



Ngā Maia Māori Midwives Aotearoa

CEO Report: 2019- 2020- 2021

October 2021

By Jean TeHuia; PhD Candidate



Tena Koutou Katoa

This report has been prepared for the Nga Maia Annual General Meeting scheduled for October 30th, 2021, in Waikato. The purpose of this report is to advise the members of the activities of the CEO for the period November 2019 – October 2021 and to highlight the progresses achieved by our Nga Maia members, whanau and rohe across Aotearoa.

Firstly, I would like to acknowledge The Nga Maia Board of Trustees and to especially recognise the many years of support for Nga Maia from the outgoing Interim Board Chair RN Pauline Allan Downes. I acknowledge there have been significant advancements in leadership responsibilities for Nga Maia members since my last report which is apparent when we recognise the mahi that has been achieved. Māori Midwifery is evidenced by Nicole Pihema, NZCOM President, and the work that she is doing, on various national midwifery committees and all members are encouraged to ensure she maintains this role. The appointment of Heather Muriwai as MOH Māori Midwifery Advisor for Population Health, her role puts a kaupapa Māori lens on Oranga Tamariki. Dr Hope Tupara as Co-chair for the Midwifery Council's Review of the Scope of Practice for Midwives. Dr Hope Tupara is also leading work around Te Tiriti and partnership in practice, with Government and NGO's ensuring the Tikanga for birthing Māori whanau is acknowledged. I would also like to recognize Ngarangi Prichard's appointment to The Midwifery Council, Kylie Hewitt's appointment to HBDHB as Māori Director of Midwifery, in the interim for Māori Midwife Shannon Bradshaw, who is currently on leave. Māori Midwife Collen Brown has also served a term on NZCOM National Committee.

The work of Megan Tahere, her appointment as Chief Māori and Equity Officer for the Taranaki DHB, is a significant achievement. Māori midwives involved and leading the mahi on research and who are studying toward their PhD, Beverly Te Huia and Janie Thomas. A recent Māori Midwife PhD graduate, Dr Jackie Martin completed her studies at Te Whare Waanga o Awanuiarangi. Midwife Tungane Kani is working with HBDHB in a Cultural Review of their maternity services. Tamara Karu, Sarah Ann Wills, Julie Rob O'Connor, Shannon Bradshaw, and Koha Aperahama completed Turanga Kaupapa Training facilitated by Henare Kani, to enable them to be facilitators so Nga Maia will extend the opportunity for Turanga Kaupapa to be available across Aotearoa.

Māori Midwives through-out Aotearoa, continue to work by providing hapu mama classes, making resources, and strive every day to ensure mātauranga Māori birthing needs of hapu mama are being met. I pay tribute to our kuia and kaumatua and lastly to those who are no longer with us, my condolences to you who have lost a loved one. Nga mihi kia koe.

The 2019 AGM Hui A Tau- held 23rd Oct 2019, at Otiria Marae was the beginning of several Hui that have continued in 2020 and 2021.

Dec 2019: Hapu Mama Birthing Needs; *Victoria Uni, Wellington*



Indigenous birthing across the world is eroded by colonisation every day. Dr Fiona Cramm, Dr Bev Lawton and others presented evidence highlighting the impact of losing cultural birthing rites, the impacts associated with changes in diet, loss of whanau and lack of appropriate care.

2020 The Year of The Midwife: Breakfast at the Beehive; *Wellington*



Māori, Pacifica, and Pakeha midwives celebrated together The Year of The Midwife.

Guest speakers paid tribute to Irihapeti Ramsden and Māori Midwife Ngarangi Pritchard. Celebrating diversity in midwifery was honored.

2020 Māori Midwifery Symposium; *Auckland*



Māori Midwifery Symposium- Te Rau Ora, Counties Manakau and Nga Maia. 28th July 2020

2020 Te Waipounamu Māori Midwives and Midwifery Ropu Hui; *ChCh*



Te Waipounamu; Māori Midwife, 29 July 2020

A strong contingent of Māori Midwives and Māori Midwifery students is being supported by Nga Maia Board member, Sarah Ann Wills. Sarah is also our Nga Maia South Island Advisory Rep on NZCOM National Committee.

2020 Nga Maia Poneke Rohe; *Wellington Region*



Nga Maia Māori Midwifery leaders in Poneke met to discuss their plans for the future. The future of Nga Maia, it's strength and unity is in building the capacity of our regions and in supporting our students.

2020 Māori Birthing Research



2021 Māori Midwifery Students; *Dunedin*



2021 Midwifery Students Attending Turanga Kaupapa Workshop



The midwifery schools across NZ have supported Turanga Kaupapa workshops.

2021 Kahungunu Māori Midwives Ropu Waanga



As always, eating, talking, and planning sit side by side when the Nga Maia Māori Midwives of Ngati Kahungunu have their monthly hui. Whakawhanaugatanga in action.

