# Te Whare Hīnātore

Shiloh Groot and Jennifer Sarich



A Kaupapa Māori review prepared for Te Tāpui Atawhai, funded by Ministry of Housing and Urban Development





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#### Te Whare Hīnātore & Te Tāpui Atawhai – The Auckland City Mission

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# The Power of Pūrākau: Hīnātore

As told within the pūrākau (story) "I noho tata pu ngā atua" by Dr Diana Rangihuna and Tohunga Mark Kopua <sup>(1)</sup>, as transmitted verbally to Tohunga Kopua from Moni Taumaunu (Tohunga Whakairo) and Rangiahuta Paratene (Tohunga Karakia).

"I noho tata pu ngā atua" commonly abbreviated to 'I noho tapu ngā atua', can be translated to 'The gods were in a state of restriction'. The pūrākau detailing the separation of Papatūānuku (earth mother, generative foundation of all life) and Ranginui (sky father, the vault of the heavens), describes the earliest narrative of love, separation, conflict, loss, and hope. These foundational tūpuna had many children, well over seventy, who existed between the vast bodies of their parents, who were locked together in a lover's tight embrace. The children grew increasingly frustrated by the lack of space, restricted in their ability to flourish, and grow. Indeed, notions of 'tapu' are derived from this pūrākau, which describes a state of restriction.

Within a period of time, known as 'Te maramatanga namunamu', a glimmer of light appeared, faint and barely noticeable at first. The children of Papatūānuku and Ranginui, all of whom were atua (ancestors with influence over a particular domain), gradually became aware of her light. Their curiosity grew, the unknown source of light proved to be captivating, an anomaly in the darkness without end. Her name was Hīnātore, the 4th born daughter of te whānau mārama – the family of light.

Some were enticed by her light, others viewed it with unease. Those atua who feared the light were resistant to change as it represented the loss of control over all that was familiar. One of the atua, Whiro, urged his siblings to ignore the light. He wished for them to remain within their state of restriction, the dark realm, for that was his domain. All fear has a whakapapa or genealogical layering that can be traced back to this pūrākau, where fear of the unknown can lead to stagnation of one's oranga or wellbeing. Yet, in others she evoked curiosity, namely Uepoto - the atua of curiosity, who nudged his siblings to seek knowledge of Hīnātore. The light represented the seeds of hope; the potential to overcome their struggles by searching for meaning within the hīnātore. From this story Hīnātore and 'potential' have become irrevocably intertwined.

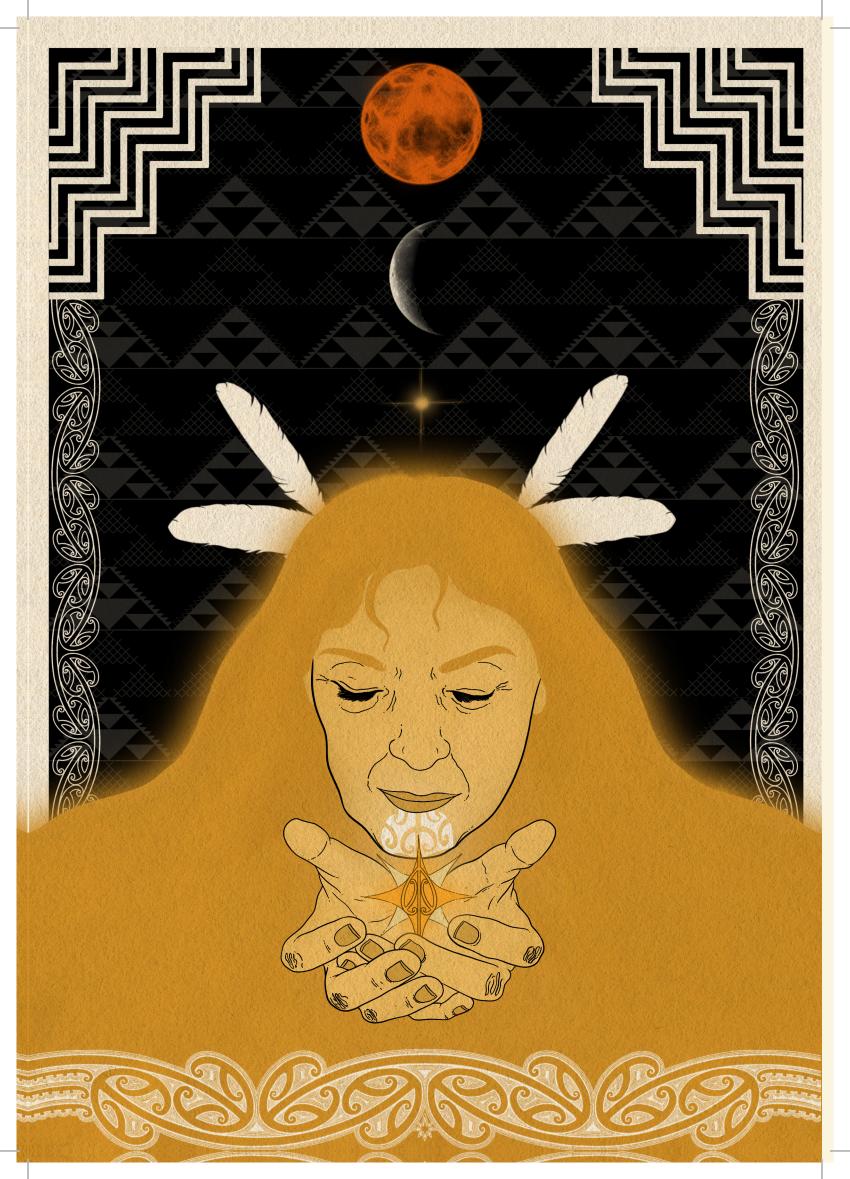
These conflicting perspectives led to a fierce debate or battle, with two siblings, Tane and Whiro, leading opposing sides. Tane features in many pūrākau that, for Māori, bear relevance in our everyday lives. He is known by many names - Tāne-mahuta as atua of the forest, Tāne-te-wānanga as the bringer of knowledge, and Tāne nui-a-rangi as bringer of higher consciousness. True to his guardianship over these domains, Tane reasoned that to resolve the uncertainty Hīnātore had introduced into their state of being, more light was needed to illuminate the situation. They must separate their parents so that the children could see, and breath, and live. Ultimately, Whiro was defeated and Tane won favour from the atua who remained curious of the light's potential.

Light rushed in as Tane began to separate their parents. Quickly Tane realised he could not do this alone as his father would not let go of his love for Papatūānuku. He called to his siblings and sought their support. First, he sought assistance from Paiaterangi who would provide karakia to complete the task. Tane called again for assistance as he knew he would need something to prop his father up. He likewise knew the pou or the pillars needed for this task would come in the form of winds. However, his brother, Tawhirimatea, the atua of winds, did not agree with the separation. Tane turned to Huruteaarangi, the feminine atua of winds, to provide him with the pou. Huruteaarangi agreed and presented four of her children; two daughters and two sons. These four winds were placed at the four corners of the sky and Paiaterangi once again resumed karakia to affirm them in their place.

The parents were then separated. This then ended the state of tapu or restriction, from which came 'noa'. The word noa can be understood by attending to its respective parts, 'no' meaning 'from' and 'a' meaning 'light'. The collective curiosity amongst the atua proved too powerful, and they overcame their fear and pursued the gifts Hīnātore offered, resulting in the opening of a new world - a world of light, knowledge, infinite potential, and hope.

**Pūrākau are powerful.** This pūrākau is intimately interwoven within the context and location of Te Whare Hīnātore. Within the whare, Hīnātore represents curiosity, potential and the desire for change. The use of this pūrākau for, and ingoa (name) of, this service was supported by Matua Otene Reweti of Ngāti Whātua, kaumatua (elder leader) of Te Tāpui Atawhai – The Auckland City Mission.

Hīnātore exists in the experiences of all wāhine who enter – a space of potential and healing, in what has otherwise been a world of loss, trauma, darkness and restriction. An invocation in a time of need, Hīnātore ensures that all who walk through the doors of her whare seeking support and dignity – find it.

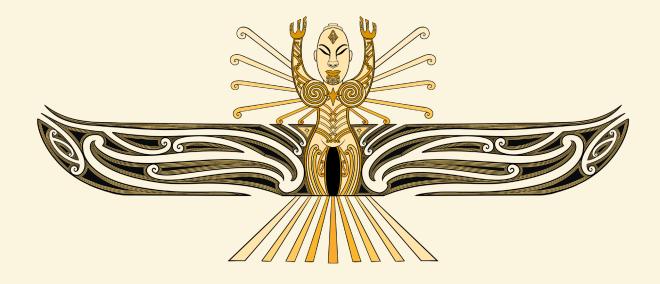


### A note on pūrākau

The word pūrākau derives from the words rākau (tree) and pū (roots). Pūrākau are considered a cultural narrative which foregrounds a shared humanity and are responsive to the cultural expectations and obligations that texture the places in which people reside as well as the metaphysical worlds that are at play in their lives. For Māori, pūrākau provide a validating and instructionally legitimate charter to live by, central to communication, building an understanding of life, and what it means to be human. As such, pūrākau are critical to the sustenance of cultural knowledge and practice, just as light, soil and water are to the trees that adorn Papatūānuku<sup>(2)</sup>.

Pūrākau serve multiple purposes in the everyday lives of Māori. They support language revitalisation; connect cosmological narratives into a cohesive whole; use whakapapa to make connections and to provide meaning between chronological episodes <sup>(3)</sup>. Further, we can understand how such pūrākau dealt with deep human emotions and complex societal issues including violence, murder, love, challenging traditional hierarchies, the power of wāhine, and the sacredness of knowledge and cultural practices. This elevates the pūrākau beyond the level of simple children's stories or exotic 'myth'.

In 1996, while employed as a psychiatric nurse, Dr Diana Kopua developed Mahi a Atua, a Māori therapeutic intervention that involves the sharing of pūrākau with whānau members to provide support, and to help reconnect with Māori ways of being, principles, and practices <sup>(4)</sup>. Those who have engaged with Mahi a Atua as a practice have suggested that this taonga has helped shift perspective and has created movement and provided healing. As such, the spiritual qualities and practical wisdom embedded in pūrākau are considered immensely valuable to the therapeutic process. **Of relevance to the current review is how pūrākau add value to the therapeutic setting of Te Whare Hīnātore providing a guideline for interactions between people, organisations and institutions.** 





# **Executive Summary**

This Kaupapa Māori research project entails a community participatory and co-collaborative review of Te Whare Hīnātore, Tamaki Makaurau Auckland's first Kaupapa Māori-led women's transitional housing service run by Te Tāpui Atawhai – The Auckland City Mission. This review is in collaboration with Pūrangakura Ltd and the Ministry of Housing and Urban Development. As such the project is of relevance to wāhine<sup>a</sup> and whānau as well as across government ministries, leading service providers (i.e., Te Tāpui Atawhai – The Auckland City Mission), therapeutic practice and other entities (i.e., research bodies). This research is specifically focused on the needs and aspirations of Raukura<sup>b</sup> in transitional housing accommodation and aims to better understand their lived experiences, stories, and the intergenerational implications of this service for whānau. The voices of kaimahi, service providers, are interwoven throughout to provide insight into the successful delivery of Kaupapa Māori-led services.

