voting-age-be-lowered-to-16>

<sup>9</sup> American Academy of Child & Adolescent Psychology. (2018). *Social Media and Teens*.

<sup>10</sup> @soyouwanttotalkabout. (2020). *The Green New Deal*.

competencies than Pakeha.<sup>11</sup> This points to an underlying social and economic disadvantage faced by many Māori, where of the 914,000 New Zealand children aged 14 and under, 230,000 were living below the poverty line and 50% of these children were Māori and Pasifika, despite Māori only comprising 15% of the total population<sup>12</sup>. This disadvantage was highlighted by the COVID-19 lockdowns, where it has been shown that out of 668 rangatahi aged 12 to 17, more than 50 percent had, at best, a phone with internet that was shared between multiple family members<sup>13</sup>. This limits the ability for many Māori students to have their voices heard on social media, because they simply do not have regular access to it.

At a broader level, an extension of the argument that young people aren't mature enough is that they are too naive and impressionable to use their voices effectively. This perception likely stems from the idea that youth are being raised in an ecosystem dominated by easy access to media. Julian Birkinshaw, Professor and Chair of Strategy and Entrepreneurship at the London Business School, supports this perspective with his discussion on how "easy access to data makes us intellectually lazy."<sup>14</sup> While Birkinshaw addresses the wider population with his statement, this is particularly relevant for young people because youth culture is so closely tied to the internet, with a third of New Zealand teenagers spending four or more hours consuming online media in a single day.<sup>15</sup> A consequence of this, according to Birkinshaw, is that "the bigger the database, the easier it is to find support for any hypothesis you choose to test," furthermore, "we allow rapid processing power to substitute for thinking and judgment." A lack of media literacy could lead to some youth using misinformation disseminated through news sources to support their voices, which reduces the credibility of their stories and perpetuates the stereotypes on naivety that act as a barrier against youth voice. There does, however, seem to be a divide in this argument, where others claim that "because they swim through so much content, they're wildly savvy at spotting bogus content."<sup>16</sup> The argument is that because nearly 46% of college students say they intentionally curate their social media feeds, "Gen Z has an innate understanding of how to create and move online content, which makes them less susceptible to misinformation."<sup>14</sup> In my view, this logic is a little flawed. A young person's ability to manipulate social media algorithms, compared to older generations, could make them more vulnerable to misinformation if they are unable to detect that the sources that they use to support their hypotheses are false. These algorithms are designed to appeal to confirmation bias, creating an echochamber,<sup>17</sup> or an environment that appeals to our opinions rather than supporting the challenging of ideas.

The evidence presented here supports the idea that, yes, youth can be vulnerable to false information online if our over-consumption of media hinders our ability to think critically. However, the idea that a young person's argument and beliefs should be totally disregarded because of this is unfair, and it means that we miss out on the value of youth voice. In the context of feeling "*involved and empowered*," it is particularly important that we address this stereotype because not only does it limit youth voice, it particularly influences Māori youth. With Māori youth tending to have less access to social media, they are less likely to develop the skills needed to reduce their vulnerability to misinformation. This is an issue that needs to be addressed for youth voice to be considered a valuable resource. Given the incredibly large amount of media that youth consume daily, a large focus in the journey to make youth feel more "*involved and empowered*" should be on developing critical thinking skills.

### **How can critical thinking competencies be taught to young people?**

The New Zealand education system influences the lives of many young people, with children and teenagers spending an average of six hours per day in a learning environment.<sup>18</sup> The sheer amount of time young people spend in schools makes education one of the easiest ways to empower young people, and particularly when it comes to encouraging youth voice, which is why scholars at Harvard and Boston Universities refer to schools as "opportunity structures for sociopolitical development."<sup>19</sup> Thus, if we are to engage youth with critical thinking,

<sup>11</sup> Netsafe. (2018). New Zealand Teens Digital Profile: A Fact Sheet. <https://www.netsafe.org.nz/youth-factsheet-2018/>

<sup>12</sup> Child Poverty Action Group. (2017). *Whakapono: End Child Poverty in Māori Whānau*.

<sup>13</sup> University of Auckland. (2020). '*Digital divide*' lays education inequality bare. <https://www.newsroom.co.nz/ideasroom/digital-divide-highlights-education-inequality>

<sup>14</sup> Birkinshaw, J. (2014). Beyond the Information Age. <https://www.wired.com/insights/2014/06/beyond-information-age/>

<sup>15</sup> Netsafe. (2018). New Zealand Teens Digital Profile: A Fact Sheet. <https://www.netsafe.org.nz/youth-factsheet-2018/>

<sup>16</sup> Kight, S. (2020). Gen Z is eroding the power of misinformation.

<sup>17</sup> Thi Nguyen, C. (2019). The problem of living inside echo chambers. *The Conversation*.

<sup>18</sup> New Zealand Government. (2020). *The School System*. <https://tinyurl.com/y4ydrcc3>

<sup>19</sup> Seider, S., Jennett, P., Graves, D., Gramigna, K., El-Amin, A., Yung, J., Clark, S., Kenslea, M., Soutter, M., Sklarwitz, S., & Tamerat, J. (2016). Preparing Adolescents Attending Progressive and No-Excuses Urban Charter Schools to Analyze, Navigate, and Challenge Race and Class Inequality.

the focus should be on implementing this in the education system.

It can be argued that critical thinking is already a part of the school curriculum, with *The Child and Youth Wellbeing Strategy* reporting that “learning opportunities and experiences develop social, cultural emotional and cognitive competencies, including resilience, critical thinking and the ability to relate well to others.” And yes, these competencies are emphasised in The New Zealand Health and Physical Education Curriculum, where critical thinking is defined as “examining, questioning, evaluating and challenging taken-for-granted assumptions about issues and practices.”<sup>20</sup> If this definition of critical thinking was accurately and effectively incorporated into the curriculum, then it would develop the media literacy needed to navigate online platforms and help to combat the stereotypes that youth face when they try to enter political environments. But while critical thinking seems to be strongly emphasised in Health and Physical Education classrooms, it is not as well incorporated into other curriculums. I have found that science and math-based subjects, for example, are taught from set standards that teach set content, so while we may *examine* results, or even *question* why they occur, we don’t necessarily *evaluate* and *challenge* these assumptions and ideas.

Becoming a talented critical thinker requires a similar amount of targeted practice as becoming a talented athlete: around 10,000 hours.<sup>21</sup> Even for a student that takes a subject that promotes critical thinking, like Health, with daily one-hour sessions from Monday to Friday, forty weeks of the year, they would only reach 200 hours of targeted practice a year. At this rate, a student would have to go through over fifty years of schooling to reach those ten thousand hours. To achieve this quote, there are actions that schools could take: incorporate critical thinking into more aspects of the curriculum, and engage students with critical thinking in a way that is transferable to students’ everyday life. This allows students to practice critical thinking outside of school. A failure to practice one (or both) of these two ideas could explain why 75 percent of employers claim the students they hire after both high school and tertiary education “lack the ability to think critically,”<sup>22</sup> despite the curriculum emphasising its importance. Addressing this gap between what is written into the curriculum and what is being taught in an effective and engaging way is, therefore, paramount to enabling young people to overcome negative stereotypes in politics.

### **Can our education system effectively respond to the need for greater critical thinking education?**

The answer to this question lies in whether educators are willing to ask, *how can critical thinking be incorporated into curriculums like maths and science?* To both achieve the ten thousand hours specified above and to surpass the expectation that young people are naive, critical thinking needs to become an integral part of all areas of our curriculum. When the evaluation and challenging of ideas promoted by critical thinking is coupled with the inspiration to develop critical thinking skills outside of the classroom, young people are more likely to achieve ten-thousand hours and become good critical thinkers. So, how can we generate a solution to fulfill both of these aspects?

A potential answer could come from harnessing Generation Z’s desire for change, and the centrality of political engagement to so many young people’s identities. Paulo Freire’s Critical Consciousness Theory<sup>23</sup> is a relative of critical theory, referring to a student’s ability to recognise and critically analyse oppressive forces in their socio-political environment, allowing them to use their voices to work against hegemonic issues. The main difference between critical consciousness and critical thinking is that it develops on the skills learnt through critical thinking by allowing people to recognise oppressive structures and understand the intersectionality of issues.

### **Why critical consciousness over conventional critical thinking?**

By the definition of critical thinking supplied in the Health and Physical Education Curriculum, the practices of critical thinking and critical consciousness have similar outcomes: both aiming to challenge assumptions and stereotypes. Yes, critical consciousness is heavily rooted in a sociopolitical context and is usually aimed at uprooting hegemonic ideas, while critical thinking is generally applied in a broader context. Some may view this as a disadvantage of critical consciousness because it may be more difficult to integrate it into the curriculum. However, many of the skills used in both methods are similar, so a combination of both methods in modern teaching could be an effective

<sup>20</sup> Ministry of Education (TKI). (n.d.). Critical Thinking. <https://tinyurl.com/y6blgom4>

<sup>21</sup> Haber, J. (2020). *It’s Time to Get Serious About Teaching Critical Thinking*. <https://www.insidehighered.com/views/2020/03/02/teaching-students-think-critically-opinion>

<sup>22</sup> El-Amin, A., Seider, S., Graves, D., Tamerat, J., Clark, S., Soutter, M., Johannsen, J., & Malhotra, S. (2017). *Critical Consciousness: A Key to Student Achievement*.

<sup>23</sup> Crossman, A. (2019). *Understanding Critical Theory*.



way to improve critical thinking in youth. Finally, another advantage of critical consciousness is that it has a concrete plan for achieving this outcome, while critical thinking has many different methods and many different definitions, which could become confusing for educators. If 75% of employers believe the young people they employ are poor critical-thinkers, then the current model of teaching critical thinking is not working, and these employers then allow the stereotype against young people in politics to persist.

These stages to critical consciousness development are considered to begin with “teaching the language of inequality.”<sup>24</sup> The first step is to enable students to label inequality and injustice. This is where critical consciousness is a close relative of critical theory, a philosophy defined as the critique of society and culture to uncover and challenge power structures.<sup>25</sup> Educators reach this stage by helping students to recognise and label forms of oppression that may not be so outright, such as internalised or systemic racism, sexism, or homophobia. These skills are crucial because without the ability to recognise forms of oppression, students cannot recognise where changes need to be made, and it becomes significantly more difficult to have their voices heard.

Then, environments need to be created where students can interrogate and critically analyse the hegemonic forces that contribute to oppression. Evaluating the interactions between the forces that contribute to oppression is where critical consciousness adopts a framework from intersectional theory and the socio-ecological perspective. According to the health and physical education curriculum, “the socio-ecological perspective enables young people to look beyond the superficial and beyond themselves and to work towards a future that encourages people to question, to challenge and, where appropriate, to take action to improve practices related to health education.”<sup>26</sup> Critical consciousness, with its multiple stages, addresses this more effectively than critical thinking on its own. In turn, this helps to promote youth voice because it serves as an argument against healthism; it helps to move people beyond the assumption that health issues, particularly large-scale hegemonic issues, are the responsibility of marginalised groups to combat. When more people are taught to question, more students are taught to take action. The value of youth voice is then more fully realised.

This leads me to the final stage of critical consciousness development: critical action. Once we understand the context of hegemony and issues that threaten health through the lens of social, economic and political forces, students are able to engage in activities that challenge these issues.<sup>27</sup> Here, it becomes clear that critical consciousness is not necessarily made up of new ideas; rather, it is the combination of critical theory and critical thinking with intersectionality, empowerment theory and collective action, to support wellbeing. For these reasons, critical consciousness can be more successful in promoting critical action than traditional critical thinking; it contextualises these skills and allows youth voice to be applied to the issues we care about

### **Does critical consciousness education align with the values of The Child and Youth Wellbeing Strategy and the New Zealand curriculum?**

As well as integrating multiple theories, critical consciousness intersects education, politics and a young person’s health. Of the outcomes named in The Child and Youth Wellbeing Strategy, critical consciousness intersects multiple, not just the one focused on feeling “involved and empowered.” By contextualising critical thinking skills, critical consciousness effectively develops the “social, cultural, emotional and cognitive competencies,” that are prioritised in the “learning and developing” outcome of *The Child and Youth Wellbeing Strategy*. When critical consciousness is applied, it can help to shift hegemonic paradigms and enable young people to feel more “accepted, respected and connected.” For example, the Māori youth who have previously experienced unfair class streaming may be able to have their abilities recognised through collective action, which would help them to feel more “accepted” and then “connected.” This integrated approach is where *The Child and Youth Wellbeing Strategy* is currently flawed. While it recognises these important areas where youth wellbeing needs to be supported, it treats each of these outcomes as independent of each other. Our understanding of the Whare Tapa Wha model recognises that each ‘wall’ of the whare, or dimension of wellbeing, influences and supports the others. This gives rise to the conclusion that the strategy’s “learning and developing” and “feeling involved and empowered” outcomes are linked through their

<sup>24</sup> Ministry of Education, Te Kete Ipurangi (TKI). (n.d.). The socio-ecological perspective and health promotion in Health and Physical Education in the New Zealand Curriculum (1999).

<sup>25</sup> Akom, A.A., Ginwright, S., & Cammarota, J. (n.d.). Youthtopias: Towards a New Paradigm of Critical Youth Studies. *Youth Media Reporter*, 2(4), 1-30.

<sup>26</sup> El-Amin, A., Seider, S., Graves, D., Tamerat, J., Clark, S., Soutter, M., Johannsen, J., & Malhotra, S. (2017). Critical Consciousness: A Key to Student Achievement.

mutual support of *Taha Wairua* and *Taha Whanau*, and even *Taha Hinengaro* (emotional wellbeing). This is legitimised by a study which found that, through education, “critical consciousness of oppressive social forces can replace feelings of isolation and self-blame for one’s challenges with a sense of engagement in a broader collective struggle for social justice.”<sup>26</sup> In this way, both the “*feeling involved and empowered*” and the “learning and developing” outcomes can be addressed simultaneously and work together to encourage self-efficacy, collective action, and overall wellbeing. It also works in reverse; the same study showed that developing critical consciousness has been shown to improve educational outcomes.

Critical consciousness education, as well as the teaching of critical thinking, does take time. But for these reasons outlined above, the amount of time that critical consciousness education would require is not necessarily at the sacrifice or devaluation of other subjects because it complements other curriculums. Thus, this should not be treated as an argument against sociopolitical education.

### **Is our New Zealand curriculum currently supporting, or hindering critical consciousness development?**

In 2017, New Zealand ranked first in The Worldwide Educating For the Future Index, a global measure that investigated the effectiveness of education systems in adapting to modern demands. In response, Education Minister Nikki Kaye said, “It means the next generation of young New Zealanders will be world leaders in areas such as problem solving, digital technology and critical thinking.”<sup>28</sup> On paper, this reflects positively on New Zealand’s potential when it comes to supporting critical consciousness development. This is a questionable statement, however, because we are only comparing our education system to every other education system; MindLab Founder Frances Valintine calls this playing “the game of comparing our country to every other nation who also offers an analogue, industrial, education system.”<sup>29</sup> This education system is the one built on rote learning rather than critical thinking, and Valintine continues by asking, “are we so obsessed with measurement and comparisons that we will seek justification of our dated practices and failing education models, just to deflect the hard conversations that we should have had years ago?” This appears to be a harsh judgement of our education system, but it is true that comparing education systems that all operate with similar methods is not the most accurate method of comparison.

So where, specifically, do changes need to be made to our curriculum? As we’ve already covered, the first stage to critical consciousness development is recognising where hegemony exists. Youth are in a unique position, in the education system, where this stage can help those who experience oppression to work alongside those who may have been previously unaware of hegemony existing in our society. In History, many students study the Black Civil Rights Movement, while in Health, students may investigate the attitudes and values that contribute to being unfairly streamed in the education system. But although both of these subjects teach content that covers oppression in both a historical and contemporary context, for them to align with true critical consciousness development, Friere and other scholars emphasise that the “language of inequality” “cannot be developed through top-down teaching methods in which teachers simply transmit facts about structural oppression to their students.”<sup>30</sup> It prioritises a set of pedagogical practices over teaching facts and content. This transmission of facts can occasionally be seen in our education system, where my own experience of studying for exams is not too dissimilar from the seventy-six percent of students from the United Kingdom who felt that they were fixating on passing exams and not developing real world skills, like critical thinking.<sup>31</sup> This isn’t always the case, however. History can promote an understanding of causes and consequences in the context of events, attitudes and values. Likewise, health has a focus on *how* stereotypes or attitudes and values can affect health outcomes, which are examples of pedagogical practices that have the potential to advance critical consciousness development.

Stage two centers on creating environments where students “interrogate and critically analyse the hegemonic forces that contribute to oppression.” Logical subjects wherethis could be integrated into the curriculum are English and the Social Sciences. Classroom discussions about literature could help youth to analyse biases, attitudes or values portrayed in text and media, which would enable youth to effectively critically analyse the media we are presented with in our daily lives. This is central to dismantling one of the barriers against youth voice. However, receiving the maximum benefit to critical consciousness education from these discussions could require some changes to the curriculum. To effectively analyse these biases portrayed in text, we need to consume a wide range

<sup>28</sup> Education Central. (2017). New Zealand ranked best in world at preparing students for the future.

<sup>29</sup> Valintine, F. (2017). Opinion: Frances Valintine – Future-focused? Who are we fooling?

<sup>30</sup> Education Week. (2017). Why Dewey Needs Freire, But Not Vice Versa; Critical Consciousness-Raising as a Form of Deeper Learning.

<sup>31</sup> Crossley, M. (n.d.). Battle Racism by Updating GCSE Reading Lists. <https://tinyurl.com/y4zej2uh>

of literature that comes from multiple perspectives, including our Māori authors, women, and more. Listening to the voices of people who experienced daily injustices will allow students to learn about how inequality exists, and using this as a platform for discussion about hegemony allows a critical analysis and confrontation of bias to occur. It is easy for an English curriculum to turn to eurocentric, heteronormative texts because these have been historically prioritised over BIPOC (black, indigenous and people of colour) voices and treated as “classics.” While these classics do have a place in our reading curriculum, a diversified reading list would help to more effectively enable students to interrogate and understand biases. The good news is that achieving this requires relatively little effort; while curriculums like the GCSE have set reading lists, which have been criticised in a petition by Molly Crossley for having “very little to do with our modern society,”<sup>32</sup> NCEA English usually allows teachers to choose the text they study, so there is easily room to introduce a more diverse range of texts alongside traditional classics.

