

# Mahi aroha: Māori work in times of trouble and disaster as an expression of a love for the people

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## ABSTRACT

In 2010 and 2011 the Canterbury earthquakes prompted expressions of mahi aroha – work done by Māori (Indigenous peoples of Aotearoa New Zealand) out of a love for the people – in the emergency context of a natural disaster. Similarly, the Covid-19 level 4 lockdown that began in the last week of March 2020 showcased Māori caring for one another in the context of a pandemic. Whether people were paid or unpaid, out in their communities as essential workers or broadcasting via the internet from their living rooms and kitchens, Māori around the country engaged in mahi aroha. While celebrating the capacity of Māori to move swiftly and effectively to care for others, the past two decades have seen an overall decline in the time Māori have been able to devote to mahi aroha, particularly voluntary work. It is proposed here the decline in Māori home ownership and access to secure, affordable housing is a key challenge to Māori capacity for mahi aroha. It is therefore timely to consider Māori responsiveness during times of crisis and how access to housing might help ensure that this capacity continues into the future.

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## Introduction

Māori are a collective people whose reality is relationships (Marsden 2003), and whose sense of self is interconnected with other people, with the environment and with the cosmos (Rua et al. 2017). It is not surprising then that Māori endurance and survival throughout the colonial context of the past 200 or so years has been a collective endeavour, as people have drawn on traditional institutions (e.g. whānau, hapū, marae, Iwi) and more recently pan-Māori organisations (e.g. Māori Women's Welfare League) for support and hope (Tennent 2018). After the second world war, for example, Māori moving to the city purposefully built and strengthened whanaungatanga (kinship relations), with this providing a foundation for socialising, religious and cultural activities, and employment opportunities (Williams 2015). According to Ranginui Walker (2004), the formation of Māori voluntary associations (e.g. religious, cultural, sporting, tribal, and benevolent organisations) during in the early days of urbanisation enabled Māori to adjust to urban life as 'the essence of Māori voluntary association is group

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membership with the common goal of promoting the kaupapa [agenda] of perpetuating Māori identity, values and culture' (p. 199).

Fast forward to 11:59pm on 25 March 2020, when Aotearoa New Zealand went into a country-wide level 4 lockdown to prevent community transmission of Covid-19. Māori recognised that the kaupapa of sustaining Māori vitality was under threat because of their knowledge of the devastating impact of previous epidemics and pandemics on Māori communities. Introduced epidemic diseases, along with social change and dispossession, caused steep declines in the Māori population in the early days of colonisation (Anderson et al. 2006). What began in Aotearoa with venereal disease in the 1770s, soon included tuberculosis in the early 1800s, followed by typhoid, measles, dysentery, influenza, etc. – all wreaking havoc on the Māori population well into the twentieth century (Cram et al. 2019). Each wave of disease provoked actions by the colonial government that were largely motivated by reducing the impacts of epidemics on Pākehā [New Zealand Europeans] communities (Day 1999), with little acknowledgement that Māori were more at risk because they were immunologically naive (Hanham 2003). Instead, Māori were blamed for epidemics because of their poor living conditions, sociality and customs (Rice 2018), and were often denied access to health care (Dow 1999).

During the 1913–14 smallpox epidemic, for example, Māori could not get access to the smallpox vaccine as Pākehā in urban centres were prioritised for vaccination. In addition, some doctors were unwilling to travel to rural settlements and Māori were not allowed to travel to get vaccinated because they could not produce a certificate of vaccination (Day 1999). The restrictions placed on Māori during this epidemic and the blame and fear of Māori provoked by newspapers had serious consequences for Māori economic activity. Demands for Māori produce and Māori labour declined, and many Māori were prevented from leaving their settlements to work or to buy provisions. Likewise, schooling was disrupted for Māori children as the Education Board gave teachers the authority to exclude children on health grounds, including those who were not vaccinated. Some schools were closed even though the disease was not present, merely because they were attended by Māori children (Day 1999).

