



Manifestations of Institutional Racism and Privilege in Public Health Policy Making & Funding Practices in Aotearoa

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ESocSci/BRCSS Identities Network Seminar

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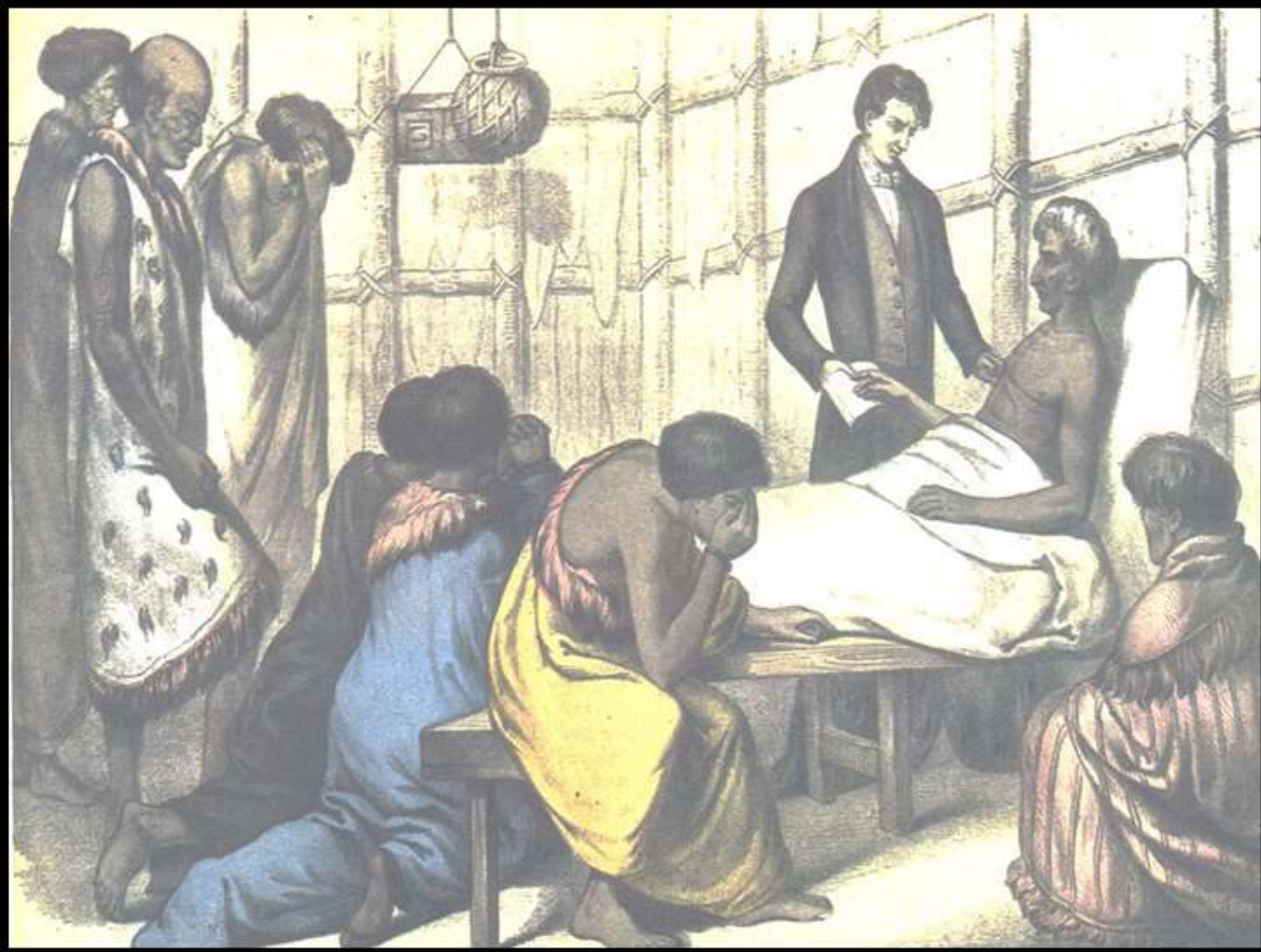
Rodney Cricket Reps 1938

THE TREATY OF WAITANGI
IS THE FOUNDING DOCUMENT OF AOTEAROA|NEW ZEALAND





FIRST DO NO HARM





HAUORA

MĀORI STANDARDS OF HEALTH IV



A STUDY OF THE YEARS
2000-2005

Robson, B., & Harris, R. (Eds.). (2007). *Hauora: Maori standards of health 4. A study of the years 2000-2005*. Wellington, New Zealand: Te Rōpū Rangahau Hauora a Eru Pōmare.