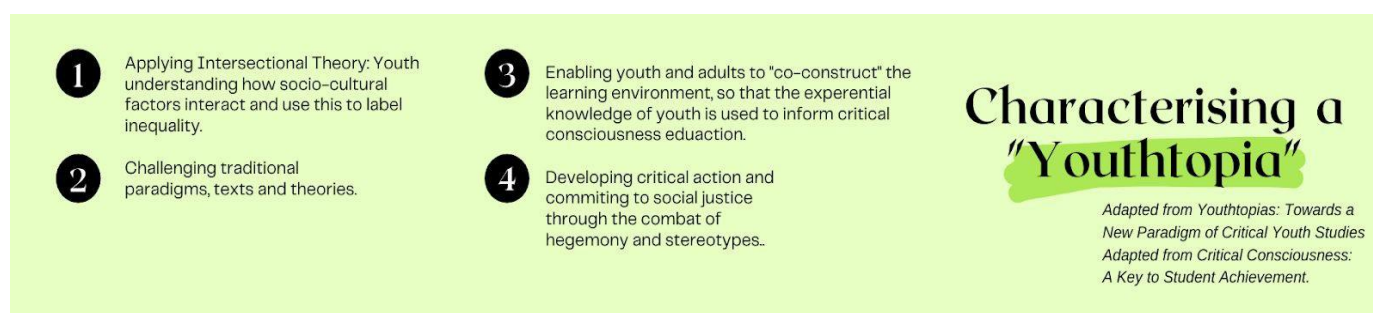
The final stage, teaching students how to take action, is perhaps the one where the New Zealand curriculum falls short the most. We need to ask whether students know how to apply the skills they are taught in earlier stages of critical consciousness development to their own lives, in order to amplify youth voice. While many social science subjects do focus on unpacking issues in the world, few discuss how to apply this to positive change. Again, the Health and Physical Education curriculum does achieve this by encouraging health promotion and collective action, but to successfully achieve critical consciousness, these values need to disseminate into more subject areas.

Overall, it could be argued that the New Zealand curriculum is already taking strides towards critical consciousness development, particularly in areas of the Health and Physical Education curriculum. However, there are still gaps, particularly for those who do not take these subjects that prevent students from reaching critical consciousness. All three stages of sociopolitical development must work in conjunction for true critical consciousness development, and given that different subject areas have different strengths, we must achieve the integration of multiple curriculums and subject areas. The most practical way to achieve this would be through a programme that uses teacher expertise across multiple curriculum areas.

### So how can we, practically, take action to promote critical consciousness and youth voice?

With the strengths and weaknesses of the current curriculum identified, what can we do to maximise our schools' and communities' potential for critical consciousness development and promote the health of our young people? A potential framework discusses the creation of “youthtopias,” which the authors defined as “traditional and non-traditional education spaces where young people depend on one another’s skills, perspectives, and experiential knowledge.”<sup>33</sup> This creates the base for community empowerment through interpersonal connections. This is a useful model to inform our development of a more critical curriculum by “building on the power of collective agency in urban schools and communities—creating Youthtopias.” To form a “youthtopia,” the report describes five key features, which I adapted in the form of a diagram.

*Figure One: The Characteristics of a Youthtopia.*



<sup>32</sup> Ali, A. (2015). Schools are 'too focused on exam results and don't prepare students for the workplace', survey finds.

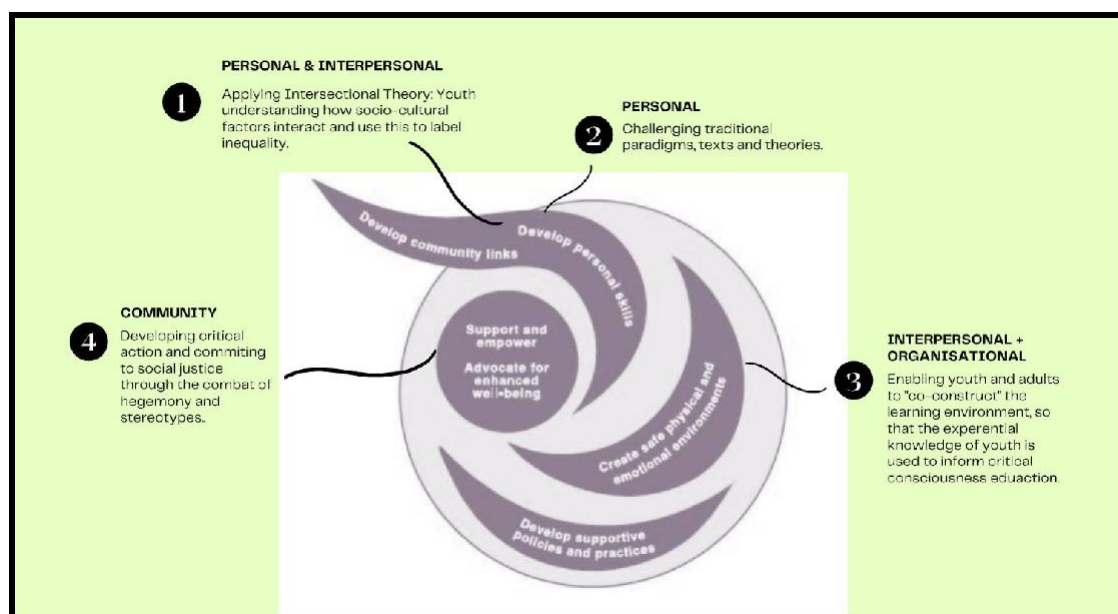
<https://tinyurl.com/y4kja8g>

<sup>33</sup> Akom, A.A., Ginwright, S., & Cammarota, J. (n.d.). Youthtopias: Towards a New Paradigm of Critical Youth Studies. *Youth Media Reporter*, 2(4), 1-30.

Many of these stages directly correspond to the stages of critical consciousness developed by Friere and modern scholars. This includes an emphasis on challenging ideas and texts, as shown in stage three of the diagram, as well as recognising and labelling inequality, as shown in stage one. Furthermore, my evaluation of our current education system shows that New Zealand already has some of the groundwork in place to create an environment that successfully promotes critical consciousness, or the creation of a “youthtopia.” For example, English already has the potential to encourage students to challenge traditional texts. But fully realising the vision of a “youthtopia” in our schools and communities will require a model of health promotion. Once more, we need to question how we can integrate critical consciousness education into the curriculum practically and in a way that maximises the health benefit for our young people. Health promotion in the context of critical consciousness education requires a socio-ecological approach, in order to fulfil one of the requirements of a youthtopia: that youth and adults “co-construct” the learning environment. This is supported by a previous statement from my report that concludes that the value of youth voice is its unifying effect. Why, then, would we choose a model of health promotion that focuses solely on the individual? Models like the Behavioural Change Model or the Self-empowerment model would be ineffective and unproductive because the former incorrectly suggests that addressing the negative attitudes and values that arise from hegemony is the responsibility of those that experience them, and the latter fails to integrate changes to youth behaviour (in terms of the development of critical consciousness) with interpersonal and community changes. The self-empowerment model could, however, be used in tandem with a collective action model. The nature of critical consciousness is that it has a strong focus on hegemony and stereotypes, and many of these are perpetuated in various forms, including structural and institutional oppression, which require community and organisational change. Individual and internalised oppression then require interpersonal and self-focused aspects. The method of health promotion that is chosen when integrating critical consciousness education into the curriculum must span across multiple levels of the socio-ecological perspective to teach students to approach hegemonic issues with this perspective.

The Ottawa Charter uses this perspective to provide recommendations for health promotion at the personal, interpersonal, organisational, community, and governmental levels. To show the relevance of the Ottawa Charter to the features of a youthtopia provided previously, I created a diagram showing where each feature was applicable to the levels of the socio-ecological model and the Ottawa Charter.

*Figure Two: The Connection between the Socio-ecological Model, the Ottawa Charter and the Features of a Youthtopia.*



The missing link between the Ottawa Charter and the features of a youthtopia shown in this diagram is the development of supportive policies and practices; in the socio-ecological model, this is referred to as change at a governmental level. Improving critical consciousness education may be achievable without governmental change, because integrating it into the curriculum occurs at an organisational level, and the benefits of this education filter into personal and interpersonal skills and connections. However, I would expect that to create change at a community level, to untangle hegemonic attitudes and values, youth voice also needs to be heard in governmental policy. This

allows the social capital that is created in previous stages of critical consciousness development to become social mobility. Equally, I expect that youth are more likely to engage in critical discussion and action in the first place if they feel that they are able to create actual change. Multiple studies conclude that “one effective strategy to foster youths’ political efficacy development has been through involvement in decision-making processes for future community or social action.”<sup>34</sup> *The Child and Youth Wellbeing Strategy* has definitely made a start on this, and is beginning to provide more avenues for youth voice in The Youth Voice Project, and under this, The Hive. The process of designing The Hive was led by fifteen rangatahi, with adults only “providing support when needed/requested.”<sup>35</sup> This successfully fulfils feature three shown in figure one, as youth and adults are co-constructing this environment. This environment is then used to allow youth to engage in discussions around policy, and is designed to be easily accessible from social-media platforms and text, and web pages containing “policy for dummies,” fully explaining the causes and consequences of proposed policy. It also helps to fulfil the “missing link” that I discussed, and is a helpful start to fully realising the vision of a “youthtopia,” integrated with the socio-ecological perspective. There are two other main links to the government described in *The Child and Youth Wellbeing Strategy*: The Youth Advisory Group for the Minister of Education, involved in discussions of policy in the education system, particularly around issues of racism and discrimination in schools, and an advisory group for environmental policy.

It is clear, here, that *The Child and Youth Wellbeing Strategy* is already making strides towards allowing youth to feel “involved and empowered,” and although there is no explicit mention of critical consciousness, a framework is in place for allowing youth to express opinions directly to the government. It is tempting to argue that the government is, therefore, successfully allowing youth to become “involved and empowered”. But are the current avenues ambitious enough? Do they allow for meaningful youth voice, or are they merely a gesture? The final two links described here are narrow in scope, and although these are areas that many youth are passionate about, limiting the scope of youth voice to specific fields means that New Zealand is not receiving the full benefit of youth voice. Another issue with “advisory panels” is that they are limited to a handful of youth, and there is a risk that young people with voices to share, particularly our minority communities, don’t have their voice heard. The Hive has the potential to cover a greater scope, but since its launch in August 2019, youth have only been involved in the discussion around one policy, The Biodiversity Strategy. Thus, youth voice is not being used effectively.

I have faith that *The Child and Youth Wellbeing Strategy* and the New Zealand Government can become more ambitious; even as I’ve been writing this report, more initiatives have been introduced - a notable one is Kau Tulī, an all-Pasifika youth advisory group for The Ministry of Pacific Peoples. To reach a greater level of ambition, youth and the government need to form groups with a greater level of intersectionality. Currently, the creation of distinct youth advisory groups fails to understand how different aspects of a young person’s socio-political identity interrelate to create their unique voice. For example, distinct climate action and Pasifika youth advisory groups potentially limit discussions around how climate change can disproportionately impact Māori and Pasifika communities.<sup>36</sup> Therefore, we need to put channels in place that connect youth advisory panels with each other, create more avenues so that more youth can partake in these groups, as well as simply connecting the government to youth.

The levels of the socio-ecological model are interrelated. Making way for intersectional youth advisory groups or a more expansive version of The Hive is dependent on youth becoming critically conscious and empowered in the first place. Specifically, on them developing the skills to recognise societal issues and use this as a platform for critical thinking. This is where our communities and our organisations come back into the picture. I’ve already discussed how our New Zealand schools have the potential to become “youthtopias.” Many of the subjects in our schools already have the potential to develop the interpersonal and personal skills needed to become critically conscious. The next step is for students to get a sense of how these skills intersect, so that they begin to practice these skills outside of the classroom, as well as within.

To address this, *The Child and Youth Wellbeing Strategy* could devise a programme that intersects both the “involved and empowered” and “learning and developing” outcomes. Such a programme could travel from school to school and, in doing so, foster connections between schools. More importantly, a travelling programme would limit the resources that individual schools need to use to create critical consciousness programmes. For students in lower-income areas, particularly the same Māori who don’t have regular access to devices, they are often less likely to have

<sup>34</sup> Matthews, C., Medina, M., Bañales, J., Pinetta, B., Marchand, A., Agi, A., Miller, S., Hoffman, A., Diemer, M., & Rivas-Drake, D. (2019). *Mapping the Intersections of Adolescents’ Ethnic-Racial Identity and Critical Consciousness*.

<sup>35</sup> The Hive NZ. (n.d.). <https://thehive.nz/>

<sup>36</sup> Parahi, C. (2018). Māori are among the most vulnerable to climate change.

schools that can afford expensive programmes. Thus, it would contextualise critical thinking skills and promote youth dialogue for *all* students, regardless of their socio-economic status.

In fact, the concept of open dialogue is key to enabling youth to feel involved and empowered. This dialogue must occur between youth advisory groups, between schools, and between students, so that a “youthtopia” can be created. If schools fail to effectively introduce critical consciousness education through a programme like the one described above, there will be little positive impact from creating youth advisory groups. Youth may be encouraged to be involved, but many won’t be empowered. Conversely, if schools do effectively introduce this programme, but the government’s Child Wellbeing Strategy fails to provide ambitious avenues for youth voice, youth may be empowered, but won’t necessarily be involved. Either way, New Zealand will not benefit from the value of youth voice.

### **A Final Statement:**

The beauty of critical consciousness education is that it draws on the currents of motivation, the desire for change that ripples through the young people of today. It also inspires motivation for change in those previously apathetic or ignorant, and compounds the unifying value of youth voice to create powerful collective action. It develops social capital, and the social competencies that are emphasised in *The Child and Youth Wellbeing Strategy*. Its intersectional nature encourages youth to critique society from multiple lenses: social, economic and political, to understand hegemonic issues that persist in our society. Through this intersectionality, it develops links between aspects of The Child and Youth Wellbeing Strategy particularly “*feeling involved and empowered*,” “*feeling accepted, respected and connected*,” and “*learning developing*,” thereby strengthening the strategy’s ability to promote youth health.

When we lever our current curriculum in a way that promotes critical consciousness, we draw on the expertise that already exists among many of our teachers. This, when combined with personal, interpersonal and societal dialogue, as well as a more intersectional approach to issues, will allow our curriculum to adapt to the current climate faced by today’s youth. It will enable youth to overcome the attitude that we are too young, too naive, or too media-illiterate, and will enable our voices to be taken seriously. When these voices can travel to the government, this will improve health outcomes across wider society, as well as within the individual.

Using critical consciousness to develop the competencies needed to navigate today’s digital-centric world will enable young people to effectively use the environment we have grown up in. These digital platforms, if used in a critically-conscious way, could also become avenues for youth voice, and the global nature of these will foster positive relationships, creating the interpersonal dialogue needed to realise the power of youth voice and improve youth wellbeing. This can only be achieved with combined action and change to the way youth voice is used in the government, empowered through the education system, and discussed through the media.



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# Exploring Social Connection and Belonging in Children and Young People

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**Waiho i te toipoto, kaua i te toiroa.**

***Let us keep close together not far apart.<sup>1</sup>***

What does it mean to be a child or young person? It means growth: growth which is defined by our social connections and our near-existential search for belonging. The importance of positive social connections in youth cannot be understated. It is through connecting with others that we gain a self-actualised understanding of ourselves and our relationship to society. This is especially important in children and young people, as developmental neuroplasticity means that the relationships we build when we are young—with others and with society—often determine our life course and *hauora* (wellbeing) outcomes<sup>2</sup>.

A fundamental and universal motivation as to why we seek social connection—whether positive or negative—is our need to belong, especially in children and young people. Child welfare veteran Dr. Amelia Franck Meyer notes, “human infants are born the most vulnerable infants on the planet” and as such, “It is not enough to be physically safe; children must be psychologically safe.”<sup>3</sup> Children and young people, therefore, seek social connection and belonging to feel protected, loved, and valued; this borders on biological and social instinct.

As such, *taha hinengaro* (mental and emotional wellbeing) depends upon social connection and belonging just as much as our *taha whanau* (social wellbeing) does. *Taha wairua* (spiritual wellbeing) is shaped by our sense of belonging to our whānau and communities. Though less directly, the desire to develop social connections can improve our *taha tinana* (physical wellbeing), through team sport. Social connection can be thought of as a mutual acceptance and respect between people, one that is free from judgement and that provides comfort, security, and self-assuredness.<sup>4</sup> However, more broadly, it is defined as, “the subjective awareness of being in close relationship with the social world.”<sup>5</sup> As such, the term encompasses all interpersonal relationships and our awareness of these relationships. Similarly, belonging can be interpreted to be the sense of strength and sustenance we receive from such relationships; accordingly, ‘belongingness’<sup>6</sup> or the need to belong is understood to be fundamental to the human experience, affecting all dimensions of our relationships and of *hauora*. When our personal identity does not conform to society, our need to belong may influence us to twist our identities or our personalities; this results in psychological stress and a fractured identity. Thus, true ‘belonging’ is understood throughout this report as the subjective experience of having our identities embraced and celebrated within our social connections.

New Zealand’s children and young people face a variety of challenges regarding social connection and belonging. 24% of young New Zealanders (aged 15 to 24) experience loneliness at least ‘some of the time’, making us the loneliest age group in New Zealand.<sup>7</sup> Young people (aged 15 to 24) also have a suicide rate of 16.8 per 100,000 people in 2016<sup>8</sup>, suggesting that we disproportionately do not have positive social connections to comfort us and provide a sense of belonging. I argue this is in part due to socioeconomic barriers to positive social connection, which I will detail later. Furthermore, discrimination and bullying on the basis of culture or identity—the positioning of some groups as not ‘belonging’ in wider society—is prevalent throughout New Zealand, affecting the ability of children and young people to have positive social connections. Finally, social media poses its own challenge as social connections are

<sup>1</sup> Massey University, *Māori proverbs*.

<sup>2</sup> Wu et al., *Adolescent Res Rev*, pp. 153–162.

<sup>3</sup> Meyer, “The Human Need for Belonging” (speech, TEDx Minneapolis, August, 2016).

<sup>4</sup> Brown, *The gifts of imperfection: let go of who you think you’re supposed to be and embrace who you are*.

<sup>5</sup> Lee and Robbins, *Journal of Counseling Psychology*, p. 338.

<sup>6</sup> New Zealand General Social Survey 2018.