Unsurprisingly, the estimated 2000 cases of smallpox during the 1913–14 epidemic, including 55 deaths, were mostly among Māori. The 1918 influenza pandemic was even more devastating, with around 2500 Māori dying. This death rate was 7–8 times greater than for Pākehā because 'Māori were a socio-economically depressed minority, isolated from and effectively excluded from the health-care system' (Pool 1991, p. 118). Thankfully, Anderson (2007, p. 144) writes that even historian efforts to discount the impact of infectious diseases on Indigenous peoples as somehow 'the natural result of "ecological imperialism"' have now been discounted as such rationalisation fails to consider the effects on health and social organisation of unnatural colonial events.

Māori concerns about the potential of Covid-19 to once again devastate their communities were soon confirmed by Māori health researchers (King et al. 2020). Modelling of the infection fatality rate (IFR) from Covid-19 resulted in an estimated IFR for Māori that was conservatively 50% higher than that for non-Māori (Steyn et al. 2020). The researchers took into account that the pandemic could potentially 'intensify existing social inequities that result from colonisation and systemic racism' (Plank et al. 2020, p. 1). Throughout the country, this same concern spurred Māori into action to ensure Covid-19 did not result in yet another wave of disproportionate illness and death for

whānau. Māori essential workers exhibited *aroha ki te tangata, he tāngata*, defined by Mead (2003, p. 359) as ‘a person concerned about people who wants to help whenever possible’. Their actions within their communities demonstrated the ‘economy of affection’ that underpinned traditional Māori society, the traces of which continue to ‘resonate in contemporary Māori beliefs and practices’ (Henry and Pene 2001, p. 235) and have positive repercussions for society as a whole (Robinson and Williams 2001).

This discussion paper explores the concept of mahi aroha – work done out of a love for the people – to describe the actions of Māori during such times of crisis. A description of mahi aroha is followed by an overview of its expression during the 2010–11 Canterbury earthquakes. This sets the scene for an exploration of mahi aroha during the first Covid-19 lockdown period in early 2020. The challenge of the rising cost of housing to Māori capacity for mahi aroha is then canvassed, to spark consideration about how to ensure the future vitality of Māori collective responsiveness in times of crisis.

## Mahi aroha

Aroha is a sacred power that emanates from the gods ... A person who has aroha for another expresses genuine concern towards them and acts with their welfare in mind, no matter what their state of health or wealth. It is the act of love that adds quality and meaning to life. (Barlow 1991, p. 8)

Mahi aroha is described as part of Māori cultural identity and sense of self-worth. In performing mahi aroha people are upholding the mana of others, and through their actions their own mana is enhanced (Edwards 2010). Mead (2003, p. 29) writes that ‘personal and group relationships are always mediated and guided by the high value placed on mana’. Every activity is therefore linked with the maintenance and enhancement of mana. Mana has a range of meanings including authority, prestige and power, and uniqueness (Williams 1971). Not only is it important for Māori to have the power and authority to define and safeguard their knowledge and environment, it is equally important to be able to live in authentic ways that uphold the integrity of others. Mana is, in turn, at the heart of mana-ā-ki or manaaki – to show kindness or respect to others, and manaakitanga – hospitality (Barlow 1991; Mead 2003).

The importance of mana is embodied in the Office for the Community and Voluntary Sector’s (OCVS) (2007, p. i) definition of mahi aroha; namely ‘unpaid activity performed out of sympathy and caring for others in accordance with the principles of tikanga [protocols] to maintain mana and rangatiratanga [self-determination]’. Mahi aroha includes (but is not limited to) work based at marae, advisory work, Treaty of Waitangi mahi, establishment and delivery of Kaupapa Māori services and projects, and supporting whanaunga (relations) and others. Participants in the OCVS’s (2007) study said mahi aroha is informed and motivated by cultural obligations, including how it benefits the wellbeing of Māori collectives (e.g. whānau, community) and strengthens whanaungatanga.

