


ORIGINAL ARTICLE

## Hauora: relational wellbeing of Māori community support workers

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### Abstract

There has been growing global interest in wellbeing over recent decades, yet what constitutes wellbeing depends on cultural and philosophical traditions, as well as worldview and knowledge systems. Our article offers an Indigenous Māori view on hauora – relational wellbeing – which emanates from the spiritual essence and ethic of hau, and traverses ecological, social, and economic spheres. We use the case study of Māori community support workers (CSWs), who, in our study, found that their hauora was affected by discrimination, racism, and a lack of cultural awareness and support from employers. Our participants, centred mostly within corporate community support providers, found that Western models of care and support did not allow for the expression of tikanga Māori, which limited their options for providing culturally appropriate care. Also prevalent was the lack of recognition by employers and funders of the importance of culture and culturally appropriate care. The implications of acknowledging hauora within Aotearoa New Zealand's wellbeing frameworks are then examined, showing that Māori notions of wellbeing have the potential to deliver better outcomes not only for Māori but for all New Zealanders. In this article, we provide some recommendations and reflections on how organisations can prioritise and embed the cultural wellbeing of Māori CSWs, their whānau and their clients in the workplace.

**Keywords:** community support; hauora; Māori; wellbeing

### Introduction

There has been growing global interest in wellbeing over recent decades, alongside a movement towards more human-centred public and social policies promoting broader measures of wellbeing. Permeating multiple disciplinary discourses, human-centred approaches to wellbeing move beyond external assessments of welfare to people's own subjective understandings of 'The Good Life' (Dalziel 2019). However, subjective wellbeing places the responsibility of wellbeing onto the individual, argued to be reflective of individualistic and autonomous assumptions, relevant to Western values (McCubbin et al 2013; Panelli and Tipa 2007). In contrast, Indigenous wellbeing is a relational construct underpinned by collective and interdependent principles that do not separate human wellbeing from the environment, culture, and society in which they dwell (Blackstock 2011; Spiller et al 2011).

Western, individualistic models of wellbeing dominate employee wellbeing research, placing responsibility on individuals to manage their own wellbeing and assuming that

negative wellbeing is due to an individual rather than the organisational deficit (Tonkin et al 2018; Wood et al 2020). The employee wellbeing literature has also focused more on how individual wellbeing leads to positive organisational outcomes, rather than employee outcomes. Significantly, this literature has failed to address how systemic contextual factors, such as gender inequity and ethnic diversity and discrimination, impact employee wellbeing at an organisational and macro level (Guest 2017; Ravenswood et al 2017b). Furthermore, there is often a failure to recognise that wellbeing and the means to achieve it are complex and multidimensional, as well as culturally and contextually specific (Panelli and Tipa 2007; White 2010; Yap and Yu 2016).

In Aotearoa New Zealand (NZ), employee wellbeing has long ignored Māori experiences of wellbeing. Yet, workplace cultural wellbeing has been found to be a fundamental predictor of job and career satisfaction for Māori (Haar & Brougham 2013). Additionally, enhancing workplace equity for Māori has been shown to enhance job satisfaction and retention of Pākehā (NZ European) employees as well (Haar et al 2024). Therefore, assessing the wellbeing of Māori within a work setting is a necessary research avenue for workplace wellbeing in the Aotearoa NZ context.

Our community-based participatory research (CBPR) (Nicolaidis et al 2015) investigated the holistic and multidimensional wellbeing of Aotearoa NZ community support workers (CSWs) during the Covid-19 pandemic. Focusing specifically on the Māori stream of this project, in this paper, we discuss how community support work influences the hauora of Māori support workers. We have privileged the experiences and knowledge of the support workers themselves, highlighting these in a way that has practical and ongoing implications for policy and practice.

We begin this article with a literature review on Indigenous Māori wellbeing, offering the *kōrero* (discussions, stories) of esteemed Māori voices. We then introduce our community support worker case study and methodology. We present our findings through sharing the narratives of four participants, which leads on to our discussion of how reintroducing and providing a deeper understanding of modern Māori conceptions of hauora could benefit the care and support industry of Aotearoa NZ.