<sup>7</sup> Baumeister and Leary, *Psychol Bull*, pp. 497–529.

<sup>8</sup> ‘Suicide Facts: Data tables 1996–2016’, *Ministry of Health*.

increasingly formed and developed online.

This report will critically evaluate social connection and belonging in children and youth, employing a socio-ecological perspective to examine the connections between the self, others, and wider society. Thus, multiple ‘levels’ of belonging will be discussed, including in teams, in schools, in cultures, and online.

As a platform for this analysis, I will examine the New Zealand Government’s Child and Youth Wellbeing Strategy (2019)<sup>9</sup>, with significant emphasis placed on the outcome area, “Children and young people are accepted, respected and connected.”<sup>10</sup> Thus, the focus of the report will be on the interrelationships between social connection, belonging, and, specifically, *hauora* (wellbeing) in children and young people. I will determine how well the Strategy—a positive start to improving child and youth wellbeing in Aotearoa—addresses issues surrounding social connection and belonging in children and young people. However, my critical evaluation will not be limited to the substance in the Strategy itself, addressing issues that have been, whether intentionally or unintentionally, largely disregarded by the Government.

### **Fostering Self-Efficacy, Resilience and Wellbeing**

Social connection and a sense of belonging amongst children and young people builds individual self-efficacy and contributes positively to *hauora*. Self-efficacy is more than just self-esteem; self-esteem is our sense of self-respect and self-worth, whereas self-efficacy is our belief in ourselves to achieve our goals and better our lives. Self-efficacy, therefore, builds on self-esteem.

Social connection develops a sense of self-efficacy through mastery experiences and vicarious experiences. Mastery experiences—when we take on new challenges and succeed—support self-efficacy as we build our self-esteem and see that we are able to accomplish our goals and overcome challenges.<sup>11</sup> Similarly, vicarious experiences heighten self-efficacy as we see others (role models), in similar positions to ourselves, achieving highly.<sup>12</sup> Social connection fostered this in my own life when I took on the challenge of joining a jazz combo, despite having little improvisation experience. Vicarious experiences through my several role models allowed me to nurture my skills, which in turn allowed me to have mastery experiences through my eventual success, achieving a Silver Award at the Auckland Jazz and Blues festival. This built my sense of self-esteem and self-efficacy, which improved my sense of *taha wairua* and *taha hinengaro*.

Self-efficacy in turn builds resilience as individuals with high self-efficacy are more able to recover from setbacks and disappointments, as well as challenges in their environment. For instance, healthy relationships build a sense of self-efficacy and self-esteem that can provide “buffering protection that can keep even very challenging experiences from producing toxic stress effects.”<sup>13</sup> Self-efficacy also builds empowerment and intrinsic motivation as children and young people are better able to envision success and the rewards of that success. This leads them to challenge themselves and develop resilience, resulting in a positive feedback cycle as they see further success, further building their sense of self-efficacy. As a Cambridge University study<sup>14</sup> found, “Adolescents’ self-efficacy beliefs... contribute to promote positive expectations about the future... to experience more positive emotions.” Thus, self-efficacy not only builds wellbeing outcomes in the short term for children and young people; through facilitating resilience and further opportunities to develop self-efficacy, it also results in improved life course wellbeing outcomes.

This relates to the self-empowerment model of health promotion, where individuals are empowered to take ownership of and responsibility over their health within their environments.<sup>15</sup> However, the Strategy solely takes a collective action approach<sup>16</sup> to child and youth wellbeing, to change environmental and sociocultural determinants of health around the child or young person, in order to change their *hauora* outcomes. This is absolutely positive, as long-term changes to wellbeing require systemic changes; however, it is important to recognise that change occurs on

<sup>9</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*.

<sup>10</sup> Ibid., pp. 51-53.

<sup>11</sup> ‘Self-Efficacy Theory’, *Encyclopedia of Personality and Individual Differences*.

<sup>12</sup> Ibid.

<sup>13</sup> Center on the Developing Child at Harvard University, ‘Applying the Science of Child Development in Child Welfare Systems’.

<sup>14</sup> Caprara et al., *Epidemiology and Psychiatric Sciences*, pp. 30-43.

<sup>15</sup> ‘Models of health promotion’, *Te Kete Ipurangi*.

<sup>16</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*, p. 29.

both individual and systemic levels. Systemic changes, though indisputably necessary, occur over generations. Considering the urgency of the crisis surrounding child and youth wellbeing that we face, it is essential that the Strategy, a collective action strategy, better lay out a mechanism to empower children and young people to feel self-esteem and feel as though they can change their subjective wellbeing even in challenging environments. We need immediate collective action to inspire self-empowerment. One way to do this, therefore, is to facilitate opportunities for social connection, building self-efficacy, resilience, and wellbeing.

### Significance of Belonging in an Indigenous Context

The dominance of Eurocentric ideologies has given us in Aotearoa a misguided view of health. Fortunately, we only have to draw on Māori and Pasifika conceptions of health which emphasise the way that sociocultural factors influence wellbeing for an understanding of the importance of social connection and belonging to overall wellbeing, especially within Māori and Pasifika communities.

### A Hierarchy of Needs?

Nearly all discussion surrounding child and youth wellbeing in New Zealand, including around the Strategy, centres on the profound issue of child poverty—specifically on material hardship. Even media articles<sup>17</sup> specifically focussed on “child wellbeing” often solely discuss child poverty, lacking any acknowledgement of other sociocultural barriers to wellbeing in New Zealand. Of course, this is understandable; we face an urgent child poverty crisis, one that impacts all dimensions of *hauora* for our children and young people. Yet tackling this inequality must not overshadow broad and wide-ranging challenges around family dynamics, socioeconomic barriers to social connection, racism and discrimination, and social media which can also restrict children and young people’s wellbeing.

This speaks to the prevalence of our often flawed understanding in New Zealand which is built upon Eurocentric conceptions of wellbeing. Though the Strategy recognises that “wellbeing needs holistic and comprehensive approaches”<sup>18</sup>, we in New Zealand often conceive of wellbeing in a similar way to that of Abraham Maslow’s highly influential ‘hierarchy of needs’<sup>19</sup>. This theory proposes that our wellbeing needs can be arranged in a hierarchy from physiological needs, to safety needs, to love and belonging, to esteem, and finally, to self-actualisation. Maslow argued that each need on the hierarchy was a prerequisite for the need above it. The normality of this worldview—that physiological needs are more significant, or more fundamental, than social ones—is evidenced by the singular focus on material poverty when discussing broader issues of child and youth wellbeing in New Zealand. The relevance of this perspective in New Zealand is also evident in the Government’s Early Childhood Curriculum, *Te Whāriki*, in which the strand, ‘belonging’, is independent of and second to the confusingly-named strand, ‘wellbeing’, which only encompasses physical, emotional, and safety needs.<sup>20</sup>

On a surface level, this makes intuitive sense: the prerequisite to full wellbeing must be, after all, ‘survival’—physiological health. Yet I reject the hierarchical nature of the public’s current, narrow understanding of wellbeing as it suggests that social connection and belonging is, comparatively, of less importance. It is undeniable that children are biologically hardwired to seek social connection. This is no coincidence, however; “belonging to a community provides [a] sense of security and agency,”<sup>21</sup> as, after all, we “evolved in small groups, in which the fulfillment of survival and reproductive needs depended on having close connections with others.”<sup>22</sup> Children and young people, therefore, cannot experience subjective wellbeing when their social connection and belonging needs are unmet. Furthermore, this Eurocentric model does not accurately reflect the experiences of Māori children and young people in New Zealand, who, despite experiencing higher rates of material hardship (23.3% of children) compared to the national average (13.4% of children)<sup>23</sup>, often possess a strong sense of belonging to their *whenua* and *whakapapa* and positive social connection through the principle of *whanaungatanga*<sup>24</sup>. Thus, our hierarchical understanding of wellbeing in New Zealand must be amended to acknowledge that the social aspect of wellbeing is equally as important as the

<sup>17</sup> ‘NZ ranked near bottom of UNICEF child wellbeing ratings’, *RNZ*.

<sup>18</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*, p. 29.

<sup>19</sup> ‘Maslow’s Hierarchy of Needs Explained’, *ThoughtCo*.

<sup>20</sup> Ministry of Education, *Te Whāriki*.

<sup>21</sup> Rutledge, ‘Social Networks: What Maslow Misses’, *Psychology Today*.

<sup>22</sup> DeWall et al., *Journal of Personality*.

<sup>23</sup> Statistics New Zealand, ‘Child Poverty Statistics: Year Ended June 2019’, *Stats NZ*.

<sup>24</sup> Statistics New Zealand, ‘Whanaungatanga important in life satisfaction for Māori’, *Stats NZ Archive*.

physical one, so that our approach to enhancing wellbeing in children and young people is holistic, non-reductive, and encompasses all dimensions of *hauora*.

Fortunately, Māori health models such as Mason Durie's *Te Whare Tapa Whā* widely used in health promotion in New Zealand, provide a more comprehensive and holistic understanding of wellbeing in children and youth. This is because these models acknowledge that alongside meeting physical needs, spiritual, social, and mental and emotional needs are just as essential for *hauora*. These dimensions of *hauora* are arranged not in a hierarchy but as four equal sides of a *wharenuī*<sup>25</sup>. Though Māori health models best apply to Māori cultures and communities, I believe *Te Whare Tapa Whā* can and should be universally extended to all New Zealanders in health promotion, so we understand the importance of social and spiritual health alongside physical and mental health for our children and young people.

Part of the Strategy's vision lies in the way it uses *Te Whare Tapa Whā* as an underpinning model<sup>26</sup> to coordinate its approach to wellbeing issues in Aotearoa; this is necessary because improving wellbeing outcomes requires both macrosystemic and microsystemic approaches that address social connection issues. Though national government can shape the nation, social connection and belonging often operate on a smaller scale, requiring community and whānau-led strategies. Thus, to avoid overshadowing the significance of social connection and belonging, we should take a holistic approach to wellbeing, inspired by Māori health models, so every child and young person in New Zealand can experience *hauora* in their communities.

### Belonging in a Collective Identity

In Māori and Pasifika cultures, belonging is more than just the unification of individuals within a collective; rather, it is a more significant cultural process that shapes one's identity and dictates one's position within environments.

For Māori, this is manifested in the rich concept of *whanaungatanga* - kinship through shared experiences like *whakapapa* (genealogy). The significance of this must not be underestimated: "whakapapa links all people back to the land and sea and sky and outer universe,"<sup>27</sup> so in 'belonging', Māori feel a close connection not only to social groups but also to the wider environment. Generalising through the socio-ecological perspective, we see that the concept of the 'self' is defined by its position within an environment and also by its sense of place. In *whanaungatanga*, "interdependence with each other rather than independence is the goal."<sup>28</sup>

Similarly, in Samoan culture, the concept of *Vā* forms a spiritual connection between self, others, society, and environment in "the Unity-that-is-all".<sup>29</sup> Controversially, one study argued that, "The Samoan person does not exist as an individual. There is myself and yourself. Through myself, you are given primacy in light of our collective identity and places of belonging (*fa'asinomaga*), our genealogical lineage (*tup'aga*), and our roles and responsibilities and heritage (*tofiga*)." Though of course Samoan people are individuals, this notion of "collective identity" speaks to the importance of belonging in Pasifika cultures, where belonging shapes identity and constructs it.

Being half Japanese, I believe I have at least an inkling as to the significance of this worldview and its values - belonging to each other and belonging to nature. The Shinto philosophy of *musubi* similarly ties all *kami* (spirits) - including elements of nature - and people together. The word *musubi* translates to 'knot'. To follow *kannagara no michi* (the way of the *kami*), we must coexist in harmony with our spiritual and social environments. I have inherited this value system from my family, and it has developed my *taha wairua* through enhancing my sense of belonging.

Thus, in many non-Western traditions, belonging operates on a wider level than simply in small social groups. To experience subjective wellbeing, children and young people of these cultures must be empowered to embrace their cultural identities through positive social connections that allow them to develop this sense of belonging - to culture, to nature, to place.

In contrast, traditionally, Western cultures are individualistic; as such, the apparent significance of belonging is

<sup>25</sup> Ministry of Health, 'Māori health models – Te Whare Tapa Whā'.

<sup>26</sup> Glover, 'A literature review and commentary on the use of a kaupapa Maori approach within a doctoral study of Maori smoking cessation'.

<sup>27</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*, p. 27.

<sup>28</sup> Williams and Broadly, *Ngā Tikanga-ā-Mārau mō ngā Tauira | Resource Kit for Student Teachers*, New Zealand, Ako Aotearoa National Centre for Tertiary Teaching Excellence.

<sup>29</sup> Wendt, *Span*.

reduced. However, the biological instinct for social connection would suggest otherwise. Experiencing life solely as an individual with a fixed identity is an isolating experience and inhibits our *taha wairua*, as we ‘float’ between transient social groups, never gaining a sense of identity beyond our inner sense of self. Fortunately, the vast majority of children and young people - regardless of their cultural values - I believe, are able to experience positive social connection and belonging, if they are empowered to do so.

In discussing Māori conceptions of belonging, it would be disingenuous to ignore Eurocentric policies, practices and philosophies that have alienated Māori from their collective identities. Colonisation and industrialisation manipulated Māori values of tribalism to subvert the cultural heritage of *whanaungatanga*, disempowering Māori. This has constructed a Eurocentric hegemony, one that “bifurcates the world into the ‘West and the Rest’,”<sup>30</sup> and that creates a mythical hierarchy which juxtaposes European civilisation against the indigenous ‘other’. Historically, land confiscations and the suppression of te reo in schools, for instance, have left Māori children and young people to this day less able to identify with their *whakapapa* and understand their relationship to *Papatūānuku* (Mother Earth). We have seen that belonging is especially important for the wellbeing of our Māori children and young people; as such, this is an issue that must be resolved.

The Strategy needs a greater recognition of the importance of *whanaungatanga* for the wellbeing of Māori children and young people especially and equally of the impact of colonisation of *whanaungatanga*. I believe the most effective way to improve the wellbeing of New Zealanders is to take an equity-based approach through targeting specific population groups with the greatest need. Māori are not listed as one of these “greatest needs” groups within the Strategy. Though other “needs” will capture many Māori, the Strategy must acknowledge unique challenges faced by Māori in our Eurocentric society. Astonishingly, *whanaungatanga* is mentioned only once and little policy detail is provided as to how New Zealand will ensure that its Māori children and young people “understand [their] identity, connections to others and sense of place, land and time.”<sup>31</sup> One policy could be to modify *Te Marautanga o Aotearoa* (the Māori-medium curriculum) to include compulsory education on Māori values and *whakapapa*, rather than simply incorporating Māori concepts within traditional, pre-existing, Western educational frameworks. This would allow Māori to feel a stronger sense of belonging to their social, cultural, and natural environments. However, this would only reach roughly 10% of Māori children and young people who attend kura kaupapa or Māori-medium schools.<sup>32</sup> To reach more Māori, the Strategy’s implementation plan for Māori language revitalisation—Maihi Karauna—is a step in the right direction, identifying all children and young people in New Zealand as a priority group. However, it is important that the Strategy acknowledge that te reo is *taonga* to Māori specifically; if the Strategy aims to improve the wellbeing of New Zealanders therefore, this plan should target Māori so they feel a greater sense of belonging and *whanaungatanga*.

### Environmental and Socioeconomic Barriers to Social Connection

A traditional approach to wellbeing issues has been healthism, or the belief that health is solely the responsibility of the individual. As political economist Robert Crawford writes, healthism “reinforces the privatization of the struggle for generalized well-being.”<sup>33</sup> This view is prevalent even around social connection; in interviews I conducted with Year 12 students, they would often attribute any difficulties in finding a sense of belonging to intrinsic factors like being “a teen, undergoing puberty”. Though personal issues may be a contributing factor, I must critique the naivety of healthism as it ignores the way that environmental and socioeconomic factors affect our ability to find social connection and establish a sense of belonging in our communities. After all, children and young people, due to their high levels of neuroplasticity, are more impacted by their environment than any intrinsic qualities, meaning their ability to develop fluid social connections is largely extrinsic.<sup>34</sup>

One facilitator of positive social connection and a sense of belonging is, quite simply, being part of a team. The Strategy acknowledges this, stating that, “Being part of a team and getting together for sport and recreation helps people feel like they belong and strengthens community participation.”<sup>35</sup> Teams such as sporting teams offer spatial social inclusion, through bringing children from different backgrounds together in a shared goal; similarly, they offer

<sup>30</sup> Shohat and Stam, *Unthinking Eurocentrism: Multiculturalism and the Media*.

<sup>31</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*, p. 51.

<sup>32</sup> *Education Counts*, ‘Māori Language in Schooling’.

<sup>33</sup> Crawford, *International Journal of Health Services*.

<sup>34</sup> Rubin, ‘Social Interactions and Brain Cell Connections’.

<sup>35</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*, p. 55.



relational social inclusion by creating a sense of belonging to the team.<sup>36</sup> One Year 10 student I spoke to told me, “Being in a team, having people there you can enjoy spending time with, is very important to me. I can meet people, including my best friend, who I wouldn’t have otherwise met.” It stands to reason, then, that the Strategy must comprehensively address environmental and socioeconomic barriers to team involvement in order to support social connection, belonging, and wellbeing in children and young people.

Neighbourhoods and physical environments interact with socioeconomic deprivation to play a significant role in changing a child or young person’s access to sporting opportunities. This is evident when looking at the number of youth and junior football teams across regions of Auckland, where I live. I used data from the Auckland Regional Football Facility Plan 2011-2021<sup>37</sup> around the number of youth and junior teams across four ‘sectors’ of Auckland and the active population, defined as those “aged between 5 and 49 years old in the Auckland region that could potentially play football” to calculate the number of youth and junior teams per 1000 active population across the four different Auckland regions (table below).