The authors acknowledge the complex challenge of transformative change in the housing sector and identify pathways for collective participation and action. By partnering with Te Whare Hīnātore we have the unique opportunity to work with Raukura at various stages of reimagining home. It encompasses the vision whereby Raukura, alongside whānau, are confident, capable and have access to spaces and places and a future where they can thrive. This project seeks to provide a review of Te Whare Hīnātore that aims to:

- Document how lived experiences can be used to improve initiatives around support for Raukura accessing the services provided by Te Whare Hīnātore;
- 2. Convey a clear understanding of how Raukura engender a sense of belonging or dwelling in the world through their engagements with Te Whare Hīnātore;
- 3. Enhance broader efforts to support the inter-relational needs of wāhine accessing transitional housing.

<sup>a</sup>The reo Māori term 'wāhine' is used to refer to all people who identify as women, regardless of whakapapa Māori. This is an acknowledgement that Te Whare Hīnātore is a Kaupapa Māori-led service who extend a duty of care to all who walk through their doors and identify as wāhine seeking safety, support and dignity.

<sup>b</sup>Raukura is the preferred term for the wāhine who come to call Te Whare Hīnātore home and recognises the integrity and immense inner strength of all who do so. We will adopt this terminology accordingly. Spanning these three aims, this report documents the challenges, strengths and relationships that shape experiences of transitional housing to enhance hauora or wellbeing frameworks and the mana of wāhine experiencing housing insecurity and homelessness.

#### Part One: Research Design

The review is designed to obtain rich details regarding the lived experiences of Raukura residing at Te Whare Hīnātore and kaimahi involved in the set up and delivery of services at the whare. **The research draws on three primary data sources.** First, a systematic search of previous research pertaining to homelessness and housing insecurity for women, pathways into homelessness, and effective responses in Aotearoa New Zealand was conducted. This revealed a collection of policy documents, reports, published articles and books.

Second, all available documents were collected from kaimahi at Te Whare Hīnātore and Te Tāpui Atawhai - The Auckland City Mission and stakeholders at MHUD regarding transitional housing, the running of Te Whare Hīnātore, demographics of Raukura accessing their service, and anonymized client vignettes (n= 4) to supplement Raukura interview materials.

Third, key informant interviews were conducted to supplement the other two sources of information. Briefly, the study is designed to obtain rich details regarding the lived experiences of Raukura residing at and of the kaimahi who deliver the Kaupapa Māori-led services provided by Te Whare Hīnātore. Participants included kaimahi (n = 5) and Raukura (n = 4), total participants (n = 9), who live and work alongside each other at Te Whare Hīnātore. Participant included:

 Raukura who currently or had previously resided at Te Whare Hinātore. Three of the Raukura interviewed were nearing the end of their journey at Te Whare Hinātore, and one had transitioned into permanent housing. All were at a point in their journeys where they could reflect on their experiences of engaging the services at Te Whare Hinātore.

This is a site-based review. As such, the sample size has been kept small to reflect the unique setting of Te Whare Hīnātore, which has a maximum of 17 beds. It would also not be appropriate or ethical to recruit newly arrived Raukura. This is because they may be early in their healing journeys and have not yet had the opportunity to begin to address the impact of complex and acute trauma that brought them there. Most would also have had limited experiences engaging in the services at Te Whare Hīnātore. Therefore, a small sample of Raukura were recruited who were either exiting or had exited Te Whare Hīnātore and could provide reflections on their journeys with the service. As part of our Kaupapa Māori approach, it was critical that the research team was as unobtrusive and non-disruptive as possible to the daily running of Te Whare Hīnātore while on site. Participating Raukura were between the ages of 19-67, all were Māori and identified as wāhine.

 Kaimahi need to have worked at Te Whare Hīnātore or have direct involvement/ oversight via Te Tāpui Atawhai - The Auckland City Mission. Participating kaimahi occupied varying roles at Te Te Whare Hīnātore and Tāpui Atawhai - The Auckland Mission. These roles included the Kaiarahi (cultural lead advisor), Kai Atarau (psychotherapist), Kaiwhatu (Team Lead), General Manager, and Manutea (General Manager Māori) at Te Tāpui Atawhai - The Auckland City Mission.

Due to a lack of sustainable funding, Te Whare Hīnātore retain the bare minimum staff needed to operate its services. As such, permanent staff were prioritized over volunteer and temporary staff. Participants were wāhine Māori and one participant was wāhine Pākehā.

Additionally, an informal Zoom discussion was held with a roundtable of MHUD stakeholders to discern their role in funding the set up and operation of Te Whare Hīnātore.

Interviews and wānanga all took place in a private room at Te Whare Hīnātore (Tāmaki Makaurau Auckland CBD), unless otherwise specified (e.g. Zoom or the Te Tāpui Atawhai - The Auckland City Mission). All interview materials were transcribed and anonymised. Pseudonyms are used throughout and any identifying details of Raukura and kaimahi have been excluded, where possible. Te Whare Hīnātore as a site for the research, however, will not be anonymised and will be acknowledged in the review report. Other research activities (e.g., analyses and report writing) took place at the affiliated research centres and institutions.

### Pūrākau as a tool for analysis & report writing

Of relevance to the review report is how the pūrākau of the emergence of Hīnātore adds value to the therapeutic setting of Te Whare Hīnātore providing a guideline for interactions between people, organisations and institutions. The pūrākau of Hīnātore also provides a connective thread for structuring the report. Kaupapa Māori qualitative methods were utilised with a focus on contextually relevant information and ethical interpretations. As a site-based case study or review of Te Whare Hīnātore this necessitated an intensive research approach that would allow the research team to provide insights into the underlying processes that explain how a particular event or situation came to be. As such, this site-based review tells the reader what is unique to Te Whare Hīnātore and what can be learned and applied elsewhere.

An intensive qualitative research corpus was generated which includes up to 18 transcribed interviews, field-notes, service user demographic data, service reports and proposals, client vignettes, policy documents, reports and academic literature. Analysis was achieved through collective coding and dialogue and refined through the writing of the report, alongside a hui was held with MHUD, Te Tāpui Atawhai – The Auckland City Mission to share and workshop preliminary findings in February 2024. As part of a peer review process, a draft of the report was sent out to stakeholders to support further refinement of the analyses and write up of the report.

## **Ethical approval**

Ethics approval was obtained through the Waipapa Taumata Rau - University of Auckland's Human Participants Ethics Committee before interviews and wananga commenced (UAHPEC26279).

### Part Two: Te Whare Hinatore

Te Whare Hīnātore's model of practice follows a marae structure, where tapu, mana, mauri and wairua are taught, shared, upheld, and embedded into day-to-day practices. A marae model of care endeavors to build a home around Raukura, facilitating home-making practices, rather than simply providing shelter with rigid rules to adhere to and strict criteria for inclusion. The strength of such models are referred to in the MAIHI Framework for Action. All wāhine who enter Te Whare Hīnātore are given the opportunity to heal within a mana enhancing environment which has proven benefits for both Māori and non-Māori accessing such services.

### Pūrākau - Raukura

To better understand a marae model of care, the reader is invited to walk through the doors of Te Whare Hīnātore and to meet some of the Raukura who have resided there. The four pūrākau presented include:

*Hinerauāmoa* is a 19 -year-old wāhine Māori (Ngāti Kauwhata), residing at Te Whare Hīnātore for a period of nine months. The narrative themes of her pūrākau include: rangatahi or youth homelessness, incarceration, service provision for takataapui & LGBTIQA+ young people, tuakana & teina relationships, employment.

*Parikoikoi* is a 43-year-old wāhine Māori who has resided both at Te Whare Hinatore's first location on Union Street, and again at their permanent site on Franklin Street. Narrative themes of her pūrākau include the impacts of deep grief, addiction, state intervention and disruption, separation, service experience, friendship and solidarity.

*Marama* is a 45-year-old wāhine Māori who had resided at Te Whare Hīnātore for a period of two years, their longest staying client. Narrative themes of her pūrākau include separation from and yearning for whānau, intergenerational abuse and trauma, addiction, education, mentorship and leadership.

Wainui is a 67-year-old wāhine Māori who had resided at Te Whare Hīnātore for a period of six months before being supported to live independently. Narrative themes include aging as a wāhine experiencing homeless, intergenerational abuse and trauma, grief and suicidal ideation, engagements with emergency and transitional housing providers. The personal pūrākau of Raukura (see section above) are supplemented by anonymised client vignettes (n=4) provided by Te Whare Hīnātore as part of the reporting process for the Ministry of Justice Proceeds of Crime funding stream.

## Service delivery & demographic data

Since establishment in 2020 until March 2024, there have been 116 Raukura residing within the walls of Te Whare Hīnātore.

- Ages ranged from 19 years old 68 years old
- May 2022 to March 2024, of the 77 Raukura recorded, at least 60 had 1 or more mental or physical health diagnoses (78%), 63% (38 out of 60) had comorbid (2 or more) diagnoses. Many experience co-morbidity of disorders and half (20) of AOD cases are dual diagnosis (mental health condition existing alongside the addiction).
- A high number of referrals are received from the Department of Corrections, MSD and DHB which presents a strong rationale for a multi-agency relationship and funding streams from these ministries.
- The shortest length of stay is 2 nights. Mid-length terms of stay (around the 12 weeks mark) occur when whanau need longer before Raukura can return home after a hospital admission, or when the Raukura doesn't have complex needs and is able to transition into the community. The longest term someone had stayed was two years and one week. Longer-term Raukura continue to stay at Te Whare Hinātore as there is no other service that can meet their needs.
- The limited supply of social housing increases the period of accommodation within the service for some wāhine as the availability and cost of private rentals sits outside their financial capacity. Networking and relationships have been successfully established with Te Tāpui Atawhai – The Auckland City Mission's two recently opened permanent housing services - Home Ground Apartments and Te Ao Mārama. A relationship has been established with Home and Place (Social Housing).
- With increased support to participate in AOD/mental health treatment, legal conditions, and requirements, securing suitable accommodation; and building skills related to relationships, communication and managing daily life; Raukura have successfully increased opportunities to regain care and/or custody of their children and reconnect with whānau.

## Recommendations

Below is a brief summary of recommendations:

- The experiences of homelessness and housing insecurity are as diverse as the wāhine living it. As a result, responses to these interwoven issues must be contained within a model that offers a finely balanced service delivery that has aspects of both flexibility and structure.
- Of particular importance to this report, is the oftentimes impossibility of delivering

services that respond to Māori needs when those services are designed to address an issue defined in a way that is fundamentally inconsistent with Te Ao Māori.

