

# Ngā Tāpiritanga: Secure Attachments from a Māori Perspective

*Anna Hinehou Fleming*

PSYCHOTHERAPIST, AUCKLAND

## Abstract

While Western attachment theory has tended to focus on the interpersonal attachments between people, indigenous Māori attachment perspectives have always included connections and relationships to aspects outside of the interpersonal domain. Collective, cultural and tikanga-based extrapersonal relationships are significant in Te Ao Māori and include connection to whānau/hapū/iwi (extended family and community groups), whenua (land and the natural world), and wairua (interconnection and spirituality). Alongside vital interpersonal relationships, these extrapersonal connections are substantial to the development of an indigenous Māori self which is well and supported within a holistic framework. This article explores the extrapersonal connections outlined above, their importance to Hauora Māori and implications for the practice of psychotherapy in Aotearoa New Zealand.

## Whakarāpopotonga

I te wā e warea ana te arotahi kaupapa piripono a te Uru ki te piringa whaiaro tangata ki te tangata, ko tā te Māori tirohanga piripono he whakauru i ngā here ngā whanaungatanga ki ngā āhuatanga i tua atu i te ao whaiaro. He take nunui te whānau kohinga ahurea o te Ao Māori whakakaohia ki tēnei te here ā-whānau, ā-hāpū, ā-iwi (whānau whānui me ngā rōpū hāpori), te whenua, te taiao me te wairua (ngā taura here, te waiuratanga). I tua atu o ngā here whaiaro he wāhanga tino nui tō ēnei kohinga ahurea ki te whanaketanga o te mana motuhake o te tangata whenua Māori e ora ana e tautokohia ana e te papa whānui nei. E wherawhera ana tēnei tuhinga i ngā here whakawaho kua whakaarahia i runga ake nei, te hira o ēnei ki te Hauora Māori me ngā whakahīrau mō ngā mahi hauora hinengaro i Aotearoa.

**Keywords:** Māori; indigenous; psychotherapy; attachment theory; Māori health

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Fleming, A. H. (2018). Ngā tāpiritanga: Secure attachments from a Māori perspective. *Ata: Journal of Psychotherapy Aotearoa New Zealand*, 22(1), 23-36. <https://doi.org/10.9791/ajpanz.2018.03>

## He Whakataukī

Mā te rongō, ka mōhio; mā te mōhio, ka mārama;  
Mā te mārama, ka mātau; mā te mātau, ka ora.  
Through perception, comes awareness; through awareness, comes understanding;  
Through understanding, comes knowledge; from knowledge comes wellbeing.

## Pepeha

I te taha tōku Māmā  
Ko Hikurangi ngā maunga  
Ko Ngatokimatawhaorua me Mataatua ngā waka  
Ko Te Raparapa me Rangitaiki ngā awa  
Ko Ngāpuhi me Tūhoe ngā iwi  
Ko Ngāti Hine me Ngāti Haka Patuheuheu ngā hapū  
Ko Matawaia me Waiohau ngā marae  
Ko Wahangu Herewini raua ko Te Wairingiringi Pepene ōku tūpuna  
Ko Manu Moehau Herewini tōku Māmā

I te taha tōku Pāpā  
No Ingarangi ia  
Ko Geoffrey Fleming raua ko Violet Tadman ōku tūpuna  
Ko Christopher Philip Fleming tōku Pāpā

Ko Annemarie Hinehou Fleming tōku ingoa

My pepeha which I begin with gives you an understanding of where I come from. My Māori whakapapa comes solely through my mother — my father is a migrant to Aotearoa and came here with his family from South London in 1973 when he was a teenager. His parents, my grandparents Geoff and Violet, were from South London and as far as they knew, their ancestors were also from that place.