This table supports my perspective that there is a correlation between wealth and access to sporting teams. The ‘Western sector’ which suffers from a lack of access to football teams at the youth and junior levels, contains the Henderson-Massey local board and part of the Whau local board, two of the most deprived in Auckland.<sup>38</sup> Similarly, the ‘Southern sector’ contains five of the six most deprived local boards in Auckland.<sup>39</sup>

	Number of Youth and Junior Teams	Active Population / 1000	Number of Youth and Junior Teams per 1000 Active Population
Northern Sector	741	210.312	3.52
Western Sector	265	139.83	1.90
Central Sector	814	315.135	2.58
Southern Sector	606	314.192	1.93

The Strategy, due to its breadth, simply does not go into enough detail on current issues around access to team sports and other team activities to foster more positive social connections and instil a sense of belonging in children and young people. Of course, if issues are not identified by the Strategy, solutions cannot be implemented. The Auckland Council’s Sports Investment Plan attributes a lack of access to facilities to be due to “gaps in supply (e.g. facilities)”<sup>40</sup>. Though this is unarguable, it is important to recognise that gaps in supply are often due to the economic factor of gaps in demand. This gap in demand may be caused by low socioeconomic status and a lack of economic capital. A Stuff News article found that “extra-curricular activities for children can cost as much as \$5000 a year,”<sup>41</sup> a significant financial barrier for poorer families. Here, economic capital translates into social capital as only wealthier families are able to afford activities that foster social connection and belonging. Thus, I believe it is the interaction between built environments—such as the availability of sporting facilities—and socioeconomic disparities that affects access to social connection through belonging to a team and as such neither cause can be addressed without addressing the other.

Ultimately, the Strategy unfortunately lacks any concrete mechanisms to facilitate positive social connections and a sense of belonging through dismantling these barriers. Though it sees “children and young people... in the context of their families, whānau, hapū, and iwi,” it does not seem to see children and young people within the context of their built environment and within the context of wider socioeconomic factors. As such, its scope is simply too narrow to

<sup>36</sup> Bailey, *Educational Review*, pp. 71-90

<sup>37</sup> ‘Auckland Regional Football Facility Plan 2011-2021’

<sup>38</sup> ‘A tale of two cities’, *Stuff and Newshub*.

<sup>39</sup> Ibid.

<sup>40</sup> Auckland Council, ‘Increasing Aucklanders’ Participation in Sport Investment Plan 2019 – 2039’.

<sup>41</sup> Jackman, ‘Extra-curricular activities for children can cost as much as \$5000 a year’, *Stuff News*.

address access to belonging through teams. This is incredibly unfortunate as children and young people from low socioeconomic backgrounds are the most likely to experience the positive effects of social connection and belonging through sports teams. Research by the University of Auckland and National Institute for Health Innovation found that “families from lower socio-economic areas were more likely to report that their child’s self-esteem had improved – following their participation in the Weet-Bix Kids TRYathlon series.”<sup>42</sup> The Strategy should call on national and local governments to invest in initiatives like these, and to provide greater resources towards physical education in schools to reach the most children and young people possible.

This investment should be wide-reaching and target the maximum number of children and young people through increasing funding for cultural activities as well. Personally, I have found being in the jazz programme at my school an incredibly rewarding experience in which I have been lucky enough to meet many talented and welcoming musicians. It has greatly benefitted my mental health through developing<sup>42</sup> my friendships and my sense of self-efficacy as I see role models amongst my peers. However, for too many others, the barriers—whether due to a lack of access or finances—would be insurmountable. As another example, in the interviews I conducted, one of my peers spoke about the “sense of belonging” she derived from my school’s “Chinese night” which “allows others to get to know my culture”. These experiences, I believe, are fundamental to a child or young person’s development and create a sense of social connection that greatly strengthens relationships. To fully address wellbeing issues in Aotearoa, therefore, the Strategy must remove the barriers to these experiences for socioeconomically disadvantaged children and young people living in underprivileged environments.

## **Belonging in a Diverse Aotearoa**

### ***Experiences of Discrimination and Isolation***

In my research, I found that experiences of discrimination and isolation are rampant amongst children and young people in New Zealand. One primary school student of mixed Māori, New Zealand European, and Pacific ethnicity said in a survey run by the Children’s Commissioner, “The racist bastards... call us brown kids pieces of poo and baa baa blacksheeps - schools need to get this stuff improved.”<sup>43</sup> In my own interviews, I found students that had been described as “Asian c\*\*t”, “monkeys”, and other racially charged epithets. A transgender student I interviewed talked about her experiences with “people casually quoting transphobic ‘jokes’” such as, “‘I identify as a’ helicopter or something else ridiculous, with the intent of discrediting nonbinary gender identities (and to a lesser extent, binary trans people too)”. This ‘humour’ came from teachers as well as students, in her personal experience. In addition, she did not feel comfortable with “unnecessarily gendered language” including in school publications as this hindered her ability to feel as though she belonged in her heteronormative school community. Thus, change is needed on systemic levels to ensure that all children and young people feel as though they belong in Aotearoa.

These experiences are just the surface of a shocking amount of discrimination—whether intentional or unintentional—experienced by children and young people in New Zealand. These have a detrimental impact on children and young people’s ability to form positive social connections within their community, as they feel unable to belong. This means they cannot experience subjective wellbeing as their sense of *taha wairua* is inhibited by wider society’s inability to accept them for who they are. Taking the socio-ecological perspective, this positions children and young people outside of the social groups in which they should feel comfortable embracing their identity.

The Strategy acknowledges this issue, stating, “Discrimination and exclusion were commonly mentioned by Māori and Pacific young people... and those who identified as a part of the LGBTQIA+ community. Racism and discrimination were tied to bullying, which is a significant barrier to wellbeing.”<sup>44</sup> A positive step taken by the Strategy to address these experiences is Project Salaam which enables Muslim secondary school students “to participate in youth leadership development... underpinned by Islamic values... The training aims to address bullying, discrimination and Islamophobia and increase self-esteem and confidence.”<sup>45</sup> This will have a positive impact as it follows the principle of equity-based need through targeting communities that feel like they do not belong within New Zealand society.

However, for a comprehensive approach to issues of discrimination, we also need to address the other side of the

<sup>42</sup> ‘Low decile students need greater access to sporting events’, Education Central.

<sup>43</sup> Children’s Commissioner, ‘Education matters to me: Emotional Wellbeing’.

<sup>44</sup> Department of the Prime Minister and Cabinet, Child and Youth Wellbeing Strategy, p. 52.

<sup>45</sup> Department of the Prime Minister and Cabinet, Child and Youth Wellbeing Strategy, p. 53.

coin: the children and young people who bully. Children and young people are not born with discriminatory views towards other children and young people on the basis of gender, race, sexual orientation, etc. Rather these attitudes are formed by the environment in which they group up and the pressure to 'belong' to social groups that constitute a hegemonic majority. There is ample evidence to suggest that children and young people with low self-esteem<sup>46</sup> and poor, "ambivalent" family relationships<sup>47</sup> are more likely to bully others which I believe suggests both correlation and causation between a desire and need to 'belong' and bullying behaviour. The Strategy fails to address the motivations behind bullying behaviour and a sole focus on empowering those who are being bullied will not solve the issue: belonging is a two-way street, requiring mutual acceptance, respect, and connection.

However, aside from outright bullying, I believe most experiences where children and young people feel as though they do not belong are more subtle, and often unintentional. For instance, being half-Asian, people often make assumptions about my ethnicity that mean that even when I am accepted, it still remains a struggle to feel a true sense of belonging in New Zealand. However, less visible experiences such as these do not only come from other children and young people but can also come from, as evidenced by the transgender student I discussed earlier, adults and institutions, who carry a responsibility to ensure that all children and young people experience their "right to see their culture and identity celebrated in positive ways."<sup>48</sup>

There are concrete changes that can be implemented to tackle this. One is increased health education for children and young people around accepting and embracing their own and other's cultures and identities. This would ensure that children and young people learn to understand and accept the fact that we have different attitudes and values. This must begin in primary school and continue through to senior secondary school. Unfortunately, at the moment, for Year 9 and 10 students at my school, health education is only taught in four units with a significant prioritisation of physical and to a lesser extent mental health issues, glossing over interrelated issues of social connection and belonging. Worse still, health education is optional for senior secondary school (Years 11 to 13), meaning that young people do not receive any guidance to navigate an increasingly complex and diverse world, in the most critical period of their lives as they develop into adults and functioning members of society. Compulsory health education should be legislated by the government, including education around diversity of thought, culture, and identity, as it is the most effective collective action health strategy for local and school mental, emotional, and spiritual health issues, as it can reach all children and young people.

The Ministry of Health must work with the Ministry of Education to ensure that the school environment is one where all children and young people feel accepted so they are able to develop their *taha wairua*. This must address a current "lack of cultural competency in the design and delivery of services,"<sup>49</sup> which the Strategy recognises for Māori and Pasific people but not for children and young people from other cultural backgrounds and those who identify as LGBTQIA+.

Aside from these concrete changes that can be made to current systems ensuring children and young people in New Zealand are able to feel a sense of belonging to their cultures and communities without feeling rejected by wider society requires a shift in our cultural psyche. It requires a new focus on fostering positive social connections in health promotion for children, to encourage the multiculturalism and diversity that we need for all children and young people to experience wellbeing.

### ***Social Connection as Enhancing Diversity***

Children and young people are not predisposed, whether genetically or by nature, to discrimination and causing other children and young people to feel isolated. In fact, when removed from negative peer group influences, children and young people are remarkably accepting of others, regardless of their culture or identity. One study found that those "with stronger social ties had higher self-esteem, and that worldview validation [having shared beliefs] did not account for this relationship."<sup>50</sup> This means that social connection improves self-esteem regardless of whether children or

<sup>46</sup> O'Moore and Kirkham, *Aggressive Behaviour*.

<sup>47</sup> Connolly and O'Moore, *Personality and Individual Differences*.

<sup>48</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*, p. 52.

<sup>49</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*, p. 52.

<sup>50</sup> Gailliot and Baumeister, *Journal of Research in Personality*, pp. 327-245.

young people come from the same background or share the same culture or identity. This offers a fantastic opportunity as children and young people, when provided with the ability to develop positive social connections, can be more accepting of each other. Furthermore, research has found that social connection depends on “multiculturalism and an individual’s ability to seek out and embrace differences while enjoying deeper connections with peers beyond surface similarities or group affiliations.”<sup>51</sup> Thus, diversity also enhances social connection as it enables children and young people to form relationships despite differences: to embrace differences.

### Social Media and Social Connection Online

For young New Zealanders, a third of whom spend more than four hours online each day<sup>52</sup>, social connections are increasingly formed and developed online and many of us derive a sense of belonging from our online communities. This poses a significant challenge for the government to address issues around social connection and belonging, as they must tread the line between protecting children and young people and allowing them the freedom to express themselves and maintain their interpersonal relationships through what is simply a new medium of communication.

A question frequently asked when exploring social connection online is: does social media provide an opportunity for social connection or does it damage it, leaving us without a true sense of belonging? As often with black-and-white fallacies such as these, the answer is both. In interviews I conducted, the overwhelming perception of young peoples’ experiences on social media was positive. I was told, “I use social media to connect with my friends, to organise social events in real life, and to maintain my friendships over long distances.” Aside from these practical benefits, however, social media has been found to develop social capital within relationship groups: “social capital can be cultivated and nurtured via use of online social networking sites.”<sup>53</sup> I critique this perspective because I believe that though social media nurtures social capital online, this does not translate into face-to-face interpersonal relationships. From my personal experience, and from the experience of several of my peers, social media detracts from face-to-face communication as the asynchronicity of online relationships offers an opportunity for personal conversations as the screen operates as a protective barrier, which can result in a sense of disconnection in real life as these encounters become more surface-level.<sup>54</sup> This is detrimental to child and youth wellbeing as a sense of connection online is less stable and more transient than social connection and belonging to the concrete world: to whānau, to community, and to culture. Part of this is due to the nature of social media, which is transactional. Social media is essentially a transaction between the user and the platform which uses an algorithm to connect ‘like minded’ users with a similar set of interests. This is incongruous with how communities work in real life which are owned and controlled by their members, who help to build the community. Relationships on social media are also transactional for young people, who are pressured to like and comment on each others’ posts, with perhaps little sincerity.<sup>55</sup> Additionally, I also question the cost of social capital; the small gains in social capital online come at the cost of being expected to be connected online close to 24/7, something that is not healthy for children and young people.<sup>56</sup> I have experienced this myself and, alongside the physiological cost of sleep-deprivation, this harms *taha whānau* (social wellbeing) as we are less able to develop healthy, lasting, and non-transient interpersonal relationships.

Social media in many ways, therefore, functions as a panopticon: “a central observation tower placed within a circle of prison cells”<sup>57</sup> where prisoners must behave as though they are always being watched by the guard. However, I argue that in the virtual panopticon, we are both prisoners and guards, always implicitly judging and fearing judgement. We compare our online image to those of our close relations, distant relations, and public figures, making us feel as though we don’t belong or fit in. If social connection through social media does provide a sense of belonging at all, this is unstable and easily shattered, resulting in young people that are less resilient and therefore more likely to suffer poor wellbeing outcomes.

The Strategy says close to nothing regarding how children need to feel accepted, respected, and connected not only offline but online too. The only mention of “social media” in the strategy merely lists issues without providing any

<sup>51</sup> Vincent, ‘Social Media as an Avenue to Achieving Sense of Belonging Among College Students’, Vistas Online by the American Counseling Association.

<sup>52</sup> Netsafe, ‘New Zealand teens’ digital profile: A Factsheet’.

<sup>53</sup> Williams, New Media & Society.

<sup>54</sup> James et al., *Journal of the American Academy of Pediatrics*, pp. 71-5.

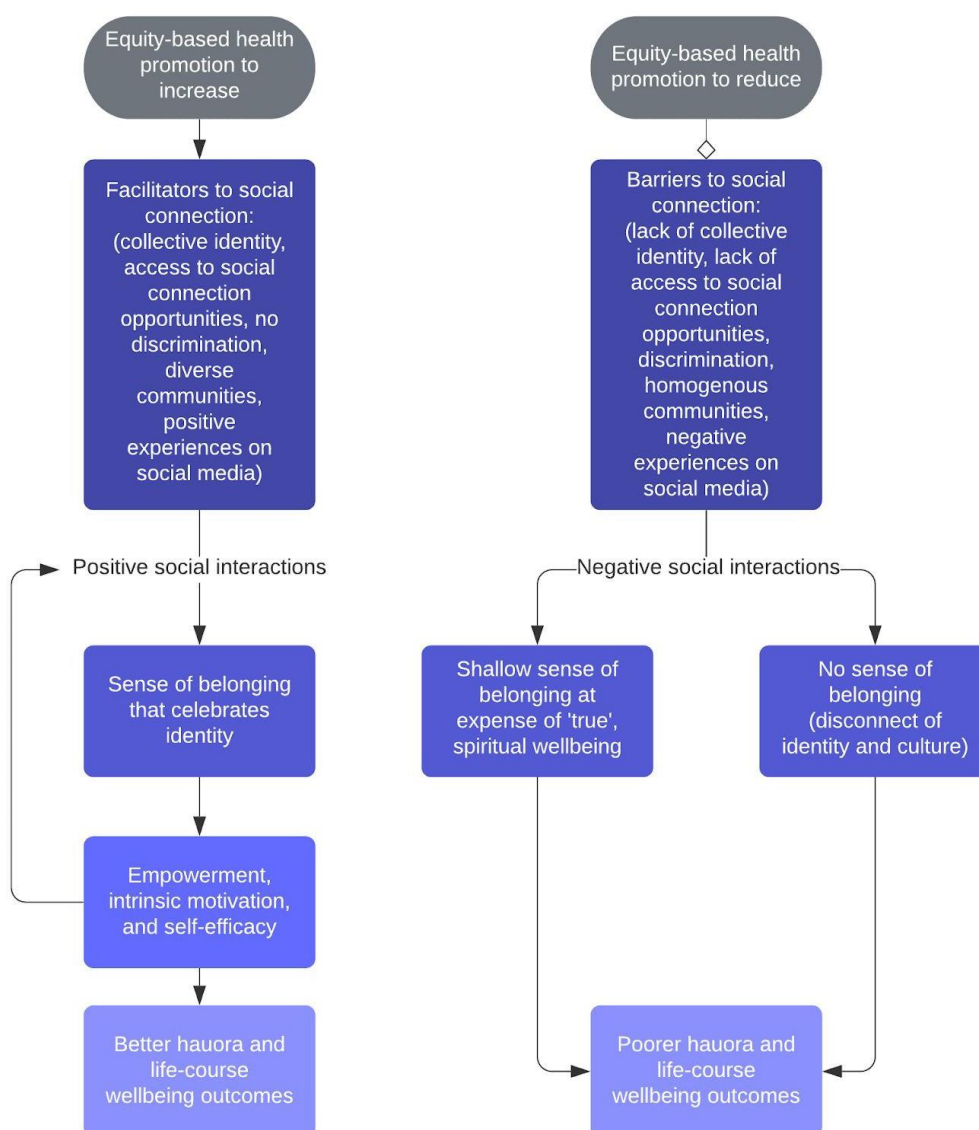
<sup>55</sup> James et al., *Journal of the American Academy of Pediatrics*.

<sup>56</sup> Ibid.

<sup>57</sup> The Ethics Centre, ‘Ethics Explainer: The Panopticon’.

solutions: “Social media, free and uncensored online content, including pornography, and access to smart phones has made big differences to young people’s relationships, connections and the way they see themselves.”<sup>58</sup> Clearly, this is not a priority in the Strategy; however, it must be. Children and young people can feel bifurcated in two worlds and any effective and comprehensive approach to *hauora* must therefore address both our offline and online environments, to provide a greater sense of social connection and belonging. The Strategy should consider specific solutions such as greater health education for students of all ages that is age-appropriate and progressive, informing students about issues with social media and giving them the tools to navigate the online world. Children and young people need to be informed about the nature of social media as manipulative and idealised. The Strategy should also broadly set out health promotion initiatives to encourage parents to act as positive role models for digital responsibility<sup>59</sup>, which could be implemented through campaigns to promote simple yet effective behavioural changes such as: not using social media during mealtimes, limiting childrens’ screentime, and ensuring that children have at least one hour of play or outdoor physical activity per day.

### Final Model: A Synthesis



<sup>58</sup> Department of the Prime Minister and Cabinet, *Child and Youth Wellbeing Strategy*, p. 52.

<sup>59</sup> J. Glazzard and S. Stones, 'Social Media and Young People's Mental Health', [book chapter], *Technology and Child Mental Health [Working Title]*.