- Although Te Tāpui Atawhai The Auckland City Mission as a mainstream provider provides oversight, Te Whare Hīnātore is able to successfully operate a Kaupapa Māori approach to transitional housing because it is tangata whenua-led and centred, employs dedicated kaimahi, is located within a unique physical environment that provides connection to Papatūānuku and is able to provide the cultural expertise to ensure success. The model is genuine and authentic.
- The 12-week duration of stay typical for current transitional housing provision is too limited, greater flexibility is needed to meet the unique and complex needs of wāhine with acute and complex trauma.
- The provision of housing is a critical part of the response to homelessness and housing insecurity. However, a lack of understanding of acute and complex, personal, intergenerational and historical trauma means the focus on housing is set up to fail.
   People are unable to move into or maintain permanent housing due to levels of trauma that require longer support and independent living is not always possible.
- Raukura have historically experienced poor outcomes when moving on to living arrangements that do not meet their needs and while gaps in external housing options continue to exist, this will keep recurring. There is nowhere else that can hold many of the wahine accessing support and dignity at Te Whare Hīnātore.
- A lack of sustainable funding risks understaffing which means the impact of services provided by Te Whare Hinātore are limited. Greater resourcing and funding would allow Te Whare Hinātore to expand communities of care and to reach unique populations that are currently under-served.

# Part One: Research Design

#### Secion summary:

- Document how lived experiences can be used to improve initiatives around support for Raukura accessing the services provided by Te Whare Hīnātore;
- Convey a clear understanding of how Raukura engender a sense of belonging or dwelling in the world through their engagements with Te Whare Hīnātore;
- Enhance broader efforts to support the inter-relational needs of wāhine accessing transitional housing.

This Kaupapa Māori research project entails a community participatory and co-collaborative review of Te Whare Hīnātore, Tamaki Makaurau Auckland's first Kaupapa Māori-led women's transitional housing service run by Te Tāpui Atawhai – The Auckland City Mission. This project was undertaken in collaboration with Pūrangakura Ltd and funded by the Ministry of Housing and Urban Development (MHUD). As such, this project has significant implications for wāhine and whānau as well as across government ministries, leading service providers (i.e., Te Tāpui Atawhai – The Auckland City Mission), therapeutic practice and other entities (i.e., research bodies). This research is focused on the needs and aspirations of Raukura in transitional housing accommodation and aims to better understand their lived experiences, stories, and the intergenerational implications for whānau. The voices of kaimahi, service providers, are interwoven throughout to provide insight into the successful delivery of Kaupapa Māori-led services.

The review acknowledges the complex challenge of transformative change in the housing sector and identifies pathways for collective participation and action. By partnering with Te Whare Hīnātore as embedded in place we have a unique opportunity to engage with Raukura at various stages of reimagining home and the kaimahi who support them. This Kaupapa Māori project utilises enhanced narrative interviewing techniques for generating stories. The authors a) interviewed Raukura and kaimahi who reside alongside one another at Te Whare Hīnātore to document unique solutions related to issues of transitional housing, home, belonging and sustainable social connections and b) curated and shared narratives related to the meaning of home and belonging beyond the provision of 'bricks and mortar' in response to housing insecurity and homelessness.

Creative collaborative spaces support social dynamism in real-life settings

<sup>(1, 2, 3)</sup>. Places and spaces such as Te Whare Hīnātore where people spend time actively engaged, feel attached to and find meaning are closely linked to their sense of belonging, community integration and recovery<sup>28</sup>. The undertaking of a review of Te Whare Hīnātore offers an innovative space for exploring emergent community issues, while facilitating social inclusion and a sense of belonging. As such, this project has significant implications for wāhine and whānau as well as across government ministries, leading service providers (i.e., Te Tāpui Atawhai – The Auckland City Mission), therapeutic practice and other entities (i.e., research bodies).

### Kaupapa Māori approach

Our orientation towards Te Whare Hīnātore is informed by the whakataukī or Māori proverb 'He toka tū moana' (the rock of stability that dissipates the ocean's force) <sup>(4)</sup>. Te Whare Hīnātore is a pillar of strength for wāhine who have experienced acute and complex trauma. Likewise, kaimahi are transformed through their engagements with Raukura. The pūrākau of Hīnātore must also guide our practice as a Kaupapa Māori research team. It invokes our collective humanity as people creating the time and space necessary for working with stakeholders on issues of mutual concern.

Through our previous collaborative research activities, we have developed an immersive approach to what could be termed 'culturally responsive, participative action research' <sup>(5)</sup>. Guiding research engagements are a set of core Māori cultural values and expectations. In many respects, these Māori values and expectations constitute a culturally patterned system of mutual support and engagement for researchers, participants and stakeholders. Manaakitanga refers to our duty to care for relationships and requires us to engage as ethical colleagues engaged in joint ventures with various stakeholders. Enacting manaakitanga raises the importance of whānaungatanga or engaged relationships with each other. In turn, whānaungatanga highlights the importance of kotahitanga, or a group reaching unity through consensus. Our culturally informed engagements within the community of Te Whare Hīnātore and beyond can also invoke notions of whakaiti, or service to others with humility. In working with others, we also stress the importance of hūmarie, or acting with gentleness and kindness where possible.

Kaupapa Māori research is an Indigenous-led approach to creating knowledge that foregrounds the importance of relational ethics and the lived realities and experiences of Māori <sup>(5)</sup>. To ensure these intentions were upheld a mihi whakatau and wānanga was held with community partners at Te Whare Hīnātore in early June 2023 to discuss the research plan and a hui was held with MHUD, Te Tāpui Atawhai – The Auckland City Mission and Te Whare Hīnātore to share and workshop preliminary findings in February 2024. These activities occurred alongside bimonthly MHUD meetings, and informal discussions with key stakeholders across Ministries and Te Tāpui Atawhai – The Auckland City Mission.

## Kaupapa Māori approach

There is a paucity of local research pertaining to belonging in the context of transitioning to home for wahine and, as such, there is limited exploration of tangible solutions for this

population. This report documents the challenges, strengths and relationships that shape wāhine experiences of transitional housing to enhance oranga (wellbeing) frameworks and the mana of those experiencing homelessness and housing insecurity. It encompasses the vision whereby Raukura, alongside whānau, are confident, capable and have access to spaces and places and a future where they can thrive. This project seeks to provide a review of Te Whare Hīnātore that aims to:

- Document how lived experiences can be used to improve initiatives around support for Raukura accessing the services provided by Te Whare Hinātore;
- Convey a clear understanding of how Raukura engender a sense of belonging or dwelling in the world through their engagements with Te Whare Hīnātore;
- Enhance broader efforts to support the inter-relational needs of wahine accessing transitional housing.

The review is designed to obtain rich details regarding the lived experiences of Raukura residing at Te Whare Hīnātore and the kaimahi involved in the set up and delivery of services at the whare. **The research draws on three primary data sources.** First, a systematic search of previous research pertaining to homelessness and housing insecurity for women, pathways into homelessness, and effective responses in Aotearoa New Zealand was conducted. This revealed a small collection of policy documents, reports, published articles and books.

Second, all available documents were collected from kaimahi at Te Whare Hīnātore and Te Tāpui Atawhai - The Auckland City Mission and stakeholders at MHUD regarding transitional housing, the running of Te Whare Hīnātore, demographics of Raukura accessing their service, and anonymized client vignettes (n= 4) to supplement Raukura interview materials.

Third, nine key informant interviews were conducted to supplement the other two sources of information. Briefly, the study is designed to obtain rich details regarding the lived experiences of Raukura residing at and kaimahi who deliver Kaupapa Māori-led services provided by Te Whare Hīnātore. Participants included kaimahi (n = 5) and Raukura (n = 4), total participants (n = 9), who live and work alongside each other at Te Whare Hīnātore. Participant inclusion criteria included:

 Raukura are currently or had previously resided at Te Whare Hinātore. Three of the Raukura interviewed were nearing the end of their journey at Te Whare Hinātore, and one had transitioned into permanent housing. All were at a point in their journeys where they could reflect on their experiences of engaging the services at Te Whare Hinātore.

This is a site-based review. As such, the sample size has been kept small to reflect the unique setting of Te Whare Hīnātore, which has a maximum of 17 beds. It would also not be appropriate or ethical to recruit newly arrived Raukura. This is because they may be early in their healing journeys and have not yet had the opportunity to begin to address the impact of complex and acute trauma. Some would have had only limited experiences engaging in the services at Te Whare Hīnātore.

Therefore, a small sample of Raukura were recruited who were either 1) in the process of exiting or 2) had exited Te Whare Hīnātore and could provide reflections on their journey with the service over time. As part of our Kaupapa Māori approach, it was critical that the research team was as unobtrusive and non-disruptive as possible to the daily

running of Te Whare Hīnātore while on site. Participating Raukura were between the ages of 19-67, all were Māori and identified as wāhine.

 Kaimahi need to have worked at Te Whare Hinātore or have direct involvement/ oversight via Te Tāpui Atawhai - The Auckland City Mission. Participating kaimahi occupied varying roles at Te Te Whare Hinātore and Tāpui Atawhai - The Auckland Mission. These roles included the Kaiarahi (cultural lead advisor), Kai Atarau (psychotherapist), Kaiwhatu (Team Lead), General Manager, and Manutea (Kaupapa Māori General Manager) at Te Tāpui Atawhai - The Auckland City Mission.

Due to a lack of sustainable funding, Te Whare Hīnātore retain the bare minimum staff needed to operate its services. As such, permanent staff were prioritized over volunteer and temporary staff. Participants were wāhine Māori and one participant was wāhine Pākehā.

Additionally, an informal Zoom discussion was held with a roundtable of MHUD stakeholders to discern their role in funding the set up and operation of Te Whare Hīnātore.

Interviews and wānanga all took place in a private room at Te Whare Hīnātore (Tāmaki Makaurau Auckland CBD), unless otherwise specified (e.g. Zoom or the Te Tāpui Atawhai – The Auckland City Mission). All interview materials were transcribed and anonymised. Pseudonyms are used throughout and any identifying details of Raukura and kaimahi have been excluded, where possible. Te Whare Hīnātore however, will not be anonymised and will be acknowledged in the review report. Other research activities (e.g., analyses) took place at the affiliated research centres and institutions.

# Raukura Interviews: Getting to know each other and engaging in dialogue

The one-off semi-structured interviews involved investing in kanohi ki te kanohi (face time) to build trust and a space within which open dialogue is possible. To facilitate this process, the research team worked in partnership with organisational partners at Te Whare Hīnātore who already had established relationships with Raukura. More specifically, we met with Raukura who were potentially interested in participating in a semi-informal manner to build whānaungatanga and share whakapapa, then to talk more specifically about the project, what their involvement would be, and how the information generated will be used.

Our overall intention was to address any reticence Raukura might have regarding research/ ers and to afford Raukura time to examine and query our personal, cultural, and academic credentials before deciding on their comfort with further interactions. It was important for us to take the time necessary to engage in whanaungatanga so that everyone was comfortable to proceed, or not. The interview focused on Raukura biographies, housing and service use experiences and key relationships.