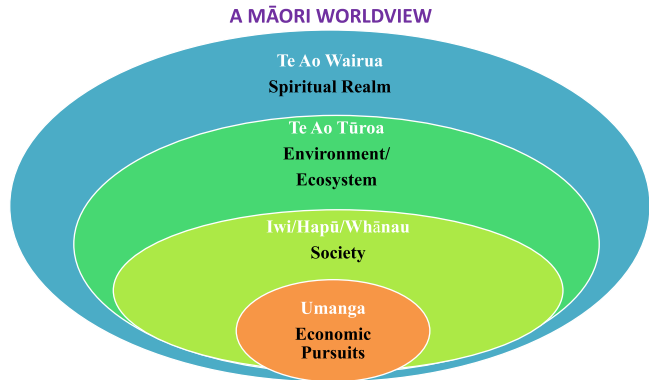
## Indigenous wellbeing

### *Voices of the ancestors*

Within the following review, we offer elements of *te ao Māori* (Māori worldview) and Māori wellbeing as expressed by esteemed Māori community leaders – collectively referred to as *ngā pou herenga*, or wisdom holders. Their contemporary *kōrero* draw on traditions handed down through generations, representing the wisdom and voices of their ancestors – past, present, and future (Kelly and Nicholson 2022). Their wisdom was shared with the first author, of Ngāruahine (Māori) descent, as part of her PhD thesis (Nicholson 2021), and thus we follow an Indigenous research philosophy and obligation to this knowledge. We privilege Māori oral literature by weaving the voices of *ngā pou herenga* alongside other cited academic texts, using their *kōrero* in the same way that the written literature is quoted in academic publications. This method of citation puts the *kōrero* of respected Māori experts on par with the written published sources. Their ancestral wisdom is derived from lived experiences, *whakapapa*, and *wānanga* teachings and thus in many cases is more relevant and enlightening than many of the written texts.

### *Hauora: relational wellbeing*

Indigenous views of wellbeing take a holistic and relational approach that considers spiritual, ecological, sociocultural, and economic dimensions (Hēnare 2001; Spiller et al 2011). Figure 1



**Figure 1.** Māori worldview. Source: Nicholson (2021).

shows an Indigenous Māori worldview that asserts that spirituality is the fundamental basis of human development. It is from spiritual connection that everything else (land, people, knowledge, language) emerges, and thus, it is from the spiritual that all other needs are met. No organism or entity is separate from its ecosystem, its sociocultural community, or its spirit. Humans are descendants and caregivers of the natural world and therefore belong to the landscape that physically and spiritually sustains humanity (Hēnare 2001; Spiller *et al* 2011). Human and societal needs are therefore intimately connected to the environment. These cultural values encompass ancestral knowledge, spirituality, and multiple dimensions of reality; and therefore define how balance is realised for personal and collective wellbeing (Blackstock 2011; Cajete 2000).

The following sections look at the various dimensions of wellbeing outlined in Figure 1. It must be noted that these dimensions are intimately intertwined and therefore, when considered separately, do not tell a full story but rather work as a cohesive whole to create hauora, relational wellbeing.

### **Spiritual wellbeing: hau**

Māori notions of wellbeing are underpinned by the life force of hau. Rendered as the breath, wind, and spirit of life, hau is a spiritual force interrelated with all other vital essences such as mauri, tapu, mana, and wairua, present in all things of creation (Hēnare 2001). Ngā pou herenga describe hau as a reciprocal ever-moving force. It is also the sustenance and vitality of life, a conduit between the spiritual and material realms, the reciprocal flow of breath, and the ethic of reciprocity and sustainability. Hau, intrinsic to growth and development, is an energy that is continually striving towards ora – to be well or alive. When hau is in a state of ora – hauora – the exchanges of life forces are in balance (Nicholson 2019; Salmond 2014).

Hauora also indicates a healthy and reciprocal flow between Te Ao Wairua and Te Ao Mārama, the spiritual and physical worlds (Salmond 2014). Awhitia Mihaere [Te Aitanga aa Mahaki, Rongowhakaata, Ngāi Tahu Matawhaiti, Rangitāne, Maniapoto]<sup>1</sup> asserts that Hā-ū-ora is ‘the breath, the sustenance of the living breath, and sustenance of Papatūānuku [Earth Mother] . . . that allow us to have a respectful relationship within the ecosystem of ngā atua [spiritual beings] and Io [Supreme Being]’. These relationships must be continuously cultivated and maintained simultaneously. Therefore, hauora encompasses the complete relationship between all things (Heaton 2018) and cannot be an individual human pursuit.

### **Environmental wellbeing: kaitiakitanga**

In an Indigenous worldview, flourishing landscapes are inextricably tied to human wellbeing. As descendants of the spiritual realm, the environment and its resources are treated as both ancestors and kin. The creative living force of the landscape informs culture, carrying history and spiritual values, kept alive through collective memories. These places thus become physical extensions of the human community, forming a source of individual and collective identity, belonging, continuity, and wellbeing (Harmsworth and Awatere 2013; Kelly and Nicholson 2022). As the landscape provides the precondition of human existence, its degradation as well as cultural alienation from the land affects spiritual, ecological, and human wellbeing (Cajete 2000; Panelli and Tipa 2007).

A fundamental value underpinning the relational wellbeing of landscape and people is kaitiakitanga. This is described as a ‘long-term intergenerational obligation to protect, maintain, and enhance the spiritual and material wellbeing of precious resources that have been handed down by ancestors and will be passed on to future generations’ (Nicholson et al 2015, 6). More than looking after the physical landscapes of land and sea, kaitiakitanga includes caring for the culture shaped by landscapes such as language, knowledge, history, values, and people. It is the act and ethic of kaitiakitanga that retains the legacy of landscapes. The legacy itself can be referred to as hau. In reference to oral literacy being passed down to the next generations, Hareruia Aperahama [Tūwharetoa, Te Aupōuri, Ngāti Kuri, Te Rarawa, Ngāti Whātua, Ngāpuhi] explains: ‘it wasn’t just the words, it was the hau that was transmitted’. Rangi Mātāmua [Tūhoe] locates ‘hau as an underpinning principle to ensuring Māori sustainability’. He goes on to say:

If you are kaitiaki whenua, if you’re not looking after the whenua, is the whenua still going to be there? Of course it’s still going to be there. But what are you actually being kaitiaki of – you’re actually a kaitiaki of the hau of the whenua, its sustainability and its vitality.