Similarly, kaumātua (elders) interviewed by Will Edwards (2010) said that service to others is a high priority. One said ‘the status of rangatira [chiefs] [is] measured by the capacity to give’ while another said ‘a good life relies upon genuinely caring for others and having positive relationships within the community. Part of that involves being readily available to serve others’ (Edwards 2010, p. 206, 207). This kaumātua added,

I have a great love for the community that I live in but to make that possible you've got to love the people that are living in that community with you. I like to make myself available for anything, any help that is required regardless. If I can do it, I will do it. (Participant 3; in Edwards 2010, p. 207)

Edwards (2010, p. 278) concluded that work that is undertaken out of a love for the people is 'an everyday part of life and ... consistent with whānau and Māori community responsibilities and expectations'. This everyday-ness of mahi aroha as part of the glue that maintains people's mana and strengthens collectivity is also a strong foundation for quick and decisive action in times of crisis. Those with mana in their communities tend to be in leadership roles so are well placed to guide crisis responsiveness (Mead 2003), while pre-existing relationships provide channels for identifying and responding to needs quickly. This became evident in Māori responsiveness during the Canterbury earthquakes and the recent Covid-19 lockdown.

### Canterbury earthquakes

The crisis of the 2010 and 2011 Canterbury earthquakes began on 4 September 2010 with a 7.1 magnitude earthquake. This and the subsequent cycle of earthquakes in the region, including four other major earthquakes, ultimately resulted in the loss of 185 lives, injuries to more than 8000 people, and extensive damage to urban environments (Canterbury Earthquakes Royal Commission 2010). At the time of the earthquakes, just over 7% of the Christchurch urban population – nearly 26,000 people – was Māori (Kenney et al. 2015). Many lived in the Eastern suburbs which were the hardest hit and the least economically secure to weather the disaster. They had to rely on their 'Māori-centric networks' – including their whānau and those in their neighbourhood – over the long periods of disruption (Lambert et al. 2012, p. 235).

Te Rūnanga o Ngāi Tahu took a leading role in coordinating the Māori crisis response, under the leadership of the then Chairman, Sir Mark Solomon. This leadership was seen as a key component to the success of the coordinated emergency response facilitated by the Rūnanga (Kenney et al. 2015). The Rūnanga also leveraged their pre-existing community linkages, internal infrastructure, relationships with a tribal network that spanned the country, and established engagement channels with government agencies (Kenney and Phibbs 2015). This included the mobilisation of health practitioners to provide health care to those in the hardest hit suburbs and the establishment of a 24-h telephone contact service to provide information and assistance more widely (Kenney et al. 2015). Māori values underpinned this response, including a love for the people. A tribal manager interviewed by Kenney et al. (2015, p. 12) said they immediately knew that 'we've got a responsibility to a whole community of people, that we need to ensure they know that we're here for them, and available to assist'. Kenney et al. (2015) describe the response as Māori using their collective experiences to facilitate coping and resiliency that spanned hazard mitigation, disaster responsiveness and recovery.

Resources were stored, packed and distributed by volunteers working at the Wigram operational base of Te Rūnanga o Ngāi Tahu. Māori institutions and organisations (e.g. Kura Kaupapa Māori, marae) also enabled the coordination and distribution of support (Lambert 2013). Once they had passed post-quake building inspections, marae became

important hubs from which volunteer groups, including Māori wardens, Red Cross and Christchurch City Council, coordinated their activities and fanned out into the city (Lambert 2013). The Māori Wardens, for example, door knocked and delivered food, water and other resources (e.g. baby clothes gifted by Tauranga Iwi) to those in need. Marae also became safe havens, extending hospitality to community members and shelter to those displaced from their homes by the earthquakes.