## Going Beyond the Strategy: Solutions and Initiatives

Though I addressed specific solutions throughout my report, these came down to three central themes: large scale change, health education, and community initiatives. A combination of these approaches will achieve the vision of the Strategy: 'Making New Zealand the best place in the world for children and young people'.<sup>60</sup>

### *Large Scale Change*

Through writing this report, I was confronted by the lack of focus on issues around social connection and belonging for New Zealand's children and young people. Through this is not an aspect of wellbeing that might garner the most publicity or media attention, it is of undeniable importance. Large scale change encompasses change across government and also across culture. Attitudes and values must shift so that we in New Zealand conceive of health as multidimensional and as encompassing social and spiritual needs alongside spiritual and mental ones. This requires a top-down shift in government action too so that any action on child and youth wellbeing in New Zealand requires a consideration of social connection and belonging in children and in young people. This still means addressing all-important issues such as child poverty, but addressing these in a way that supports children and young people's ability to feel connected to their environment and to their society. Large scale change also encompasses understanding social connection and belonging outside of solely a Eurocentric context. It means understanding that to children and young people of all backgrounds but those from especially non-Western cultures, a sense of belonging to their culture or to their environment can be the most significant determinant of their health. A greater awareness of the significance of social connection and belonging to all communities will help direct governmental and non-governmental strategies to ensure that action delivers comprehensive yet tangible improvements to the wellbeing of all our children and young people.

### *Health Education*

Health and Physical Education Scholarship has been an enlightening experience for me as it has given me an insight into the complex interactions between macrosystems, microsystems, and the individual that determine *hauora*. This came through an analysis of the facilitators and barriers to social connection and belonging in New Zealand. As I have indicated in my flowchart above, the most effective health promotion strategies are those that affect the environment around the child or young person to maximise their access to facilitators of social connection and belonging and minimise the significance or permanence of barriers to social connection and belonging in their lives. The most effective way to address the environment around a child or young person is, I believe, health education as this occurs in a space where children and young people expect to learn and, ideally, come with a growth mindset. Additionally, schooling around health issues in relation to social connection and belonging is the best way to reach as many children and young people as possible.

I believe that health education would be most useful to: (1) encourage children and young people to embrace their culture and identity, (2) instil attitudes of acceptance towards differing cultures and identities, and (3) inform children and young people about the responsible use of social media. This would be a reasonably significant shift from the current way health is generally taught in New Zealand which ranges from not at all to a predominant focus on physical and to a lesser extent mental health, as I have previously detailed. Though some may argue health education must be made compulsory, which in an ideal world I would absolutely support, I believe this is unrealistic due to schools already being under-resourced and teachers already carrying immense responsibilities and workloads. Instead, a health and education curriculum could be offered in four to six weeks per year; at least one of these weeks must be devoted to education around social connection and belongingness for children and young people so they better understand their position within their wider environment. Children and young people should be encouraged to ask critical questions about culture, identity, belonging, and social connection online (social media). This would contribute to breaking down barriers to social connection and belonging such as discrimination and poor social media use, and facilitate social connection and belonging through encouraging acceptance and diversity of thought amongst children and young people, as well as responsible and conscious social media use—digital responsibility. Though this is a collective action model of health promotion, this would ensure that children and young people are also empowered to take responsibility over their own *hauora*, as much as possible within their environments, which will ultimately be positive for child and youth wellbeing in New Zealand.

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<sup>60</sup> Department of the Prime Minister and Cabinet, Child and Youth Wellbeing Strategy, p. 10.



## Community Initiatives

This being said, we must also influence the community—built and social—around a child or young person in order to ensure that they can experience *hauora*. One such community initiative could be *Te Kotahitanga*<sup>61</sup>, supporting teachers to create a culturally appropriate and culturally responsive environment for Māori learners in the classroom, allowing them to connect with their *whanaungatanga* and therefore providing them with a greater sense of belonging. This is a programme that needs greater funding and direction to transition from a relatively ‘niche’ area of professional development to an accessible one for all teachers in our bicultural nation. A positive initiative to address environmental and socioeconomic barriers to social connection such as to sporting teams is KiwiSport in schools, which breaks down these barriers and facilitates social connection through increasing sports opportunities by 76% and participation, as a result, by 81%.<sup>62</sup> This is supported by the fact that low decile schools are the most likely to report large increases in sports opportunities and participation, suggesting these barriers to social connection were being broken. The main challenge faced by KiwiSport was funding<sup>63</sup> so I call for greater funding for this programme. Community initiatives such as volunteering can create a greater sense of belonging to your environment through self-efficacy and contributing to a wider shared purpose; I believe leadership programmes and opportunities in sports teams, cultural groups can therefore also have a significant impact on boosting social connection and belonging amongst children and youth.

## Final Thoughts

Positive social connection and a sense of belonging is an undeniably significant determinant of health, with especially positive impacts on *taha whānau* and *taha wairua*, two areas of *hauora* that are often left out of health promotion strategies. Writing this report has given me insight into the way that belonging—a personal experience—is informed by our capacity for social connection, influenced by our environments. It is absolutely imperative that all children and young people feel as though they belong in our society through positive social connections; though the Strategy is a fantastic first step forward, it must be one in a long journey towards acceptance, connection, and respect for all young New Zealanders.

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<sup>61</sup> Ministry of Education, Te Kete Ipurangi, ‘About Te Kotahitanga’.

<sup>62</sup> Education Review Office, KiwiSport in Schools, Findings, 2016, <https://www.ero.govt.nz/publications/kiwisport-in-schools/findings/>, (accessed 3 November 2020).

<sup>63</sup> Ibid.

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## NCEA stress on students

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In recent discussions of the *National Certificate of Educational Achievement* (NCEA), a controversial issue has been whether this qualification pathway has caused too much stress on students. The Youth 19 survey found that a large number of secondary school students were reporting high levels of distress with symptoms of anxiety and depression in relation to their school work.

There are multiple theories as to why the mental health of our secondary school students has been worsening. It is evident from the Youth 19 data that there has been an “increase in perfectionism and expectations in schooling, while the impact of future worries as teens look to adulthood”<sup>1</sup> which may contribute to the decline in youth mental health. Scoop Media (2017) further argued that “two-thirds of New Zealand secondary students identify stress and anxiety about assessments as a challenge to learning, and about half believe they are not taught how to study or deal with exams, according to a new survey of nearly 6000 students”<sup>2</sup>.

The stress that NCEA causes is not clear, however, cannot be ignored. Minister of Education, Chris Hipkins, explained one of the reasons behind the controversial 2018 NCEA review was due to stress. Hipkins (2018) explained “I have heard many stories of rising stress levels both by students and principals. Over assessment and the impact on students’ and teachers’ wellbeing is one of the major concerns raised by my youth advisory group”<sup>3</sup>. This raises the question, can the Government enforce appropriate strategies that students can apply to manage their stress caused by NCEA?

<sup>1</sup> “Emotional and Mental Health - Squarespace.”

<https://static1.squarespace.com/static/5bdbb75cccf37259122e59aa/t/5f338e4cfb539d2246e9e5ce/1597214306382/Youth19+Mental+Health+Report.pdf>. Accessed 6 Sep. 2020.

<sup>2</sup> (2017, November 17). 2 in 3 NCEA students severely affected by anxiety ... - Scoop NZ. Retrieved November 5, 2020, from <https://www.scoop.co.nz/stories/ED1711/S00066/2-in-3-ncea-students-severely-affected-by-anxiety-or-str-ess.htm>

<sup>3</sup> “Falling out of love with NCEA as stresses mount ... - Stuff.co.nz.” 24 Jul. 2018, <https://www.stuff.co.nz/national/education/104306636/falling-out-of-love-with-ncea-as-stresses-mount-on-new-zealand-students>. Accessed 6 Sep. 2020.

From current personal experience, NCEA can be a very daunting time for students. I'm currently in my final year of school and have almost completed my third year of NCEA and least to say I've definitely had my fair share of stress when it comes to completing large 6 credit internals or studying hard for my exams in order to achieve course endorsement. I'm a hardworking, organised student who puts 110% effort into everything I do but I have certainly found there have been times where NCEA has pushed me over the edge. I have experienced the sleepless nights, turning stomach and many other feelings of unsettledness which, as a result, have knocked my levels of confidence and motivation to consistently work hard throughout the year. A key issue with NCEA is the massive workload it involves. It has made it difficult for myself to attend my football practices or go out to socialise, as the intense workload has caused a great amount of anxiety to complete work on time. From this, I strongly believe NCEA did not prepare me well for my future as there were no opportunities to learn skills that could help me to manage my stress in which the qualification caused. This further questions whether there is enough societal support for students in NCEA?

The 2019 Child and Youth Wellbeing Strategy is aiming to improve the wellbeing of NZ youth by assisting and modifying the way many New Zealand ministries and other agencies work together to achieve this aim. They set outcomes and propose actions in which they believe are most suitable to improve the wellbeing of our youngest. This report will critically examine the aspect of the Child and Youth Wellbeing Strategy related to the 'learning and developing' outcome. In particular, it will critically evaluate how this aspect of the Child and Youth Wellbeing Strategy addresses the current decline in youth mental health and wellbeing attributed to our national qualification system.

### **Is NCEA really the issue?**

The stress of NCEA is arguably a relevant issue as secondary school students who have completed the qualification would be able to understand the rollercoaster of emotions that can be experienced through the system. Most students would have also felt the same large amount of pressure to achieve well in their internals and externals to endorse.

Stress caused by NCEA would be a current issue for our youth as many students express they aren't equipped with the appropriate strategies, resources and skills to manage their stress. WHO (n.d.) describes the social determinants of health (DOH) as "the conditions in which people are born, grow, live, work and age. Shaped by the distribution of money, power and resources at global, national and local level."<sup>4</sup> Stress is a product of the social DOH, which would massively contribute to this current and relevant issue. Diocesan School for Girls (2020) supports this as they explain stress is "caused by social and psychological circumstances that can have serious effects on people's mental health. Long periods of anxiety are damaging, no matter what parts of a person's life they affect."<sup>5</sup>

Adele Redmond suggests NCEA is a multifaceted issue with some arguing that university entrance (UE) is a catalyst, contributing to the pressure as increasing numbers of students fail to obtain UE requirements, despite passing NCEA. Redmond (2017) explained "data released by NZQA showed university entrance rates were significantly lower than NCEA level 3 pass rates last year – 49.2% compared to 64.5% – despite minimal difference between the two qualifications."<sup>6</sup> Stress may arise as students are required to achieve 14 credits at three approved subjects during level 3 as well as literacy and numeracy credits for UE. UE has suggested to create more stress for students with learning differences, where achieving these requirements may be difficult. Universities could further add to the stress of NCEA as students feel the competition between others to achieve highly to be considered for entry into courses, including engineering, medicine, and veterinary. We must also take into consideration the influence teachers and parents could have on students' level of stress.

However, these listed factors would only be a handful of examples to suggest why students' levels of stress may increase during NCEA. The Government would need to consider in their solutions that all students are different with their own cultural expectations, background and influences that could affect their academic performance.

This issue may negatively affect people's overall hauora as it creates unrealistic expectations. Stress can impact an

<sup>4</sup> (n.d.). About social determinants of health - WHO. Retrieved August 23, 2020, from [https://www.who.int/social\\_determinants/sdh\\_definition/en/](https://www.who.int/social_determinants/sdh_definition/en/)

<sup>5</sup> (2020) Diocesan School for Girls from [https://docs.google.com/document/d/1yiVm6c\\_Yeua8GZNR09C7YbICESYeFB4pqFiGHg7xURU/edit?usp=sharing](https://docs.google.com/document/d/1yiVm6c_Yeua8GZNR09C7YbICESYeFB4pqFiGHg7xURU/edit?usp=sharing)

<sup>6</sup> (2017, April 18). Students achieving NCEA level 3 but not ... - Stuff.co.nz. Retrieved November 10, 2020, from <https://www.stuff.co.nz/national/education/91645390/students-achieving-ncea-level-3-but-not-university-entrance>



individual's physical health as it can cause an upset stomach, chest pain and sleeping problems. Stress can also affect our brain, as John Rampton (2017) supported "chronic stress can reduce levels of serotonin and dopamine. These are simply happy chemicals, which are called neurotransmitters. Without them people become depressed and more likely to develop addictions."<sup>7</sup> Therefore with stress, students may develop depression, panic attacks and emotional problems. This may cause a change in individuals' decision-making and problem solving skills. Stress can cause students to become isolated in their relationships with others, and as a result, this could weaken any social support that an individual may already have. From a spiritual point of view, students may find it difficult to relax and enjoy the peaceful moments. As a result, their entire life may begin to revolve around their school work and study leading up to the examinations. Focusing all this energy onto NCEA may cause students to drop their value in extracurricular activities such as sport, part time work and other responsibilities.

Some students could show a deeper value in their NCEA than extracurricular activities. We could argue that this, in itself, would have a negative impact on their hauora. Extracurricular activities allow for students to socialise with others within their local community, enhancing their social skills. These activities help to develop levels of self-esteem and confidence as well as allow them to set their own goals for a sense of achievement. Without these activities, we would find that students' wellbeing could worsen, demonstrating the importance of keeping a well-balanced student life.

This issue of stress caused by NCEA could negatively affect New Zealand society as it could increase mental health problems for New Zealand youth. Mental Health Foundation of New Zealand (n.d.) explained that "20% of young people are likely to experience a mental health issue. Depression and anxiety are quite wide-spread: one in five young New Zealanders will be affected by depression by the age of 18; almost one in five meet the criteria for an anxiety disorder by age 19<sup>8</sup>." This illustrates the New Zealand Government should consider all possible solutions to help young people manage their mental health to ensure these statistics decrease in the future.

This issue highlights that secondary school students would be the most disadvantaged, as they don't have the appropriate strategies to help them deal with NCEA. Students wouldn't be aware of the different coping mechanisms they could use to deal with their stress. This may also disadvantage counsellors who may see an increase of overwhelmed students towards the end of the year as their workload becomes heavier.

However, we must also take into consideration that all stress isn't necessarily bad for students. Dealing with exam stress, pressure of internals or even failing can personally teach students to deal with stress and develop their own resilience which would be beneficial for similar stressful situations in the future. Therefore, it could be argued that removing all barriers of stress may not be healthy for students in the long term, depending on how students handle their stress. Dian Fisher (2020), deputy principal at Diocesan School for Girls, supported this idea as she explained, "if we see exams as a positive challenge - as a way to prove to ourselves that we can 'do it' or as a way to demonstrate to ourselves the progress we have made with learning, we are less likely to be as anxious. The positive reinforcement of working hard and seeing the rewards in good exam results that reflect your best effort are incredibly positive for wellbeing, self-belief and confidence." This illustrates that my issue of stress caused by NCEA could have a positive or negative impact on student wellbeing, depending on their mindset. We understand from Dian that students who develop a growth mindset tend to see their academic setbacks as only temporary and experience lower levels of stress. However, students who have fixed mindsets often experience high levels of stress for a longer period of time as they believe they are unable to come back from their setbacks.

Therefore, it could be argued that stress in students' lives can be healthy as it builds character development and motivates individuals to work harder. Therefore, the NZ government should consider creating strategies to help promote growth mindsets for students so they learn how to better manage their stress, rather than eliminate the issue altogether.

<sup>7</sup> (2017, August 25). 4 Proven Ways to Deal With Stress Without Shutting Down Retrieved November 10, 2020, from <https://www.entrepreneur.com/article/299225>

<sup>8</sup> (n.d.). News - Mental Health Foundation of New Zealand. Retrieved August 24, 2020, from <https://www.mentalhealth.org.nz/home/news/article/24/are-our-kiwi-kids-all-right>



## Who can be made accountable?

The main purpose of the Child and Youth Wellbeing strategy is to create a framework that helps to improve the wellbeing for children and young people in New Zealand. Protecting our youth's wellbeing is vital as it impacts their short and long term health to ensure they successfully overcome their barriers and achieve what they want in life. In contrast, if youth wellbeing isn't supported we would find that as a nation, there would be higher statistics for depression, anxiety and other mental health problems which would be difficult to come back from.

The Child and Youth Wellbeing Strategy was created on 29th August in 2019, with a vision that New Zealand is the best place in the world for youth. By putting children and young people at the centre of the strategy, they aim to change the way agencies and Ministers work together to ensure children and young people in our nation are able to receive the support needed to improve their wellbeing. With the philosophy: "we want New Zealand to be a place where all children and young people are loved, confident, happy and healthy, and are empowered to reach their full potential."<sup>9</sup> The strategy includes a programme of action which is well supported with over 75 actions with 49 support actions that have been led by 20 different government agencies. These actions that have been proposed were supported by \$3.5 billion in funding in Budget 2019, which demonstrates how strongly the New Zealand Government agrees with improving our children and youth wellbeing, as it is vital to a better future. The outcome most suitable for my issue is the 'learning and developing' outcome where the "government has launched a programme of review across the education sector to improve equity and ensure no-one misses out. An immediate priority is on children and young people who need extra support in the education system,"<sup>10</sup> according to the strategy (2019).

This strategy is designed for children and young people of all cultures and backgrounds in New Zealand, but also encourages their parents and whānau to also be involved in the process. Under the 'learning and developing' outcome, the strategy aims to promote a strong engagement within the education sector to help young people with their learning. The strategy aims to ensure that all young people have continuous access to quality education and the support needed to succeed. Educational experiences between the young people in New Zealand can often vary as some may encounter difficulties with inequities in opportunities. There are many reasons as to why these inequities exist in New Zealand, these can include: discrimination, racism and stigma. These inequities can lead to limitations in individuals learning, engagement to their education and affect their overall achievement. Child and Youth Wellbeing Strategy purposefully creates actions to tackle these inequities to ensure equity is achieved. Achieving equity is important as it ensures that all students are treated equally and have the same opportunities to excel in their education. This would help my issue as the strategy aims to support students, to ensure their wellbeing is protected.