Through my mother I whakapapa to the iwi of Ngāpuhi and Tūhoe. My two maunga are both named Hikurangi. Hikurangi in Tai Tokerau (Northland) and Hikurangi connected to Tūhoe. My waka are Ngatokimatawhaorua and Mataatua. Descended from the Matawhaorua waka which Kupe first navigated to the Hokianga, Ngatokimatawhaorua was voyaged here by his descendant Nukutawhiti. Through my Tūhoe whakapapa I connect to the Mataatua waka, which first landed near Whakatāne and then travelled north to the Bay of Islands. My awa or rivers are Te Raparapa in the north and the Rangitaiki, the longest river in the Bay of Plenty. My hapū are Ngāti Hine in the north, and Ngāti Haka Patuheuheu for Tūhoe. Rangimarie is our whare tipuna at Matawaia which is landlocked and surrounded by interlocking rivers and streams. Tama ki Hikurangi is our whare tipuna at Waiohau, and sits on the western edge of Te Urewera. Our whare's backyard is the ngahere (forest, native bush) of Te Urewera.

These connections that I name begin my pepeha. They include key figures of the landscape on which my tūpuna lived. From this you know my mountains, water sources

from which we would have gathered water, the wider groups of people that I belong to and the houses that sheltered us. This is all acknowledged before any individuals are named. I then name my tūpuna, my mother's parents are Wahangu Herewini and Te Wairingiringi Pepene and my father's parents are Geoffrey Fleming and Violet Tadman. My mother is Manu and my father is Chris. Finally, I name myself. Through my whakapapa shared in my pepeha, I am held in the context of my histories, my whanau and my land.

E kore au e ngaro, he kākano i ruia mai i Rangiātea.  
I will never be lost, for I am a seed sown in Rangiātea.

Pepeha provides a strong example of the importance of these extrapersonal and collective attachments in Te Ao Māori. As noted, natural landmarks, resources and collective structures in hapū and iwi are named before any individuals. Pepeha marks the relationships that an individual has with both human and non-human connections and is often a way of introduction. To answer “Ko wai koe?” (“Who are you?”) is to connect to several different connectors or concepts that include and extend beyond the interpersonal.

This article is informed by my 2016 Master of Psychotherapy dissertation, “Ngā Tāpiritanga”, and is also based on a presentation given in Ōtepoti/Dunedin at the New Zealand Association of Psychotherapists’ annual conference in March 2018. My journey with this kaupapa (purpose, topic) was an area that had been calling me for a long time. My experience as a statutory social worker at Child, Youth and Family (now known as Oranga Tamariki) left me continually asking, “why are our whānau so overwhelmingly represented in this space?” Each time the often-quoted statistic of “56% of children in care are Māori” was said at a meeting or published in a document, I felt pain. And our whānau would keep returning. Mothers and fathers of children in care now, were children in care themselves. I wondered why this was, but I also thought that there was clearly something in the system that wasn't working, it wasn't changing outcomes through generations, it wasn't healing. That line of wondering and questioning brought me to my psychotherapy training — a wish to learn more about healing and supporting people, especially across generations.

It feels important to name that I myself have experienced significant disconnection from my Māoritanga. As I mentioned before, my whakapapa Māori comes through my mother, as my father and his family have their roots in South London. My mother passed away when I was six months old and I remained in the care of my paternal family — being raised by my grandmother, grandfather and my Dad. I can remember only a handful of times where I met members of my mother's family growing up and my experiences of being Māori as a child were mixed. It mostly felt unfamiliar. My journey into reconnection with my taha Māori is closely linked with my journey in psychotherapy. Psychotherapy — both training, and being in therapy — provided me with spaces to think and feel about, often for the first time, my experience of being Māori. These spaces seemed to give me a starting point to exploring my connections further.

How people attach, connect and belong is integral within Te Ao Māori. Māori perspectives on development value parental relationships in the way that they nurture and support growth. Both indigenous and Western approaches to attachment share this emphasis on the importance of reliable, consistent, attuned and responsive adults being available to children.

However, attachments and connections beyond the interpersonal dyad also hold priority with regard to development for Māori. The ongoing dominance of Western developmental theories and interpersonal dyadic relationships has marginalised mātauranga Māori (Māori knowledge), particularly around the importance of collective interpersonal attachments and extrapersonal attachments. For the purposes of this article, I will outline the four wider connective structures beneficial to Māori, identified in my 2016 dissertation research, and then I will address some of the implications for psychotherapy in Aotearoa New Zealand.