**Activist
Scholarship**

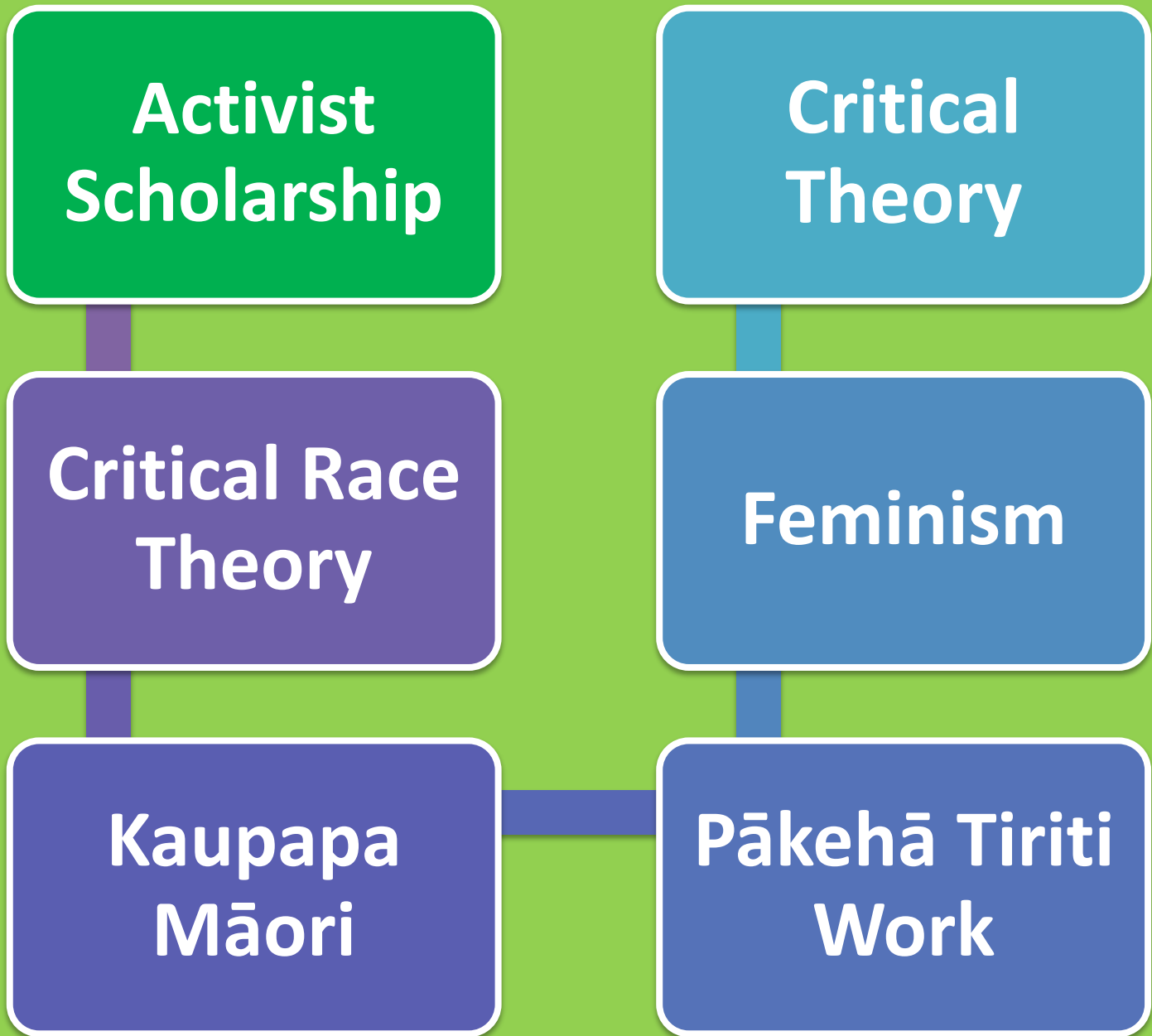
**Critical
Theory**

**Critical Race
Theory**

Feminism

**Kaupapa
Māori**

**Pākehā Tiriti
Work**



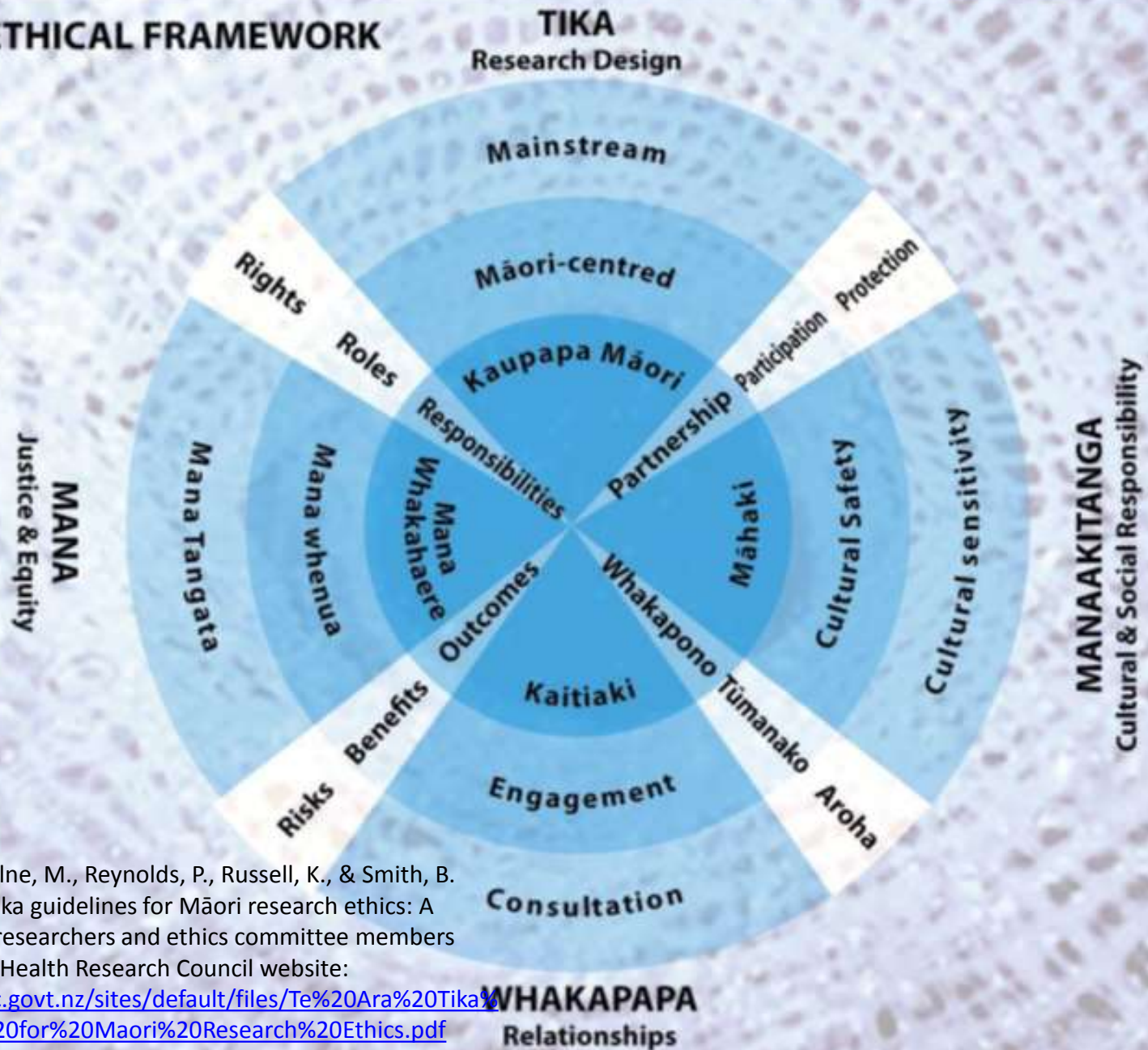


ACTIVISM
IS MY RENT ON
EARTH!

ALICE WALKER



MĀORI ETHICAL FRAMEWORK



Hudson, M., Milne, M., Reynolds, P., Russell, K., & Smith, B. (2010). Te ara tika guidelines for Māori research ethics: A framework for researchers and ethics committee members Retrieved from Health Research Council website:

<http://www.hrc.govt.nz/sites/default/files/Te%20Ara%20Tika%20Guidelines%20for%20Maori%20Research%20Ethics.pdf>

Institutional Racism


“...white terrorists bomb a black church and kill five black children that is an act of individual racism...

But when in the same city – Birmingham, Alabama-five hundred black babies die each year because of the lack of proper food, shelter and medical facilities, and thousands more are destroyed and maimed physically, emotionally and intellectually because of conditions of poverty and discrimination in the black community that is a function of institutional racism”.

(Carmichael & Hamilton 1967:2)



Stokely Carmichael

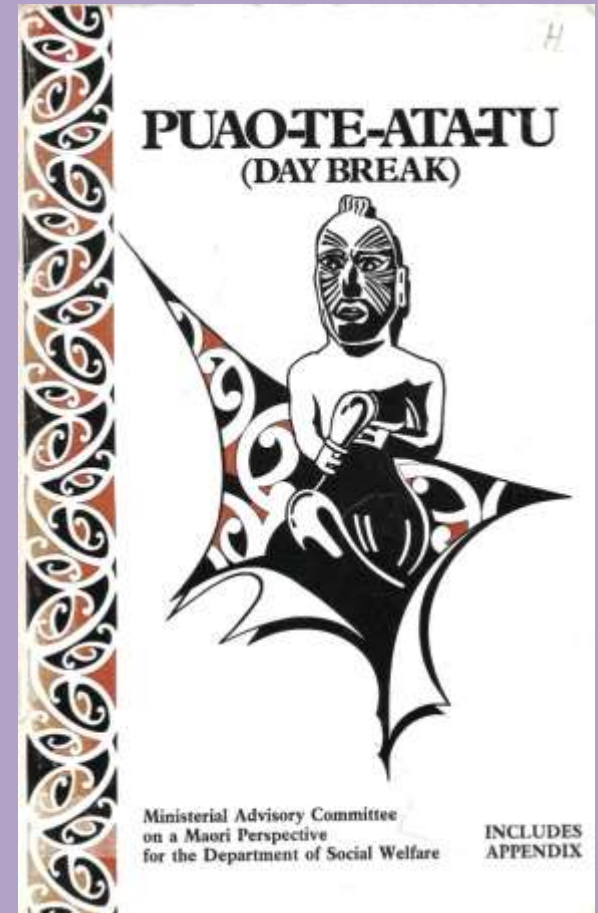
- 
- ***Me titiro ki nga wa o mua***
 - ***Rapua te mea kua ngaro***
 - ***“When searching for direction focus your eyes backwards and see where you have come from”.***