There is thus a reciprocal connection between the landscape that spiritually and physically sustains all that it provides sustenance to and the obligation of the human community to care for the wellbeing of that landscape.

### **Social wellbeing: whakapapa**

A Māori worldview sees each person and entity as a product of whenua (landscape), whānau (family), and whakapapa (ancestral connections) – a manifestation of the collective involvement of these influences, past and present, over time (Tate 2012). The individual essence of anyone cannot be understood without recognising their connection to their surroundings. Whakapapa is what links people, places, and ancestors. Regarded as genealogical ties, whakapapa encompasses the history of human and spiritual ancestors and the connection to the natural world. Ancestral connections are fundamental to identity and link individual wellbeing to the collective (Kelly and Nicholson 2022).

Whānau are extended family units consisting of three to four generations and are the central social unit of Māori society. Historically, whānau lived in a larger kāinga consisting of multiple whānau. The kāinga was the primary place of habitation and a central institution of communal support, whereby all whānau members shared the responsibility and recognition of care for each other, especially children and elders (Hēnare 2014; Tate 2012). In modern society, whānau extends beyond family blood ties and can symbolise a wider sense of community.

Whether in a literal or metaphorical sense, whānau is a community of belonging, one that provides reciprocal spiritual and emotional support and cares for the wellbeing of

each member (Durie 1985). Each person or entity inherently possesses its own set of interconnected life forces, such as hau, and is affected by the life forces of all those around them. Hau, also described as a ‘complex ethical value system of reciprocity’ (Nicholson 2019, 152), is an energy that is expressed in relationships between people. The self emerges from a social context, and society is bound together through reciprocity, through hau (Ruwhiu and Cone 2010). It is the connection to others that creates a sense of belonging and enhances hauora. Conversely, disconnection diminishes life energies and weakens hauora.

### ***Economic wellbeing: economy of mana***

Economic development from an Indigenous perspective is community development (Cajete 2000; Spiller et al 2011). It is the community networks and kinship structures that drive trade and are the very reason for its existence (Dell et al 2018). Māori theories of business and economic development maintain that business and enterprise are vehicles in which to address and enhance spiritual, ecological, and social wellbeing (Durie 2003; Harmsworth and Awatere 2013; Spiller et al 2011). These are not seen as separate dimensions but interwoven into one totalising system of reciprocal exchange.

The relational worldview of Māori gives rise to an economic system that is founded on multidimensional wellbeing and wealth distribution – an Economy of Mana. Dell et al (2018, 54) define mana as ‘a potent human state with the profound ability to impact upon, affect and transform the lives of others’. The Economy of Mana is thus ‘a system that manifests and cultivates a potent human state that can affect and transform the lives of others’ (Dell et al 2018, 55). All economic decisions have long-term outlooks to increase the collective good. This collective good is defined and mandated by the community. In order to maintain collective belonging and connection, an obligatory cycle is generated and sustained, whereby a positive interaction creates an indebtedness to return an act of generosity in the future (Dell et al 2018; Hēnare 2018; Nicholson 2019). Such an economy is based on values of affection, reciprocity, and spirituality.

### ***Assessing hauora***

Given the relational nature of wellbeing, much literature exists asserting that to truly assess the wellbeing of Māori requires measures based on Māori notions of being well, not comparative analyses against a dominant narrative (Durie 1985; Houkamau and Sibley 2011; Panelli and Tipa 2007). This would include culturally appropriate indicators of quality of life, designed and evaluated through te ao Māori lenses. We must move beyond strategies that assume what is achievable for one group is both achievable and desired by another. Nicholson (2021) identified hauora, rendered as relational wellbeing, as the measurement of Māori wellbeing: what is the relationship of the entity (individual, collective, or organisation) and the environment, its people, its community, and its spirit? We now turn to our case study of Māori CSWs and how they describe and experience hauora.

## **Case: Hauora of Māori community support workers**

### ***Background***

Our CBPR (Nicolaidis et al 2015) investigated the holistic and multidimensional wellbeing of Aotearoa NZ CSWs during the Covid-19 pandemic. Focusing specifically on the Māori stream of this project, led by a Māori researcher, we asked: how does community support work impact the hauora of Māori CSWs? Previous research (Ravenswood et al 2017a;

Ravenswood and Douglas 2022), experience, and existing connections of our research team within the wider Aotearoa NZ care sector identified CSW as a precarious workforce that were looking for opportunities to tell their stories. This highly feminised and ethnically diverse workforce is seen as a low status occupation within the healthcare sector, recognised as an effect of historic gender discrimination (Health New Zealand Te Whatu Ora 2020). This leads to poor work conditions that include split shifts, variable hours, low wages, and limited training opportunities, which in turn directly affect the health and wellbeing of CSW who feel exhausted, isolated, and invisible (Briar et al 2014; Ravenswood et al 2022; Tsui et al 2019). For Māori, these issues are exacerbated, with specific cultural issues subsumed into the mainstream narrative. However, there had been little or no prior focus on Māori CSWs; thus, a key element of the research project was to bring attention to the inequity for Māori and provide a platform for Māori home-based support workers to voice their own concerns and meaningfully engage with the development of their own solutions.