A lesson from the 22 February 2011 earthquake is about the empowerment of volunteers who can connect with community and respond on the ground. Lambert et al. (2012) describe comments that Māori are better at this because they are used to self-sufficiency (often in the face of poverty) and are agile and innovative (e.g. figuring out how to get to tangi). However, tikanga about face-to-face manaakitanga stretched whānau in the post-earthquake context, where many were struggling just within their own households. Instead, social media came into its own as a way people could remain connected both locally and internationally. Values of manaakitanga and whanaungatanga were therefore enacted in ways that were manageable and realistic for people, with the authors concluding that 'Maori resilience is nuanced, place based and culturally attuned' (Lambert et al. 2012, p. 239).

Overall, the Canterbury earthquakes prompted immediate and coordinated 'culturally-attuned collective responses' (Lambert 2013, p. 20), that put into action 'cultural technologies' (Kenney et al. 2015, p. 14) to support collective resilience and restoration. People were united and coordinated in their responsiveness, in a show of kotahitanga (togetherness) that enacted kinship obligations in times of disaster and need and gave full expression to mahi aroha and Ngāi Tahu's host responsibilities (Kenney and Phibbs 2015). However, the demands of officials (e.g. reporting) were often seen as being in conflict with what was needed on the ground (e.g. finding and sitting with frightened people) (Lambert and Mark-Shadbolt 2012), and highlights the risk of assessing Māori responsiveness in the face of disaster using mainstream criteria about what should be happening (Lambert et al. 2012).

Fitting Maori communities for future disasters needs to concentrate on clarifying how Maori response(s) coordinate among Maori, and work in within the wider and pre-dominant non-Māori response. The vulnerability of Maori to future disasters through ongoing economic marginalisation cannot be overstated. (Lambert and Mark-Shadbolt 2012, p. 246)

## **Covid-19 lockdown**

Beginning 25 March 2020, the Covid-19 level 4 lockdown (the highest alert level, where people had to remain in their household 'bubbles') lasted five weeks. It was followed by two weeks of level 3 lockdown (when people could slightly extend their 'bubbles'), then nearly four weeks at level 2 (when most people could return to work or school with social distancing requirements in place), and finally a return to level 1 (freedom to move about, return to work and school, and assemble without social distancing) at 11:59pm, 8 June 2020. While the level 3 and 4 lockdowns were reasonably brief, when it began no-one knew how long level 4 would last.

In appreciation of the increased vulnerability of Māori during this time – both to the coronavirus and to the hardships caused by pre-existing conditions such as poverty and precarious housing – Māori quickly swung into action.

Across Aotearoa New Zealand, iwi, health and community organisations have made big and small decisions with or without government support to defend their areas from community outbreak and to assist their people in hardship. (Parahi 2020, p. 1)

Gatherings at marae were seen as potential hotspots for the spread of the coronavirus and some hapū and marae committees took the hard step of closing their marae. This was a difficult decision, particularly because of its impact on whānau who experienced the loss of loved ones during the lockdown and would otherwise have held tangi (funeral rites) at their marae (Parahi 2020). When marae remained open the guidance from the New Zealand Māori Council (2020, p. 7) about tangi was about social distancing, mask wearing, and hand washing, with the Council saying, ‘Tangi is something that must continue, and our only advice is to remain alert, calm and follow the available health advice’. In order to keep people safe, many marae adapted their tikanga and kawa in the face of the pandemic (Hayden 2020); for example, using ‘long-distance’ options as alternatives to hongī (e.g. the Kahungunu Wave). Ultimately the health advice was for the cessation of tangi under the level 4 lockdown, with a resumption under level 3 but with a limit of 10 attendees. When this limit was left in place for level 2, a backlash from Māori led to the government introducing a ‘rolling’ tangi limit that would allow more people to attend. McMeeking and Savage (2020) write that government guidance about tangi and other Māori practices needed to more fully recognise Māori adeptness at cultural adaptations based on a commitment to doing what was tika (correct).