Interviews were recorded on audio equipment and transcribed. Each interaction drew on participative techniques to enhance participant reflexivity regarding key situations, critical incidence, experiences of housing, and everyday wellbeing related social practices. Although we had a set interview schedule, Raukura also shaped the direction of the dialogue and spoke to the influences, places, people, practices, relationships, and the things they considered to be important. This allowed us to explore more fully home-making practices, homelessness and transitional housing as well as the links between personal experiences, local contexts, and structures to be invoked and documented.

#### Kaimahi semi-structured interviews

The authors were appreciative of the contractual arrangements and responsibilities of all who might participate. We were not seeking to record material that would bring any person or organization into disrepute or opposition. Rather, this project focused on the human side of transitional housing with a view to contributing constructively to the aspirations of Te Whare Hīnātore and Te Tāpui Atawhai – The Auckland City Mission. This aligns with the Ministry of Housing and Urban Development's strategic directions as outlined in documents such as MAIHI Ka Ora – the National Māori Housing Strategy. As such, the expertise of kaimahi who provided a caring service to Raukura in the process of reimagining home at Te Whare Hīnātore aid efforts to contribute to improvements in the system's ability to engage the dignity of 'Raukura'.

#### Pūrākau as a tool for analysis & report writing

This report opened with a pūrākau detailing the emergence of Hīnātore that would compel the children of Papatūānuku and Ranginui to separate their parents. A range of messages are embedded within this pūrākau, namely the existence of light and potential, in contrast to a state of darkness, and overcoming restriction and fear. Pūrākau have relevance in contemporary lives and are not fixed in time and space. They are determined to move and shift just as we all do within our own environments <sup>(6)</sup>. Likewise, Mātauranga Māori, or Māori ways of being and engaging in the world, constitute an ever-evolving knowledge base, rather than a stagnant pool of thought that is never rejuvenated or questioned <sup>(7)</sup>. In this report, pūrākau guides the relational ethics and principled practice through which this report was produced.

Kaupapa Māori qualitative methods are used with a focus on contextually relevant information and ethical interpretation. As a site-based case study or review of Te Whare Hīnātore this necessitated an intensive research approach that would allow us to provide insights into the underlying processes that explain how a particular event or situation came to be. As a result, cases can provide a framework for linking the general and specific through the production of 'context-bound typicalities' <sup>(8 p788)</sup>. Thick descriptions characteristic of case studies provides the reader with the opportunity to consider whether aspects of the case can be applied to another situation by enhancing existing knowledge from direct experience <sup>(9)</sup>. Or in other words, this site-based review will tell us what is unique to Te Whare Hīnātore and what can be learned and applied elsewhere.

Engaging Raukura and kaimahi in one-off interviews produced an intensive qualitative research corpus. It generated up to 18 transcribed interviews and a rich corpus of field-notes, service user demographic data, service reports and proposals, client vignettes, policy documents, reports and academic literature. This research corpus is invaluable for

developing both breadth and depth across Raukura and kaimahi accounts. Each interview constitutes a case, each of which was initially analysed in their own right. We also conducted composite analyses of particular interview topics such as the impacts of homelessness for wāhine and efforts to respond in ways that enhance their wellbeing (e.g. Kaupapa Māori service provision). Analysis was achieved through collective coding and dialogue and refined through the writing of the report. A hui was held with MHUD, Te Tāpui Atawhai – The Auckland City Mission and Te Whare Hīnātore to share and workshop preliminary findings in February 2024. To ensure academic rigour, a draft of the report was sent out to stakeholders to support further refinement of the analysis and write up of the report. This combined strategy enables us to look both within and comparatively across the cases and to draw out both contextualized and more general insights. As such, this review contributes to filling a gap in information relating to Kaupapa Māori-led approaches to transitional housing for wāhine.

# **Ethical approval**

Ethics approval was obtained through the Waipapa Taumata Rau - University of Auckland's Human Participants Ethics Committee before interviews and wananga commenced (UAHPEC26279). The greatest care has been taken to ensure that Raukura participating in this review, and all directly identifying information, is kept confidential; known only by researchers and the Raukura themselves, and not disclosed to any other party. Although kaimahi are more easily identifiable (e.g. staff profiles on professional websites such as LinkedIn and Te Tāpui Atawhai – The Auckland City Mission), names are not used, and they are instead referred to by their roles (e.g. Kai Atarau or psychotherapist).





# Part Two: Te Whare Hīnātore

#### Secion summary:

- Te Whare Hīnātore aims to assist all who identify as wāhine that are experiencing homelessness across a spectrum of housing experiences, to improve their social and psychological wellbeing, through the provision of a high quality Kaupapa Māori-led trauma informed service.
- Te Whare Hīnātore adheres to a marae model of care which endeavors to build a home around Raukura by facilitating home-making practices.
- All wāhine who enter Te Whare Hīnātore are given the opportunity to heal within a mana enhancing environment which has proven benefits for both Māori and non-Māori accessing such services.
- To better understand a marae model of care, the reader is invited to walk through the doors of Te Whare Hīnātore and to meet some of the Raukura who have resided there.
- Service delivery and demographic data of Raukura residing at Te Whare Hīnātore is provided to better understand their complex needs and appropriate trauma informed care responses.

The authors opened this report with the pūrakau of the emergence of Hīnātore. Te Whare Hīnātore refers to Hīnātore the 4th born daughter of the whānau mārama – the family of light. Within the whare she represents curiosity, potential and a desire for change. Te Whare Hīnātore aims to assist all who identify as wāhine that are experiencing homelessness across a spectrum of housing experiences, to improve their social and psychological wellbeing, through the provision of a high quality Kaupapa Māori-led trauma informed service.

#### Pilot service, initial set-up and funding

In June 2018, Te Tāpui Atawhai - The Te Tāpui Atawhai - The Auckland City Mission identified a need to provide shelter for street homeless women during the winter months. In partnership with the Ministry of Social Development, Manaaki Wahine, a 10-week pilot, was set up to deliver a night-by-night shelter commencing at 4pm and closing at 8am. The shelter offered a bed, showers, hot meals, and a place to do laundry as well to access to basic social support for women who were street homeless.

Following the Manaaki Wāhine pilot, funding was sought to provide a Kaupapa Māori-led transitional housing facility. MHUD approved funding for 3 years to cover lease costs, tenancy management, security, and non-specialist roles. And additional funding was sought and approved for implementing therapeutic aspects and transitioning to independent living from the Ministry of Justice Proceeds of Crime funding stream. Te Whare Hīnātore was first launched in 2020 at Union Street, however the initial location was not conducive to a Kaupapa Māori approach. Rooms were single occupants, windows did not open, there was no access to a mara kai or garden space, and there was a lack of communal spaces to enact practices of whanaungatanga (such as karakia). Te Whare Hīnātore was then relocated permanently to the more appropriate site at Franklin Road in 2023.

The move to Franklin Road has increased engagement with te ao Māori practices such as whanaungatanga and kotahitanga through communal living, problem solving hui (conflict resolution, creation and enforcement of rosters and schedules, gardening, cooking/ cleaning), connection to Papatūānuku (māra/māra kai/mahi māra, karakia outdoors, rongoā), mātauranga Māori (learning te reo, waiata, celebrating Matariki, sharing pūrakau relative to wāhine narratives), as well as a focus on manaakitanga upon arrival and supported to manaaki others through whakatau/hākari or kapu tī and kai. All wāhine are given the opportunity to celebrate Māori ways of being and healing within a mana enhancing environment which has proven benefits for both Māori and non-Māori.

The wāhine who take up residence within the healing embrace of Te Whare Hīnātore are referred to as Raukura. The term reflects a shared vision of leadership, hope, aspiration, and achievement. Raukura refers to the feather or plume that was traditionally worn by Māori people of rank and mana. Raukura also symbolises pride and inner strength, to support wāhine on their journey towards realising the hīnātore of their own moemoeā (dream or vision).

Resident Raukura live onsite in the whare with private and shared sleeping and living facilities, as well as participating in a structured daily routine individually tailored to work through barriers to maintaining permanent housing. All Raukura are invited to participate in the daily running of the whare, including cooking, cleaning, and sharing in activities based on community building. The length of stay is 12 weeks and for those requiring longer term support, an additional 12-weeks support is provided whereby Raukura are housed in

the Māreikura villa in an onsite flatting-like environment. Transitioning into the Māreikura villa occurs following completion of the programme and before returning to the wider community.

Te Whare Hīnātore is staffed 24 hours per day, 7 days per week. Kaiarahi (Cultural Practitioners) ensure that ongoing safety and therapeutic programmes are maintained alongside the Kai Atarau clinical team, which includes a Psychotherapist and Occupational Therapist. This model of practice follows a marae structure, where tapu, mana, mauri and wairua are taught, shared, upheld and embedded into day-to-day practices.

#### **INSIGHT TEXTBOX: Literature Review**

Housing insecurity and homelessness constitute complex societal issues and are intimately interwoven with other experiences of being displaced to the margins of society. These issues are the sharp edge of larger issues of inequality in Aotearoa New Zealand

<sup>(1, 2)</sup>. For example, women experience specific gendered barriers which may include relationship breakdown, the threat of violence, childcare challenges, discrimination, inadequate service provision, and living in crowded, unsafe, or unsuitable housing <sup>(3, 4, 5)</sup>.

In Aotearoa New Zealand, successive governments have established an emergency housing system to deliver on our human rights obligations and respond to the immediate housing needs of people experiencing homeless. As well as international human rights obligations <sup>(6, 7, 8, 9)</sup>, the government also has Tiriti o Waitangi obligations, particularly given that Māori are disproportionately represented in homelessness statistics and the emergency housing system. Yet it was reported in December 2022 that over 28,000 people were requesting government assistance with housing support <sup>(10)</sup>. Further, the recent New Zealand Human Rights Commission (HRC) Housing Inquiry <sup>(11)</sup> into the emergency housing system, drew upon figures estimating that more than 100, 000 people in Aotearoa New Zealand are experiencing severe housing deprivation and homelessness. In Part Two of this report, we outline a Marae Model of Care as part of a Kaupapa Māori-led response to the interwoven issues of housing insecurity and homelessness for women.

#### A Marae Model of Care

Hīnātore welcomes you in. She consists of two whare. The main whare (Hīnātore) is adorned with Māori atua and lessons from the maramataka greet you in the main entrance. The mara in the backyard proves fruitful - bearing berries, cabbage, silver beet, and beans. Light seeps into the various rooms that shelter the wāhine who all co-exist in this space. Mareikura (the second whare) sits just behind a communal kitchen/dining area with an indoor and outdoor wharepaku and space for gatherings and whanaungatanga outdoors. It is lunchtime on one of my visits and the aroma of warm kai penetrates the air, while laughter and music lift lightly up towards the sky. [Fieldnotes, J. Sarich, 2023]



Te Whare Hīnātore's model of practice follows a marae structure, where tapu, mana, mauri and wairua are taught, shared, upheld, and embedded into day-to-day practices. **A marae model of care endeavors to build a home around Raukura, facilitating home-making practices, rather than simply providing shelter with rigid rules to adhere to and criteria for inclusion.** This serves as a reminder that marae have always provided care and dignity to those in need. Furthermore, such models of care embedded within te ao Māori exemplify that marae can be a vital part of urban emergency and transitional housing solutions today <sup>(1)</sup>. This is likewise referred to in the MAIHI Framework for Action <sup>(2)</sup>.