- ***Herewini, M., Wilson, R., & Peri, M. (1985). Maori Advisory Unit Report. Auckland, New Zealand: Department of Social Welfare.***

Puao te Ata Tu

- Institutional racism is “... *the outcomes of mono-cultural institutions which simply ignore and freeze out the cultures of those who do not belong to the majority.*”
- *National structures are evolved which are rooted in the values, systems and viewpoints of one culture only.*
- *Participation by minorities is conditional on their subjugating their own values and systems to those of “the system” of the power culture”.*

(Ministerial Advisory Committee, 1988, p19).




Waitangi Tribunal Claims



THIS IS YOURS, SON
-IT'S BEEN IN THE FAMILY
FOR GENERATIONS



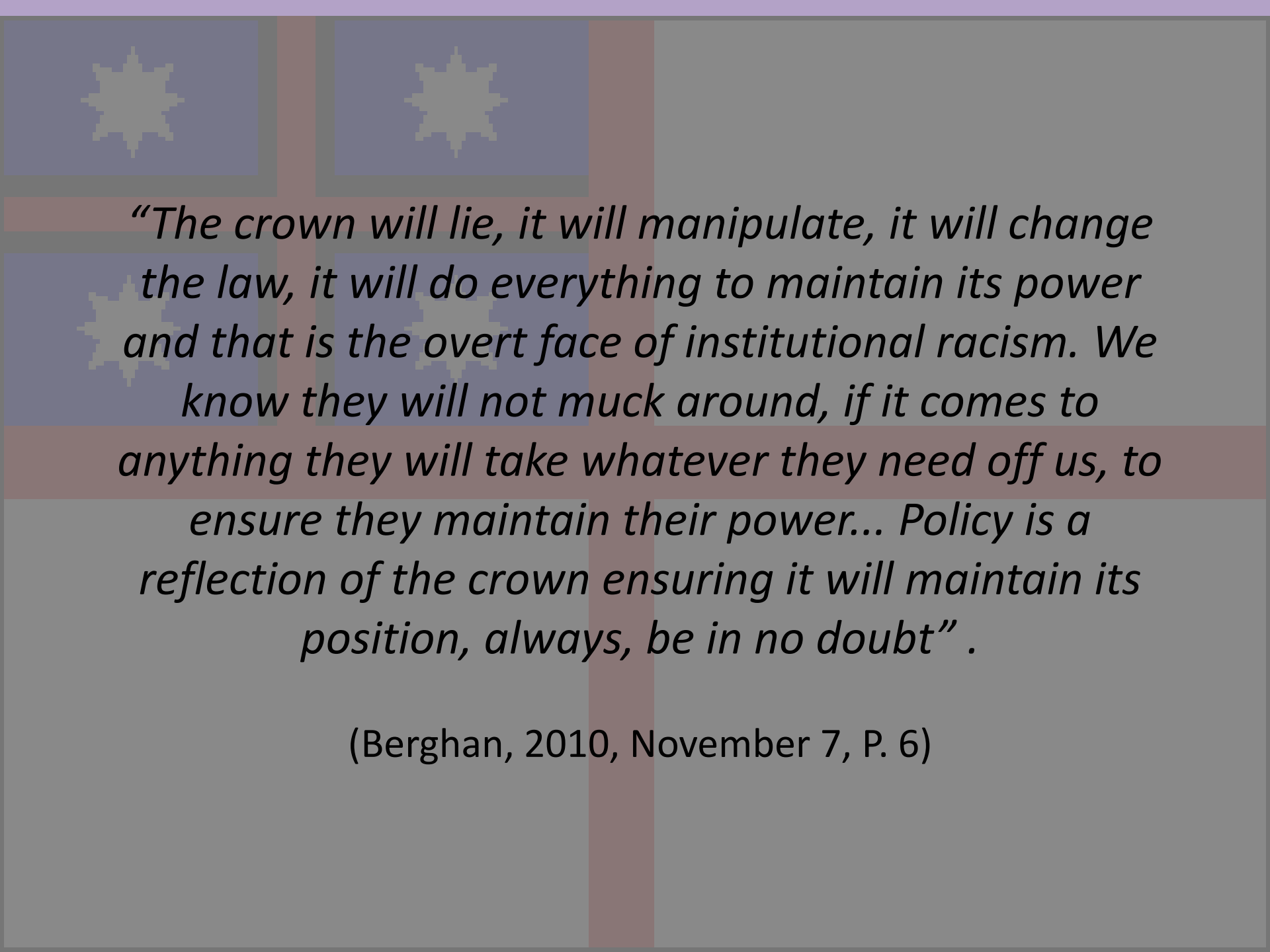


Institutional racism is a pattern of differential access to material resources and power by race, which advantages [**privileges**] one sector of the population while disadvantaging [enacting **racism** against] another.