Many hapū and communities also took steps to keep people safe by staying contained and/or isolated during the level 4 and 3 lockdown period. They used checkpoints to ensure that only locals entered their community as a way to prevent the spread of the coronavirus. Pihama and Lipsham (2020) write that the checkpoints were on the boundaries of the rāhui (prohibition) that Māori had placed on their communities. Barlow (1991, p. 105) defines rāhui as ‘a form of tapu restricting use ... If a place is under that ritual restriction, access to it is forbidden to unauthorised people’. Non-residents were therefore asked to turn around at checkpoints and go back the way they had come (Jones C. 2020, p. 1). The checkpoints were staffed by volunteers and often operated with the cooperation, and at times the presence, of the police. Tina Ngata, who (wo)maned one of the Ngāti Porou checkpoints, said ‘We’re aware our whānau who volunteered to do this have taken a certain level of risk themselves. We feel not being here is a greater risk, because tourists will still continue to come through’ (Strongman 2020, p. 1). While checkpoints also gained support from local councils, they were a point of contention in political circles as Members of Parliament debated the rights and wrongs of Maori taking this step (Hurihanganui 2020). Academic Steve Elers (2020) enquired about the vetting of those manning checkpoints after a report that gang members were assisting. While Elers explicitly stated he was not ‘anti-Iwi’ others named similar comments as racism and actively supported the rights of Māori, including gang whānau, to undertake this mahi aroha (Hurihanganui 2020; McMeeking and Savage 2020).

Many individuals and whānau who were confined within their household bubbles took to social media to share their expertise and knowledge, and encourage and uplift people. Connie and Tony Hassan, for example, in Kaitaia shared waiata and karakia online through the lockdown, to contribute to ‘collective strengthening’ (Perich 2020,



p. 1). Kirsten Holtz from Whangarei launched Mumma's Kitchen on Facebook and Instagram during lockdown to show people that 'healthy kai made easy' was within their grasp as well as providing other useful household tips and advice (e.g. composting) (Nathan 2020). There were many, many examples of whānau distributing manaakitanga across their social networks, and many were profiled by Te Ao Māori News. Māori celebrities also joined in, serving up te reo lessons that embraced diverse topics from storytelling to games (McLachlan 2020). All this served to encourage others into this mahi aroha, as they realised that they too had something to share with whānau during lockdown. The outcome was a vast, distributed web of mahi aroha that shored up people's collective resilience to endure the lockdown.

Māori and Iwi organisations also leveraged their networks to quickly mobilise support for their communities. McMeeking and Savage (2020, p. 38) write, 'these distributional networks enact manaakitanga and reflect an intrinsic obligation on the part of these organisations' that is sourced from tikanga. This included the unlocking of government funding. In mid-April, an extra \$15 million of government funding for the three Whānau Ora Commissioning Agencies was announced. The Agencies then worked with wholesale suppliers to ensure that whānau, especially kaumātua, had kai packs and winter packs (Te Ohu Kaimoana 2020). As Whānau Ora services and organisations were deemed essential services during the lockdown, other resources to support whānau could also be deployed by Whānau Ora and Māori health providers (Whānau Ora Commissioning Agency 2020). The Whānau Ora Commissioning Agency arranged wellbeing checks for whānau as well as the delivery of hygiene packs to whānau, with a goal of delivering 120,000 packs by the end of April 2020 (Whānau Ora Commissioning Agency 2020). In Te Waipounamu, Whānau Ora navigators supported 800 whānau with kai and 600 with paying their power bills, as well as delivering over 20,000 hygiene packages (Te Ao – Māori News 2020).

An additional \$30 million was also made available by government so that health providers could provide a telehealth service alongside financial assistance to whānau to ensure their health needs (e.g. prescriptions) were met. The funding was also intended to ensure the continuity of in-home care for kaumātua (e.g. food parcels, resources) (Te Ohu Kaimoana 2020). Northern Region DHBs, for example, partnered with Iwi and Māori health providers to deploy 120 new community health workers (in half-time positions) as part of a Ngā Kaimanaaki service to support whānau wellbeing (i.e. that whānau are 'safe, protected and well in their homes and communities') (Waitemata District Health Board 2020, p. 1).

