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# CULTURAL SAFETY

IN DIVERSIONAL AND RECREATIONAL THERAPY IN AOTEAROA



# KARAKIA WHAKATUWHERA

**Kia hora te marino  
Kia whakapapa pounamu te moana  
Hei huarahi mō tātou i te rangi nei  
Haumi ē, hui ē, tāiki ē!**

May peace be widespread  
May the seas be as flat as pounamu  
To provide a path for us today  
Join, group, and affirm



# PEPEHA- ABOUT ME



- Lecturer at Kalandra Ed Group- specialising in DRT, MHA, DEM and PAL
- Registered DRT and Board Member of the NZSDRT
- Raised in Hawkes Bay, Living in Auckland
- Māori and European Heritage
- Happily Married, with two cats



# PRESENTATION OVERVIEW

- Defining Cultural Safety and its importance
- History of Aotearoa
- Impacts of Colonisation
- The Face of Cultural Safety in Aotearoa
- So What Now?



# WHAT IS CULTURAL SAFETY?

Cultural safety broadly means ensuring that the various perspectives and preferences of people are known and respected.

As diversional and recreational therapists it means you will:

- Be *proactive* in learning about people in your care
- Be *flexible* as some of your own assumptions might be not be applicable
- Be *friendly* as this helps protect yourself and your organisation from accusations of malice



# WHAT IS CULTURAL SAFETY?

Cultural safety is NOT:

- Assuming someone of a certain culture subscribes to every common or traditional practice of that culture
- Memorising cultural facts and figures
- Recognising only indigenous cultures as 'having culture'



# WHY IS IT IMPORTANT?

We work with vulnerable communities, many people in care have few people who visit and show care for them, as a professional employee you are expected to practice care.

When we are culturally safe it encourages people to feel comfortable, to feel seen, and to feel valued.

Cultural safety can greatly impact the health and wellbeing outcomes of our clients. Poor cultural safety can lead to severe consequences, including avoided healthcare, misdiagnoses, preventable deaths, and entrenched health inequities for marginalized communities. These consequences arise from actions and systems that diminish, demean, or disempower individuals' cultural identities.

*Lets look at an example:*



# KATARINAS EXPERIENCE

“The staff assumed that because i am Māori, i must celebrate Matariki. So when the time came around, they decorated my space with stars and taniwha. This made me very uncomfortable because i don’t celebrate holidays that have ties to other gods, even though i am proud of my Māori hertiage, my religious beliefs are more important to me, and the staff, though well meaning, actually caused a situation that made me feel more isolated from my culture and the care team”

-Katarina, Mental Health Support Care



# AOTEAROA- A BRIEF HISTORY

- Aotearoa New Zealand, has a rich history that predates European contact. Before colonization, the islands were inhabited by the Māori, who arrived around the 13th century from Polynesia. Māori society was organized into tribal groups called iwi, with a strong connection to the land (whenua), and they developed unique customs, language, art, and traditions. Their way of life was deeply rooted in fishing, hunting, and agriculture, with a rich oral history and complex social structures.
- In the early 19th century, European explorers and traders arrived, leading to increased contact, trade, and eventually, colonisation. This period brought significant changes, including the introduction of new technologies, diseases, and land conflicts.
- The Treaty of Waitangi was first signed in 1840 between the British Crown and Māori chiefs. It aimed to establish a legal framework for New Zealand's governance while recognizing Māori land rights and sovereignty. However, differing translations of the treaty led to disputes and land loss for Māori over the following decades.



# IMPACTS OF COLONISATION

- The colonisation of New Zealand had profound and lasting impacts on Māori culture and lifestyles. Throughout the decades, Māori experienced significant land loss due to land confiscations and unfair treaties, which disrupted their traditional way of life. This led to social dislocation, economic disadvantages, and a decline in language and cultural practices. Colonisation also introduced new diseases, and invasive species, causing population declines and long-term health challenges.
- Over time, these impacts contributed to disparities in health, education, and economic opportunities for Māori. In healthcare, Māori often faced barriers such as language differences, cultural misunderstandings, and systemic biases, which affected the quality and accessibility of health services.