Informed by the writings of Yin Paradies and Camara Jones

Kaupapa Māori Theory

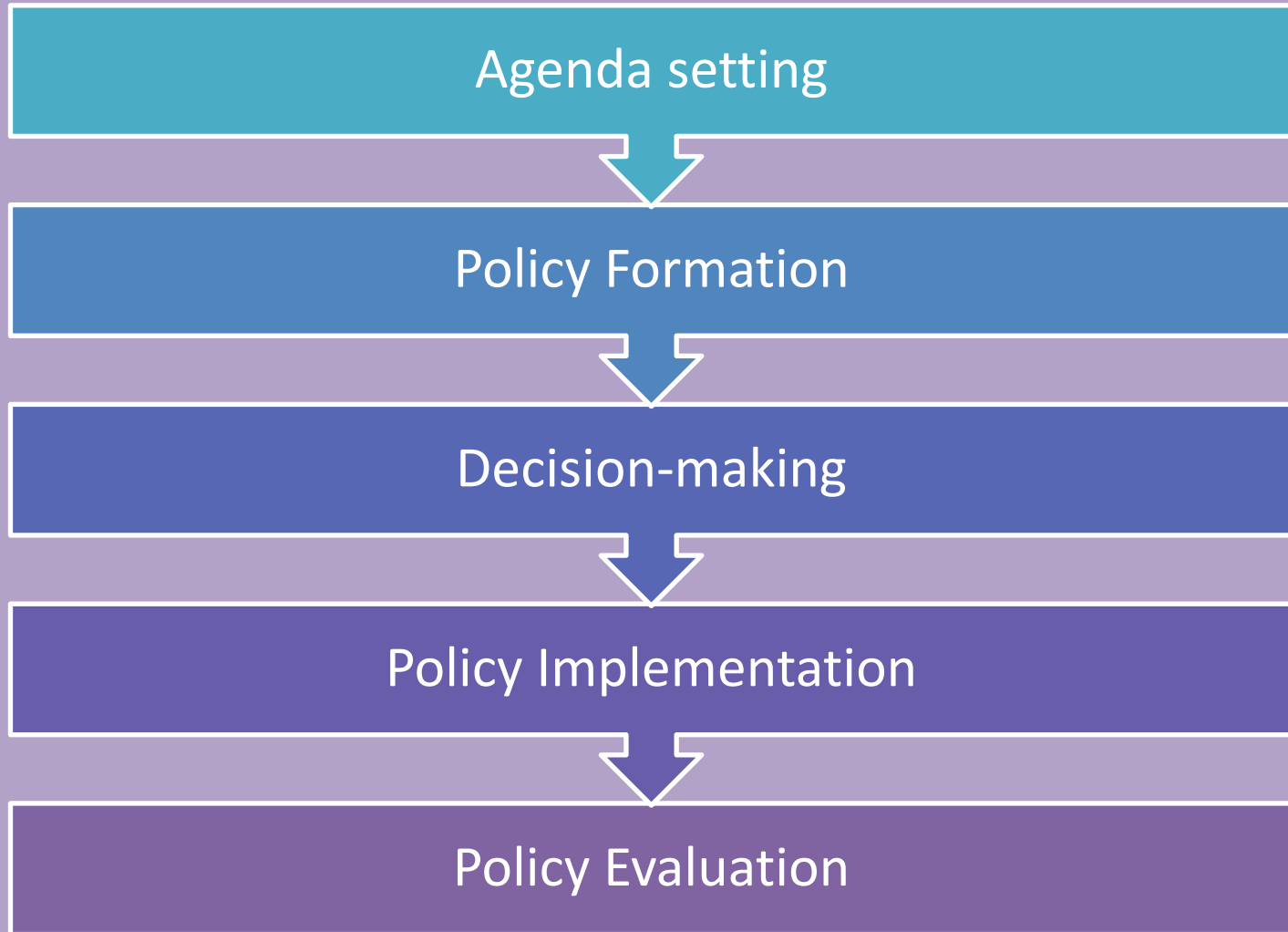
[Kaupapa Māori] assumes the taken for granted social, political, intellectual, and cultural legitimacy of Māori people, in that it is an orientation in which Māori language, culture, knowledge and values are accepted in their own right (Smith, 1992, November p. 13).



“The crown will lie, it will manipulate, it will change the law, it will do everything to maintain its power and that is the overt face of institutional racism. We know they will not muck around, if it comes to anything they will take whatever they need off us, to ensure they maintain their power... Policy is a reflection of the crown ensuring it will maintain its position, always, be in no doubt” .

(Berghan, 2010, November 7, P. 6)

Stages Approach to Policy





take a walk in someone else's shoes hikoitia ngā tapuwae o te hunga kē



Race Relations Day 21 March Te Rā Whanaungatanga

www.hrc.co.nz photographs and design by Peter Smith

**Impact Crown
Filters**



**Tyranny of the
majority**



**Incomplete
evidence base**



**Levels of
cultural &
political
competence**



**Flawed
consultation**



**Racism in the
Policy Cycle**



“I am sitting round the table and I am the only Māori and there are ten of us. We are arguing the prioritisation framework and I argue that Māori health should be right up near the top. So we have the debate... you put it on the table, you go hard for it and in the end if you don’t have the numbers, that is where the funding goes”.

Grant Berghan, 2010





“It is really is about tobacco control dogma and what is current global policy of the day, which then comes into a New Zealand context. Someone says quit attempts are really important and so inevitably what happens in New Zealand is we take on that mantra. But in terms of a Māori perspective and a Māori world view or even contemplating that... no I don't see that”.

Shane Bradbrook 2010

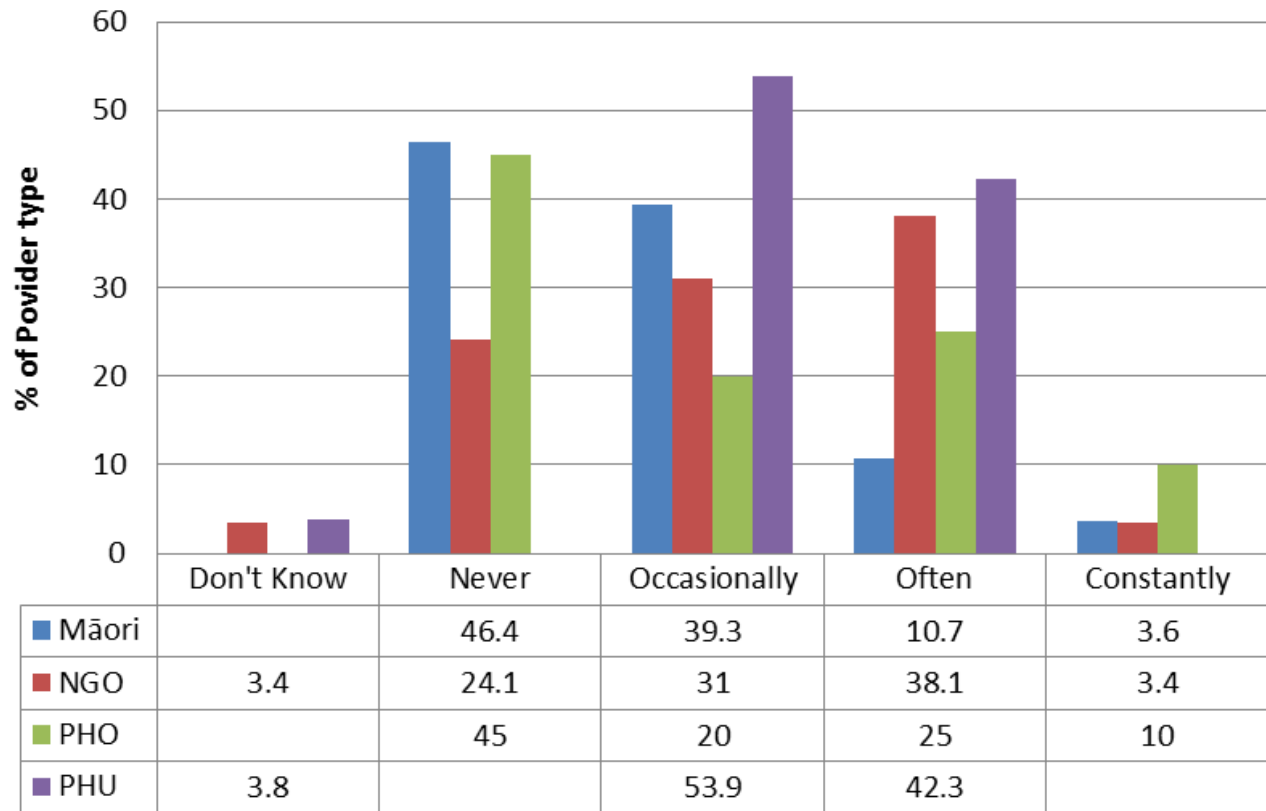




From his involvement with Crown officials in a range of capacities over decades, Berghan (2010, November 7, p. 6) elucidates these claims of culturally incompetence. He asserts:

...these are good people... they are benignly incompetent... [they] don't take into account other values; it is kinda like the universality of western values... and that tends to happen through most of the policy processes... they [Crown officials] don't see the need to be competent because why should they?... it is the others that need to understand. When in Rome do as Romans do, so when in New Zealand do as Pākehā do; it is that kinda stuff.