Creating more support for student learning helps to empower all children and young people within the nation. It also helps for their whānau to create their own values with the education system, but most importantly allows for students to grow a deeper connection with their community as they become more aware of the societal support available for them to set great goals to achieve. It seems that this would be helpful in addressing my issue of stress caused by NCEA as students would be more aware of how to seek the societal support available to improve their learning. The strategy hopes young people will be able to make better choices, to make great changes in the world. The focus area in the framework are young people in New Zealand. Child and Youth Wellbeing (2017) explained that the strategy "sets out a shared understanding of what children and young people need and want in order to be well, what government is and should be doing to support them, and how we must work together"<sup>11</sup>. Evidence<sup>11</sup> demonstrates how concerning our mental health statistics is for youth in New Zealand as they are more likely to experience distress through stress caused from parents, unrealistic expectations in schooling and any future worries as they look into adulthood in terms of employment and university. Sarah Lang (2019) supported this idea as she explained the Ministry of Health in 2017 found, "79,000 New Zealanders (aged between 15 and 24) were affected by psychological distress, so had a "high or very high probability of [an] anxiety or depressive disorder". That's 21,000 more young people than the previous year."<sup>12</sup> This shows how crucial long term solutions such as the Child

<sup>9</sup> (2019, August 29). Child and Youth Wellbeing Strategy launched | Child and... Retrieved October 4, 2020, from

<https://childyouthwellbeing.govt.nz/about/news/child-and-youth-wellbeing-strategy-launched>

<sup>10</sup> (2019, August 29). Actions for 'Outcome: Learning and developing', Child and... Retrieved October 4, 2020, from <https://childyouthwellbeing.govt.nz/actions/actions-outcome/actions-outcome-learning-and-developing>

<sup>11</sup> (2019, August 29). Implementation of Child and Youth Wellbeing Strategy 1 July... Retrieved October 4, 2020, from

<https://childyouthwellbeing.govt.nz/resources/child-and-youth-wellbeing-strategy>

<sup>12</sup> (2019, March 30). Why are our kids so anxious? | Stuff.co.nz. Retrieved October 4, 2020, from <https://www.stuff.co.nz/life-style/parenting/big-kids/five-to-ten/111534835/why-are-our-kids-so-anxious>

and Youth Wellbeing strategy are in our society today.

An advantage of the Child and Youth Wellbeing strategy is that it follows a collective action model, which indicates their consideration of applying a socio-ecological approach that takes into account the interrelationship between individuals and their environment, as evident above as the New Zealand Government have over 20 government agencies collaborating strategies and actions to improve our youths wellbeing. Using a collective action model would help my issue of stress of NCEA as it is more likely to achieve equitable outcomes as it focuses on more societal solutions that are implemented purposefully for all within communities. By collectively working together, the Government has created three actions within the 'learning and developing' outcome that they believe will help to improve student wellbeing in our country.

These actions to improve education include:

1. Support students during their life transitions. Child and Youth Wellbeing (2019) explains that the strategy will include "a new service to support young people as they transition out of care or youth justice settings, and a range of programmes to support young people into employment or training."<sup>13</sup>
2. Under the outcome, the strategy looks for ways to improve the quality in education. For example, the 2019 Budget helped by funding to improve support services for students. There have also been improvements made in early childhood education systems and vocational education, which demonstrates the strategy considers different types of education across the sector which would advantage a larger range of students in New Zealand.
3. The strategy has also considered increasing equity of educational outcomes. The strategy aims to increase funding towards more support for children and students who require further support in the education system. They have also considered funding an initiative for the education of Pacific students as well as welcome the fee-free tertiary education in students first year.

A limitation of the support the outcome proposes is that they don't specify what types of support they will be providing and how students will benefit from it. This further questions how their strategy is going to specifically support students' stress with NCEA.

Another key limitation of this strategy is that the initiatives to improve education for a wider range of students may not take into account the underlying DOH which may cause a student to feel stressed about their NCEA. It is important to recognize that the DOH do not operate independently and often interact with each other. For example, the social DOH can cause stress due to students' social circumstances that could negatively impact their mental health. This is supported by Rotorua High School Year 13 student Monique Tutlewski (2014) who explained "there is a lot of peer pressure in school and are looked down on if you don't get the same grades as your friend. It's no longer about education, it's a competition for who can be the best,"<sup>14</sup> which can suggest that the strategy does not take into account the competition students feel to achieve highly as there may be an absence of supportive friendships during these highstake times. Another Rotorua High School student further supported this idea as he discussed the expectations put on students from a wide variety of people including their peers, teachers and parents. He explained (2014) "we are expected to gain good grades and teachers want students to apply lots of extra study and homework to achieve high grades, but forget we have other subjects with the same workload and expectations. Parents are unaware of how difficult it is to gain high marks."<sup>15</sup> This social DOH could easily interact with the personal determinant as the strategy doesn't consider what factors could be influencing a student's stress towards exams. This could include, but not limited to one, difficulties with learning, mental health problems and dyslexia. For example Dyslexia Foundation (n.d) explained "assessments, and NCEA exams are a ticket to opportunities beyond the classroom. They are stressful for most, but dyslexic students are disadvantaged because their basic skills including accurate spelling and fluent reading hold them back."<sup>16</sup> This suggests that there are overarching social and personal influences contributing to New Zealand students' stress with NCEA exams that the Child and Youth Wellbeing would need to further consider to achieve equity.

<sup>13</sup> (2019, August 1). Current Programme of Action ... - Child and Youth Wellbeing. Retrieved November 7, 2020, from

<https://childyouthwellbeing.govt.nz/sites/default/files/2019-08/current-programme-action-child-wellbeing-strategy-aug-2019.pdf>

<sup>14</sup> (2014, November 17). Exam pressures cause stress - NZ Herald. Retrieved October 4, 2020, from [https://www.nzherald.co.nz/rotorua-daily-post/news/article.cfm?c\\_id=1503438&objectid=11359726](https://www.nzherald.co.nz/rotorua-daily-post/news/article.cfm?c_id=1503438&objectid=11359726)

<sup>15</sup> (2014, November 17). Exam pressures cause stress - NZ Herald. Retrieved October 4, 2020, from [https://www.nzherald.co.nz/rotorua-daily-post/news/article.cfm?c\\_id=1503438&objectid=11359726](https://www.nzherald.co.nz/rotorua-daily-post/news/article.cfm?c_id=1503438&objectid=11359726)

<sup>16</sup> (n.d.). Dyslexia ADVOCACY - Allow Competence. Retrieved October 4, 2020, from [https://www.dyslexiafoundation.org.nz/dyslexiaadvocacy/allow\\_competence.html](https://www.dyslexiafoundation.org.nz/dyslexiaadvocacy/allow_competence.html)

Another limitation is the lack of evidence that the actions were successful. The main indicators of the outcome ‘social-emotional skills’ and ‘self-management skills’ were under development as baseline data from the survey is expected to be announced in 2021. These two indicators are crucial for my issue as they reflect whether students have developed the relevant skills to work with pressure. Therefore, we cannot assume the actions the strategy has promised are successfully working within the communities.

When the Child and Youth wellbeing strategy sought feedback from New Zealanders on their ‘learning and developing’ outcome, there were various barriers people believed the strategy should have considered that would help to overcome my issue of stress from NCEA. New Zealanders explained that they wanted more life skill classes to be applied into the curriculum (this included enhancing interpersonal skills, budgeting, learning how to vote etc) to help students when they entered adulthood. Young people with learning difficulties and other learning needs further expressed the need for life skills class, as well as wider societal support for when they left high school.

New Zealanders also emphasised the need for early learning centres to have more services available for their students and whānau such as counselling, employment/financial advice and dental care to ensure their wellbeing is also being supported. New Zealanders further explained that “children want more support to learn in a way that is accessible to them – they called for more one-on-one support, particularly for those with additional learning needs”<sup>17</sup>, reviewed by the Child and Youth Wellbeing Strategy (2019), which further demonstrates the limitations of the strategy. This would also address my issue of stress of NCEA as New Zealanders emphasised that, currently, there is lack of societal support accessible for all. This would create negative consequences on students and their whānau as increased depression and anxiety may increase within communities as students may become disengaged in their learning, leading to serious long term problems with employment and university opportunities. Through this, we understand that the strategy is not perfect and needs to be adjusted.

According to the Ministry of health (2018), equity is defined as “people have differences that are not only avoidable but unfair and unjust. Equity recognises different people with different levels of advantage require different approaches and resources to get equitable health outcomes.”<sup>18</sup> Therefore, it could be argued that a “one size fits all approach” to improve quality in education, increasing equity of educational outcomes and supporting life transitions may require more thought as how could this approach achieve equitable outcomes for all students? A further question could go into how these initiatives from the Child and Youth Wellbeing strategy would reduce and respond specifically to levels of stress caused by NCEA.

### **What are some possible solutions to help better equip our NCEA students?**

Investigating this issue, it can be concluded the “one size fits all” approach does not work well in the education sector, and so we must look beyond the ‘*Child and Youth Wellbeing Strategy*’ to tackle student’s stress towards NCEA to achieve equitable outcomes for all. I have therefore constructed the following recommendations that could help to embrace student wellbeing in New Zealand.

As previously discussed, the Child and Youth Wellbeing strategy needs some adjusting as Prime Minister Jacinda Ardern (2019) explained in relation to the strategy that “we can’t do it alone. It will take an approach of all of the government but iwi, community, local government as well. Tell us whether or not there are things you think you could do in your local community. How can we work together?”<sup>19</sup> This would help my issue as the Government has recognised that there needs to be changes in the strategy to ensure all issues within the education sector are being approached by allowing communities to have their say, which helps to achieve equity.

The Child and Youth Wellbeing Strategy is put together on a problem solving paradigm, where they identify many problems that our children and youth are experiencing, have an analysis of the causes and with this creates various possible solutions through making multiple actions. In contrast, an appreciative inquiry paradigm focuses on appreciating the best of what is available, envisioning what might be and attempts to shift from a “fixing problems”

<sup>17</sup> (2019, August 18). 18 August 2019 - Child and Youth Wellbeing Strategy. Retrieved November 7, 2020, from <https://childyouthwellbeing.govt.nz/sites/default/files/2019-08/child-youth-wellbeing-strategy-2019.pdf>

<sup>18</sup> (2019, October 1). Achieving equity | Ministry of Health NZ. Retrieved November 10, 2020, from <https://www.health.govt.nz/about-ministry/what-we-do/work-programme-2019-20/achieving-equity>

<sup>19</sup> (2019, August 29). Child and Youth Wellbeing Strategy launched | Child and Youth Wellbeing Strategy. Retrieved October 31, 2020, from <https://childyouthwellbeing.govt.nz/about/news/child-and-youth-wellbeing-strategy-launched>

approach to a flourishing strengths based approach.

In regards to the issue of stress of NCEA, I believe that we need to firstly consider the best of what is available globally. The research conducted in Finland demonstrates they do no standardized tests, except for one exam students complete in their last year. The schooling system does not include any rankings or comparisons in school work which would decrease the sense of competition between students, schools and regions. Pasi Sahlberg (2016) supported the benefits of Finland's education system as he explained "Finnish educators and policymakers believe schools can change the course of children's lives, these schools must address the health, nutrition, wellbeing and happiness of all children in a systematic and equitable manner."<sup>20</sup> This can help to explain why Finland students were ranked the happiest, with more than one in two students reported very satisfied with their life. However, we could question this approach as is eliminating all examinations going to fix the root problem of not being able to manage stress? It is doubtful that NCEA would remove all their examinations, but I recommend that the Government could reconsider lowering the number of credits. Through this, we would find an improvement within our students' wellbeing, having less pressure put on them throughout the year as demonstrated by Finnish students.

Continuing with the sociological approach that the strategy is already implementing, further considerations are needed around how differently students learn as one size does not fit all. This has been demonstrated through the Future School Alliance (FSA) education system as their education is very flexible and adapts quickly to the needs of their young people in the programme. The system actively supports success but also encourages co-constructed learning opportunities for all learning. The system looks for ways to empower the learning of their students as well as encourage development of individuals. FSA helps students develop their core skills to be equipped for the future.

It is important to recognise that in order to achieve a sense of justice and more equitable outcomes, further exploration of stress due to NCEA is needed. This will help the Government and schools to understand ways in which they can help to prepare their students to learn to cope with their pressures with school. Presbyterian Ladies College (PLC) in Perth, Australia created a wellbeing centre in 2018 and put mental health in the centre of their curriculum. The \$10.5 million centre has various well thought-out facilities for their students to embrace, which include: a meditation room, "recharge room", art room, speed pathologists, psychologists, occupational therapists, yoga, fitness centre, kitchens, dance studio and a room filled with couches. Dr Hadwen (2018) supported this idea as she explained "having a whole level dedicated to mindfulness and being brave enough to do things like have a recharge room means that rather than saying to young people the only way to be healthy is to be physically fit, what we are saying is, no, you need to be mentally fit as well."<sup>21</sup> This demonstrates that PLC wanted to show students their deep value for student wellbeing as they hope the centre will provide students with the appropriate tools to help support their education, prevent and reduce mental illness but most importantly promote mental health.

Through evaluating the various successes we have observed overseas, there are many ways that we could address the issue of increased stress associated with NCEA on students. With my recommended solutions mentioned above, it appears that the education sector could invest in providing teachers with workshops that educate them to recognise and support students who may be struggling. This support would create a sense of social support within the school as well as help encourage students improve their academic performance.

The education sector could also consider investing in wellbeing classes to be added to the curriculum. This strategy could follow the self-empowerment model as it focuses on enhancing students' self-worth and development of necessary skills in life, this could include problem solving/decision making, learning of ways to cope with stress to ensure that students are able to manage their wellbeing.

Through evaluating how student wellbeing is managed overseas, the New Zealand Government should consider creating a wellbeing centre in every school in the nation. The centre emphasises the idea that students need to better manage their stress, as were recognised eliminating all levels of stress is not healthy as individuals wouldn't be able to gain resilience. Each centre would provide many facilities to ensure equity is achieved for all students enrolled at

<sup>20</sup> (2016, September 15). Finnish education: a system based on equity, trust ... - MinLand. Retrieved November 8, 2020, from <https://miriampierard.com/2016/09/15/finlands-education-system-in-brief/>

<sup>21</sup> (2018, March 11). Perth school PLC unveils \$10.5 million Lighthouse well-being.. Retrieved November 10, 2020, from <https://thewest.com.au/news/education/perth-school-plc-unveils-105-million-lighthouse-well-being-centre-putting-mental-health-on-the-curriculum-ng-b88765711z>

the schools. These facilities would include but are not limited to: support, counselling, consultation, nurses, physio, yoga, fitness centre, resting rooms and common rooms. In my strategy, I have taken ideas from preexisting wellbeing centres around the world including the one at *PLC* in Perth and *DLD College* in London, where they have similar facilities in their centres that have benefited their students. I have decided on these facilities for the wellbeing centres as the Government needs to recognize that each student has different needs and ways of dealing with certain situations, therefore having different facilities combats the idea that one size fits all. My wellbeing centres allow for students to discover and embrace multiple ways of coping with their stress as what one student may find helpful, another may not. This strategy emphasises that although being physically fit is healthy it is important that we take time and practice to become mentally fit as well as the combination of the two can help us to improve our overall well hauora.

For this strategy, the Government must evaluate what wellbeing looks like for a range of communities, since New Zealand is culturally diverse. The purpose of looking at different perspectives of wellbeing is to ensure that all students of different cultures are included in the strategy to manage their own wellbeing. For example, hauora is a Māori philosophy on health, specific to our country and encompasses the physical, mental/emotional, social and spiritual health of an individual. In the Pacific Islands, individuals have a positive wellbeing if they're strongly connected to their family and friends but also remain well connected with their culture in different environments. In contrast, the meaning of wellbeing for Chinese is more about an individual's happiness and subjective wellbeing as their four main dimensions of wellbeing include: harmony, worthiness, sociability and futurity. This challenges the idea what wellbeing should look like in these wellbeing centres.

This demonstrates the importance of the NZ Government to investigate various perspectives of wellbeing to ensure these facilities within the centre are suitable for all students to achieve equity. As a result, in my strategy, I have taken careful consideration of individuals' social, personal and cultural DOH to ensure my vision is more inclusive for all. Therefore, I believe that each centre should also implement culturally responsive practices such as Māori traditional medicines with spiritual healings like mirimiri and rakau rongoā, so the centre can become a more engaging, inclusive and welcoming place for all students to benefit from. Having other cultural practices allows students to understand and recognize that there are other perspective on wellbeing, that are not necessarily our own. This would help students to become more embracing of other cultures. However, a disadvantage of this would be that not all cultures in our country could possibly be included in the centre due to limited space.

A consequence of implementing wellbeing centres could be that they don't get used to promote students wellbeing. The centres may be seen as a burden to visit if they are located randomly in the school, especially if students don't see others using the facility. Students may fear that if they are seen going into the To overcome this limitation, my vision would be for the centres to be located in the heart of each school. By locating them in the centre, we would be able to break the stigma surrounding seeking for help as students would become more comfortable to use the centre if it was located somewhere accessible for all.

Another limitation of these wellbeing centres could be that students use them as a hangout spot during breaks, rather than understand the real value of these facilities. Therefore, having them located in the centre would overcome this limitation as it would be crucial to changing the schools culture. These centres would help change staff and students' attitudes and values towards seeking support as people are able to easily access these facilities to begin learning how to manage their wellbeing. Having it in the hearts of schools would also demonstrate the community deeply value their students' wellbeing and are always available for support. The placement of the centres would also ensure that equity is achieved as the centre would be accessible for all students, staff and the school community to experience the benefits the facility has to offer.

I would also encourage the education sector to consider compulsory wellbeing classes to be taught in the schooling curriculum within these centres. This would achieve equity as all students would get the opportunity to learn about wellbeing and the possible strategies they could apply into their everyday lives. In relation to my issue, this would help students to learn how to cope with the pressures of NCEA. I found that wellbeing classes were an important aspect to include in my strategy as studies have shown that over 3000 students felt they were not taught how to study or deal with exams. Further research from Oliver Fairbrother (2018) believed that the Ministry of Educations solution of lowering credit requirements from level one, two and three was not going to solve the large amount of stress felt by students. Oliver argued this approach as he supported my idea of wellbeing classes by explaining "stress



is a part of life and what we should be doing is teaching young people coping strategies to work through it. After all, isn't the ultimate purpose of school to encourage personal growth and learning?"<sup>22</sup> This helps us to understand that wellbeing classes would help students to keep engaged and connected with their wellbeing as well as promote the wide societal support available for them. However, a key limitation of implementing compulsory wellbeing classes in the centre could result in students taking more time out of their core curriculum classes. This could result in further stress on students who may be spending more in wellbeing classes than their core school work.

Finally, it is important that wellbeing centres are implemented in both primary and secondary schools around the country as early intervention in primary schools will expose children to different ways of coping with stress. At an early age, early intervention with wellbeing centres would help develop cognitive skills, problem-solving skills, self-awareness and healthy coping mechanisms. Jill Mead (2020), managing director of TalkOut also sees value in early intervention as she explained "75% of adult mental health problems start before a child is 18 years old, with anxiety, depression, self-harm and low self-esteem being the most common issues among young people. Early intervention is therefore crucial, and schools play a huge role in this."<sup>23</sup> Wellbeing centres in primary schools should balance their classes between indoor learning in the centre and outdoor play as this way students will be able to keep engaged and enjoy learning the various ways to manage their wellbeing for when times get tough. This early intervention would be an advantage for these primary school students in the long term, as it will allow them to adapt to the pressures of NCEA during high school by applying strategies and coping mechanisms learnt during this early intervention. However, the wellbeing centre in PLC was \$10.5 million to create, therefore an immediate limitation of this would be the cost it would have on the Government - especially after the Government's response to Covid-19, our country may be unable to afford implementing these facilities to put student wellbeing at the centre of each school.