# OVERSIMPLIFIED

*Imagine we are in the early 13<sup>th</sup> century, arriving in a new land with our families.*

*To survive we need to settle in a place that has food, water and natural resources we can use to build shelter, weapons and other supplies.*

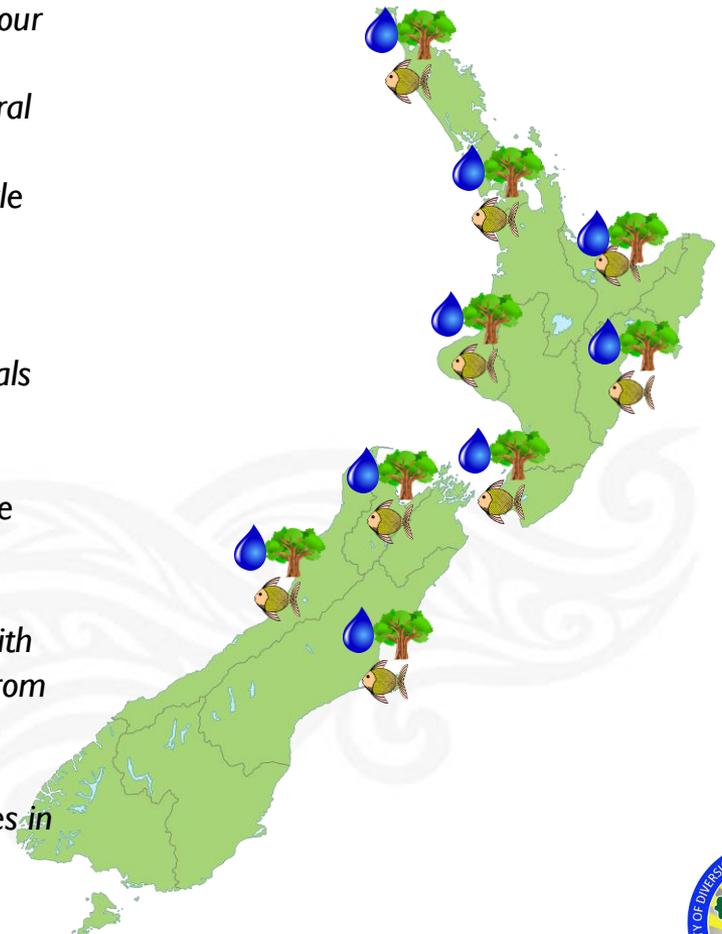
*We develop these areas for generations, creating a culture and lifestyle with the land.*

*Fast forward 600 years. The British immigrants are arriving in large numbers and wanting to establish 'civilized' townships, schools, hospitals and governments.*

*Which areas do you think they would focus on? The wild bush? Or the developed/developing areas with easy access to needed resources?*

*This effectively pushed the Māori into these underdeveloped areas with limited access to resources. Creating generational poverty, isolation from modern medicine, education and career opportunities.*

*This socioeconomic position led to poor health and unhealthy coping mechanisms- ultimately causing a trapped mentality for many families in Aotearoa.*



# HOW DOES THIS AFFECT US?

Working in healthcare today, you see the disparities between Māori and Non- Māori service users. Some common features include:

- Māori are 1.7x more likely to die overall, 2x more likely for heart disease, 1.5x for diabetes, and face much higher rates for lung cancer and poorer dental health.
- Māori are currently under-represented in Aged Residential Care (ARC) facilities, making up approximately 3% of the population in such care, despite comprising 8% of the population aged 65 years or older.
- Māori are underrepresented in the New Zealand health workforce, making up approximately 8.5% of the total health workforce despite occupying about 17.8% of the general population



# CULTURAL SAFETY IN DRT AOTEAROA

Apply principles inspired by Te Tiriti Ō Waitangi

## **Principle #1**

*Tino rangatiratanga* - enabling self-determination over health decisions, recognising the right to manage personal and cultural interests, and affirms the right to develop, define and deliver services and activities according to personal choice.