Reported Representation on Steering Groups





Working on a daily basis with the Northland DHB for twelve years, Kuraia (2010, September 22, p. 5) notes that over a period of some years, expert Māori health analysis provided to the DHB, was actively rejected and marginalised. She explains:

“The input we [MAPO] were providing would be written out, it would be ignored, it would be twisted, it would be reframed, we would reframe it back again into what it was supposed to be and then it would be left out entirely. And when we challenged it, when we questioned it, excuses usually came in the form of “oh we were under time pressure to get this produced because the CEO wanted it published” or some such thing. Basically they’d say “we ran out of time so just couldn’t put your stuff in” (p.5).



“The strategy went through seventeen iterations; it started off as a really wonderful product... it had to be approved by non-Māori... most of it got cut out, so we got this... very safe version... it is the perfect illustration of what Māori go it does not have institutional racism written across it but when you delve down and look through it, across all the hoops, it is a classic example of what goes on”

Grant Berghan 2010

Excuses for Racism

*I went to a Treaty course a few years ago
I was sure we sorted that decades ago – this isn't racism*

I couldn't follow the agreed process as I just ran out of time

*Policy is written for everybody not minorities
I can assure you some of my best staff are Māori*

*I'm going to retire soon that is a young man's battle
We have other priorities the Minister/Board is on my back*

*We don't have the capacity to deal with that
We can't afford to consult and who do we consult anyway?*

I can confirm there was a memo - it seems a dog ate that policy



**HOW DOES THIS ECHO THE
FINDINGS OF PUAO TE ATA TU?**

**Lack of
Leadership**

**Historical
funding
allocations**

**Racism in
Funding
Practices**

**Inconsistent
Practice**

**Mono-cultural
frameworks**

**Uneven access
to Crown
Officials**



- ...as a PHU, I was just given money, millions of dollars, I didn't have to argue for it... it wasn't a purely contestable fund, we talked about how difficult it is, [but] every year it kept coming to me... I wasn't competing with anyone now that I think of it. It was just there. I was just given it

- (Berghan, 2010, November 7, p. 8).



Public Health Service Handbook

- Public health regulatory services
- Physical environment
- Communicable diseases
- Social environments (including health promoting schools)
- Well child
- Screening
- Prevention of alcohol and other drug related harm
- Tobacco control
- Nutrition and physical activity
- Sexual and reproductive health (including HIV/AIDS)
- Mental health promotion
- Injury prevention
- Public health infrastructure
- Refugee and new migrant health
- Well child promotion service
- Problem gambling
- Health impact assessment