CSWs provide complex home care and support to a range of clients, young and old, and in various stages of life. They bring vast skill and life experiences to their work that requires empathy and rapport due to the intimate nature of care. These CSWs enhance the mana of our communities through the empowerment of personal independence. Despite the societal importance of such care, what we found was that many Māori CSWs feel their hauora is negatively impacted by work conditions, discrimination, and a lack of cultural awareness and support from their employer. Western models of care and support within corporate community support providers do not allow the expression of tikanga Māori (Māori customary practices or behaviours) and therefore limited offerings of culturally appropriate care. We saw how these challenges impacted the wellbeing not only of the workers themselves but their whānau and their clients.

### Methodology

Framed from an intersectional feminist standpoint (Harding 2012), we utilised a CBPR methodology for the wider project, which encompassed both Māori and tauīwi (those who are not of Māori descent) streams. This approach centres the research communities as partners (Nicolaidis et al 2015). The CBPR methodology, concerned with power and democracy, aims to 'put the less powerful at the centre of the knowledge creation process; to move people and their daily lived experiences of struggle and survival from the margins of epistemology to the centre' (Hall 1992, 15–16). CBPR has dual objectives, both the generation of new insights, coupled with the action to improve the lives of participant communities (Mayan and Daum 2016). These objectives are also seen to align with Māori-centred research (Kerr et al 2010). Within the Māori stream of this project, under the CBPR methodological umbrella, we embedded Māori methods and practices (described further below).

The community-based partnership element was achieved with two organisations, E tū and Public Service Association Te Pūkenga Here Tikanga Mahi (PSA) unions, who represent the largest proportion of CSWs in Aotearoa NZ. These organisations were allocated part of the grant funding, recognising them as partners, rather than in an advisory/consultation capacity. The framework we developed to guide our research is shown in Figure 2.

Working collaboratively with the partner organisations, we identified the community need, developed a guiding research question, and included participant researchers (PRs) as a key part of the design. PRs were seen to have greater access to other support workers, as well as experiential knowledge that could prompt more in-depth insights. PRs were able to carry out as few or as many interviews as they preferred. As well as being interviewed and interviewing others, PRs were asked to provide feedback on the themes and recommendations and were also involved in presenting the research to the government's

## Strategy of Research & Key Partner Roles

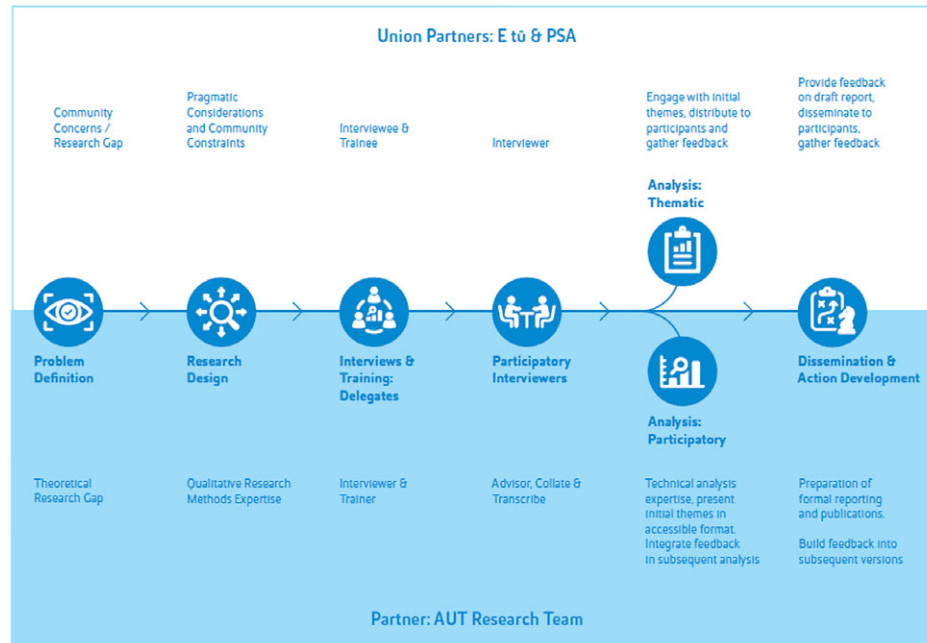


Figure 2. Collaborative research design.

Health Select Committee and the Minister of Health. These PRs were compensated at either their hourly rate or the NZ living wage, whichever was higher. Partnership also extended to publication, with the project report and initial publications appearing with PRs (anonymised) as co-authors.

The Māori-centred stream was committed to embedding Māori methods and practices. Interviews conducted with Māori participants incorporated tikanga Māori practices such as karakia, mihi, koha, and kai, as well as the use of te reo Māori. Our consent forms and Participant Information Sheets were available in both te reo Māori and English, and key sections of the final report have been translated into te reo Māori (Nicholson et al 2022).