## Wairua

Wairua is a fundamental concept within the worldview of Māori. Wairua itself is a vital state of connectedness between Māori and all aspects of the universe (Marsden, 2003). It is developed within infants prior to birth and provides a connection between the individual, their whakapapa and the world as a whole (Mead, 2003). Whakapapa in this sense is not solely the idea of ancestry through genealogical lines but also includes ancestral connection to land, to sea, to stories, to songs and to entities such as waka and marae.

Wairua is a key concept when considering health or wellbeing for Māori. It is the source of being and it connects us to all aspects of life (Marsden, 2003). Where wairua is often taken to mean “spirituality”, this can include religious beliefs and practices, however it does not hold to any specific denominations of faith. Within wairua particularly is the ability to conceptualise links and connections between the human experience and the environment. Sir Mason Durie in particular cautioned that problems with accessing tribal lands is seen as a sign of poor health due to the integral role of the natural environment in wairua health and wellbeing (Durie, 1994).

In considering health for Māori, much emphasis is placed on wairua health. A kuia interviewed in a study of Māori healers stated that “wairua is the first thing, and everything that you do” (Kuia, as cited in Ahuriri-Driscoll, 2014, p. 34). Wairua is also seen as being fundamental to understandings of Māori health as it allows access and knowledge to the whole person (Cram, 2014). This concept needs to be understood in the sense that not only does this include the health of the individual person, but also the health of their whānau and their connections to the wider world and cultural connections.

The health of wairua can be compromised through different factors. The actions of others can affect an individual’s wairua through abuse, neglect and acts of violence. The stressors of elements such as addiction, domestic violence, financial issues, and housing issues can all be seen as examples of conditions that can negatively affect wairua (Mead, 2003).

Interconnection, holism and balance are integral to indigenous philosophies and ways of thinking. At a wider societal level, this relational way of thinking supports relationships between humans and the natural world and on an individual level it calls for mind, body and spirit acknowledgment, with each dimension interlinked and necessary in maintaining holistic health and wellbeing. A holistic view supports a balanced way of looking at the world through several lenses with a view to understand how to live well in, and with, the world. My approach emphasises that psychotherapy can play a key role in facilitating this kind of deeper understanding and connection.

## Whenua

The word *whenua* has many meanings. *Whenua* means land, in terms of the physical ground, and *whenua* is also the word for placenta. When a child is born into its *whānau*, the baby's placenta is buried in the ground with *whenua* returning to the *whenua*. In this way, the many meanings of *whenua* are interwoven between ideas of physical ground, location, birth and family. Within a Māori worldview, *whenua* is a significant part of wellbeing, with environmental, spiritual, psychological and cultural attachments between people and the land.

Papatūānuku, Earth Mother, along with Ranginui, Sky Father, are key parts of the Māori understanding of creation and are seen as the primordial parents who gave birth to the gods of the elements and to mankind. According to Māori Marsden, the double meaning of *whenua* as both placenta and land provided a constant reminder that we are “born out of the womb of the primeval mother” (Marsden, 2003, p. 45). From Papatūānuku springs life, “a living organism with her own biological systems and functions” (p. 68) with importance placed upon the symbiotic, interdependent relationship between Papatūānuku and her children.

Land remains personified in the acknowledgement of Papatūānuku as Earth Mother. As Māori we are born from the earth and we return to the earth when we die, as well as *whenua* (placenta) being returned to the earth upon the birth of a child. The phrase, *tangata whenua*, is often translated to mean people of the land. This translation infers that a certain group are “of” a place or occupy a certain place. Smith (2004) however, explained that *tangata whenua*:

—has a deeper, more significant meaning of being ‘composed of’ the elements of that place through generations and centuries of occupation; for the people not only passed ‘through’ or over the land but the land passed ‘through’ and made up the substance of people both physically and metaphysically. (p. 13)

As noted previously, *whakapapa* includes human ancestry but also extends to everything that makes up the human, spiritual and natural worlds — these all have a *whakapapa* (Carter, 2005). *Whakapapa* lines create connections and relationships across these worlds and this is how Māori understand the creation of the universe and all its elements. Place and space are interconnected within the environment and are explained through different oral traditions. In this way, Māori do not hold ownership over land but instead hold responsibility, care and are in a *kaitiaki* or guardianship role with the land (Henwood & Henwood, 2015). It is looked after in an interconnected way for *whānau* and for future generations.