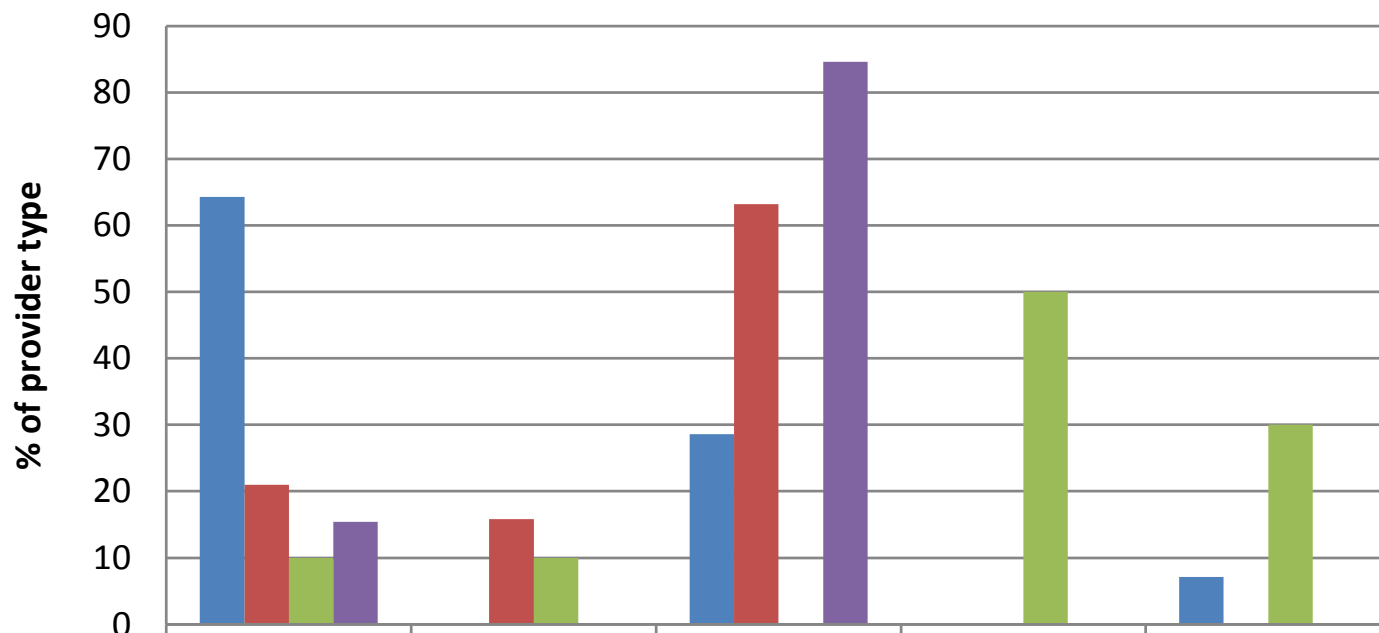




BENCH-MARKING PRACTICE

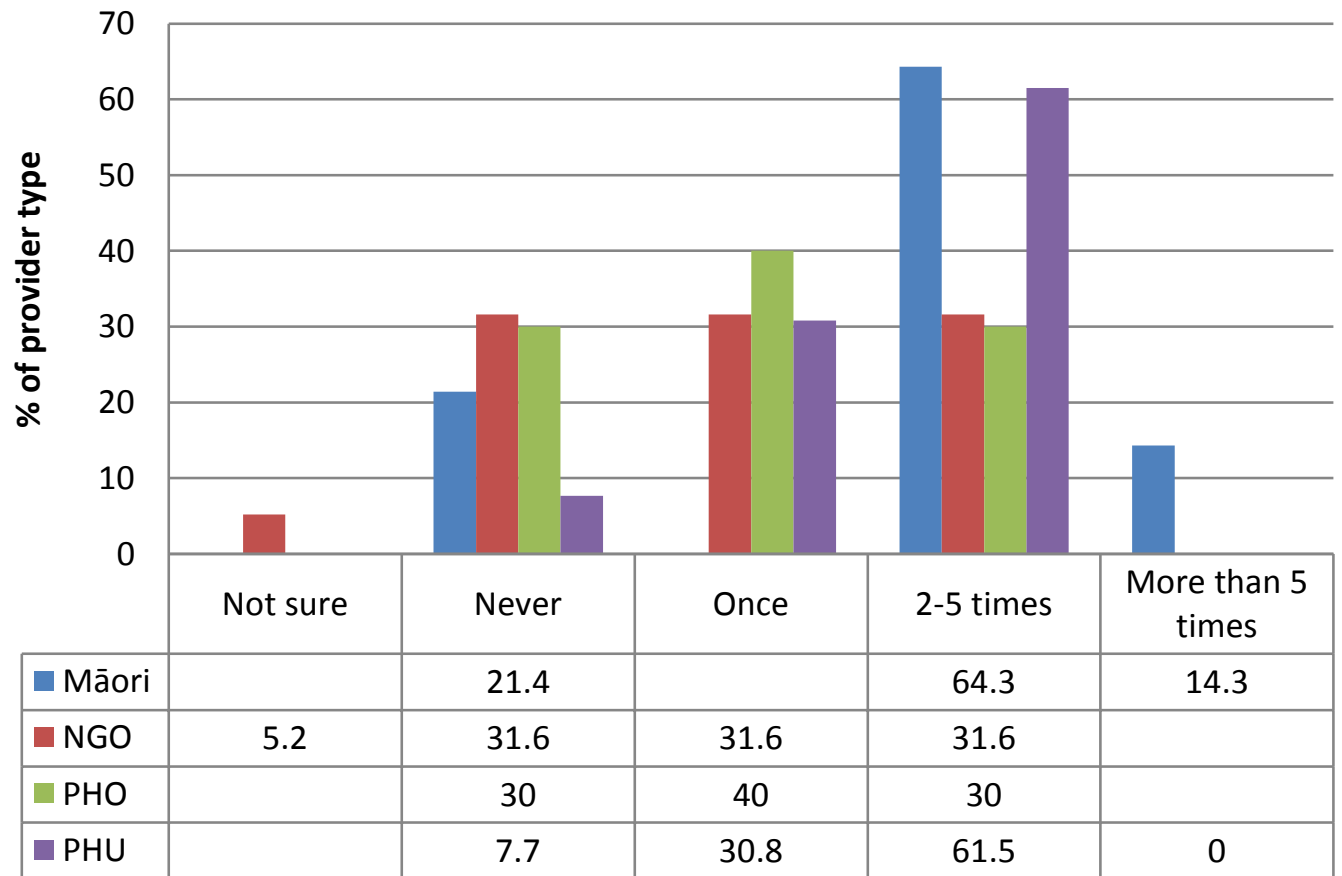
- Reported access to funders
- Representation steering/advisory groups
- Frequency of auditing
- Intensity of routine monitoring
- Contract timeframes
- Access to sustainable funding
- Cost of living/FFT adjustors
- Discretionary/ one-off funding
- Perception of compliance costs

Negotiated Contract Terms

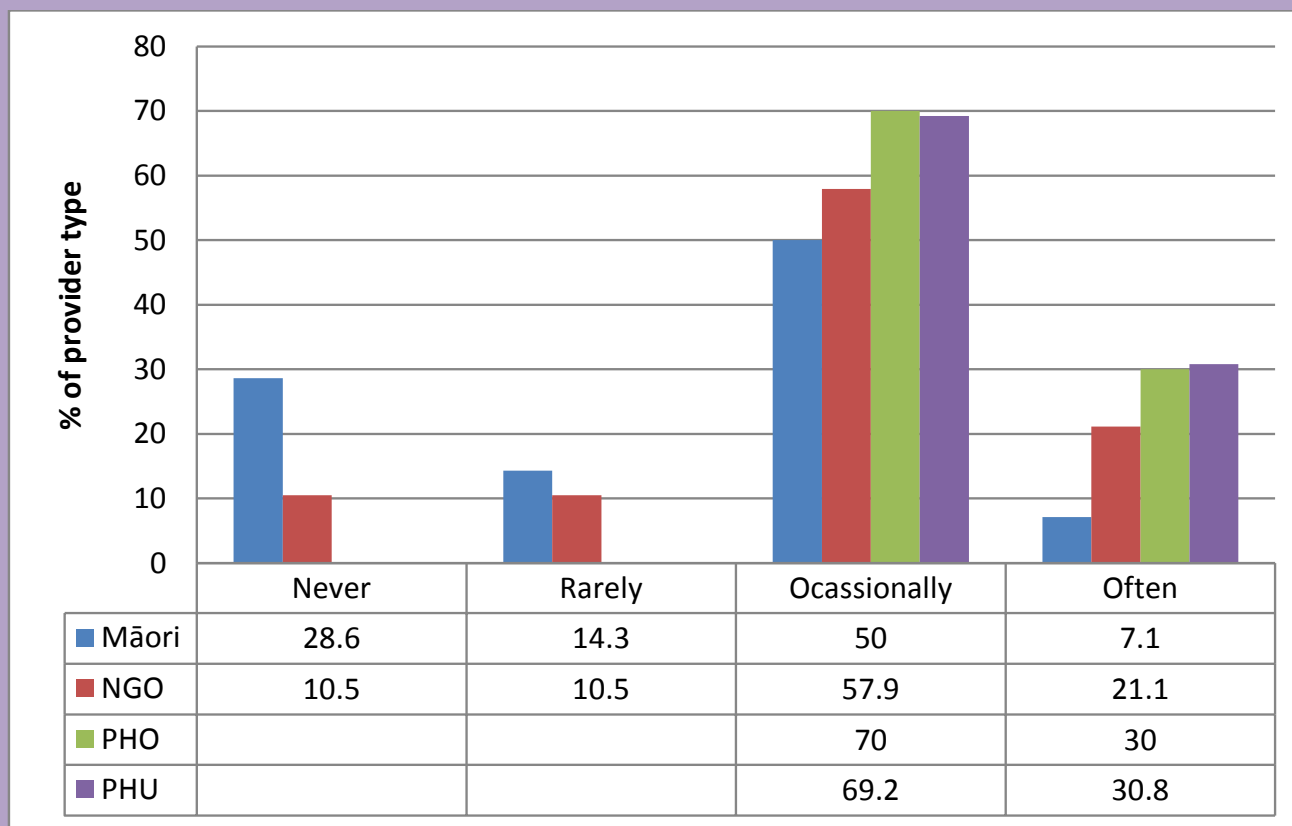


	One Year	Two Year	Three Year	Evergreen	Various
■ Māori	64.3		28.6		7.1
■ NGO	21	15.8	63.2		
■ PHO	10	10		50	30
■ PHU	15.4		84.6		