All wāhine who enter Te Whare Hīnātore are given the opportunity to heal within a mana enhancing environment which has proven benefits for both Māori and non-Māori accessing such services. Bonds between wāhine (including interactions between Raukura and kaimahi) become strong in their time living together and last even after exiting. Many Raukura reported that for the first time they experienced a secure sense of whānau, there is both a sense of gratitude and grief to this idea:

Hinerauāmoa (Raukura, 19 years old): There's been more consistency here than there has ever been in my whole life. It's like this whare alone has given me more than my

family and the system ever did, even myself really. So, this whare has done a lot not only for me but for every girl here and it's just giving that bit of comfort, that awhi aye? That love, that real... that realness and that's.... I'm pretty sure that's all we've ever wanted. Was real love, real happiness, you know, real opportunities to take and they provide every single one of them and it's up to us again, to take those opportunities.

Manutea (Kaupapa Māori General Manager, Te Tāpui Atawhai – The Auckland City Mission): We are set up as a transitional housing facility which doesn't work for our wāhine, I don't know that it works for any of our people [Māori]. So, they're only supposed to stay three months. And if we stick to the three-month period, if they feel that they need to leave, then that creates a lot of anxiety and pressure that interferes with their progress. Because they need to be able to rest and feel safe in a space that is grounded, to be able to then create change for themselves. So, that's what we want to be pushing for, a supportive housing model.

More than the provision of bricks and mortar, the culturally demarcated space of Te Whare Hīnātore ensures an all-embracing whanau network that envelopes each Raukura in constant wrap around care and support <sup>(1)</sup>. However, as noted in the HRC Housing Inquiry report <sup>(3)</sup>, providers experience the double bind of being tasked with delivering services that respond to Māori needs but must adhere to definitions of transitional housing (e.g. 12-week duration) that run counter to definitions of home in Te Ao Māori. The ability of Te Whare Hīnātore to provide flexible and effective support to Raukura highlights the need for a more supportive housing model than what is currently practiced in conventional practices of social housing by local and government agencies:

General Manager, Te Tāpui Atawhai – The Auckland City Mission: It's the whānau aspect, it's the manaakitanga, it's the community, it's the safety, it's the "reparenting" processes that just occur within those spaces. When people mess up, they don't get thrown out you know unless it's really significant and then there's a reparation process, there's a restoration process, and there's a coming back into the fold. Now for many who are so displaced from whānau, that in and of itself is an incredible gift to offer. But how do you measure that? The most powerful voices needed in this whole thing, really are the voices of the wāhine.

Raukura have access to an onsite psychotherapist and occupational therapist. Kaimahi also support Raukura with transport, appointment reminders, and advocacy with lawyers and in the courtroom. A registered nurse from Te Tāpui Atawhai – The Auckland City Mission's Calder Centre visits Te Whare Hīnātore weekly for individual consults without appointment. She joins Raukura to cook and share kai (food, a meal) together for Mana Wāhine dinner which is hosted each week at Te Tāpui Atawhai – The Auckland City Mission. These simple acts have significantly increased rapport building and has resulted in engagement from the outset of their admission to the service. The nurse is also available for site visits for urgent care when wāhine are unwilling to engage externally (such as in the case of sexual or physical assaults). Raukura reported increased trust with medical professionals and kaimahi more generally:

Parikoikoi (Raukura, 43 years old): Since I've been here, I've been able to get my bearings back, put the enemy back in its place, into peace. There was just a lot of messed up shit going on, but with these guys' help [kaimahi at Te Whare Hīnātore], it's

just made it heaps easier to cope with the rest of world. I'm one of those people who just go... hold up, where's the brakes, who are you, who are you!? Nah because I found it hard to trust people, trust anybody, and coming here I know I can put my life... that my life will get looked after being here. They will nurture it, they'll love it. I know I can trust staff here and know that they won't let it go to waste.

Kai Atarau (Psychotherapist): Yes, so I am a Kai Atarau, which means - to translate literally - a person who works with shadows. And out of that darkness, it's the potentiality [Hīnātore], and this is the joy of working with people's potentiality... it's a privilege for me to be able to sit alongside someone in their dark times when previously they had been alone. When I'm introduced as a clinician or a psychotherapist, so many people see the health system or control. I think our people have been withheld from long enough and it doesn't do any good to continue that pattern of withholding, especially for my clients here.

The examples provided above highlight how efforts to offer practical support to Raukura are driven by Kaupapa Māori imperatives which are foundational to a marae model of care. Marae allow for the enactment of values such as manaakitanga (reciprocal care), aroha (compassion), whanaungatanga (relatedness and connectedness) which frame how providers such as te Whare Hīnātore respond to the issues of 'homelessness' and 'housing insecurity' for wāhine.

## Tikanga

A Kaupapa Māori approach is more than simply legitimating the 'Māori way' of doing things. It's the impetus to create the moral and ethical conditions and outcomes which allow Māori to assert greater cultural, political, social, emotional, and spiritual control over their own lives <sup>(4 p456)</sup>. This is not to assume a totalizing narrative of what it means to be Māori and the multiple intersections of (whānau, hapū, iwi, community, organisational) identity that many Māori may lay claim to. Nor is this to assume the universal application and significance of similar sets of principles or frameworks. Kaupapa Māori approaches are diverse, fluid, flexible and forever evolving, but all will "incorporate Māori preferred ways of operating and embracing Māori values" <sup>(5 p.201)</sup>.

What goes hand in hand with a marae model of care are tikanga and kawa (kawa are cultural practices and tikanga are the cultural principles guiding their enactment). Raukura are told on arrival the names of the whare they will be residing in (the first being the Raukura whare or house) and associated tikanga of the site and setting:

Kaiwhatu (Team Lead): The way we do it now is we always open our assessment with karakia, we explain that we're a Kaupapa Māori service before they even come in and then we expand on that again when they come in, that's "assessment". So that they know that this is who we are. Whanaungatanga is one of the key connectors to everything. Once you start sitting down and you start talking about where you're from, whether that be whakapapa, whether that be what school you went to or what sports you like, or what's in the community... that's all, whanaungatanga. People tend to overthink what te ao Māori and what ngā taonga tuku iho looks like, aye? Because they're looking for a Western lens on a Māori concept. We think as a collective, we do as a collective, we operate as a collective. **Hīnātore gives us scope to be imaginative**.

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Tikanga is a flexible and adaptable knowledge system that can be interwoven to fit with the demands of the moment. Tikanga comprises those practices, values, ways of doing things and understanding actions, which have cultural continuity across generations and will always be with Māori. Raukura and kaimahi are all engaged in a learning journey together, and meeting people at their own pace is critical to the development of whaungatanga (relatedness and connection). There is structure and consistency in the daily routines, days that begin with the option of karakia and breakfast. There is a curfew, however the doors at Te Whare Hīnātore are never locked permanently and the staff we spoke with highlighted that their door will always be open in times of need:

Manutea (Kaupapa Māori General Manager, Te Tāpui Atawhai – The Auckland City Mission): Staff often come in thinking, if we get them into a house and they get a job and they get this and they get the kids back, then we've succeeded. So, I was really clear that no, if they get out of bed and manage to make their own kai and manage to keep their space clean and uphold the tapu of Hīnātore, then that could be considered success. Life is a challenge, but none of them have failed, all of them have shifted from where they started. Many have moved into homes. The majority of them are in some kind of employment. Some of them have tamariki back. We may never, ever fully see the success of what we've done.

While the rules are more flexible than others, accountability still exists. Largely governed by notions of tapu and noa. Tapu is often translated as "sacred," though in reference to the opening pūrākau of Hīnātore, tapu is perhaps better described as a state of restriction due to its spiritual dimension. Noa is the key mechanism for managing tapu. The separation of Papatūānuku and Ranginui ended the state of tapu or restriction for their children, from which came 'noa' – a world of light. If tapu reflects something that is subject to restrictions, then noa reflects a balance where interactions can occur. One of the non-negotiable boundaries is having no drugs on premises. Kaimahi aim to manage this by instilling a sense of internal policing, rather than external, building the belief that Raukura, are capable of making decisions for themselves if given the tools to do so. When discussing the house rules one Raukura stated:

Marama (Raukura, 46 years old): Yeah, that's what I love about this place too. It's okay to be in a bad mood, it's okay to be sad, it's okay to be happy. It's just how we deal with it that matters. You know, that's what counts? And it does have a ripple effect on the others. Especially coming from this house [Mareikura villa] to over there [Hīnātore whare]. [Tikanga is] there for a reason. But yeah... everyone is pushing the boundaries a bit around here. Even in my house, so I have a house meeting tomorrow. I'm gonna kick their asses... verbally. [Laughs]

Marama grew up in a world of violence – violence was how people expressed 'love', violence was the consequence, violence was to be endured and expected. To have the option to engage in discussion is both novel and transformative. The marae model of care at Te Whare Hīnātore activates tikanga which has shifted notions of responsibility and consequences from the individual to the collective. This offers Raukura, such as Marama, new ways of understanding the world. When tikanga is not adhered to, or when something goes wrong, accountability is in the hands of all Raukura:

Manutea (Kaupapa Māori General Manager, Te Tāpui Atawhai – The Auckland City Mission): There were so many lessons along the way, but our greatest lessons.... because you know you can write up a really great program and then you try and roll it out and it never quite works the way you think it's going to. Our greatest teachers were the wāhine, the Raukura. They showed us what they were willing to do and weren't willing to do, what they did like and what they didn't like. So, we were constantly changing things every time it wasn't working. And that's what I really appreciated about them, and we could be really agile and adjust as we needed to. Because it's important to meet the person where they're at, and that's often talked about in social services, "meet the person where they're at". **But you've also got to make sure that the service is agile enough to be able to pivot to meet them where they're at**.