Traditionally, *hapū* and *iwi* groups organised themselves across the *whenua* and established themselves in chosen areas. *Whenua* provided the foundation for social and community life, creating a network of connectedness and a fundamental relationship with the land. The processes of colonisation and urbanisation have drastically altered the way Māori interact with land. One of the most visible ways of this is through systematic land loss; during the 19<sup>th</sup> and 20<sup>th</sup> centuries Māori experienced significant land loss through settler purchase and occupation (McCreanor, 2006; Sorrenson, 1956). Similarly, the process of urbanisation has led to many Māori being located away from their traditional homelands, with the movement toward major cities and towns meaning that *whenua* and identity

markers are often away from the place upon which they primarily reside.

Given the significance of whenua to Māori, these losses and changes hold considerable impact as Māori became dislocated from ancestral connections and land attachments. On a practical level, Māori were obstructed from performing kaitiaki tasks and responsibilities with regard to whenua. On a psychological level, Te Ngaruru (2008) spoke of this process compromising the mana (prestige, authority) of the people, which influences the psychological health of those affected and generations to come. In this way these ongoing intergenerational and current disconnections create physical and psychological barriers, which diminishes both positive self and group health.

Whenua provides a literal place to stand and embodies the concept of tūrangawaewae, the place where one feels secure and at home. There is a symbiotic and interconnected relationship between Māori and whenua, in which the health of each depends on the other. Durie (1994) considered this as being how Māori sought to belong to structures, rather than possessing them. Through this, concepts such as kaitiakitanga and rangatiratanga are imbued within whenua. Through the close, spiritual relationship created through understanding the ancestry of mankind, Māori accepted the responsibilities that came with being a guardian and protector of the deities and interrelated connections between the human, animal and spirit worlds.

Te Kawerau ā Maki, the hapū based in West Auckland and the traditional custodians of Te Waonui a Tiriwa or the Waitakere Ranges, have currently imposed a rāhui (temporary ritual prohibition) on the Waitakere Ranges. This rāhui was set in place in November 2017 due to the spread of Kauri Dieback Disease which is lethal to kauri trees. I highlight this because this is an example of a current fight to kaitiaki our whenua and protect a significant taonga (treasure). These events are not relegated to history — they are happening in the here and now. Te Kawerau ā Maki have been criticised for their stance in imposing the rāhui, and initially Auckland Council supported the rāhui but chose not to enforce it. However, from May 2018, Auckland Council have now come to support the rāhui put in place by Te Kawerau ā Maki and have closed much of the forest to the public.

## Whānau, Hapū, Iwi

Moving into some of the interpersonal connections, whānau is the immediate group that we are born into, and as the smaller of social structures within Te Ao Māori, the whānau is contained within the larger groups of hapū and iwi. A key characteristic is the two definitions of the word whānau. It includes the definition which is most familiar — extended family, family group, a term of address to a group of people. Traditionally, it was also the primary economic unit of Māori society. However, the word whānau also means to be born, or to give birth. Deepening our understandings into kupu Māori or Māori words helps us to understand the multi-faceted meanings and the depths of these meanings. As I move through some of these interpersonal connections further, we will begin to understand further weaving of the interpersonal links with the wider physical and societal world around us.

The whānau group is made up of different generations. Comprising mātua (mothers, fathers, aunts and uncles), koroua and kuia (grandparents, great-aunts and great-uncles),

tuākana and tēina (siblings and cousins), this collective group is usually the most immediate and primary connection in the life of a Māori infant. Waiti and Kingi's (2014) study into whānau resilience found that healthy relationships were key for a resilient whānau unit. Named as "whānaungatanga factors", these healthy networks included "healthy relationships with family, relatives, friends, workmates, neighbours and members of the community" (p. 129), demonstrating the importance of healthy connection across numerous and diverse interpersonal relationships.