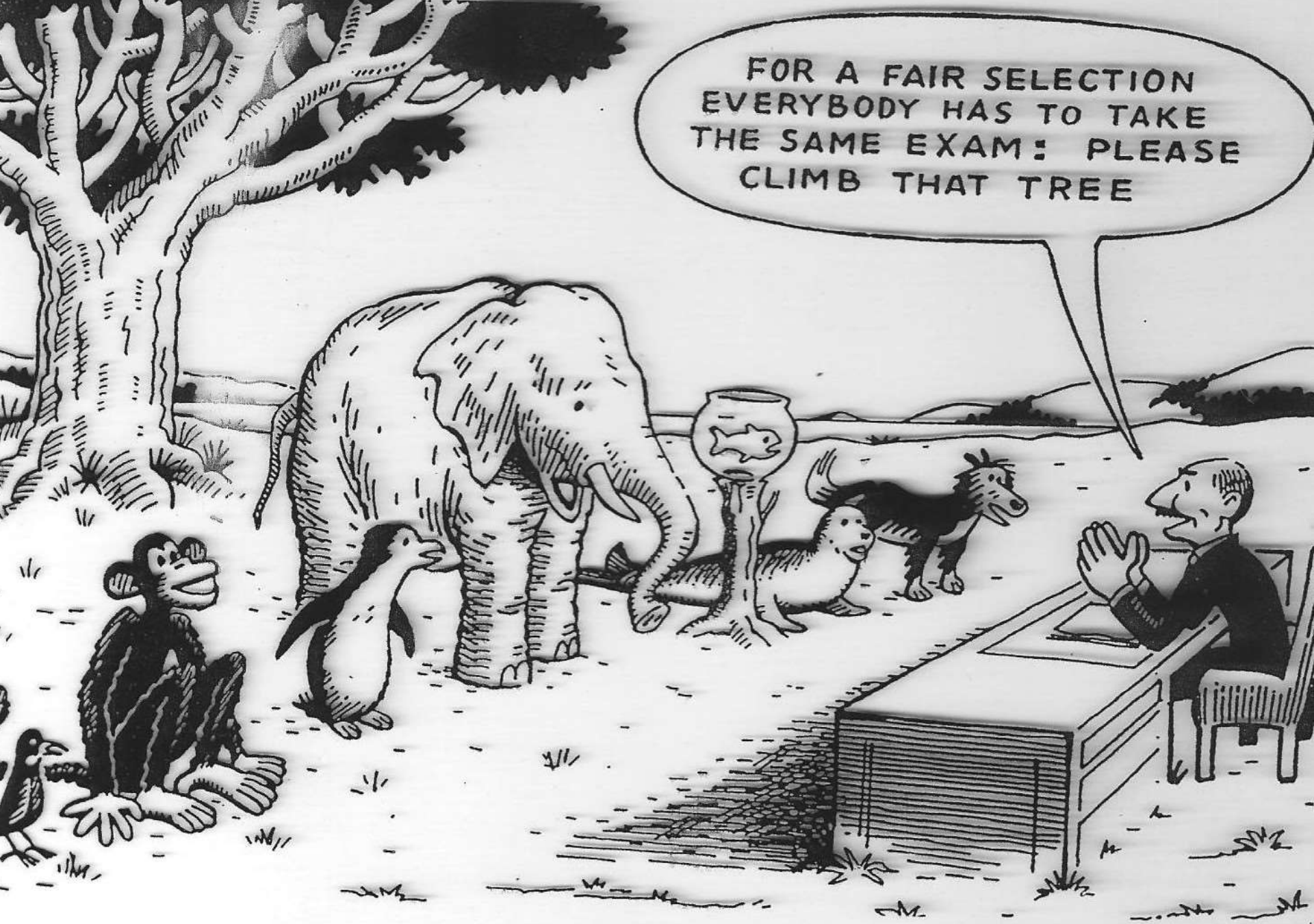
Recollection of Audit Frequency



Access to Discretionary One-off Monies



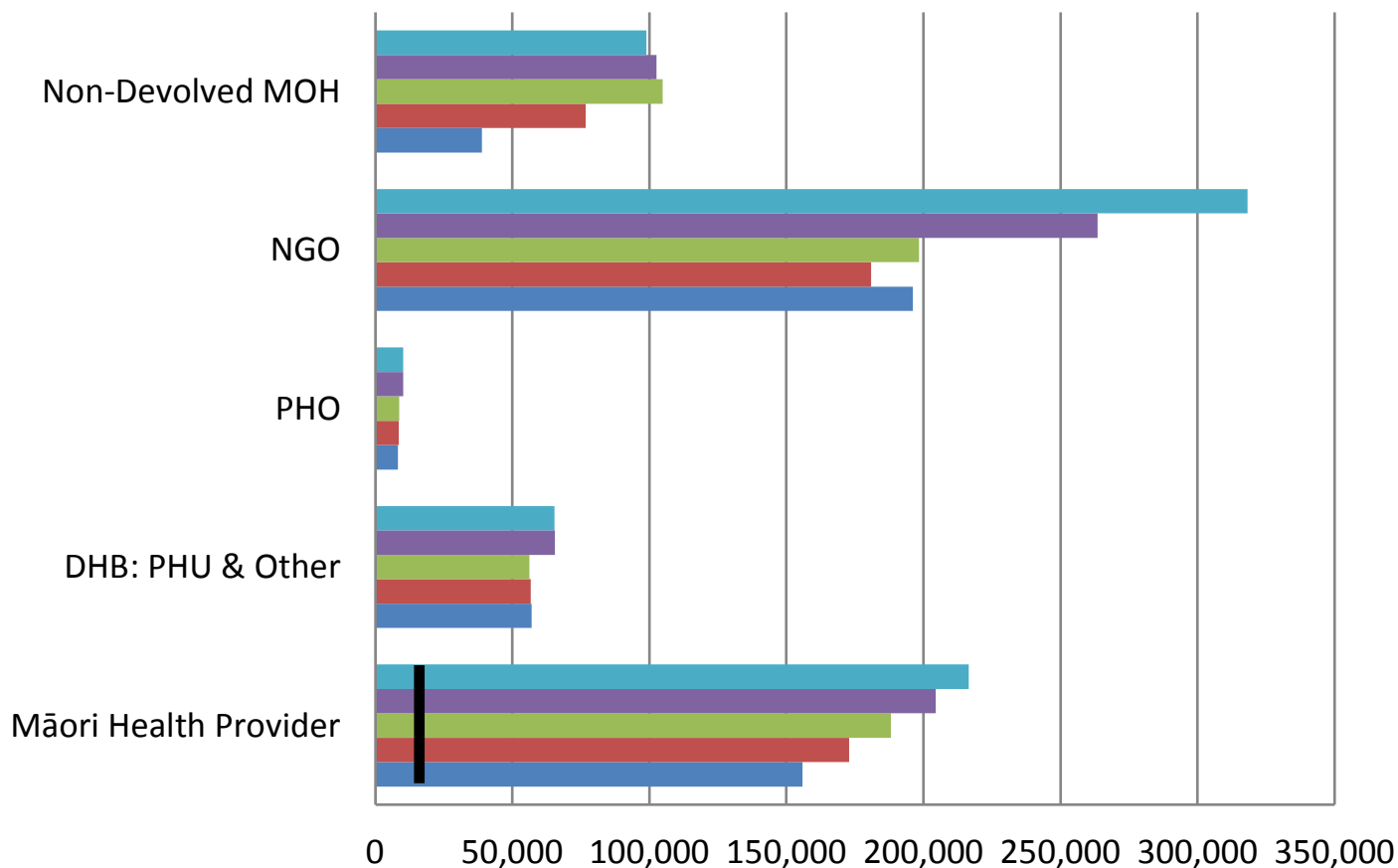
FOR A FAIR SELECTION
EVERYBODY HAS TO TAKE
THE SAME EXAM: PLEASE
CLIMB THAT TREE



Enabling Racism



Cartoon: John MacArthur



	Māori Health Provider	DHB: PHU & Other	PHO	NGO	Non-Devolved MOH
2009/10	216,487	65,343	10,133	318,297	98,826
2008/09	204,503	65,601	10,196	263,551	102,612
2007/08	188,088	56,259	8,695	198,410	104,885
2006/07	172,828	56,717	8,600	180,840	76,696
2005/06	155,843	57,010	8,185	196,171	38,903

NZ \$ (000)