The kaimanaaki are made up of community leaders and members who will boost the Northern Region DHBs' existing Māori health workforce and services in the community ... With guidance from Māori clinical leadership, the kaimanaaki will engage with some of the most vulnerable whānau and communities across Auckland and Northland (Waitemata District Health Board 2020, p. 1)

In many places, health care deliveries included immunisations for hapū (pregnant) women and for kaumātua (Maniapoto Māori Trust Board 2020). A midwife undertaking this work in Hawke's Bay described how this also provided an opportunity to check that kaumātua were okay. She also helped some shower as they had not been getting their usual support visits (Te Huia B, pers. comm.). Māori and Iwi health organisations

were pivotal to the achievement of equity for Māori for flu vaccinations for 65+ year olds in many district health board regions (Dewes 2020). Kaumātua were also phoned and/or visited, often by multiple parties, to check if they needed any support and/or to simply chat and so they are not left isolated and lonely. This essential work undertaken by Māori workers may have given them job security, but many knew they were potentially risking their own health and the health of their whānau and possibly even their lives. Their love for the people should therefore not be discounted because they were being paid.

Many Māori and non-Māori businesses also offered support and resources to communities during lockdown. In Tauranga Moana eight Ngāti Ranginui bakers combined their efforts in a 'Rēwana-thon' and baked over 200 rēwana bread in 48 h for kaumātua (Tyson and Wright 2020). Davina Thompson made rongoā packs for distribution to whānau. She is quoted as saying, 'So when they go into the homes, they take their superpowers with them' (Hurkmans 2020, p. 1). Takitimu Fisheries supplied fish for whānau; the Ngāti Porou dairy company distributed milk; Bostock's in Hawkes Bay donated apples to communities; and Brownrigg Agriculture donated onions and squash (Parahi 2020). This support from businesses reflects the increasing embeddedness of Māori and Iwi organisations within a wide network of resources and people within their community, as well as the growing presence of Māori businesses across the country (Te Puni Kōkiri and Nicholson Consulting 2020).

Nationally, Te Rōpū Whakakaupapa Urutā – a National Māori Pandemic Group – was established by Māori health experts with the backing of the Iwi Leaders Forum. Its formation recognised that Māori experts were not going to be included in government decision-making forums or be given a platform from which to speak to Māori about pandemic safety. As Dr Rhys Jones (2020, p. 1) wrote in March 2020, 'the Ministry of Health's strategy lacks a Treaty partnership approach and has little to suggest it is appropriately addressing glaring equity issues'. Te Rōpū Whakakaupapa Urutā (2020) therefore asserted itself as a sovereign, coordinated source of reputable information for whānau, hapū, Iwi, Māori organisations. It was only when Te Rōpū Whakakaupapa Urutā was formed that real pressure also came to bear on government to give Māori a seat at the table. As Linda Smith (2020) has said, 'our own stories had to bubble up from the ground, as they were neglected from the centre'.

Overall, like the Canterbury earthquakes, Māori were quick to respond during the Covid-19 lockdown with a range of protective measures to keep the most vulnerable in their communities safe. This included the implementation and adaptation of tikanga, the leveraging of networks and resources, the repurposing of spaces, and the commitment of essential workers. Like the Canterbury earthquakes these responses were founded on Māori values and often coordinated collaboratively with other Māori and non-Maori organisations for the whole of the community (e.g. Hawe 2020). Essential workers who were able to move within communities and whānau social media champions who reached out from within their bubbles all undertook mahi aroha that brought people closer together and helped ensure collective resiliency. In both crises Māori were also able to control the messaging and support the delivery of culturally responsive news and advice. The mana of those receiving and those delivering mahi aroha within their communities was upheld and strengthened. Undoubtedly, the



pandemic responsiveness of Māori was a key reason why Covid-19 did not disproportionately impact Māori communities (Strongman 2020).