2021 Māori Midwifery Hui; *Otaki*



Facilitated by Nga Maia Māori Midwife Victoria Roper, Otaki; May 15-16th 2021

2021 National Māori Midwifery Student Hui; *Auckland*



21st- 23rd June 2021

Ngarangi Pritchard and Maria Hakaraia labored tirelessly for three days to birth the very first Māori Midwifery student's hui, held in Auckland in June of this year. A Summer School for Māori Midwifery Students is currently in negotiations, to be held at Hinetemoa Marae in January 2022. The summer school will be hosted by Nga Maia Kahungunu Midwives.

2020; Turanga Kaupapa Facilitators Training

Calls to increase the number of Turanga Kaupapa facilitators and to extend their ability to provide the workshops across Aotearoa came from our 2019 Hui at Otiria marae. In response Henare Kani facilitated the Turanga Kaupapa Training for our Nga Maia Midwives.



Henare Kani, Tamara Karu, Koha Aperahama



Henare and Shannon Bradshaw



Henare and Julie Rob O'Connor



Henare and Sarah Wills

A Call for Nominations for Three Board Member vacancies to the board of trustees.

The call has gone out to all Nga Maia members to consider one of the three vacancies to be filled at this year's AGM- Trustee Elections-to be held at Waikato on 30th October 21.

One vacancy for the South Island and Two vacancies for the North Island are currently up for nominations with two sitting existing Trustees- Sarah Wills representing the South Island and Ripeka Ormsby representing the North Island as sitting board members. A Chief Returning Officer will ensure the election process meets our legal requirements and the returning officer will be responsible for coordinating the 'Voting' and ensuring the process of the trustee elections, as required under Schedule 4-(6.1) of the Ngamaia Trust Deed is tika and pono.

Thank you, for those who put themselves forward.

Workforce Development for Māori Midwives in New Zealand

is currently adhoc and in-appropriate. The workforce shortage across all DHB's is highlighted in the latest TAS Report and has been ongoing for over ten years. The latest report indicates we have 27,000 unregulated Māori workers in health, social and education- *Kai awhina*. A restructure of Health Workforce NZ and the resignation of the former chair Des Gomes's has resulted in a new team being appointed. The appointment of a Māori midwifery advisor to the group is being followed up so that we may meet to support the role and to ensure the Māori Midwifery shortage can be a priority.

Te Ara o Hine – \$6million Dollars for Māori and Pacifica Midwifery Students.

There is always going to be controversy when Māori are provided with financial support. The criticism was evident in the flurry of abusive and racist comments on maternity and midwifery web pages and midwifery education sites across the country based on Bia's around 'brown privilege'. What is evident is the need to continue to support the education of Māori and Midwifery students, and only through 'Te Tiriti Partnerships' will this be achieved. The stark reality is that the need for culturally appropriate maternity and midwifery workforce, is the driving force behind the Ministry of Health and Disabilities current workforce strategy. Work across Aotearoa focusing on Māori birthing and workforce needs was initiated by Te Rau Ora, Counties Manakau and Nga Maia working together.

The full document can be viewed at: <https://terauora.com/wp-content/uploads/2020/05/Rapua-te-Aronga-a-Hine-Final-Publication-Version-19.04.2020.pdf>

The stark reality is, that the Māori Midwifery workforce has declined slowly over the past 25yrs, and all efforts by successive governments who have not been willing or able to address the problem, goes on un-resolved. Tupara and Tahere (2020) highlighted the fact that between 2008- 2018 over 1400 Māori women enrolled into a Bachelor of Midwifery degree at one of the five midwifery schools, only 261 completed, over 1200 were failed by the course. This represents an 86% failure rate which is absolutely unacceptable and highlights the need for a complete overhaul of the midwifery training system, to enable Māori learners to be properly supported to complete the programs.

Nga Maia as the 'Voice' and protector of 'Māori Birthing' is often silenced, not heard at the tables, where discussions around the disparities that exist for Māori women and their babies in birthing and maternity services, is too often explained away by 'directors and advisors' born not of this country, whose lack of cultural knowledge and driving political ambitions silence further the unheard voices and needs of Māori in New Zealand today.

While Nga Maia attempts to make changes that would better grow the Māori Maternity workforce, increase support for Māori midwifery students, and re-call and re-assert the traditional birth practices of our forebears to assist and enlighten our pregnant Māori Women- which is proven to deliver better out-comes for themselves and their babies. Nga Maia does so, within a limited ability. Limited financial and administration support is relied upon solely through our own dis-advantaged members.

2021 Strengthening Relationships Nga Maia- NZCOM

NZCOM / Nga Maia Māori Midwives Relationship was strengthened with a workshop facilitated in Wellington by NZCOM 14 April 2021 by Moe Milne. Nga Maia BOT had an opportunity to discuss openly in the forum which highlighted the need to make further opportunities to meet and to discuss partnership between the two organisations within a Te Tiriti Framework. Further hui are still to be had; these discussions have been delayed by COVID.



