Cultural Identity and Mental Health Outcomes for Indigenous Māori Youth in New Zealand

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Introduction

Rangatahi Māori, the Indigenous youth of New Zealand experience significantly poorer mental health outcomes compared to Pākehā/NZ European youth. Suicide death rates for Māori youth are almost twice that of non-Māori. Despite the concerning health and social impacts of poor mental health, Māori youth are significantly less likely to be able to access healthcare when needed and frequently experience mental health stigma and ethnic discrimination.

Given the well-documented mental health disparities of Māori youth, there remains little published evidence on why these disparities persist



or how best to address them. **Measuring the impact of structural racism, inter-generational trauma and the colonising stress on youth** remains complex. The impact of colonisation for contemporary Māori youth has contributed to a breakdown of traditional cultural structures; leaving a legacy of hopelessness and loss of meaning. While there is evidence that whānau and community relationships are protective for mental health concerns there is much less evidence to support the assertion that Māori cultural identity is also protective.

Key Questions:

- What is the relationship between Māori cultural identity, ethnic discrimination, and mental health outcomes for Māori youth in New Zealand?
- Is a strong Māori cultural identity associated with improved wellbeing for Māori youth?

Mental Health 16 14 12 10 8 6 4 2 0 Depressive Symptoms Māori Pākehā

Study

The aim of this project was to identify whether a strong Māori cultural identity was associated with improved wellbeing for Māori youth. Youth'12 is a nationally representative, anonymous, cross-sectional survey of New Zealand secondary school students aged approximately 12–19 years old.

A literature review identified the components of Māori cultural identity:

- (1) Whanaungatanga (Collectivist Identity and Relationships)
- (2) Ko wai au? (Who am I?/Personal Ethnic Identity)
- (3) Ngā Taonga Māori (Precious Māori Cultural Resources)
- (4) Social Determinants of Wellbeing that might include socio-economic factors, history, colonisation, structural, interpersonal or internalised discrimination, policy, changing demographics and media representations.

For the purposes of this analysis, the two themes Ko wai au? and Ngā Taonga Māori were utilised to guide our development of the Māori Cultural Identity Scale (MCIS) utilising available questions from the Youth'12 national health and wellbeing survey questionnaire.

Three mental health outcomes were utilised in this analysis:

- (1) The 5-item World Health Organisation Well-Being Index
- (2) The Reynolds Adolescent Depression Scale Short Form
- (3) Self-reported suicide attempts

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Results

In this large, nationally representative study of indigenous Māori students from mainstream education, we found that **a strong sense of a Māori cultural identity was associated with improved wellbeing and reduced serious depressive symptoms**. Ethnic discrimination was found to confound the relationship between mental health wellbeing and cultural identity; and was associated with poorer wellbeing, increased depressive symptoms and suicide attempts amongst Māori students.

- Māori were more likely to be living in areas with higher levels of deprivation, with 80.2% of the sample living in medium or highly deprived areas.
- A quarter (25.5%) of all Māori participants reported that they had experienced some form of ethnic discrimination at school, in health care or with the police.
- 49.0% of participants reported having eight or more cultural identity variables. Younger students, female students and those living in areas of high deprivation reported higher levels of cultural identity.
- Students with strong cultural identity, more frequently reported experiences of discrimination.
- Those reporting discrimination were more likely to report poorer wellbeing.
- Although those experiencing discrimination were more likely to have attempted suicide, there was no evidence of an association between Māori Cultural Identity and attempted suicide.
- After adjusting for age, sex, socio-economic factors and experiences of discrimination, the relationship between Māori cultural identity and wellbeing became stronger (fewer depressive symptoms and greater wellbeing).

Conclusion

Māori youth mental health is complex and multi-dimensional with multiple contributing factors embedded in cultural, historical, spiritual, physiological, psychological, structural and social domains. Our findings suggest that public health programmes and services that genuinely seek to address equity for Māori youth, will ensure cultural programming and policies that are culturally and developmentally specific, as core components of any mental health and suicide prevention strategy. Given the high rates of suicide and persistent inequity, we must support the continued reclaiming of

traditional Māori knowledge and practices by contemporary Māori youth to heal, connect and give meaning to their lives as highlighted in The Turamarama Declaration. In parallel, there must be structural commitment to disrupt the status quo research, policies, programmes and service provision that perpetuate discrimination and racism resulting in inequitable outcomes for Māori. Mauri Ora.

Key Policy Implications:

- While socio-economic factors are important, experiences of ethnic discrimination may be more powerful risk factors in mediating mental health outcomes for Māori youth.
- Any future suicide prevention research must include ethnic discrimination questions to enhance understandings and contributors to suicide among indigenous and minority populations.
- Suicide prevention programmes must include core cultural identity components
- Institutional racism is damaging to the mental health of Māori youth. The privileging of knowledge from dominant culture academia using racist interpretations that systematically undermine Māori knowledge and experiences hinders efforts to introduce and expand effective kaupapa Māori strategies (incorporating the knowledge, skills, attitudes and values of Māori society), and must be challenged through anti-racism praxis.

To find out more about this research, please visit:

https://www.frontiersin.org/articles/10.3389/fpubh.2018.00319/full

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