Adherence to tikanga is about contributing not only to one's own but also the community's wellbeing, it is about supporting the needs of the collective. This differs from the rigid rules Raukura have been expected to adhere to at other organisations and institutions. Rules regulate and restrict the individual's behaviour. Tikanga allow Raukura to be more than the passive recipients of care, they help shape what constitutes tikanga and have agency in the process:

Kai Atarau (Psychotherapist): I often think of the lack of control that people experience when their body is violated at any time. And then the other things that can happen to your body like breaking a leg or miscarriage or medical procedures. All sorts of things that, particularly as women, that even birthing, like, people can have a panic attack. They've described it as a 'hijacking of their autonomy'. That sort of thing can be

#### triggering because all of a sudden you have no control over your body. It's hijacked.

Kaiarahi (cultural practitioner lead): It's not just about, 'Here I'll help you to stop being angry'. [referring to the Mauri Tau programme, a Kaupapa Māori approach to "anger management"] You have to do all this background stuff first, like help them feel grounded. You [kaimahi] have to consistently show that you care. They've [Raukura] been living their whole lives with people judging them and telling them to move on, move on, you know, you're hōhā, you're too hard. We shouldn't be like that. We're Kaupapa Māori. We should act like it and show them empathy. You know, there's boundaries and then there's empathy. They're two different things in our world [te ao Māori]. For example, we had a girl come in here that was a stalker... she's moved out and got her own whare now, and she's doing really well. But she came in from prison, and she was like, "Oh, I don't know how to stop being a stalker." I said, "You're not a stalker." And she's like, "But the judge said..." "No, you're not a stalker." She goes, "Well what am I?" I said, "You're a paua!" And she's like, "A paua?!" I said, "Yeah, because paua cling to everything." And she's like, "Ooooh, so what should I be? A fish?" I went, "No, a kina!" It's like, "Oh, because it's spiky eh? And I can't go by anybody," I said, "That's it." So little things like that, so when a new girl comes in, and she wants to follow her [engage in stalking behaviours], I pull her aside and say, "Ah, what are you doing?" She thought about it and went, "I'm not being a paua." That's right. It's a present. It's about having pride in yourself, walk in the room like your tupuna opened the door for you. We're not a transitional housing facility. We're a whānau. So, a lot of them... they've never had a whanau. They've, you know, never had people that were good to them. The more you get them grounded, the more information you can give them about life.

Tikanga, or those 'way(s) of doing and thinking held by Māori to be just and correct' <sup>(6)</sup>. Tikanga has been developed over centuries of practice and is underpinned by core values and principles which govern Māori political, legal, social, and spiritual behaviour <sup>(7)</sup>. Conversations with Raukura often highlighted that other services they have engaged with have been too restrictive. The tikanga of the whare is relayed to all wāhine who enter Te Whare Hīnātore, after they are welcomed in. Most importantly, tikanga is flexible and open to revision in response to the needs of Raukura.

#### Whanaungatanga

Whanaungatanga is a central concept and everyday practice for Māori wellbeing, described as the 'basic cement that holds things Māori together' <sup>(8 p.67)</sup>, and the collective orientation of whānau to nurture and care for one another is a key aspect of this <sup>(9, 10)</sup>. It is the process of tying people together in bonds of association and obligation through kinship ties or relatedness <sup>(11)</sup>. In the context of Te Whare Hīnātore, whanaungatanga involves remapping relational pathways. If homemaking is seen as an ongoing process, then resettlement is enhanced when people begin to remake home and reconsider their place in the community <sup>(12)</sup>. Central here is the reintroduction of stability into the lives of Raukura:

Kaiwhatu (Team Lead): That's the thing is like... I look past whatever's going on with them and see what the potential could be. Marama... we use her as an example all the time, she's doing level four mental health and wellbeing [social work qualification]. She never would have thought of doing that before. Because she'd sit on the stairs in the office and talk about all of these things. You know like "Oh when I did this, or when I did that, or when I sat on the street, I know that street here, or I know that street here and once fucked up cause of this dah dah dah". And I said to Kaiarahi (cultural practitioner lead) one day "That girl needs to do the level four cert, her lived experience is huge. That will actually help her to understand all of those other conversations that are going on in her head and with other people if we can get her to do that level four." Kaiarahi (cultural practitioner lead) a little bit further ahead of her on the course, so Kaiarahi (cultural practitioner lead) has been doing it as well so they're kind of doing it together.

Marama (Raukura, 46 years old): Yeah, because you know the key goal is get my kids back but also when they do come back, I don't wanna be bitter and twisted and angry, an addict, you know? I want them to come back and I'm still strong. You know, strong, kind, caring and respectful. And yeah, [kaimahi] have helped me see that I can get that. I'm gonna get there. Before that, the only place I could see peace was six feet under but now I know different and I believe different, I feel different.

When we look deeper into how whanaungatanga functions for wāhine with histories of complex and acute trauma, it becomes evident that it is about the development of a space that is safe to share with others, to be in the presence of others and to let down some of the safeguards that have been learnt overtime. Kaimahi discussed the need for sensitivity when supporting Raukura. Once again emphasis is placed on the need to take time to build relationships with Raukura:

Kai Atarau (psychotherapist): Sometimes it's really hard to get any momentum with anything and it can be very hard to see if you're doing any good because it's so patchwork. The population that we're working with and the stuff they're dealing with is quite dynamic, they're not always here, not always present, not always engaged. So, anything that will help them is important, so you've got to look at the really long picture or take the really small wins. I think those of us that are drawn to this mahi tend to have our own lived experience and our own reasons for getting into it and can burn out quite easily. Yeah, it's not for everybody, so, you need to have people that really believe in the Kaupapa.

All the kaimahi we spoke with were passionate about the work they did, interwoven into their discussions were their own personal journeys, relevant to their identities as a support network for the Raukura at Te Whare Hīnātore. Their āhua, compassion and dedication showcase that these roles are difficult to teach and cannot be simply learnt in a textbook.

Parikoikoi (Raukura, 43 years old): They're [kaimahi] just awesome, they wrap right around you, and that's something that the women here needed. They [Raukura] come in all different personalities, all different people, because you get the sick ones come through, you get the cracked-out ones come through, you get the stoners come through and like, no matter what we are, or what we look like, or who we are, they still wrap around us.

A sense of community, place affiliation, and ownership amongst Raukura and kaimahi to Te Whare Hīnātore generates a sense of care and responsibility for the overall site. Urban facilities that have clear functions, are well utilised and are central to the lives of people tend to have fewer safety and security issues <sup>(13)</sup>.

Manutea (Kaupapa Māori General Manager, Te Tāpui Atawhai – The Auckland City Mission): It's always been that no matter what happens, the doors always open, so they may use [do drugs] or they may leave [self-exit] or they may behave in a way that's not useful or not, not caring of themselves or how they're impacting others. We will address the behaviour, but we remain always in relationship. So even if they need to leave the service, we remain in relationship. And I can think of one Raukura who came back three times. The first time she left, she was heavily addicted to meth. It was probably the heaviest [case of addiction] I had ever seen. And she left. Then one day we got a knock on the door and she was there, "I need help," and I said "Of course, I'm happy too." We stayed in relationship and worked really hard not to be judgmental because she became the most important person in that moment. And if we were judgmental, it would have alienated her, and she would have left, and we would have lost sight of the people [a Kaupapa Māori-led service is built around the people]. Every time they come to us, they're ready for the next stage of being more connected to who they are. And that to me is powerful. It can't be measured.

Drug and alcohol peer support is provided, which has been strongly advocated in He Ara Oranga <sup>(14)</sup> and in local forums. Peer support is critical to making services more effective. Due to the high rates of stigma and discrimination, fear of judgement or of being misunderstood is a barrier to seeking help, peer support provides an important space where fears and struggles can be openly and safely acknowledged, and a living example of recovery provided. While mental health peer support is well established, AOD specific peer support is only currently provided in Counties Manukau DHB. Increasing access to AOD peer support is therefore a critical component in the drug and alcohol care continuum. Te Whare Hīnātore is embedded within a larger service structure including further opportunities to engage in a range of creative arts, recreational and peer led interventions at existing services including Toi Ora, YMCA and the Clubhouse which are all located centrally.

For Māori, being a person means existing through relational entanglements, which are navigated in accordance with our core cultural values<sup>(15)</sup>. Everything and everyone is related and interdependent in a Māori worldview. We have a primary duty of care for others, particularly those with whom we are related and/or reside<sup>(16)</sup>. When one part of the network is for some reason stressed and burdened, the network reconfigures as we attempt to meet our duties of care <sup>(16)</sup>.



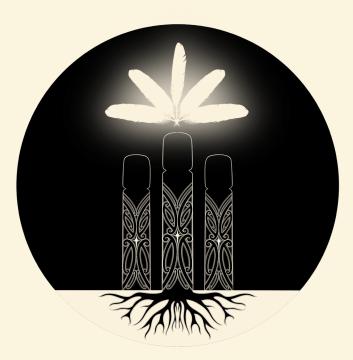
## Pūrākau - Raukura

In this section, to better understand a Marae Model of Care, we invite the reader to walk through the doors of Te Whare Hīnātore and to meet some of the Raukura who have resided there.

The personal narratives of Raukura, their pūrākau, and their search for Hīnātore are presented. All pseudonyms used for Raukura are ingoa (names) belonging to atua within te whānau marama (the family of light from which Hīnātore belongs). The accounts provided by Raukura tell a story of ongoing struggle, where the pull of Whiro and the fear he brings still exists for many.

The pūrākau analyses offer deeper insight into the journeys of the Raukura engaging the services of Te Whare Hīnātore and other agencies, highlighting states of restriction they have been stuck in, the pulls and shifts across different states of healing, to understand their worlds and to rewrite personal narratives moving forward.

We are given glimmers of hope and can see the potential of Raukura, alongside the manaakitanga and kaitiakitanga of the kaimahi who support them and the whare herself - Te Whare Hīnātore.



## Hinerauāmoa (19 years old, Māori)

**Narrative themes:** Rangatahi homelessness, incarceration, takataapui & LGBTIQA+, tuakana & teina relationships, employment.

Hinerauāmoa is a 19 -year-old wāhine Māori (Ngāti Kauwhata), residing at Te Whare Hīnātore for a period of nine months. Hinerauāmoa was originally from the Manawatū-Whanganui region and was separated from her family supports in Auckland. For Hinerauāmoa notions of "home" are difficult to conceptualise. At age six her two older brothers were killed in a gang-war. She spent much of her childhood moving between various houses, which included a story of running away from one foster home and hitchhiking to Palmerston North at age eight trying to find her māmā:

"Interviewer: What was it in Palmy that you were running towards?

Hinerauāmoa: Home. Or what I thought was home. Yeah, well cos, I was so young at the time. It's like all I wanted was my mum and... where's my aunties and where's my sisters? Always trying to find home. No matter where I went. I was always trying to go back home."

At age twelve she enrolled herself in school, desperate for an education. She excelled at rugby but recalled experiences of racism and discrimination from teachers and peers. Her childhood is marked by movement, cycling between foster homes provided by Oranga Tamariki (OT) within the Te Tai Hauāuru region that proved to be no better than the whanau home left behind:

"I've never felt at home. That's why I was always running. I was always moving to different cities, just trying to find a home, make home, even find a home back at home [laughs]. But it's just like a house, it's just a trap house [a place where illegal drugs are bought, sold, or used]. So, it was never a home, like even in that age gap of zero to six years old, it wasn't home, nothing felt like a real family, nothing felt like real love."