In the midst of the ongoing crisis of colonialism (Cram et al. 2019) we should celebrate Māori collective responsiveness in times of crisis, and ‘congratulate ourselves as a people – that we are still here, and that we are still fighting’ (Smith 2020). The coordinated enacting of mahi aroha by so many people during times of crisis shows that Māori remain capable of undertaking work out of a love for the people. This mahi aroha, in turn, is a protective mechanism in times of high risk. Aroha is more than rhetoric; it is a way to move through everyday life that infects Māori life-worlds and peoples paid and unpaid work-worlds. This is the sort of infection we need to encourage, nurture and sustain.

### **Housing and Māori capacity for mahi aroha**

The initial Covid-19 lockdown was relatively short, and the Māori pandemic response lasted the distance. However, it is unclear how much more pressure could have been taken by those who were out in our communities as well as by those who were confined to their household bubbles. Corlett (2020, p. 1) wrote about the impact of being in lockdown for overcrowded households; that ‘at least 400,000 people are living in stressful, overcrowded homes and the lockdown is making life for many even worse’. The lockdown also caused increased levels of isolation, anxiety and mental health issues and, for some, it triggered trauma (Mental Health Foundation of New Zealand 2020). Like the Canterbury earthquakes, Covid-19 exposed the intimate relationship between colonialism and capitalism, whereby the goods and resources of our society – constrained or abundant – continue to be unequally distributed to the detriment of Māori (Cormack 2020).

The quiet time following the initial lockdown – including our 102 days free of community transmission of Covid-19 – and the quiet times that follow localised community outbreaks are opportunities to get ready for the next crisis (Cormack 2020). Part of this should be the retention and strengthening of Māori capacity for mahi aroha (Hawe 2020), including the consideration of how to relieve the pressures so many whānau are under. Emery (2008, p. i) predicted ‘impending cultural discontinuity’ if the challenges to people’s ability to undertake mahi aroha are not moderated. In the Christchurch earthquakes it was hard for Māori whose houses had been damaged or destroyed to offer home-based manaaki to others. Similarly, anecdotal evidence from the initial Covid-19 lockdown suggests that those best placed to engage in mahi aroha were those whose housing was affordable and secure, whereas those most vulnerable were whānau impacted by housing unaffordability and tenure insecurity. This section therefore explores the sustainability of Māori capacity for mahi aroha, with a focus on affordable, secure housing.

Since the early 1990s, when Māori bore the brunt of neoliberal economic interventions that gripped the country, Māori have struggled to regain our reputation for high work-force participation rates, high home ownership rates, and our strong foothold on pathways back to economic, cultural and social security in our own land (Williams 2015). The reforms of the late 1980s and early 1990s disrupted these pathways, with the global financial crisis of 2007–8 pushing a slowly recovering Māori population backwards

again, as jobs, homes and many opportunities slipped away (Te Puni Kōkiri 2009). The legacy of the economic decision-making of national and global governments, alongside a refusal locally to implement welfare reforms that would signal a valuing of the lives of those hardest hit, have marginalised many Māori through job insecurity, housing insecurity and unaffordability, and the shattering of aspirations for home ownership and a place to live and stand tall in the land of our ancestors (Johnson et al. 2018).

In their report on volunteering and donations findings from the 2016 NZGSS, Statistics New Zealand (2017, p. 6) write, ‘people living in owner-occupied dwellings were more likely to volunteer for organisations than people who rented (30.5 percent compared with 23.7 percent)’. While this report does not detail ethnicity differences, the lower rate of home ownership among Māori compared to Pākehā might be expected to have a similar impact, with Māori having more capacity for unpaid work when they have the security of tenure afforded by owner-occupied housing. However, Māori home-ownership has continued to decline, to stand at 28% (compared to 57% for the general population). The most common alternative to home ownership is renting, and most Māori who rent live in accommodation that is owned by private landlords, trusts or businesses (Statistics New Zealand 2016) and the third or more of their income that goes to a landlord is no guarantee that their rental accommodation will protect their health (New Zealand Productivity Commission 2012) or keep them safe from harm (Barwick 1991). Rising housing costs have also seen a rise in levels of overcrowding as whānau seek to spread the cost of shelter over more income earners. As the then Housing Minister said in 2018, ‘We must acknowledge the harsh effects the housing crisis has had on Māori. They have borne the brunt of rapidly rising house prices and skyrocketing rents’ (Johnson et al. 2018, p. 2). Māori now make up over a third (36%) of the public housing tenants and are five times more likely than Pākehā to be homeless (Office of the Associate Minister of Housing 2020).