There is wide acknowledgment that traditionally, Māori children were contained within multiple relationships. These wider groups of people often functioned as caregivers, monitoring that child's safety and also assisting with the development of a cultural self. In this way, a singular dyadic model does not fit the Māori system of collective family systems. Dr Alayne Mikahere-Hall suggested that a Māori view of attachment is more likely to be horizontal, with more than one attachment figure, as opposed to hierarchical, in line with the dyadic approach of attachment theory. This horizontal approach does not dismiss the idea of a central parenting figure but instead acknowledges that a "bi-lateral arrangement operates where physical and emotional care is continuous, consistent and supported by the mutually significant other or others" (Hall, 2015, p. 45).

Continuing with our wider whānau structures, the hapū unit is generally made up of more than one whānau, and these units are bound by whakapapa and strong kinship ties. The definition of hapū again has more than one meaning — it has the meaning of kinship group, or clan, and it also means to have conceived and to be pregnant. The imagery of pregnancy and the hapū as a kinship group is very metaphorical; through the growth and swelling of a whānau, so a hapū is able to hold many whānau groups. The metaphor also continues the symbolism of birth with hapū members also having birth and whakapapa links. Where whānau is the immediate group that we are born into, the hapū unit is larger. Situated around a specific area of land with its own sustenance and resources, there was a political system which the hapū was built around. The hapū leader was a rangatira (chief) and their function was to "ensure that the group survived and that its land base and resources were protected and defended" (Mead, 2003, p. 217).

Continuing the metaphorical symbolism in which these interpersonal structures are associated with birth and growth, the word iwi again has more than one definition. Iwi are made up of several hapū — in this way it can be defined as an extended kinship group. Prior to the arrival of other peoples, Māori did not function as one homogenous group — instead the indigenous peoples of Aotearoa identified through their iwi groups. The other definition of iwi speaks of strength, or more specifically, bone. Bone emphasises the strength of the group's shared whakapapa and links. Hirini Moko Mead (2003) pointed out the significance of iwi is in its "function as a metaphor for whānaungatanga and the strength that arises" (p. 219) from this. The meaning of the word iwi and the importance of whānaungatanga continues to emphasise the importance of kinship and belonging.

Porter and Ratima's (2014) study considered the concept of iwi vitality. They argued that wellbeing in terms of health is much more suited to the smaller whānau group and the individual level. Instead, they presented the idea of iwi vitality, which included indicators for secure identity, intergenerational sustainability, collective cohesion, environmental kaitiakitanga, self-determination, economic advancement and whānau health and wellbeing.

Porter and Ratima suggested that when an iwi is able to determine their own frameworks and solutions within these indicators, it can be “strong in its identity, connected and committed to the environment and all living things, and focused on the wellbeing of its people” (p. 282).

Whakapapa is the way in which Māori connect themselves to each other and is seen as an essential element of belonging and identity. Whakapapa is also how Māori connect to their ancestral knowledge and the ways in which they view and approach the world. As with other words within these social groupings, whakapapa also has more than one defined meaning. Whakapapa has been described as the folding of layers from the past, into the present and on into the future. In this way, “whakapapa holds the connections and relationships so that mythology, legend, history, knowledge, tikanga (custom), philosophies and spiritualities are understood and communicated between generations” (Taonui, 2015, para. 1). Transfer of whakapapa knowledge has been an important process, with knowledge being transmitted between generations through whaikōrero (formal speeches), waiata (songs) and art. Understanding this knowledge is seen as integral to Māori wellbeing as it supports the development of individual and cultural potential. The transmission of this knowledge is said to enable healthy interpersonal, spiritual and environmental relationships as it outlines the links between the child and their living family members, as well as their ancestors and those who have passed on (Wirihana & Smith, 2014). In this way, good health for Māori includes the ability to know who they are and where they belong.