### **Researcher relationality**

From an intersectional feminist standpoint, the positionality of the researcher is central to understanding the research (Cunliffe 2003). From an Indigenous lens, the relationality of the researcher is central to the research (Wilson 2009). We thus outline the positionality and relationality of the university team. The core research team and named authors of this paper identify as wāhine/women of Aotearoa New Zealand. The first author is an early career researcher of Māori [Ngāruahine] descent and led the Māori-centred stream of this project, drawing on her research expertise in Māori wellbeing and 10 years' experience in Māori-led research. The other two authors are tangata tiriti (people of the Treaty) and Pākehā (of New Zealand European descent). The overall project lead is a professor with extensive expertise focused on the care and support workforce, including issues such as gender inequality. Her long-term relationships with both union partners began at the commencement of her PhD research, and she has consulted and worked with these partners across multiple fora. The mid-career researcher brings significant expertise in gender and diversity within organisations and in participatory and reflexive methodologies.

In implementing a CBPR methodology, this project was designed with and for the community partners. Aligned with the principles of community grounding, the methodology acknowledges the importance of Te Tiriti o Waitangi/The Treaty of Waitangi in Aotearoa NZ both contextually and more specifically to the community of workers in this study. The Pākehā researchers recognise that as tangata tiriti, they have a responsibility not just for tauwiwi participants and stakeholders but also for conducting research that contributes to meeting Te Tiriti o Waitangi/Treaty of Waitangi obligations. The relationships between the research team and community partners were essential in gaining access to this research community due to their precariousness, business, and unpredictable work schedules.

### **Recruitment, ethics, and sample**

A total of 91 participants were recruited through purposive and snowball sampling. The university research team, alongside the 19 PRs, recruited and interviewed a further 72 participants. A total of 87 interviews were included in the data analysis and participant demographics, with four participants being excluded due to either being in occupations not related to the project definition of community support work or due to technical recording and retrieval issues. In-person interviews were carried out where possible; however, with the changing pandemic situation and rural locations of some participants, most interviews were carried out via Zoom and phone calls.

Full ethical approval was granted prior to any contact with participants. Confidentiality agreements were signed by all PRs, and participants gave their consent to use their interview data. Participants' individual identities were anonymised through the use of assigned numbers (P1-75; PR1-18) in the analysis and publication stages.



**Figure 3.** Staged thematic process.

Demographics about the community support workforce are limited; however, the makeup of our participants was seen to be reflective of the Aotearoa NZ workforce composition (HCHA 2020) – predominately wāhine, female (82 participants), Pākehā (49 participants), and over 45 years of age (58 participants). All our participants worked for mainstream providers, the majority of which were privately owned companies. Fourteen wāhine were interviewed in the Māori-led stream, and it is these participants who are the focus of this paper.

### **Analytical strategy**

We employed a staged thematic analytical strategy (Hennink *et al* 2017) across all data, utilising the same approach for both Māori and tauwiwi data, to ensure the ability to generate and compare themes within and across data sets. We employed a triangulation analytical strategy, initially coding the data individually within the university research team and then meeting to agree on coding. In line with the CBPR methodology, we discussed the findings between the university research team, the union partners, and the PRs (who held a dual role of interviewee as well). This helped to keep participants’ lived experience, expertise, and research knowledge central to the research, ensuring a partnership was maintained throughout (McCracken 2020). The stages of analysis are outlined in Figure 3.

Initial coding of the data was conducted by the university researchers via NVivo. This began independently, with the team coming together to discuss emergent themes. The Māori researcher was responsible for the initial coding of Māori participants. Specifically, themes that arose within the Māori data included wellbeing as hauora (holistic view of wellbeing), professional boundaries, and lack of cultural support as barriers to achieving hauora. We now turn our attention to these themes.

## **Findings**

### **Hauora of Māori community support workers**

Within our study, CSWs as a whole refer to wellbeing as a holistic concept, incorporating good physical and mental health, financial security and independence, good social support, spiritual connections, cultural groundings, environmental connections, meaningfulness, and a lack of stress. Wellbeing is seen by many as having a good sense of balance between all these factors, with social (whānau and community) networks seen as an essential mediator. Work is both a contributor and a barrier to wellbeing, most notably through the meaning and purpose it provides to CSW lives, coupled with the impacts of fatigue and isolation that were experienced by these workers.

The Māori participants expressed the same contributors and barriers to wellbeing as tauwiwi participants but referred strongly to culture as integral to wellbeing. Māori participants tended to speak more freely about spirituality, some referencing the renowned Māori model of health – Te Whare Tapa Whā (Durie 1985) – and others speaking about hauora. Moreover, Māori CSWs experience additional wellbeing challenges, which

include a lack of cultural support in their organisation and restrictions on being able to provide culturally appropriate care.

Below, we present the findings of wellbeing as expressed by our Māori CSW participants. The findings presented here are in the form of individual excerpts from some of the Māori CSWs in our project. These excerpts represent the lived experiences of our participants. Each person brings with them their own narrative, but we found that each of these excerpts below exemplifies the collective story of our participants. What emerged was that the main contributors to wellbeing were culture and whanaungatanga, and the barriers to wellbeing were the rigidity of professional boundaries and a lack of cultural support and awareness.