Hinerauāmoa described the constant moving and experiences with OT as "fucking traumatising" where a "dreamland" of home and happy families was always promised and never realised. Often the homes she was placed in were just as bad as the home she had been removed from. At age thirteen, her stepfather gave her an ounce of methamphetamine for her birthday, an act she interpreted as love and one of the few opportunities for advancement life had presented her with. She took it and ran with it, leading her down a path of more running and more chasing - which led to her "burning out" at age eighteen. She was in and out of Youth Justice from fourteen to seventeen before she was incarcerated as an 'adult' at age seventeen alongside older women serving life sentences, as the prison had nowhere else to house her given her youth and charges.

"They [the women serving life-sentences] taught me quite a lot, just through a game of chess, every day. Yeah, because they couldn't put me in general because of my charge at the time. So, they had to put me in high risk, and in high risk I wasn't mentally stable, so they ended up putting me with the lifers, so I was just hanging out with them all the time and they were cool. They changed my mentality and my pathway to life... through the game of chess. You know if they weren't doing a whole life sentence, and they're like coming up to 60 – 70 years old.... If they were my age... they'd take every opportunity that comes my way and that's what kind of like made sense to me"

At age nineteen, after spending time in prison and "couch-surfing"<sup>c</sup> Hinerauāmoa arrived in Auckland with no place to stay and with bail restrictions. A concerned friend organized for her to stay with her parents temporarily, yet this eventually became too demanding for them. She was referred to Te Whare Hīnātore through MSD (probation arm) due to couch surfing in Auckland but not meeting criteria for emergency housing. She was told at several transitional houses that there was no space for her due to her age, lack of priority placing (e.g. no children), and bail restrictions, before finding Te Whare Hīnātore.

When she arrived at Hīnātore she had outstanding court matters in Queenstown. At the time of the interview, she had been residing at Te Whare Hīnātore for a period of six months, the longest she could recall of ever staying in one place – besides prison. Her memories of her first night there showcase the ways in which traumatic life experiences reverberate outwards, causing her to question the safety on offer when arriving at Te Whare Hīnātore.

#### "Interviewer: Do you remember what your first night here was like?

Hinerauāmoa: Oh, fuck yeah! I was like ready to jump out the window, I was so shit scared, I felt like I was locked up again, but I knew that if I left... then where the fuck am I gonna go? I'd worked so hard to get here. I don't really feel like that anymore and it didn't actually last that long cause I got to know them pretty fast, and I realised that most of them were pretty much like me. It feels like home now, yeah. It does feel like home, but it hurts me to even think that it feels like home. Cause why can't they be my real family?"

Hinerauāmoa engaged regularly with staff at Hīnātore and the programme from the outset. Her gratitude for support and a safe environment was expressed through active engagement in the programme, particularly Kai Wāhine (also referred to as Mana Wāhine, a dinner provided for women experiencing homelessness which is hosted at Te Tāpui Atawhai – The Auckland City Mission), the daily running of the whare, and adherence to kawa and tikanga (kawa are cultural practices and tikanga are the cultural principles guiding their enactment). She was highly intelligent and appeared more mature than her 19 years. However, emotionally she was very much adolescent and had difficulty making choices that prioritized her safety and directing her considerable talents productively.

Hinerauāmoa is takataapui (sapphic, Māori umbrella term for LGBTIQA+), and credits her girlfriend as a stabilizing force, reinforcing a sense of belonging, purpose, connection, and home:

"She's done a lot for me... most days when I'm feeling like shit or certain dates when

<sup>c</sup>Staying for short periods with different friends or family when someone has nowhere else to live.

I remember in my head... [traumatic events] and certain people I see [remind her of traumatic events and people no longer living] and I'm like fuck! She knows my triggers and she'll tell me to sit down, she'll tell me to talk. "I don't wanna fucking talk!" But she'll still wait and listen, and she'll just be like "What's wrong? Don't be mad at me, I'm not your enemy" She taught me how to be calm, she softens me a lot, and I don't think she knows it."

LGBTQIA+ people and young people are significantly overrepresented in homeless populations in Aotearoa yet face barriers accessing mainstream housing services with staff lacking confidence or knowledge around LGBTQIA+ identities and experiences, and policies and environments that are not designed to be inclusive <sup>(1)</sup>. In Aotearoa, LGBTQIA+ populations are only just starting to be recognised as a priority in national and regional policies to address homelessness and housing insecurity. **Te Whare Hīnātore is unique in the whare's ability to support LGBTIQA+ young people who identify as wāhine.** This is achieved by meeting Raukura where they are at and establishing whanaungatanga by identifying whatever interests they are forthcoming with.

Hinerauāmoa was supported to connect with Iwi Liaison regarding her charges and to have her court appearances moved to Auckland so that she could be supported by Hīnātore. Hinerauāmoa engaged with services offered by the whare, such as psychotherapy and occupational therapy, as required by her, and external services such as at Orakei marae where she completed her driver licensing training. Hinerauāmoa also attended an experiential day at a prestigious Auckland restaurant as part of Hīnātore's programme and connected well with the owner, a highly renowned chef who was also a part of the LGBTIQA+ community:

"When I'm in the kitchen I don't care about anything going on in my life. I just worry about the food and if it's gonna taste nice and if it's cooked alright and if it's gonna feed everyone you know? Yeah, I love it there. Not only am I doing this for me but I'm doing this for my legacy that I'm gonna leave behind... I know I'm made for something good.... I wanna start my own restaurant one day, back home, you know? Just try and do something with my life, cos I know I'm made for something big. I know there's a bigger purpose or something cause there's no way I can just go through hell and back for nothing."

Hinerauāmoa was offered employment and mentorship at the restaurant and has been working steadily and progressively, being promoted at her workplace over the last few months. Her main goals were to resolve her court charges, find work, gain her licence and own a car and to secure permanent accommodation in Auckland where a younger sibling would be able to live with her. Hinerauāmoareceived her sentencing in December and was granted intensive supervision due to the outstanding personal progress she had made while at Hīnātore and the positive changes in her life, shifting harmful intergenerational patterns, using her talents productively and providing a strong, healthy example to her younger siblings. Once Hinerauāmoa had resolved her goals, she felt ready to move on and was supported to attend viewings of private properties with the hope to transition to permanent housing, which she achieved in February of 2024.



# Parikoikoi (43 years old, Māori)

**Narrative themes:** deep grief, addiction, state intervention and disruption, separation, service experience, friendship and solidarity.

Parikoikoi is a 43-year-old wāhine Māori who has resided both at Te Whare Hinatore's first location on Union Street, and again at their permanent site on Franklin Street. She is on the list for social housing and hoping to find a place soon. Parikoikoi was raised in South and West Auckland, before moving to Asutralia when she was 16 years old. After living there for a significant period of her adult life, she lost a baby son who was only ten and a half months old when he passed. She returned briefly to Aotearoa to lay him to rest and described "going off the rails" from then onwards, before finally being deported back to Aotearoa in 2010.

The death of a child embodies a deep grief experience that words could never fully capture. The loss affects grieving parents emotionally, physically, mentally, spiritually and socially. There is perhaps no more devastating loss than the death of a child, the ultimate disruption to all that we assume to be true in the natural law and order of life:

"Children are not supposed to die... Parents expect to see their children grow and mature. Ultimately, parents expect to die and leave their children behind... The death of a child signifies the loss of the future, of hopes and dreams, of new strength, and of perfection" <sup>(2 p39)</sup>.

Following the death of her son, Parikoikoi described embarking on a long, sad journey that was oftentimes confusing, frightening and lonely–a journey without end <sup>(3)</sup>. For Parikoikoi this protracted period included homelessness, addiction, relationship trauma, incarceration, drug and alcohol recovery residential programmes and transitional housing. Parental grief is described as different from other losses–intensified, amplified and lengthened:

I still hadn't gotten my bearings by the time I come back here [to Aotearoa New Zealand]. So, I was lost, I was lost. I was on the streets, I was everywhere. I was everywhere. [After a prolonged period of time] I was going through a bad breakup, and I finally went [into a drug and alcohol recovery programme] ... I was only there

about two weeks and I found out I was hapū [pregnant], so they shipped me straight into the whare [Te Whare Hīnātore's first location on Union Street], I spent the rest of my 7.5 months in the whare, and I had to get off the drugs and that to try and keep my baby. So, I did, I went through detox, I went through [adult residential programme], I did 11.5 months there, and I passed. I had him with me the whole time and then we finally got out of there, got us a place and I lapsed.

They took my baby from me, and then after that they told me I had to give up my place that I was at. I went into [rehabilitation and accommodation service for people released from prison], they didn't help, they really didn't help. My aunty and that, they've got my son now, and they didn't help either. My son, he's the wisdom of my journey, he's going to lead our people, those who are going to need it, and he has the wairua for it. If it wasn't for him, I would be down in the dumps, I would have lost him from birth, everything. My journey is because of him. When they ripped him from me, my aunty ended up taking him, and my cousins got him. Now they're trying to take me to court, but I've got [kaimahi at Te Whare Hīnātore] helping me.

Parikoikoi's interactions with state-care institutions highlight the normality of childremoval processes that exist alongside the minimisation of traumatic experiences for many wāhine Māori. She has now returned to Te Whare Hīnātore, this time to their second location on Franklin Street, and kaimahi are supporting her to reclaim custody of her baby. Before coming to either site where Te Whare Hīnātore had been located, she discussed her frustrations with other transitional housing programmes and facilities as a relationship she bore out of necessity but with little opportunity for healing:

You don't get treated like a slave [at Te Whare Hīnātore] and you really do at other places, you are bound to these chores. Those chores were okay to do, I got used to it after a while, but it's like trying to do all these chores and your baby at the same time. They didn't really help, they really didn't. I didn't find any help there. Some of the girls would walk in, light their cigarette, "Hey!" [points and imitates staff shouting, indicating to put out a cigarette] You're only allowed 29 items, and that's including your bras and undies, socks. Even for a child. I had drawers full, bags full. I went in there with really nothing for my baby.

Many wāhine are distrustful of service providers based on past experiences of discrimination, judgement, denial of benefits, child removal, and/or incarceration that have only served to re-traumatise them further. Not all engagements with service providers were negative, but building whanaungatanga takes significant time. While in a residential programme, Parikoikoi was provided with the opportunity to bury the placenta of her infant son on their premises. For Māori the placenta is revered and sometimes buried in a place of extraordinary familial significance, home. Whenua does not just mean land it also means placenta – like the land, the placenta provides physical, emotional, spiritual and intellectual nourishment and furnishes all the needs of humanity. Burying the placenta is symbolic of taking one's place within your iwi. Separated from whānau support in both Aotearoa and Australia, this is where her son's placenta currently remains as she anxiously waits to retrieve it and bring it to Te Whare Hīnātore.

After exiting the rehabilitation and accommodation service for people released from prison,

relapsing and losing her home and son to state-intervention, a period of homelessness followed alongside repeated traumatic experiences. Lack of safety on the streets and difficulty accessing support to deal with experiences of sexual trauma, grief, loss of children and whanau; is compounded by repeat exposure to traumatic events. Parikoikoi engaged with the services of Te Tāpui Atawhai – The Auckland City Mission once again and requested to return to Te Whare Hīnātore as this was the last place she had felt safe:

I had no support and I seen [Manutea or Kaupapa Māori General Manager] down at The Mission, because I was back on the streets again. I went down to her and told her my situation, "Look I can't do this, I really can't," and she goes, "Do you want to come back to the whare?" So, I said, I did, "Yes, please." She goes, "It's a roof over your head, you know the place." She brought me straight through.