## Māramatanga

Durie (2001) stated that living as Māori means having access to the Māori world which includes understandings of language, culture, marae, tikanga and resources such as land, whānau and food. Good health for Māori includes understandings and insight into Te Ao Māori.

Māori traditional knowledge is often drawn from the spiritual and natural worlds (Hall, 2012), as traditional Māori were much more engaged with the natural world. From this framework came the creation legends which are significant within the Māori world view. Io, Ranginui and Papatūānuku as the ancient deities, and characters such as Kupe and Māui shaped Māori knowledge and continue to do so. Hall (2012) deconstructed psychological terms from a Māori perspective and found that words which are often used to explain psychological behaviours are built from Māori principles found in nature. This supports the holistic view of Māori, and the connection to the physical realm.

Malcolm-Buchanan (2008) explained that oral narratives became a way to comprehend the world, especially the unpredictable environment of the natural world. These narratives gave order, structure and logic to the wider world and cosmos. A key way of imparting this knowledge, as with many cultures and groups, was for younger generations to spend time with adults who already held the knowledge. This way of living was supported in Māori society as whānau systems meant that young children were often in the company of their whānau and tribal elders. Family and whānau groups are still seen as being crucial for learning (Tocker, 2012), ideally with children learning about Māori ways of being from birth.

The ability for Māori to live as traditionally practiced has been hampered by assimilation

policies that have impacted Māori language and the basic structures of Māori culture, knowledge and values. The impact of historical trauma on Māori has had a significant effect and over the years has disrupted the way that Māori learn, access and engage with their knowledge. Intergenerational imparting of cultural knowledge allows children to grow up being comfortable as Māori, allowing their cultural identities to develop unhindered. This knowledge and practice both protected and sustained wellbeing for Māori as well as laying a foundation for further interactions and progression as a community.

## Discussion

These extrapersonal and collective interpersonal factors within Te Ao Māori are integral to a Māori world view. Durie (2003) discussed the foundations of Māori health, stating that these wider contexts must be considered. In addressing what underlies Māori health, Durie found that while the platforms are similar to those which underpin the health of other New Zealanders, they are not the same. Durie (2003) named that “platforms for Māori health are constructed from land, language and whānau; from marae and hapū; from Rangi and Papa; from the ashes of colonisation; from adequate opportunity for cultural expression; and from being able to participate fully within society” (p. 36). In this way, the foundation for Māori health is in the freedom to be Māori.

### Marginalised Knowledge

The relationship between Western and indigenous knowledge is complex. Impacted by processes such as colonisation, Māori found themselves and their ways of thinking and being increasingly destabilised. Throughout the 19<sup>th</sup> century, Māori experienced drastic changes to their way of life including what has been outlined in this kōrero — widespread loss of lands, detribalisation of iwi and the introduction of new and dominant religious pathways.

My aunties and uncles tell many stories of being smacked by teachers at school for speaking te reo Māori, to the point that they became fearful to speak and instead would often stay silent. My aunty says that she hated school, and in order to protect their children, my grandparents instilled in their tamariki (children) to only speak te reo Pākehā (English) as soon as they left the front gate.

For health care in particular, the Tohunga Suppression Act of 1907 set to legislate tohunga healing practice by imposing licensing systems and punishment for those who did not comply. This progressed the use of Western medicine as a treatment method but also as a means of control.

These processes of marginalisation were not passively accepted, and Māori responded in several ways to the changes occurring across different levels of society. In the late 19<sup>th</sup> century, iwi began meeting and working together, discussing courses of action with regard to the growing dominance of Pākehā and what was seen as the many infractions of Te Tiriti o Waitangi (Walker, 1990). Māori groups and individuals started to become more active in politics and education in order to have more access to governmental and societal processes.

Māori health is a holistic construct, which focuses on all aspects of the self. As Durie (2003) stated, if the answer to Māori wellness can be found in the ability to “be Māori”, and

it focuses on all aspects of the self, that provides us as psychotherapists and healers a pathway in supporting this.