## **Principle #2**

*Partnership*- DRTs work together with service users with the mutual aim of improving health outcomes with an agreed common purpose, interest and cooperative approach ensuring that the integrity and wellbeing of both partners is preserved.



# CULTURAL SAFETY IN DRT AOTEAROA

Apply principles inspired by Te Tiriti Ō Waitangi

## **Principle #3**

The DRT workforce recognises that health is a taonga (treasure) and acts to protect it by, recognising that Māori health is worthy of protection. Ensuring that health services and delivery are appropriate and acceptable to individuals and their whānau.

## **Principle #4**

The DRT workforce recognises the citizen rights of Māori and the rights to equitable access and participation in health services and delivery at all levels, facilitating the same access and opportunities for Māori as there are for non-Māori.



# CULTURAL SAFETY IN DRT AOTEAROA

## Apply Ngā Paerewa Sector Standards

I know what it means for me			I know what it means for me		
<p><b>The people</b> I participate in what matters to me in a way that I like.</p>	<p><b>Te Tiriti</b> Service providers support Māori community initiatives and activities that promote whanaungatanga.</p>	<p><b>As service providers</b> We support the people using our services to maintain and develop their interests and participate in meaningful community and social activities, planned and unplanned, which are suitable for their age and stage and are satisfying to them.</p>	<p><b>The people</b> I feel the environment is designed in a way that is safe and is sensitive to my needs. I am able to enter, exit, and move around the environment freely and safely.</p>	<p><b>Te Tiriti</b> The environment and setting are designed to be Māori-centred and culturally safe for Māori and whānau.</p>	<p><b>As service providers</b> Our physical environment is safe, well maintained, tidy, and comfortable and accessible, and the people we deliver services to can move independently and freely throughout. The physical environment optimises people's sense of belonging, independence, interaction, and function.</p>

I know what it means for me		
<p><b>The people</b> I work together with my service providers so they know what matters to me, and we can decide what best supports my wellbeing.</p>	<p><b>Te Tiriti</b> Service providers work in partnership with Māori and whānau, and support their aspirations, mana motuhake, and whānau rangatiratanga.</p>	<p><b>As service providers</b> We work in partnership with people and whānau to support wellbeing.</p>



# CULTURAL SAFETY IN DRT AOTEAROA

## Kāore

- × Sit on eating surfaces or directly on pillows
- × Touch head without permission
- × Cross a room while someone is speaking
- × Step over another person
- × Misuse or abuse natural resources
- × Pass food over someones head

## Āe

- ✓ Use Te Reo
- ✓ Ask permission to change, touch or dispose of body parts or fluids
- ✓ Return nature to nature
- ✓ Take great care with personal treasures such as Pounamu
- ✓ Engage natural remedies and recreations



# TAKE ACTION- THE SECRET TO CULTURAL SAFETY

## ■ Embrace Training Opportunities

-Crucial for addressing significant health inequities, especially for Māori, by making practitioners self-reflective about biases, acknowledging power imbalances.

## ■ Appreciate the Experiences of Others

-Improves patient outcomes, building trust, and reducing disparities, as it leads to better communication, culturally competent care, and more effective problem-solving.

## ■ Don't Assume

-Broad (often rooted in stereotypes) inaccurate generalizations about a person based on their culture poses significant risks to communication and therapeutic relationships.

## ■ Ask Questions

*-Cultural Humility is the Secret to Cultural Safety.*



# CLOSING KARAKIA

**Kua mutu ā mātou mahi  
Mō tēnei wā  
Arohanui mai mātou katoa  
ō mātou hoa  
ō mātou whānau  
Āio ki te Aorangi.**

Our work is finished  
For the moment  
Love to us all  
Our friends  
Our families  
Peace to the Universe.



THANK YOU FOR  
JOINING!  
HE PĀTAI?



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