The importance of *manaakitanga*, ‘or the obligation to take care of people [that is] ... central in discharging Māori leadership responsibilities’, and *whanaungatanga* are espoused in *He Whare Āhuru He Ōranga Tangata*, the Māori Housing Strategy (Ministry of Business, Innovation and Employment 2014, p. 2). However, the housing pressures whānau experience may affect both their capacity to care for whānau members living with them and undertake *mahi aroha* outside the home (Ministry of Social Development 2020). Potentially the time many would have previously had for *mahi aroha* is now going into longer hours of paid work so that their whānau can be sheltered, clothed and fed, with whānau needs taking precedence over *mahi aroha* for larger collectives (the *hapū-iwi*) (Emery 2008). Aligned with the declining Māori home ownership rate, official statistics collected about volunteering and caretaking show a declining Māori participation in volunteering and unpaid caregiving over the past two decades. From 2008 to 2016, for example, the percentage of Māori respondents in the NZ General Social Survey who had undertaken voluntary work for a group or organisation in the four weeks prior to completing the survey had dropped from 34.2% to 28.5%. In 2008 just over two-thirds of the Māori respondents had undertaken ‘unpaid work for anyone not living with them (helping someone move, providing transport or lending transport, caregiving, or child-care, etc.) in the previous four weeks’ (Statistics New Zealand 2009, p. 2). In 2016, this had fallen to two in five Māori respondents (Statistics New Zealand 2017). This is in

spite of increased opportunities for Māori to undertake mahi aroha in culturally responsive settings (Statistics New Zealand 2020).

It is acknowledged by government that 'healthy, secure and affordable housing is fundamental to living and working with dignity', with the pandemic requiring the acceleration of government responses to Māori housing needs (Office of the Associate Minister of Housing 2020, p. 1). Te Kāhui Tika Tangata – the Human Rights Commission (2020) sets this right to a decent home within the context of the colonisation of Aotearoa, including the alienation of Māori land, and the honouring of Te Tiriti o Waitangi. They have drafted Guidelines about the expression of this right to a decent home that hold central and local government to account and call for stronger partnerships between kawanatanga (Crown) and rangatiratanga (hapū and Iwi). Insight into the rangatiratanga that Māori desire in the context of housing can be found in *He Whare Āhuru He Ōranga Tangata*.

Māori housing ... must be considered within the broader whānau ora context. The whānau ora context is relevant because of the central role that access to affordable housing and home ownership plays in promoting community health, whānau stability and Māori social well-being. (Ministry of Business, Innovation and Employment 2014, p. 1)

The right to a decent home for whānau Māori is therefore about the provision of safe, quality housing within communities, where whānau have affordable housing choices and security of tenure (Ministry of Business, Innovation and Employment 2014). This will go a long way to providing housing that whānau can consider a home, where the security of their tenure will mean that whanaungatanga and manaakitanga can be enacted as everyday happenings that can be taken for granted (Cram 2020). In this way, housing is part of securing Māori capacity for mahi aroha into the future.

## Conclusion

In times of crisis and adversity, Māori have stepped up to undertake paid and unpaid work within their communities. For many, this work is done out of a love for the people and a desire to see those who are most vulnerable in their community supported through times of difficulty and loss. Mahi aroha is underpinned by Māori values that also inform responsive adaptations to kawa and tikanga alongside the repurposing of workforces, resources and networks. Social media is widely used to support collective resiliency and inspire hope. Part of securing Māori capacity for mahi aroha into the future is the provision of homes for whānau that enable them to give effect to their love for people and their willingness to reach out and support others.

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