One of the areas that I have been exploring elsewhere is the idea of psychotherapy as decoloniser. Traditional psychotherapy, having its roots in Western modalities born out of Europe, can easily be seen as a Western practice. One of my challenges for psychotherapy in Aotearoa is to become further engaged in the socio-political landscape and educated in the historical and current processes which impact all our peoples in this place. For me, psychotherapy is about taking the position of exploring and understanding the internal world in its relationships with the world around us. This feels particularly aligned with the idea of wairua which I have explored here. Wairuatanga is the process which links the internal experiences of Māori with wider connections throughout the universe. The Māori concepts of attachment named here make up Te Ao Māori, and therefore, the world that Māori inhabit.

### Clinical Implications

The relationship that Māori have with being Māori has been impacted by the very processes acknowledged in this kōrero. Disconnections, disavowals and marginalisations through colonisation, urbanisation and intergenerational trauma has affected the way that Māori individuals and whānau engage with these concepts.

The connections outlined here show that Māori understandings of the world are grounded in primary relationships including and additional to parental dyadic relationships. Significant attachments for Māori extend to include wider interpersonal relationships through whānau, hapū and iwi and these relationships are shown to be protective, nurturing and exploratory. Given that psychotherapy is concerned with understanding a person's inner emotional life, it is important that these wider relational attachments are given appropriate attention in the therapeutic process. If we can open up to acknowledging the power in these connections, they can provide stability and a foundation from which further explorations and journeys to hauora (health) can be made. A commitment to understanding and exploring these discourses and wairua interconnectedness in therapy not only allows these connections to be named but for any concerns or disconnections to be explored.

Similarly, attending to nuclear family relationships will often not adequately capture the close and integral relationships important to Māori. Just as significant are the relationships to grandparents, aunts, uncles and cousins and of psychological importance is being able to understand the quality of these relationships in addition to those with parents and siblings. It is necessary for psychotherapists to make enquiries and gain an understanding as to how these wider relationships present in the client's life. Enquiring into these wider collective structures of whānau can make visible important attachment relationships for the client, beyond the parental relationship.

Hapū and iwi relationships remain important and these relationships may also be of significance to a client. Hapū and iwi ruptures, successes and reconciliations whether recent or historical are of importance. Smith (2004) named that indigenous people feel their history, therefore processes that may seem distant such as tribunal decisions or iwi mandates may make visible colonising processes that cause pain for hapū and iwi members. Psychotherapists must remain attentive to these kinds of narratives and experiences within

the client's life as they can hold historical or current pain through connection with these wider collective structures.

As discussed, attachments to whenua are imperative within Te Ao Māori and can often be a source of great pain and upheaval. The ongoing effects of colonisation and legislative processes have left Māori with a complex relationship with land. I often will make enquiries with clients about their key landmarks with my sense being that positive land associations can help a client internalise the protective supporting nature of whenua.

While my academic training experience in psychotherapy was largely informed by psychological and philosophical ideas arising out of European perspectives, I have been grateful for the different spaces I have encountered which have encouraged and challenged me to think more broadly about concepts of health and wellbeing. In particular, my training encouraged a bicultural lens be applied, acknowledging Te Tiriti o Waitangi, and the early and evolving relationships between Māori and Pākehā. However, my own experience of being disconnected from, and reconnecting with my Māoritanga, also became a part of my beginning practice as a psychotherapist. Early student placements and subsequent employment roles have allowed me to work closely with tangata whaiora both in one-on-one psychotherapeutic sessions and also in process and educational groups. I noticed that themes of disconnection for tangata whaiora were frequent and took many different forms. There has been disconnection from whānau, sometimes brought on from the health issues that the person was experiencing in the present, but often there had been a historical relationship rift, sometimes intergenerational, that had impacted the current whānau relationship. Often, on enquiring after iwi or hapū ties, the person would tell me that they only knew their iwi but not their marae, or that they had not been to their tūrangawaewae since they were a child, or that they didn't know where their ancestral lands were at all. Often I would greet my tangata whaiora with a "Kia ora", to be told, "I don't speak Māori". Often we explored guilt and shame for not knowing these aspects and sometimes there was a strong dismissiveness that seemed to shut down any conversation about what it meant and felt to be Māori.