Our Tiriti o Waitangi Claim

Against child welfare agency Oranga Tamariki has gained attention across the country with supporting reviews by The Ombudsman, Peter Boshier, Children's Commissioner Andrew Beecroft, and Whanau Ora Review team, all calling for change. The new Minister for Children- Kelvin Davies has recently announced changes to the State Sector Agency which will see opportunities for Nga Maia regional Rohe groups to align with their local IWI, in the delivery of new services to support hapu mama. These services will be devolved to the communities, Māori midwives have an important role in the devolution of these services.



Lead Claimants; Jean Te Huia. Paora Moyle, Dr Rawiri Karena Waretini and Kerry Nuku.

Māori Midwives at the Forefront of The Oranga Tamariki Ora Claim



Māori Midwives at the front of the Protest to Parliament in 2019



Hon Minister Kelvin Davies- States Changes must Happen- Oranga Tamariki Devolution must go to Māori- By Māori for Māori.

Acknowledging the Autonomy and Tikanga of whakapapa for traditional Māori birthing practices in Aotearoa is ongoing across Aotearoa, and much of the evidence as identified in The Heather Simpson Health and Disability Review (2020) has been supported by others in our claim; Mana Wahine WAI 245 claims and the Māori Mothers Claim against Oranga Tamariki.

These claims support the need for hapu mama to return to traditional birthing and recognise the significant inclusion of 'whanau' in the birthing process. The Mana Wahine claims are currently ongoing with hearings across the country expected to start again next month. The underlying themes encourage Iwi to challenge the role of the state in their interference in the lives, hearts and bodies of Māori women that causes disruption by the state, through policies like housing, health, and education, that impacts negative for their tamariki and pepi.

Colonisation's Impact on Māori Birthing The facilitation of childbirth, prior to the Nurses Amendment Act 1901, the first in the world, originally embraced the world of Mātauranga Māori for birthing whanau. The Midwives Act 1904 established midwifery schools and legitimised training for midwives.

The Tohunga Suppression Act 1907 outlawed traditional Māori birthing; this was later repealed in 1962. These legislations resulted in the partial loss of mātauranga Māori and tikanga (cultural traditions) associated with childbirth and forced Māori into hospitals to birth. The medicalisation and authoritative discourse in childbirth for Māori birthing whanau that exists today have become cursory indicators based on assimilation policies envisioned for Māori¹.

Autonomous Regional Rohe Groups; There are currently seven active regional ropu groups; Te Waipounamu, Poneke, Papaioea, Kahungunu, Waikato, Auckland, and Whangarei. With strong interest in Gisborne and Whakatane for establishment of more regional ROHE groups. It is often challenging for our national office to maintain our membership data base and to collate regional information due to a lack of information or feed-back from the regions because regional rohe groups are significantly under resourced. On enquiry it would seem that Māori Midwives have commitments as midwives that leaves little time to administer or manage the administrative needs of the regional ropu group members. Ongoing feed-back on this issue suggests administrative requirements could be achieved if the Regional Rohe Groups achieved their own autonomous status and registered and obtained their own individual contracts for funding. This pūtea would support the rohe to progress their membership and support their collective needs. As the current CEO of Nga Maia, I would be available to assist those Rohe endeavoring to achieve these goals for their Rohe'. The opportunities that have become available with the new Māori Health Authority will ensure the devolution of services for hapu mama and birthing whanau from their existing DHB contracts to become available in the communities to ensure better access to whanau and hapu Māori. The challenge is for Māori midwives to prepare for the changes and to be ready and supported to meet the demands.

Five Year Strategic Plan

By re-establishing Tribal Authority tino rangatiratanga and individual autonomy for every Nga Maia Rohe is what Nga Maia must do within the next five Years.

Tino-rangatiratanga acknowledges mana Motuhake for every Nga Maia Māori Midwifery member. This will enhance the tikanga of mātauranga traditional birthing and transform the current Eurocentric maternity systems that exist today. The rights to birth as Māori are individual rights, they are not collective rites, and the challenge for Nga Maia is to support the tikanga of individual rohe without the Eurocentric belief that we are all ONE PEOPLE. Nga Maia is dedicated to the recollecting of ancestral names by Māori midwives in Māori cosmology associated with procreation of life and birth; Hineteiwaiwa, Hinauri, Hine-kōtea, Hine-kōtiro, Hine-mākehu and Hine-korako as but part of what Nga Maia Māori Midwives is achieving in some rohe. By keeping our mātauranga of birth alive within our birthing world will ensure better outcomes for hapu mama.

¹ Te Huia, J. (2020). Māori Health Workforce. Te Rau Ora.