

## Karanga: the first call

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The purpose of the karanga study was to explore the health benefits of karanga for kaikaranga, whānau, hapū and iwi and develop a model of practice that could be incorporated into health policies and practices. At the core of the study was the restoration and reclamation of karanga as a healing model for Māori. A kaupapa Māori research design was used for the study and drew on interdisciplinary scholarship of Māori development, colonisation, Te Tiriti o Waitangi, community psychology, public policy, and discourse theory. A focused literature review and pūrākau from nine kaikaranga informed the study. The pūrākau were cocreated by the kaikaranga and the interviewer and deductive and inductive thematic analysis used to inform the findings. The study team argued colonisation had a detrimental effect on the health and well-being of wāhine Māori and that karanga as a tool of restoration and reclamation has the potential to change this.

There were two primary health benefits of karanga in the current study, the assertion and restoration of the mana of wāhine, whānau, hapū and iwi and decolonisation of the mind. The assertion and restoration of mana was linked to feelings of confidence and self-worth for kaikaranga, whānau, hapū and iwi. For kaikaranga, mana related to representing the voice of Papatūānuku and the nannies who had crossed over to other side of the veil. It was also about being recognised as trustworthy by whānau, hapū and iwi. For whānau, hapū and iwi mana was about whakapapa, tūrangawaewae and economic development. Closely linked to mana was decolonisation of the mind. Decolonisation of the mind was the result of the retelling tikanga Māori through whanau, hapū and iwi pūrākau. The retelling of these pūrākau resulted in the normalisation of tikanga Māori in a colonised world.

Other health benefits included smoking cessation, establishing non-violent ways of discipline within iwi, grief resolution, as a way of reclamation of identity and sense of self, feelings of self-worth, learning te reo Māori and a healthy environment.

A karanga health model was developed and is being implemented in Ngāti Whātua settings. A multi-faceted approach to implementing karanga is required with iwi at the fore.

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