I am attuned to themes of connection in the therapy room. This is one of the ways in which I feel that Māori ideas of health and psychotherapy meet — in the importance of relationship and understanding their psychological implications. As detailed in this article, connections to extrapersonal as well as interpersonal relationships are significant for Māori health and development. As I sit with tangata whaiora, I pay particular attention to the way they tell their story. Do they describe their relationships with ease? Do they tend to spend more time talking about certain people or places, and who might be missing? As I listen, my own experiences of connection come to the fore. If a disconnection is named, I am curious about it. I notice my own experience of cultural disconnection, and feelings of loss, grief and shame often come forward for me. These feelings guide my curiosity and I wonder what feelings come up for my tangata whaiora. As we explore further, I will often enquire after the areas that they feel connected to. They may talk quite enthusiastically about a particular whānau member, place or activity. I gravitate toward these connections and allow space for the person to talk about these things, sometimes at length. My approach in discussing these stronger connections allows them to be brought into the therapeutic space, facilitating trust and alliance. This then creates a foundation for us to begin exploring some of the concepts

that the person may feel further away or disconnected from, and we can explore this from a place of strength and safety.

Many Māori have experienced significant cultural disconnection through some of the different historical and social processes named above, with trauma often occurring through multiple generations. For these people, connecting to culture may not be an area of their life that they feel comfortable with or have a current interest in. In these circumstances I am mindful of the complexities of disconnection and aware that thinking about connectedness and any reparation is a process which needs to occur when the tangata whaiora is open to this. I believe this is another way in which psychotherapy is suited to this kind of process — beginning to understand both conscious and unconscious dynamics in trauma responses is useful with regard to holding a space around cultural identity development and connection.

As I end this kōrero, I find myself reminded of Sir Mason Durie's encouragement that the foundations of Māori health are constructed from multitudes of sources (Durie, 2003). While being Māori is not a homogenous construct, and there is no one way to be Māori, the concepts and connections acknowledged here provide further ways of understanding Māori experience within Te Ao Māori. While everyone's experience of these connections will not be the same, acknowledging these concepts allows further understandings to be formulated around the impacts of disconnection and connection for tangata whaiora.

## Glossary

Aotearoa	New Zealand
Hapū	kinship group, clan, subtribe; to be pregnant
Iwi	extended kinship group, tribe, nation; strength, bone
Kaitiaki	custodian, guardian, caregiver
Kōrero	speak, talk
Kuia	female elder
Papatūānuku	Earth mother
Pepeha	tribal saying, formulaic expression
Māoritanga	Māori practices and beliefs
Pākehā	New Zealander of European descent
Rangatiratanga	chieftainship, right to exercise authority
Ranginui	Sky father
Tangata whaiora	person seeking wellness, often used to describe someone accessing mental health services
Tāpiritanga	attachment
Te Ao Māori	the Māori world
Tikanga	customs
Tohunga	chosen expert, skilled person
Tūpuna	ancestors
Tūrangawaewae	place where one has the right to stand through whakapapa
Wairua	spirit, soul
Waka	canoe
Whakapapa	genealogy; to place in layers

Whānau	family group; to be born, give birth
Whare tipuna	ancestral house
Whenua	land; placenta

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**Anna Hinehou Fleming** (Ngāpuhi, Ngāi Tūhoe) is a registered psychotherapist, current Secretary of Waka Oranga, a provisional member of NZAP and a member of NZAP's Te Tiriti Bicultural Advisory Committee. Anna has worked in various social and health services with individuals and whānau for over 12 years and graduated with a Master of Psychotherapy in 2017. Anna's therapeutic approach combines her working and personal experiences with a recent focus on attachment and developmental theory particularly from an indigenous Māori perspective. This focus on indigenous health informs Anna's current work as Counsellor for Māori at Auckland University of Technology, and her growing community practice in Tāmaki Makaurau/Auckland. Contact details: [anna\\_fleming@icloud.com](mailto:anna_fleming@icloud.com).