

Māori and Reproduction, Sexuality Education, Maternity & Abortion

I decided to research this topic because there was so much research highlighting negative experiences and predicting negative outcomes. It all seemed to present Māori reproduction negatively, and felt completely different to my positive personal experience of whānau. I came across newspaper articles entitled: 'Māori teenage birth rate soars', and 'Turia support of teenage pregnancy 'extreme.' Even academic articles approached the subject of Māori and reproduction with an assumption that this was some kind of problem. I was saddened by the one-sided oppressive and offensive tone of such articles that had a wide ranging impact on New Zealand policy and people's views about Māori, encountering it when I was in my twenties, starting a long term of postgraduate study after making a decision to postpone childbearing. Noticing this difference between the academic work I was encountering and my own personal knowledge drove me to conduct a systematic research study about ordinary Māori people's experiences of making decisions about whether or not to have children. In my project, I sought to answer the following questions:

How do Māori make decisions about having children?

How do Māori experience having children?

What do we know about tikanga Māori (Māori practices) about having children?

Do modern Māori consider these traditions when thinking about having children and raising children?

How do modern Māori consider western ways of life when thinking about having children and raising children?

How can sexual, reproductive and maternity health services meet Māori needs better?

What my research involved

I investigated traditional and modern day Māori understandings, experiences and practices of conception, reproduction and reproductive decision making, raising children, and going to relevant health services. This involved reviewing the literature, interviewing participants, analysing data, and then re-reviewing the literature with new insights. I interviewed a total of forty three participants, including men and women, for this study.

What my research found

1. Traditional Māori knowledge and practice informed the lives of Māori people when making decisions about having children and raising children.

My research findings suggested that Māori cultural common sense regarding having and raising children related to concepts:

- whānaungatanga, nurturing and resilience through connection among relations

- whakapapa, revering the idea of bringing past ancestors into the present and protecting the trajectories of future children
- wairua, respecting the influence of spirituality that interconnects us with our relations and the natural environment.

These cultural values provided support and strength for people in their individual personal ambitions, as well as in a parenting role. They also informed a positive view of children, led to a general tendency to want to have children, and value their contribution to a whānau.

2. Western knowledge and practices about having children and raising children were adopted by Māori in quite different ways.

Some participants were able to embrace western ideals of individual personal development, participation in the monetary system and comfortably balance ambitions for children. This was easiest for those who were socially advantaged by gender, socioeconomic status, and education. Access to monetary resources particularly enabled easier accommodation to these western values and the option to choose to delay childbearing. Access to environmental resources, whānau support and networks, and traditional Māori knowledge enabled participants to turn away from western ideals and make decisions about having children and raise children in relation to Māori values and practices.

3. Sexuality education, maternity services and reproductive health services could use Māori knowledge and practices more, to provide more effective and better quality of care for Māori.

Reproductive health services can meet Māori cultural needs by incorporating traditional Māori knowledge. This requires good quality sexuality education, training current service providers and removing racism, classism, and sexism as obstacles & barriers to good service.

4. We create our own destinies through the experiences, blessings, and challenges that life gives us at each stage along the way.

We can think about our life choices, including our decisions to have or not have children, through a metaphor of sitting on top of a mountain. We can navigate and plan our lives by mapping out our path through the terrain in front of us to reach the destinations and possibilities we dream about. Those atop higher mountain peaks might see a different view or vista from those on smaller mountain peaks that have taller mountains blocking the view. People can only plan their lives through what they consider is possible, and what they can see. Some options like University study, travel, having a career, a great car, fancy clothes, or having a family, might appear easy for those who are more privileged (on higher mountain peaks), while those who are less privileged (on smaller mountain peaks) might perceive these goals to be out of reach, or likely to be challenging and difficult. We need to make sure that our young people are aware of all of the mountains, options, possibilities and dreams that are available to them, know that they can reach them, and be supported in doing so.