**WHAT CAN WE DO TO CREATE
SUSTAINABLE CHANGE WITHIN THE
PUBLIC SECTOR?**



Specific ideas for action

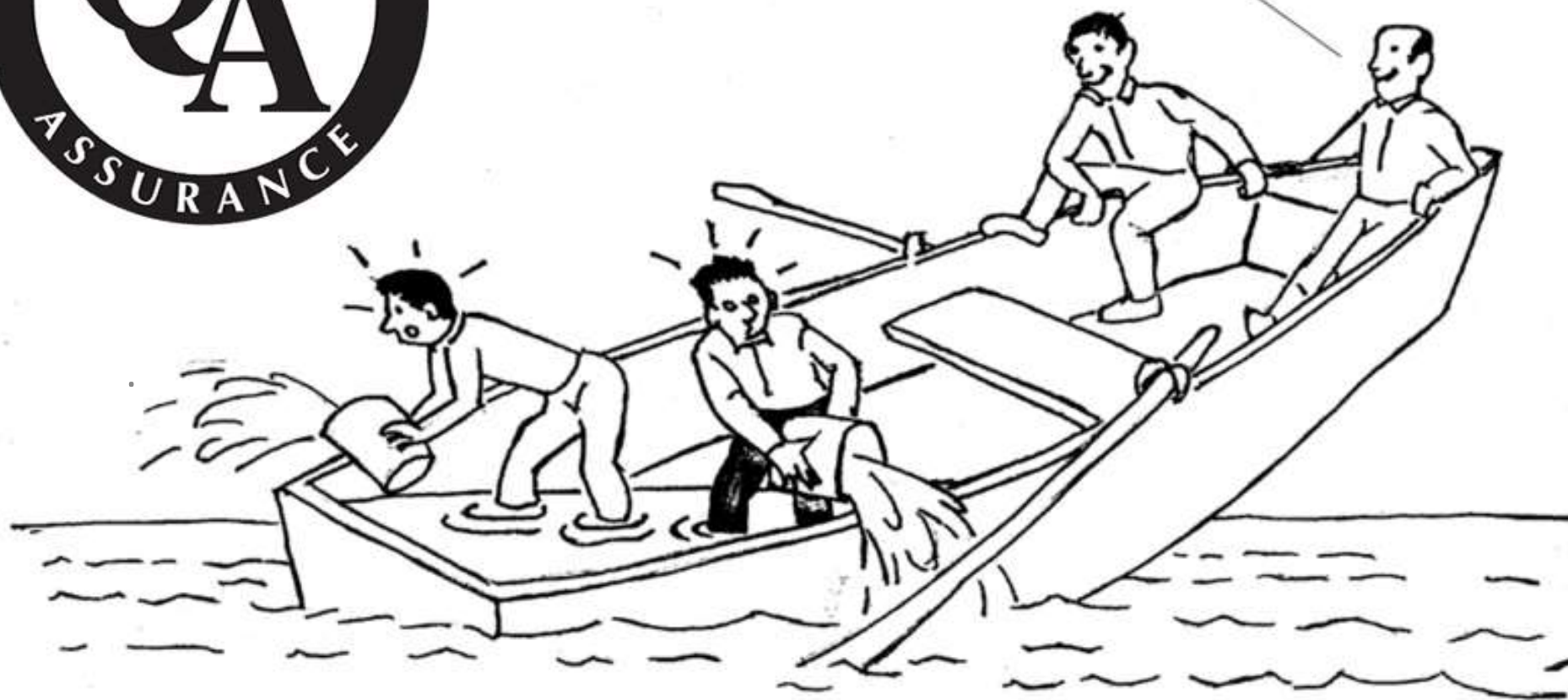
- Ask “How is racism operating here?”
 - Ask the question at work, at children’s schools, in community, at state level, in faith groups
 - Who is at the table, and who is not?
Involve and fund affected individuals and communities
 - What is on the agenda, and what is not?
 - How are values communicated and perpetuated?



SYSTEMS THINKING



Sure glad the hole isn't at our end.





TOP DOWN &/OR BOTTOM UP

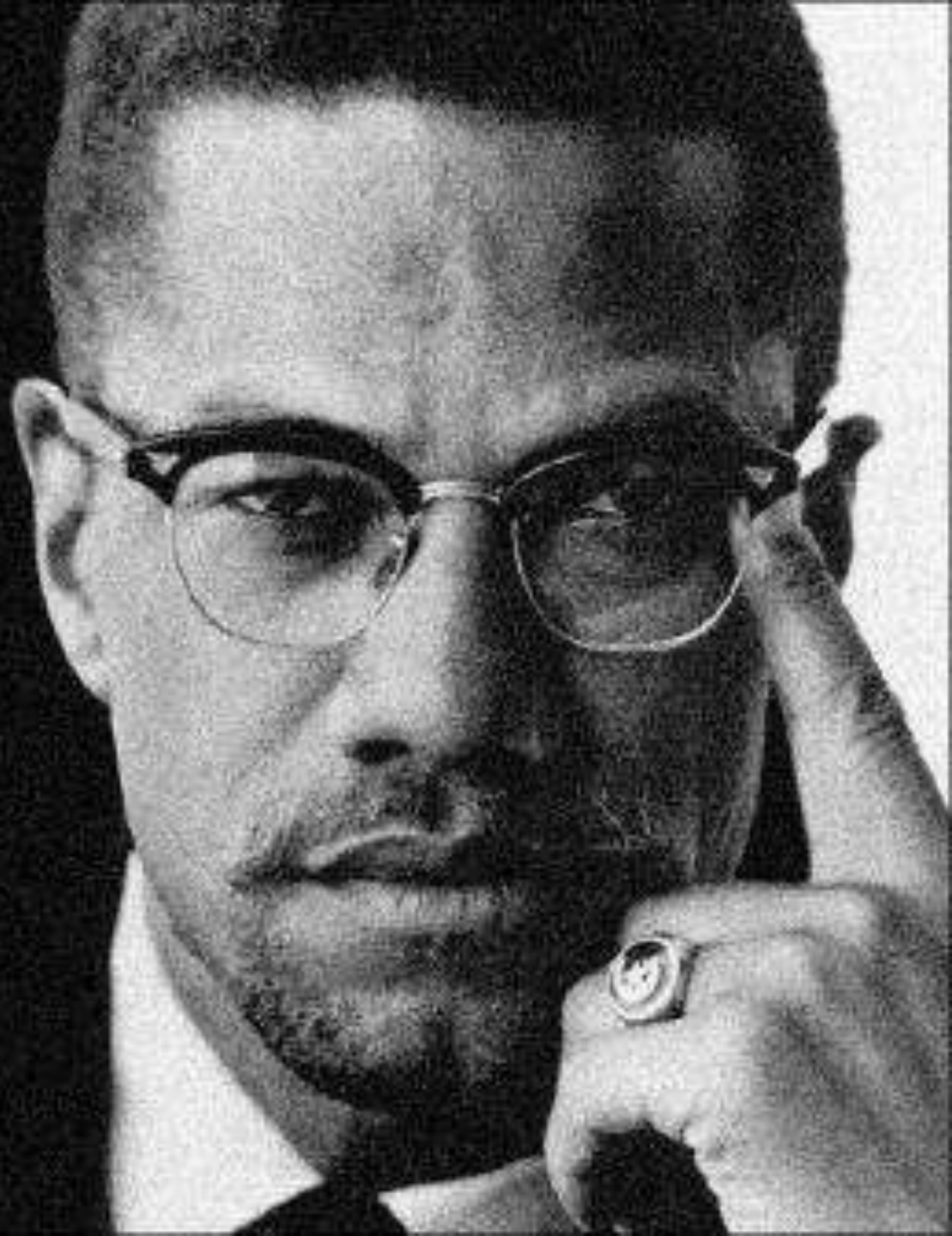




**MONITORING
THE CROWN**

“The future
belongs
to those
who prepare
for it today.”

—Malcolm X



References

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