### **Hauora dimension: culture**

Culture was expressed as an integral part of wellbeing of Māori participants. Māori participants spoke about how their Māoritanga (Māori way of life) enhanced their role. There was also an acknowledgement of the importance of culture to their clients. Māori CSWs feel an obligation to respect the mana, including culture, of those that they provide care for. The following story of Atawhai reflects how important her whakapapa, culture, and identity are to her wellbeing and how it enhances her role.

#### **Atawhai (P76)**

Atawhai is a full-time CSW, with over 7 years' experience in the role. Reflecting on how her Māori heritage impacted her wellbeing she said: '... it's made me realise how important whānau are'.

*I just love the culture, I love that it's just so - for me, it's so authentic and you just do you and do what's best for your whānau. And you know I love that it's not just your actual bloodline, like your immediate bloodline that you acknowledge as family. And that essentially, everyone's whānau. And I love that because I love people, and I love having all of that around me. So yeah, I think it's definitely impacted my wellbeing quite significantly.*

She spoke about her journey in learning te reo Māori and how this has allowed her to connect to one of her Māori clients with dementia. These interactions have impacted both her and the person she cares for.

*Her ability to communicate is pretty non-existent. But I can go in there and I can speak in te reo which has encouraged me to learn more of the language because she responds best to te reo. I sing to her and it's all in te reo... She always calms right down when you start speaking in te reo to her. And I've said to the company, because she has multiple support workers. And I'm like just even get them talking the basic stuff. I said, even if they said over and over. I said that it calms her right down. But I can guarantee that that hasn't been relayed to the other workers.*

Making an effort to understand a client's culture and learning to communicate in the language of the client is seen by Atawhai as part of her ethic of care. Her cultural awareness of being Māori within a Pākehā world allowed her to relate to others who are not from the dominant culture.

*But the company don't give that education... even when we're sent to somebody, we're not told about anything culture related... For me, I always looked it up and find out the main things so that you don't cause offence the moment you walk through the door.*

*... So I always sort of try and look at it that if I try and speak their language that they know, and that they're comfortable with then it kind of shows you care a wee bit more and you're not just there just to do a job; you're actually there to care for them and their needs.*

Many Māori CSWs spoke about how their Māoritanga supports them in providing care for others. Some reflected on their ability to specialise in end-of-life care due to an inner strength and resilience that came from whakapapa and from their notion and experience of whānau through growing up with their kaumātua (elders), which prepared them for such cares. Some Māori support workers spoke about how they were often called to deal with clients that were deemed 'challenging' by the organisation. These support workers spoke about how recognising the importance of culture was key in dealing with these cases, and thus, they were able to forge better relationships with these clients.

### **Hauora dimension: whanaungatanga**

Māori support workers spoke directly to the relationships they had with their clients, referring to them as whānau. Whanaungatanga is a relational process for making whānau connections with extended networks. This ethic frames all relationships as interconnected and establishes belonging. For CSWs, it creates and enables close bonds between support workers and the people they care for.

#### **Kara (PR15)**

Kara, a full-time HBC with over 10 years' experience, spoke about the terminology used within community support that creates distance between the caregiver and those that they support.

*that word 'client' is a dirty word to me ... Because that makes me feel like they're are a number. They are just another person that you need to - I don't know, it's hard to put it into words. Once you've been on with someone for a certain amount of time, they become your whānau.*

*We do the most intimate of jobs. You get to know people a little bit too fast a little bit too personally, and they become your people. The stories that I could tell about some people's parents would absolutely shock their children and there is no way in hell that I would even tell them because those are my secrets. And those are their secrets and those are mine forever and that we will have a chuckle about and not their children.*

*I think that's the difference between a caregiver and a support worker - a person that gives care and really cares about their job and is passionate and wants to see the best outcome and give them the best quality of life rather than quantity and yeah, choose the best outcomes.*

Kara spoke to how the people she supports impact on her wellbeing.

*... It's a big part of it because I love, absolutely love going home at the end of the day knowing that I have really helped someone do something that most people take for granted, like putting on a pair of socks or putting on shoes. We have a laugh. We have a joke and sometimes we have a cry ... yes, we have lots of tears ... but then we have that joke afterwards and it's just it's a really humbling job. Yeah. I absolutely love it.*

Māori CSWs see their roles as caring for the whole person, which demands rapport to undertake intimate cares and therefore enables close relationships. These relationships

bring meaning and personal fulfilment to the lives of the support workers and thus are integral to their wellbeing and identity.

### **Barrier to achieving hauora: rigidity of professional boundaries**

Our participants shared that professional boundaries of care, essential for organisation, client, and worker health and safety, do not recognise or value the emotional labour required to provide such intimate cares. Employers discourage personal connections between client and support worker. Our Māori participants expressed that this construct does not match up with the ethic and wellbeing dimension of whanaungatanga, thus limiting both the meaningfulness to CSW and holistic care for those they care for.

#### **Pou (P74)**

Pou reflected on her experience as a manager and support worker in a facility that assisted people to live independently within a residential community. Pou was a pillar for her organisation, providing structure and implementing the protocol, as well as providing support for her whānau. Pou spoke in depth about the disconnect between professional standards imposed by organisations and a Māori ethic of care.