It is important that we eliminate the catalyst of NCEA as a primary stressor. It is important that we don't consider eliminating all the stress related to the issue as then everyone would be able to achieve NCEA without any challenge. If this was the case, how could we consider NCEA as a qualification? However, there are multiple consequences that the stress of NCEA can have on students if we don't create a strategy. For example, students would feel they need to spend more of their time on internals and studies due to the high expectation of achieving good grades. This means that they may not be keeping a well-balanced student lifestyle which could impact other aspects of their lives. Aspects such as their social life and physical fitness may decrease as a result of spending more time stressing about school. Stress of NCEA may cause students to have low attendance as they may choose to work at home or find that they're too tired to attend school as a result of working hard to complete their workload. Low attendance would have negative flow-on effects as this would decrease the social interaction they have with others at school as well as may hinder their ability to create positive long term goals for university.

In relation to the Child and Youth Wellbeing Strategy, I believe my vision will target more desired outcomes than the Government-led strategy was proposing. The actions in the 'learning and developing' outcome did not specifically look for ways to support all students deal with the pressures of NCEA. Their action of 'support life transitions' are aimed to only help young people transition out of care/youth justice settings and have programs for young people who aren't in education. These justified actions would not achieve equity for all students taking NCEA who find the pressures to be overwhelming. This suggests that my vision of a wellbeing centre clearly takes into consideration the support needed for all students, staff and members of the community by providing various facilities where they can learn many skills to manage their stress. This strategy would help students to feel more cared for by the Government as the centres would also ensure students they have a place to learn and seek support for their worries as well as academic struggles - which the Child and Youth Wellbeing does not consider.

My strategy would have direct consequences. On a personal level, students and teachers would be more than welcome to gain the health benefits through the fitness centre in the facility. This would allow them to keep actively fit through the various gym equipment that would be made available. An increase of physical activity would boost levels of endurance for individuals, as they would find they have more energy throughout their day. The wellbeing centre would improve the development of students' critical thinking skills, problem solving, decision-making, self-

<sup>22</sup> (n.d.). NCEA changes aren't reducing stress, they're ... Stuff.co.nz. Retrieved November 3, 2020, from <https://www.stuff.co.nz/stuff-nation/105766769/ncea-changes-arent-reducing-stress-theyre-increasing-it>

<sup>23</sup> (2020, April 6). How to set up a wellbeing centre in your school – Independent. Retrieved November 1, 2020, from <https://ie-today.co.uk/health-and-well-being/how-to-set-up-a-wellbeing-centre-in-your-school/>



control and communication of thoughts and feelings through the various resources available, as well as the wellbeing classes that would be compulsory for all students to take part in. Having the wellbeing centre located in the heart of schools means that it would be accessible for all students which could increase the levels of social interaction between students as they would be mixing with others in different year levels. By implementing my strategy, I believe that this would positively change students' attitudes and values towards their wellbeing. The centre would help them to recognise the importance of maintaining their wellbeing as it is fundamental for their overall health since it helps individuals to achieve their goals to the fullest potential as well as support them to overcome difficulties in life. This would suggest that the wellbeing centre would equip students with the appropriate skills and strategies to cope and overcome the stress that they may experience through NCEA, but also outside factors such as family, relationships, university, personal struggles. However, a limitation of the strategy is that it is not an immediate fix for students, as it would take time to get the program up and running with facilities. Therefore, students won't receive the benefits until the centre is completely ready.

At an interpersonal level, the wellbeing centre takes into consideration the influence that a teacher and other students can have over individuals' wellbeing, as by working with others in wellbeing classes, students will be able to understand and recognise the strategies and coping mechanisms that they find are more effective for them to apply during stressful situations. This ensures that students' wellbeing is well supported and safe by the members of staff at the school, as there are various facilities that are available for one on one sessions that students can take part in to improve their overall wellbeing. For example, one on one talking therapy sessions are available through the counsellors and western scientific medicine would be accessible through the nurses located in the centre, which would positively impact students as they would feel they have a safe, supportive environment which they can turn to for help.

By promoting hauora at a societal level, schools would be taking an socio-ecological approach for a positive cultural shift within the school community to support student wellbeing for all in their school. Through implementing this strategy, the school community expresses that it should be okay for students to seek help as it should be encouraged and normalised. As a result of this attitude shift, this would benefit the students within the community as they would feel that they have a positive sense of community as they have a school environment which understands the struggles that can be experienced in high school. Dr Hadwen (2018) at PLC explains by implementing their wellbeing centre "we certainly hope we see downward trends in anxiety and stress levels among the girls and a higher level of connection across the school."<sup>24</sup>, therefore by having a variety of support available for all students to access in one place I hope this would decrease members of the communities levels of depression and anxiety around NCEA, as these facilities would be convenient all year round. Likewise, this would decrease rates of community obesity and physical health problems as students and staff would have access to the fitness centre to help manage their wellbeing. Having the wellbeing centre demonstrates that schools are willing to cooperate with the community to ensure a better environment for student wellbeing which would illustrate a positive involvement and participation by schools for their students. By funding this, the Government would further show their care and compassion for students, as they respect this idea that NCEA can be a difficult schooling system for people within the community so would want to improve this by setting up the facility that allows for students to learn skills to apply during stressful situations.

### **Where does this all lead us to?**

The present study was designed to determine the effect NCEA has on students taking it. One of the more significant findings to emerge from this study was that many New Zealand youth recognized that they did not have the appropriate skills and strategies to cope with the stress that NCEA brings. Research by NZ Herald (2004) even demonstrated that students are heavily medicating themselves as a result of trying to cope with their high levels of stress. They further explained "more young people are relying on medication to deal with the stress of the new secondary school assessment system, a Nelson survey has found."<sup>25</sup> I found this statement to be quite alarming as it made me realise how big of a problem NCEA can be for students, but also the importance of implementing strategies for these students to better manage their stress more effectively.

<sup>24</sup> (2018, March 11). Perth school PLC unveils \$10.5 million Lighthouse well-being. Retrieved November 3, 2020, from <https://thewest.com.au/news/education/perth-school-plc-unveils-105-million-lighthouse-well-being-centre-putting-mental-health-on-the-curriculum-ng-b88765711z>

<sup>25</sup> (n.d.). NCEA pressure turns students to medication - NZ Herald. Retrieved November 3, 2020, from [https://www.nzherald.co.nz/nz/ncea-pressure-turns-students-to-medication/JCJVX6TEO3PKTDLNEDJL\\_THDNI/](https://www.nzherald.co.nz/nz/ncea-pressure-turns-students-to-medication/JCJVX6TEO3PKTDLNEDJL_THDNI/)

I have evaluated the various solutions that NCEA and the Child and Youth Wellbeing Strategy have in place for students who reported the qualification was too stressful for their learning, however, I found these to be too broad. For example, as soon as NCEA is implemented in schools, they recommend to reduce the workload as soon as they begin. They also allow schools to be flexible around the internal/external balance. There are derived grades available for students who are unable to complete their exams and they have a very specific supportive system in place for students who are struggling to achieve the credits required to pass, such as earn credits from outside of school courses.

However, research in my report demonstrates that NCEA and the Child and Youth Wellbeing strategy do not explicitly address the issue of increased stress for students. I believe that it is crucial that the Ministry of Education takes into consideration students' lives both inside and outside of the school gates, as making changes to NCEA isn't going to fix all the issues that students have with it. The Ministry of Education should be exploring strategies that are going to promote student wellbeing and ensure an effective school support system is made available for every student of every age, ethnicity, background, differences to ensure equitable outcomes are met. This is why I suggest my vision of a wellbeing centre could achieve these barriers as the centre allows students to explore different types of strategies they could use to cope when NCEA gets stressful. It takes into consideration the different types of needs of students and ensures that it is accessible for everyone, both staff and students, at the school.

As a student sitting her final year of NCEA, I urge the Government and Child and Youth Wellbeing Strategy to reconsider their proposed actions. I believe it is crucial that the Government makes a change now to ensure students in years to come feel more supported and cared for by the qualification. Findings from Scoop Media suggested that "half believe they are not taught how to study or deal with exams, according to nearly 6000 students."<sup>26</sup> Therefore it would be recommended that further research is needed to be undertaken to find solutions to ensure students feel more prepared for NCEA. Evidence found overseas suggests that we don't have to eliminate stress but instead create ways of managing it to protect our students' wellbeing.

I encourage the Government to consider my vision of a wellbeing centre as it would be essential in promoting and enhancing students' wellbeing in New Zealand. Being in year 13, I believed NCEA missed the opportunity to help me with my wellbeing so I hope the Government reconsiders this possibility for others. However, we must consider other ways to solve this issue. Having the most powerful generation coming through, what more can we do as a nation to ensure these young people feel supported and prepared for their future, both in and outside of the school gates?

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<sup>26</sup> (2017, November 17). 2 in 3 NCEA students severely affected by anxiety ... Scoop NZ. Retrieved November 5, 2020, from <https://www.scoop.co.nz/stories/ED1711/S00066/2-in-3-ncea-students-severely-affected-by-anxiety-or-str ess.htm>

## Activity 9.

# Critical thinking for wellbeing

### Overview

The capacity for thinking rationally and critically is noted among the protective factors that contribute to healthier outcomes and helps foster resilience. For example, among the evidence-based protective factors listed in the *Youth Development Strategy Aotearoa* (Ministry of Youth Affairs, 2002) is '*thinking skills, including problem solving and seeing things from others' perspectives*'.

*Health and Physical Education in the New Zealand Curriculum* (1999) defines critical thinking as "*examining, questioning, evaluating, and challenging taken-for-granted assumptions about issues and practices*" and critical action as "*action based on critical thinking*" (page 56).

To think critically requires the ongoing development of a range of cognitive skills such as: analysis, comparing and contrasting, and explaining (e.g. factors influencing an issue), leading to higher order skills like evaluation, reflection, creative thinking (e.g. to suggest novel solutions), and seeing situations from multiple and diverse perspectives.

This activity invites students to think about the role of critical thinking, a feature of many health education activities, and how it might contribute to their sense of wellbeing.

### Curriculum considerations

**Learning intention:** Students will develop understanding how the skills needed for critical thinking can support mental health and wellbeing, and be a potential protective factor when managing major life changes.

**Key competencies:** Thinking critically, Participating and contributing.

**Digital fluency or citizenship:** Learning supports digital principles – demonstrating values when working digitally; being an ethical, respectful, and responsible digital citizen.

### Resources

- Extracts from the HPE critical thinking statement in *The Curriculum in Action: Making Meaning Making a Difference* (Ministry of Education, 2004) <https://health.tki.org.nz/Key-collections/Curriculum-in-action/Making-Meaning/Teaching-and-learning-approaches/Importance-of-critical-thinking> - see cypsheet for extracts.
- Access to the Scholarship report on cultivating critical consciousness may also be useful for students to read in full or in part.

### Teaching and learning process

- Ask the students what they thinking 'critical thinking' is? How do they know when they are thinking critically? What sort of skills are they using? How is critical thinking different to simply learning to know (and reproduce or regurgitate) something? Accept all reasonable attempts at a definition and offer the short HPE 1999 statement in the overview. Repeat any of the previous questions to elicit further information, given this definition.
- Ask the students how they think critical thinking could be an important feature of wellbeing? As necessary, unpack the statement that critical thinking is about "*examining, questioning, evaluating, and challenging taken-for-granted assumptions about issues and practices*" – how could being able to do these things support wellbeing? Draw out ideas related to being able to *think about and evaluate their own thinking and behaviour on issues; make reasonable and defensible decisions about issues related to individual and community well-being; challenge and take action (individually and collectively) to address social, cultural,*

*economic, and political inequalities (from The Curriculum in Action: Making Meaning Making a Difference)* and where not immediately apparent, why these capabilities are in some way linked to wellbeing.

- Provide students, working in groups, with the copysheet and instruct them to use this as a guide to group discussion. Provide as much scaffolding and support as needed to take the students into the discussion activity.
- After students have worked through a number of ideas, ask each group to feedback three main ideas about the way they think critical thinking and wellbeing are linked.
- Reflect back on previous learning about building resilience and protective factors that support people when they experience major changes. Using the statement in the overview, that the evidence-based protective factors listed in the *Youth Development Strategy Aotearoa* includes 'thinking skills, including problem solving and seeing things from others' perspectives', how do the students (also) see that being a critical thinker could also help them manage major life changes? Draw on ideas from the copysheet and the discussion.

#### **Debrief:**

- [Playing the devil's advocate] Ask students if they can see a situation when being an astute critical thinker might be a disadvantage for the wellbeing of themselves and others e.g. is there a case to be made for understanding too much about some situations? Or if someone thinks critically about everything and always gives another perspective, and challenges other views or asks further questions, when in conversation? .... How does a critical thinker negotiate these tensions when relating to other people?

#### **Student learning artefact(s)**

- Notes from the activity documenting students' own sense making are filed in their learning journal for ongoing reference and use OR a reflective paragraph is developed after the discussion explaining how the students see that critical thinking and wellbeing are linked.

#### **Teacher pedagogical and/or content knowledge**

While the 1999 HPE in the NZC statement offered a short accessible definition of critical thinking, the complexity of critical thinking warrants consideration of more detailed definitions such as that provided in the copysheet for this activity.

Developing critical thinking as a lifelong capability and not just a set of skills used when needed for learning requires consideration of the way critical thinking is built into learning programmes in health education. For example, to what extent does your learning programme attend to the two components of critical thinking

- 1) that it is a set of information and belief generating and processing skills, *and*
- 2) *it is also a habit*, based on intellectual commitment to use those skills to guide behaviour.

This is in contrast with:

- 1) the mere acquisition and retention of information alone, because critical thinking involves a particular way in which information is sought out and treated;
- 2) the mere possession of a set of skills, because critical thinking involves the continual use of them; and
- 3) the mere use of these skills ("as an exercise") without acceptance of their results.

Source: Michael Scriven & Richard Paul, 8th Annual International Conference on Critical Thinking and Education Reform, Summer 1987.  
<https://www.criticalthinking.org/pages/defining-critical-thinking/766>

Have you or your department done an 'audit' of critical thinking opportunities in the health education programme? Where do you help students to develop the capabilities and the skills for critical thinking (as a key competency)? Where do you provide learning opportunities for these capabilities to be applied? How diverse are the learning contexts?

**Teacher evaluation and reflection**

How readily could students make the connection between critical thinking and wellbeing? If this was a challenge (for some) where else could these ideas be further developed? In which learning contexts (topics) could critical thinking about issues be purposefully highlighted for the way being able to think critically is not just for understand the issue, but as a competency for supporting one's own wellbeing?

## Discussion guide : Critical thinking and wellbeing

As a group select 3-4 of these ideas and discuss how or why being a critical thinker (as described by the features on this list) could support a person's wellbeing. Either look up or ask for an explanation of any terms you are not familiar with.

### A Brief Conceptualization of Critical Thinking

Critical thinking is self-guided, self-disciplined thinking which attempts to reason at the highest level of quality in a fair-minded way.

- People who think critically consistently attempt to live rationally, reasonably, empathically.
- They are keenly aware of the inherently flawed nature of human thinking when left unchecked.
- They strive to diminish the power of their egocentric and sociocentric tendencies.
- They use the intellectual tools that critical thinking offers – concepts and principles that enable them to analyse, assess, and improve thinking.
- They work diligently to develop the intellectual virtues of intellectual integrity, intellectual humility, intellectual civility, intellectual empathy, intellectual sense of justice and confidence in reason.
- They realise that no matter how skilled they are as thinkers, they can always improve their reasoning abilities and they will at times fall prey to mistakes in reasoning, human irrationality, prejudices, biases, distortions, uncritically accepted social rules and taboos, self-interest, and vested interest.
- They strive to improve the world in whatever ways they can and contribute to a more rational, civilized society. At the same time, they recognize the complexities often inherent in doing so.
- They avoid thinking simplistically about complicated issues and strive to appropriately consider the rights and needs of relevant others.
- They recognise the complexities in developing as thinkers, and commit themselves to life-long practice toward self-improvement.
- They embody the Socratic principle: *The unexamined life is not worth living*, because they realise that many unexamined lives together result in an uncritical, unjust, dangerous world.

From: Linda Elder (2007)

The Foundation for Critical Thinking <https://www.criticalthinking.org/pages/defining-critical-thinking/766>

Again, select 3-4 of these ideas and explain how or why being a critical thinker in these ways could support a person's wellbeing.

Taking responsibility for using their reasoning skills to analyse and evaluate information

Giving other people feedback about their analyses, evaluations, and actions

Questioning and challenging other people's assumptions in a non-threatening manner (and having own assumptions challenged in the same way)

Learning to identify any inequalities and power imbalances in relationships ...

... recognising how these positions of power are sometimes reinforced through organisational structures and ...

... recognising how these positions of power are sometimes reinforced through certain forms of language

Reflecting on people's assumptions, beliefs, and behaviours, and taking into account a range of factors or perspectives when doing this

Generating alternative or innovative solutions and accepting them or critiquing them in a sensitive manner

Taking responsibility for using their reasoning skills to plan and think strategically

Developing the confidence to work with others to take critical action

Developing the confidence to become broad and adventurous thinkers

Source of information based on: *The Curriculum in Action: Making Meaning Making a Difference* (Ministry of Education, 2004)

<https://health.tki.org.nz/Key-collections/Curriculum-in-action/Making-Meaning/Teaching-and-learning-approaches/Importance-of-critical-thinking>



## Activity 10.

# Perspective taking around diverse values and beliefs

### Overview

Variously called the 'lifeboat activity' or 'who gets the treatment' (who will be saved when not everyone can be, or there's not enough for everyone), values auctions, (and other such activity names), these approaches to learning have been around in democracy, peace, social justice, ethics, or health education for decades. These are activities that position students in the role of having to decide who gets saved, or whose interests are most served, as a way to explore ethical dilemmas, values and beliefs, and promote values of fairness and inclusiveness, and empathy.

This activity offers two more versions of a type of values auction: (1) is the future pandemic-limited vaccine scenario whereby the students have to work out a points system to decide who gets the vaccine; and (2) in a potentially more complex scenario, two main groups of student activists seeking to take action on environmental issues are positioned against each other – one group favours actions to benefit the natural environment and the planet (even if that means offending or even harming some people), the other group favours actions that firstly support people's health and wellbeing as well as protecting or saving the environment.

Use this activity as part of a unit when students are exploring values and beliefs leading to consideration of ethical dilemmas. Some prior learning about the similarities between morals, values, beliefs, attitudes, opinions and assumptions may be useful.

### Curriculum considerations

**Learning intentions:** Students will recognise a range of values and beliefs associated with complex situations in which difficult choices need to be made.

**Key competencies:** Thinking critically, Relating to others.

### Resources

- Scenarios and situation cards for selected option copied off and cut up as indicated - see cypsheet pages.
- Access to the Scholarship report on cultivating critical consciousness may also be useful for students to read in full or in part.

### Teaching and learning process

- Re-establish class safety guidelines indicating that the 'values auction' activity may require students to draw on some deeply held personal beliefs about social issues which, if the group debate gets heated, might become upsetting and troubling. Consider adding a clause to the safety guidelines about the right to seek teacher mediation if any member of the group feels like things are getting out of hand and it's too upsetting.
- Explain the basic process of the activity (use the instructions in the copy sheets for this). Instruct the students that they need to individually take a stand on the situations presented in the activity based on their values and beliefs about matters (as far as they are confident and feel safe to do so).
- Make clear to the students that the point of the activity is not necessarily to resolve the issue, but the process to get there and the debate and decision making along the way – so not to rush to finish and just decide the outcome.
- Organise students into groups of 6-8 (make the groups big enough to get some debate going but not so big that some students will get left out. One person needs to be the note taker as follows).
- Note the option to appoint a note taker to record the value-based reasons for the decisions made. If used, take a few moments while the groups are getting organised to brief these students on their role and to

focus them on recording what they are hearing about the values and beliefs underpinning the decisions being made, and to ask the group when this is not clear.

- Distribute the copysheet materials and after checking that the groups understand the process, allow time for groups to work through the activity, monitoring the conversations to ensure communication remains respectful and safe for all students. Allow enough time for the point of the activity to be made. This need not result in a clear resolution of the dilemma presented in the activity.

#### **Debrief:**

- Ask the note takers (or if not used, the groups) what sorts of values and beliefs they saw being expressed as their group made their decisions. Were any values and beliefs particularly well supported, or strongly voiced – if so which?
- Ask the class why it is that within a population there are such diverse values and beliefs – how do any of us come to know and learn all of these things we place value on (and reject other ideas)?
- Why is it important for individual, group, community and societal/national (even global) wellbeing to have an understanding of the different perspectives people bring, and where these values and beliefs come from?
- What role does empathy play in situations like these? *Recap what showing empathy means if required.* Can we/should we *empathise* with people who have very different values and beliefs to our own on matters like these? Or is it more a case of *accepting and tolerating* that other people have very different values and beliefs to our own on such matters? *If in your heart of hearts you absolutely believe there is one right thing to do in a situation but others have completely opposing views can you show empathy for their position, or is it more a case of accepting (or tolerating) that they have very different ideas to you?* Thoughts?

#### **Student learning artefact(s)**

In their learning journal students write a reflective comment about the activity e.g.

- What I realised about my own values and beliefs doing this activity ....
- What interested or surprised me about the values and beliefs of others while we were doing this activity ...
- What I found most difficult or most challenging about this activity .....
- What I learned from this activity ....

#### **Teacher pedagogical and/or content knowledge**

It will be important to re-establish class safety guidelines for this activity. These issues are potentially very emotive and quite concerning for some students. Delete any items from the life situations or issues lists in the activities. Monitor the group activities carefully to ensure the debate is constructive and not causing distress or upsetting students.

Consider swapping the scenario for other values-based dilemmas that are topical and of interest to the students.

#### **Teacher evaluation and reflection**

How well did the students engage in the process of this values auction? Were students prepared to actively take a stand on issues or did they tend to passively go with the group decision? How does this approach compare with the way students engage in values continuum activities for example? What other topics/issues in the learning programme would be useful to explore from a values continuum or more a values auction type approach?

## Values auction instructions and scenario

- **Appoint a group facilitator**
- **[Optional] Appoint one person in the group to take brief notes about how or why you came to your decisions about the points allocated to each life situation.**
- **Facilitator - read the scenario below to your group and lead them through the instructions that follow:**

### Scenario

In a future global pandemic, the disease-causing virus spreads very easily and results in far more deaths than previous pandemics, not just among the elderly but also among younger people, including children and babies. Oddly, it appears that anyone surviving this virus has immunity from further infection – although the scientists aren't so sure about this.

Although a vaccine to prevent the disease has been developed, it is very slow to manufacture, and a break down in international agreements has meant countries have to buy the expensive vaccine from those countries that make it. New Zealand has managed to secure enough vaccine for half of the population.

You're part of the government agency who gets to decide who gets the vaccine as stocks of it arrive into the country. To date the vaccine has been described around the country on a per capita basis (ie the number of vaccines is proportional to the local population). Your local community has decided on a 'points system' for the vaccination and to be in line for a vaccination a person has to have a certain number of points based on a set of selection criteria.

Your task NOW is to decide how many points will be given to each of the life situations in the chart provided.

**Cut up the chart into separate squares so that you can (re)organise the ideas as you discuss them.**

You need to give more points to the life situations your group thinks have greater value.

A scale of 0 = no value, through to 10 = highest value is suggested.

**Your group can add other ideas for your points system before you start the main part of the activity, or as you think of other ideas throughout the activity.**

Keep in mind that the more points an individual accumulates, the more likely they will be the people selected to get the vaccine.

**[Optional] Once you have established your points system, test it out:**

- Decide how many points in total you think a person would need to get the vaccine – and how many criteria would this need to be spread over?
- Turn all of the life situation cards upside down and mix them up - but keeping them grouped in relation to age, occupation, and other life circumstances. Randomly select a card from the age range group of cards, then the occupation cards (have they met the points needed yet?), and then the other circumstances cards. Try this several times.
- Do you think a points system like this is fair? Do you think it will work? Why or why not?

*Cut these up*

Age-related life situations			
Babies	Primary school age children	Secondary school age young people	University students - young adults
Young adults (20-35)	Middle aged adults 35-50	Older adults (50-65)	Elderly adults 65-80
Very elderly adults 80+	Grandparents	Great grandparents	Kuia and kaumatua
Parents with children and teenagers			
Jobs and professions			
Doctors and nurses (and other front line medical workers)	Professional people such as lawyers, accountants and other finance-based professions	Tradespeople (who make and build things)	Police and the defence forces (army, navy, airfare)
Farmers and market gardeners and other food producers	Teachers and people who work in education	Top performing and/or professional sports people	Counsellors and therapists
Government workers	Hospitality industry – hotel workers, bar and restaurant workers	Entertainment industry – singers, actors, dancers etc, and people in the TV, music and film industries	Hairdressers, beauty therapists, nail technicians etc
Government and civic leaders	Religious or other cultural leaders	Other creative industry people – artists, craftspeople	People who work in retail (selling good in shops or online)
People who work with digital technologies – programmers, IT helpdesk/ support etc			
Other life situations			
Currently has a life-threatening illness or condition	Has compromised immunity due to a past or current health condition	Believes / doesn't believe in the scientific evidence about the virus and vaccination	Has had the virus and survived
Urban (city and town) versus rural (country) dwellers	Employed middle-aged older adults	Employed young adult	Unemployed adults
People with physical disabilities	Neuro-diverse people (e.g. people with cognitive or intellectual impairment)	Reproductive age people who are infertile	People who do unpaid charity work

## Negotiating a decision to a values-based problem - instructions and scenario

- **Appoint a group facilitator to explain the instructions** – this person will join one of the groups once the activity is explained and underway.
- **[Optional] Appoint one person in the group to take brief notes about how or why you came to your decisions.**
- **Facilitator - read the scenario below to your group and lead them through the instructions that follow:**

### Scenario

A student activist group is keen to take action around an environmental issue as part of a global youth movement seeking to make an impact on current environmental concerns and climate change. The size of the group and the time and resources available to them means that they **need to decide on just one issue at this time**, otherwise it's unlikely they will manage to take any form of action.

However, there's a clear split in the group:

- **those who believe that the actions should be all about saving the natural environment and the planet – even if this means upsetting or even harming people ... 'the mother earth lovers'.**
- **whereas others believe that any actions should first support the health and wellbeing of people, as well as being what is best for the environment ... 'the humanitarians'.**

The group are currently at an impasse.

1. Imagine you are all members of the student activist group.
2. Half of the group are going to be 'the mother earth lovers' and the other half 'the humanitarians'.  
*[Facilitator, divide your group into 2 and assign a role/position to each group. You can change the names of the two groups if you want to.]*
3. *[Explain]* This means that some of you will need to take a position which may not be your own but you will need to try and stand in the shoes of a person who holds those views. This means that views expressed may not be your own but a reflection of views they have heard expressed by others.
4. The list of actions for us to focus on is as follows ... *[provide these ideas printed on cards]*

Climate change	Global warming	Reduction of fossil fuel use
Plastic waste and pollution	Overpopulation	Loss of biodiversity (endangered and extinction of species)
Waste disposal including e-waste, medical waste, industrial waste, domestic waste etc	Deforestation (for farmland, housing, and resources like timber)	Water pollution (and access to clean water)
Natural resource deletion (and destruction of habitats)	<i>(Add other ideas or adapt these if required).</i>	

5. Our task NOW is to debate and decide which ONE of the environmental issues the **whole group** is going to support, given our limited time and resources.
6. First, in your two separate groups, discuss the issues on the list your group is going to support and why, and which ones are not an option at this time. What values and beliefs are important for your group to stand up for? *[Allow about 5 minutes for this. Facilitator - join one of the groups keeping numbers as even as possible]*
7. Taking turns, each group now needs to put forward one idea at a time giving reasons for your selection. You need to pay particular attention to the values and beliefs underpinning the reasons for your group's choice(s) and position on the matter.
8. With each selection the opposing group can ask questions and challenge the reasons for the choice.

9. *Keep going until each group has put all of their ideas on the table.*
10. *[Facilitator] Look for any issues in common. If any issues are supported by both groups, keep these on the table and focus only on these. If there are no ideas in common, ask each group to decide their highest priority issue and leave only these two ideas on the table. Ask the groups to then try and negotiate a final decision, again focusing on the value-based reasons and beliefs underpinning their selection.*
11. *Regardless of whether or not your group reaches an agreed outcome, the teacher will guide you through an activity debrief.*



## Activity 11.

# Connectedness

### Overview

This activity offers a more complex approach to the familiar 'my map of social support activity' often used in junior secondary and even primary school level programmes. Students are invited to explore the idea of 'connectedness and being connected, in conjunction with the concept of whanaungatanga.

Use this activity in any unit where ideas about 'wellbeing' are being developed, especially what might be termed 'spiritual wellbeing' and those less defined, less tangible ways wellbeing is explained and supported.

### Curriculum considerations

**Learning intentions:** Students will demonstrate understanding of the way the concept of 'connectedness' relates to people's sense of wellbeing.

**Key competencies:** Managing self; Using language, symbols and text.

### Resources

- Access to an online dictionary (e.g. Te Aka Māori dictionary <https://maoridictionary.co.nz/>) and/or print sources of terminology, and/or te reo speakers in the school community where possible, for explaining te reo Māori kupu (words) and aroro (concepts).
- Paper based or digital application for creating a personal 'connectedness map' of A3 (or larger) size.
- Access to the Scholarship report on social connection and belonging in children and young people may also be useful for students to read in full or in part.

### Teaching and learning process

#### Scene setting:

- Ask students to recall prior learning about the notion of '(belonging and) connectedness' through questions such as:
  - In what ways do people 'connect' (*with other people, with places, with things etc*)?
  - How do you know if you have a connection with someone or something?
  - What do you think or what do you feel if you have a 'sense of connectedness'?
  - How does having a sense of connectedness or being connected contribute to wellbeing? *And if people have few connections, or no sense of connection, in what ways is their wellbeing compromised?*

#### Main activity:

- Ask students what they understand the term 'whanaungatanga' to mean. Use an online dictionary (or other source), or local expertise to help develop understanding of the meaning and break the term down into its parts.
- Also establish what 'whakawhanaungatanga' means (as a *process* for establishing relationships and relating to others in ways that support wellbeing
- How could the terms whanaungatanga and whakawhanaungatanga enhance or add to the previous understandings of connectedness?
- Ask students what skills and opportunities are needed for people to be able to connect in any of the ways discussed (draw out prior learning about a wide range of interpersonal communication skills for example).

- Assign the individual task of creating a personal map (a poster) of connectedness – like the map of social support students may have completed in previous years, but with the addition of the skills, knowledge and opportunities (life situations) needed to develop and sustain these connections.
- Discuss how this map might be created. Imagine it's like a positive affirmation or positive thinking poster. Think about how the notion of 'connectedness' might be shown visually and how the poster will be titled. At a minimum specify that the map must feature in words and/or images the ways the student feels a sense of connection to people, places and/or things, AND it needs to include examples of the skills, knowledge and opportunities (life situations) needed to develop and sustain these connections.
- Allow time for students to complete their map/poster. Sharing is optional as these may contain quite personal information.
- Signal next steps for learning e.g. A logical addition to this activity is to add in the notion of 'belonging' and to consider what that adds when applied to ideas about wellbeing – ie what does it mean to have a sense of belonging and connectedness?

### **Student learning artefact(s)**

Students file an image of their map in their learning journal and the original is something they can take home.

### **Teacher pedagogical and/or content knowledge**

What school (or community) wide actions or event might this activity be able to connect with? Some descriptions of whanaungatanga also embrace or intercept with a range of other concepts such as manaakitanga, kaitiakitanga, and wairuatanga. Refer back to Activities 1-4 for other ways to extend this learning through these other related concepts.

### **Teacher evaluation and reflection**

How readily do students grasp these less concrete, less tangible (more abstract) ideas about wellbeing? Is there any languaging or are there any related concepts or models that help to develop students' understanding of ideas like connectedness and for them to be able to talk about these ideas?

Similarly, any there some topics/learning contexts that are more useful for developing these abstract ideas and is there a way to leverage off these when applying the ideas in other topics?

## Activity 12.

# Taking action to manage NCEA stresses

### Overview

The relationship between formal assessment at school or university and 'being stressed' has long been recognised. In recent years the ways NCEA specifically adds to student stress through over assessment and other factors has also been well documented.

This activity invites students to firstly explore their experiences of NCEA related stress and what helps or hinders stress management, with a view to conducting a wider school survey leading to making recommendations to school leadership on ways to help students better manage assessment stress, and/or advocate systems levels changes to reduce (potential) assessment stress.

Use this activity in a unit exploring young people's wellbeing and how stress management is a feature of maintaining wellbeing. Further activities related to stress and wellbeing can be found in the NZHEA resource, *Mental Health & Resilience 2nd ed* (2021) available at <https://healtheducation.org.nz/resources/>.

### Curriculum considerations

**Learning intentions:** Students will describe the way NCEA related matters may cause stress and recommend strategies for managing this stress.

**Key competencies:** Participating and contributing; Relating to others.

### Resources

- Access to any school documentation e.g. policy or procedures related to the promotion of student wellbeing (and reducing assessment related stress), where these exist.
- Access to the Scholarship report on NCEA stress may also be useful for students to read in full or in part.

### Teaching and learning process

- Recap students' prior learning about stress – what causes it, how it manifests (how it impacts wellbeing) and what helps to reduce or manage stress.
- Focus students attention on the way NCEA assessment causes students stress. Use a preferred method to brainstorm ideas e.g. graffiti sheets headed with a question to which students add 'graffitied' ideas in response to the question:
  - How does NCEA assessment cause (you) stress?
  - How does NCEA stress affect wellbeing? (*What do people say or do, how do they behave when NCEA assessment specifically is stressing them?*)
  - What do you think our school could do better to reduce NCEA-related stress?
  - How do you think individual students could better support themselves to manage NCEA stress?
  - What do you think parents need to know and understand about NCEA assessment and the stress this causes?
  - What do you want your teachers to know about the sort of stress students' experience in NCEA assessment situations?
- Assign a graffiti sheet to each group (number of groups = number of questions) who have the task of summarising all of the ideas noted on the sheet to formulate a short summary statement that captures all of the class's ideas. Once summarised these are shared with the class as a check that all ideas have been captured. Collect and organise these summaries in a digital (or print) file for all students to access.

- [Where available] make connections between the issues raised by the class and any school documentation about promoting student wellbeing (and any specific school guidance around NCEA stress management).
- Using the brainstormed ideas as a basis (and any inconsistencies with school policy and procedures), ask the class to come up with ideas for survey questions to find out if their year level cohort or all levels of senior student students have similar experience of assessment related stress, with a view that the findings of the survey will be used to inform a class submission to the school senior leadership (and/or pastoral) team, and/or board of trustees, seeking changes that will help reduce NCEA related stress.
- Using a democratic approach, negotiate a list of questions with the class to formulate the survey.

**Next steps:**

- Support the students to ethically administer a digital survey of their peers, and then analyse the data.
- Use data from this survey for writing a submission as a form of student advocacy.
- Alternatively, the evidence may show other more direct actions the students could take as a way to help manage NCEA assessment stress or change the factors that cause this stress and learning could focus on planning and implementing these actions.

**Student learning artefact(s)**

Students file a copy of the class brainstorm summaries in their learning journal as a source of evidence for future investigations, along with the summarised data and analysis from the survey, and a copy of any submission they contribute to.

**Teacher pedagogical and/or content knowledge**

It is useful for teachers of health education to have a working knowledge of any student wellbeing focused documentation (policies, procedures etc – not specific student details) developed by leadership or school governance. It is similarly useful to know how the pastoral systems works at your school – the overall structure of the pastoral network, who is responsible for what, and who to refer to for certain issues). Ensure that at HPE department or faculty level these understandings of the pastoral system are consistently understood.

**Teacher evaluation and reflection**

Were there any particularly pleasing outcomes of the discussion or the survey that can be shared with school leadership, and/or anything particularly concerning that needs to be followed up? Who is the key person to follow up concerns with at your school? Who can you ask if not sure?