*it's not necessarily a consciousness but if you're treating people like you're treating your own whānau, then that boundary isn't even there to start with. And that only becomes a boundary when somebody with a different worldview comes along and tells you it's one. And then for Māori, that's when they struggle in their workplaces because they actually haven't done anything wrong.*

*... Because you know what, if you're going to tell me that I'm crossing boundaries, yet, this person's mana is upheld - whether they're Pākehā or where the clients from - and there's a positive influence and they are succeeding and achieving for them and there are relationships forming with the family and, all of those kinds of things. And you're telling me oh, I just need to watch out because somebody's walking by might see it as da da da da da.*

She spoke about how she supported one of her clients at a funeral.

*Now some people would say that that's unprofessional because without that workplace I would never have met that person and I shouldn't be having any relationships with anybody outside of that workplace. Some people would say that and just like 'oh well, you go and ask that person whether or not they want me there'.*

*... one of my colleagues that have been working for the organisation for 10 years - they had developed relationships with the family of that person and so rather than her being the support worker, she was sent a wedding invitation for the nephew's wedding as well. And off they went, that kind of stuff. But there's certainly been other people, other managers, that have come into the space that have questioned staff around their connection to a person.*

Many participants talked about how they crossed professional boundaries set by employers in order to uphold the mana of the people they cared for and provide manaaki (care, hospitality). However, they chose not to disclose this to their employers as it jeopardised their job.

**Barrier to achieving hauora: lack of cultural support**

Māori support workers spoke about the lack of cultural awareness in their organisations and wider industry that negatively impacted their role. This included experiences of discrimination and racism, coupled with a lack of support and training from their employer. In many regions, there are no Māori health providers, and thus Māori communities are less likely to receive support due to a dearth of cultural understanding by existing providers.

**Aroha (P7)**

Aroha is a young community support worker in a small district with a predominantly Pākehā population and no Māori health providers. She spoke in depth about how Māori kaumātua and communities were less likely to receive and take up support due to a lack of cultural awareness of existing providers.

*There's a lot of resistance from Māori whānau with receiving support . . . And if there are, they may be quite disconnected from the iwi and or their culture.*

*I feel that the supports are Western - there's not enough of a desire for agencies to be adaptable to the needs of Māori or other cultures and Māori feel that. So that's kind of been the conversations that I've had with members of the local hapū, kaumātua from the local hapū is that, why, when [the support provided is] not willing to meet the needs, should they open your home to that?*

*[Organisations] have a framework or they have plans. And you have to stick to the plans. Even something simple is: ' . . . staff have to wear shoes in your home'. Well, that could put a kaumātua off straightaway. It would put me off straightaway. So just being respectful in that manner, in also them not knowing who that person is that's coming into their home. I think just there's been so much mamae [hurt] from our kaumātua, especially of their treatment that they are very hesitant to receive care, because of how they could be treated.*

*But even things like when we have had that odd Māori client, it's pronouncing their name properly, which they never get right. And just that just said, basic respect that's not given to them makes them shut down really quickly. And I've seen them do that.*

She provided a poignant example of the employer's disregard for creating a relationship with the local community. The local Pā (village) invited the community support provider to accompany Aroha to attend an event to promote their service. The provider felt the presence of Aroha was not needed, and Aroha interpreted this as a sign that they did not want to be led by a junior staff member. The invite from the Pā was thus rescinded. As Aroha expressed: 'they're not willing to meet and engage under mana whenua terms'. Further explaining that 'I don't think they really see it as being a need, that actually there is whānau there that will support kaumātua, and [the company has] got plenty other clients that they can look after'. Additionally, as one of the few Māori support workers in her region, she had requested to be called first if a Māori client needed attending, but this was never followed up by her employer.

This excerpt focuses on the community, painting a picture of how little attention is paid to culture within these organisations. Support workers talked to the lack of awareness and training of other CSWs and co-ordinators in acknowledging cultural differences and how these may affect their work and relationships. Some experienced discrimination in their role and a lack of support to deal with such issues, as well as often being asked to enter unsafe situations.

## Discussion

As our findings show, the hauora of Māori support workers is impacted both positively and negatively by their employment. Māori support workers see cultural identity and values as strengths that are interwoven with caring practices, leading to a desire to provide culturally appropriate care to others. Additionally, our participants consider cultivating whānau relationships as essential to their caregiving role. It is these relationships that provide meaning and purpose to community support work, for them and the people they care for. These findings show support for Māori models of wellbeing that are founded on culture, interdependence, and belonging (Durie 1985; Houkamau and Sibley 2011; Spiller et al 2011). Indeed, enculturation, that is, the process of reclaiming a positive cultural identity, is widely endorsed as a way to promote Indigenous wellbeing (Cajete 2000; Durie 1985; Houkamau and Sibley 2011).

Paradoxically, it is the elements that contribute most significantly to hauora of Māori CSWs – culture and whānau – which are discouraged and unsupported, often actively, by the employers. Our research has shown that a lack of cultural awareness and training, coupled with the imposition of Western boundaries of care, can disempower care workers through not recognising, devaluing and discouraging the cultural and emotional labour necessary to provide holistic and intimate care and support. In turn, this stymies the wellbeing of client and worker. This echoes the findings by Hurai et al (2014) who found that Māori nurses feel valued for their clinical skills, but not acknowledged in the industry for their cultural skills. However, it was these cultural skills and their commitment to working with Māori whānau that both incentivised and increased workloads for this cohort.

Cultural wellbeing in the workplace is a nascent field (Haar et al 2024; Haar and Brougham 2013). However, there is less research that identifies ways that hauora could be embedded into organisations. Thus, drawing on the above findings, we propose a multi-level approach to hauora that could be enacted at societal, industry, and organisational levels through reconceptualising and reconnecting hau to its spiritual essence and recognising whānau as an integral part of the individual.

### Reintroducing hau to hauora

Reintroducing and providing a deeper understanding of modern Māori conceptions of hauora is a way to more fully understand a Māori view of what it means to be well, as determined by Māori, which will have far-reaching ramifications for Aotearoa NZ society (Nicholson 2019). Hauora is a frequent word in the Aotearoa NZ vocabulary, especially within the health and education sectors. However, in its contemporary setting, hauora has lost much of its vital meaning, with a commonplace interpretation as health and wellbeing or a Māori philosophy of health. Heaton (2018) describes how the juxtaposition of hauora with the Pākehā concept of health confines its meaning within the narrow framework of a Western worldview, omitting many layers of meaning and cultural relevance.

As the spiritual dimension is recognised by Māori as fundamental to human experience, a revitalisation of hauora within the mainstream vocabulary inserts the spiritual element back into the wellbeing literature, public policy, and employee wellbeing. Spiritual forces such as hau are connected to and affected by all other life forces. When recognising that each entity (including humanity, institutions, ecosystems, and organisations) possesses such life energies, then we move into a new societal paradigm of care, reciprocity, and wellbeing.

Recognising hau as a relational force within the care and support industry finds theoretical kinship with an ethic of care (Sevenhuijsen 2003; Tronto 1998). Care ethic scholars such as Tronto (1998, 17) assert that care is ‘a central value in human life’, one that we should recognise as creating reciprocal lifetime relationships of giving and

receiving. With relationality and interdependence at its core, Sevenhuijsen (2003, 182) sees care ethics as a way to develop ‘forms of collective agency that are directed towards people’s needs for leading a good life in which they can realise their connections with and commitments to each other’. Spiller *et al* (2011) thus see care at the heart of the Māori value system, where humans are obligated to be *kaitiaki* (caretakers) for the *mauri* (life force) present in all things. Conceptualising care in such ways could lead to a new social infrastructure of care (Sevenhuijsen 2003), one that values all cultures and relationships.

### **Recognising whānau as integral to hauora**

The complex industry of home care and support is caught between paradigms, largely operating within a commoditised model of care that provides intimate and domestic services that have historically resided within the familial realm. However, the marketisation of care has only outsourced the physical tasks: the emotional bonds of whānau are seen to be incompatible with professional settings. This model of care does not align with Māori models of wellbeing that promote holistic care for the whole person.

In a Māori worldview, social (whānau) relationships are not something an individual attains but parts of a person’s being. Hauora, relational wellbeing, is therefore a relational process occurring between people and their communities. Whānau, in this sense, extends to the relationships between caregiver and care receiver. Our findings support other research (Huria *et al* 2014; Wilson and Baker 2012), which has found Māori nurses engage with Māori clients in ways that are more likely to meet their community and health needs but that may be seen as unprofessional or crossing organisational boundaries. Yet, familial relationships are also seen to increase client satisfaction, reduce power differences, and engender feelings of being valued (Dodson and Zinavage 2007; Eketone 2013; Mears 2009). By acknowledging the emotional and social relationships between those providing and receiving care, we can begin to see care as embedded within the fabric of life as a valued social activity and process (Sevenhuijsen 2003).

The implications for organisations lie in their acknowledgement of the role the employer plays in the wellbeing of individuals. Modern economic pressures and lifestyles have weakened whānau capability to meet its purpose and function of supporting the wellbeing of each of its members (Hēnare 2014). Employment and business engagement, in many cases, may be the most influential experience of community in one’s life. Haar and Brougham (2013) highlight the need for organisations to understand Indigenous cultural beliefs and to modify HR policies to be more culturally specific. They found that recognising and enhancing cultural wellbeing correlated with greater career satisfaction and job performance for Māori employees. Work satisfaction both influences and is influenced by home-life satisfaction, both of which are integral to individual and whānau wellbeing. Indeed, as our study has found, holistic wellbeing is about finding balance between all intersecting dimensions.

### **Conclusion**

Hauora is a collective state reflected by the balanced wellbeing of multiple life-giving dimensions. By reinserting the spiritual aspects of a Māori worldview back into economic discussions, the community dimension that is often superimposed by the mindset of the self-interested individual is brought to the fore. When taking a relational view of the world and economic activity, it is relationships themselves that hold the economic system together and govern the use of, and access to, resources (Dell *et al* 2018; Spiller *et al* 2011). The implications of acknowledging hauora within Aotearoa NZ employee wellbeing frameworks have the potential to deliver better outcomes for all New Zealanders.

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## Note

1 When known, kinship affiliations are provided for Māori authors and authorities at first citation.

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