Parikoikoi has resided at both sites where Te Whare Hīnātore has been located, when comparing the first site at Union Street to their permanent location in Franklin Street, she noted the drastic shift from a more mainstream approach to transitional housing to an environment that was more conducive to a Kaupapa Māori approach:

You couldn't really get that close with staff over there [residential alcohol and drug recovery programme]. One or two, the ones that would do the night shifts, and there were the ones that would interact with us, but there wasn't many that would fully interact with us. I never seen them aye. Nobody really got on the way how we do here, yeah, there is a big difference. Because they [Raukura] were always in their own rooms, they were always doing their own thing and because they never really had something like this. Here, we've all got to share everything, so we've all got to interact.

The shift to an environment that allowed for a Kaupapa Māori approach to flourish was experienced through the enactment of whanaungatanga (relatedness and interconnectedness). While independence might be the ultimate goal in government strategies and a value enshrined in mainstream models of transitional housing, everything and everyone is related and interdependent in a Māori worldview. We have a primary duty of care for others, particularly those with whom we are related and/or reside. A sense of self, place, and notions of home are interpreted through the lens provided by the concepts of whanaungatanga and manākitanga (reciprocal caring) for the betterment of the community.

While initially Parikoikoi struggled with the tikanga of the whare around curfew, she adapted quickly after she began to feel safe. She engaged regularly with staff at Hīnātore and the programme after a short period of settling in, and built strong relationships with other Raukura. As the interview drew to its natural conclusion, a discussion of what "home" looked like for Parikoikoi served as a closing point. Parikoikoi noted wryly that if she were to image what a home wasn't, she would take a photograph of her former prison cell, and then compared this to her experiences of homemaking through Te Whare Hīnātore:

[First arrival] I'd hardly ever come home, I'd take off for a week, two weeks, and then I'd come home, and then I'd take off again, come home. I'd get my bearings you know; the girls [Raukura] are there going, "You should stay home sister, stay home with us," it's like.... "Nah, I'm good," and I'd take off again. It's just me trying to sort my shit out, as well as trying to figure out what I wanted out there. I always knew this was my safe haven, and I always knew that if I ever needed to get away from out there, I'd just come in. I'd come home. Home is somewhere where I can lay my head and know that things are going to be alright. I love it here, yeah, absolutely. The girls are like crazy, but I love it because we're all our own people. Yeah, we are all our own people. [Parikoikoi pauses to wave at another Raukura who is walking past the interview room window to check-in on her] Look at that, they're all even trying to tautoko [support] me now... go away [smiles softly].



# Marama (46 years old, Māori)

**Narrative themes:** Separation from and yearning for whānau, shame, violence, addiction, education, mentorship and leadership.

Marama is a 45-year-old wāhine Māori who was referred to Te Whare Hīnātore through Social Withdrawal Services after a series of unsuccessful experiences in accommodation in Auckland. She is intuitive, watchful, observant and loves to laugh. Marama is a māmā of five and believes Te Whare Hīnātore is the best space for her to be as she seeks stability by first looking within herself to heal. She resided at Te Whare Hīnātore for a period of two years, their longest staying client. Marama initially presented to Te Whare Hīnātore as deeply mistrustful, and struggling with anger, and guilt due to trauma, addiction and separation from her children and partner. Marama's children are currently all living under the care of her eldest daughter. She spoke with pride that her children had only ever lived in three homes, in stark contrast to her own childhood spent shuffling between whānau and foster homes where abuse and violence was a pervasive feature:

You know, that was about the only thing I could be consistent with for them [her kids], was the home and the education... They're all educated. My first three are all working together with the last two to keep them all together so I'm quite happy about that... that they're all close. Cause I'm not close with any of my siblings. My big brother has become what we grew up with. He uses violence and all that stuff, and I hate that stuff, I hate it all. It cost me my family, it cost me my children.

Marama stated she had had hundreds of homes as a child. Home is where everything starts. It is both a place and a set of relationships between the people who reside together there. Marama has struggled for most of her life to find a place to call home. As such, ideals of "home" are never guaranteed, the provision of shelter does not always include safety, or kindness or dignity. The key issue here is the absence of the kind of stability and care that many take for granted. There are decades of feminist research on family and intimate partner violence, too numerous to cite here, that show how you can be at home while not feeling at home. Marama echoed these notions:

I was born out in Papakura. But my family... we moved around a lot, like heaps. My mum was in active addiction and my dad was a gangster. It's that generational shit, you know? Big family, I'm like the second eldest of ten. I had to be "mum" at an early age. Like my family on my mum's side, tell me stories about what my mum used to do to me. I'm just like "Aye? Why am I still.... how am I still walking?" But then it makes sense why I've blocked out a lot of the trauma. But the thing that got me was the fact that they saw it happening and they did nothing... You know, I mean I was getting hidings in front of people, and they would just walk away. I remember... like she [mother] tried it at the intermediate [school] in Ponsonby one time... she showed up, she tried to give me a hiding and who stood up to her? All my mates... all my classmates. I was like "Fuck, wow". Even people I thought didn't like me, you know? They were like "Nah, you get lost old lady" [laughs].

From there we ended up in CYFS [Oranga Tamariki, formerly known as Child, Youth and Family Services] care for a little bit, but they threw us back into the fire, so to speak. They [foster family] were a really abusive family that we went to, highly abusive family. Then mum came and I ended up bringing up my baby brother and then we moved around a bit more. I ended up back in foster care when I was like eleven cause of the abuse, the violence, and stuff, until I was about 14-15 [years old].

Resolving homelessness isn't as simple as moving wāhine off the streets into housing, such strategies will not work when it is captured under normative understandings of home, of belonging and of acceptability. Indeed, many Māori adults often attribute their earliest entrance into homelessness to their removal from whānau by social services in childhood, and the abuse, neglect, and discrimination endured whilst in state care <sup>(4)</sup>. Not all foster homes are inherently violent, Marama recalls with reverence the kindness of a Samoan family that she lived with briefly as a teenager, who taught her the true meaning of family and, through her older foster sisters, "sisterhood". She also notes with sadness

being moved on when her stay ended and not being able to talk through her feelings of loss and loneliness, and fears of being reconnected with whānau. Being forcibly removed through state intervention can be a pervasive and frequent feature of the lives of wāhine like Marama that contributes to later, ongoing experiences of homelessness and housing insecurity.

Te Whare Hīnātore seeks to restore connections to home and instead asks: how can we support wāhine who do not have a home, to feel at-home? When Marama first arrived at Te Whare Hīnātore, she was prone to controlling behaviour and aggressive verbal outbursts when feeling unsafe or disrespected:

I come from violence. I was surrounded by violence all my life and then I went into this situation [arrival at Te Whare Hīnātore] .... where it was just like, what do you call it? Oh wow, it was different to just getting a hiding. You know? Having a house meeting, that stuff was... [shakes head in bewilderment] ... cause I thought violence... I thought being hit meant they loved me.

Marama engaged regularly with staff at both Hīnātore and Street to Home services from the outset. Her immense gratitude for support and a safe environment was expressed through active engagement in the programme, the daily running of the whare, and staunch adherence to the kawa and tikanga. Establishing whanaungatanga has been key for kaimahi supporting Marama in her journey. Where te ao Māori has been a site for trauma, kaimahi must establish unconditional care and respect to enable genuine whanaungatanga:

This place makes me want to get back in touch with my Māoridom. You know, because I got humiliated at school and so that's why I'm the way I am. I've started opening up. My confidence when it comes to the reo is pretty low. Really low, you know? My family, all being Māori's and just the dysfunction, you know? [Discusses movie based on book portraying whānau violence and the detrimental impacts of colonisation, and ultimately, the restoration of te ao Māori] "Once were Warriors" was like... and what? Where's the rest of it? Like aye? This is soft, and people crying and stuff and to me it was like... that's nothing... because it was nothing. I've come a long way. Just finished my probation, two years. I started smoking weed, just so I wouldn't be looking over my shoulders for my family. My family's huge and I was like living in fear until I had that first joint. Since I've been here. I've learned not to act on my emotions. But the [kaimahi]... they make me wanna like learn it and be a part of it.

Marama's story showcases the strides she has taken in her life to move away from Whiro's domain of fear and darkness, and towards Hīnātore. One of Marama's main goals was AOD recovery and abstinence, and she has been actively working on this through sessions with the onsite Kai Atarau (psychotherapist) and attending external AA meetings. Although Marama relapsed early in her stay when reunited with her ex-partner and overwhelmed with feelings of shame and despair, she was able to interrupt addictive and self-harming behaviours with the support of staff and an AOD-free environment and move quickly back into recovery. Marama has continued to follow her recovery and safety plan successfully.

Because it's like, if I stuff up... if I act the way I used to then how will I look [kaimahi] in the eye and then it's like "no way". Cause they know me better than anyone. They've

known me, you know, they've watched me in the last few years. .... When I first got here and I was down in the room over there [indicates downstairs], and I woke up to dramas at the front door. So, I got myself involved in that and then I got moved upstairs [laughs]. They chucked me upstairs in my own room. For some reason, I felt safe with them [kaimahi]. I didn't have to say much because they already knew, kind of weird cause I've never had that before with you know, staff members. I've never actually felt that comfortable around officials. Like if life's hard for me in my own space over here [Mareikura villa] then I can just go over there [Raukura whare] and get distracted by the other girls, watch the TV in the lounge, you know? Just that in itself helps heaps for me to just stay put and just focus on me. If I was in a place of my own at the moment and those feelings were coming up... I'd be out there, running into people who'll just be wanting to use me for what I got, you know?

Marama acknowledges struggling with managing her anger, and that this has interfered with relationships and increased risk to self and others. She has often used AOD to selfmedicate and disconnect from her feelings. While there have been several incidents involving aggressive behaviour with both staff and other wāhine, Marama has taken responsibility for her behaviour and actively engaged in trauma work, anger management and conflict resolution (restorative justice). She has increased self-awareness around her responses and indicated an unshakeable desire to break destructive generational cycles. Over time, Marama has learned to either emotionally regulate or remove herself from situations that might cause her to erupt with anger. Marama's ultimate goal is to repair her relationship with her children, however that may look and not to try and force it:

My oldest... I call her my captain, cause she wanted kids but she can't have any, I said "that's alright, you can have mine". I've just gotta work on myself hard out and that's why I wanna stay here as long as I can cause it's helping me you know get calm. Cause when I sit down with my oldest kids and my babies, there's gonna be a lot of shit thrown my way and I have to be strong enough to take it. They can read me, they read me so well aye. I can't even flinch when they do that, I just gotta be strong enough to sit there and take it and then when they go... I'll cry like a baby. Go get me some therapy and then do it again [laughs]. Until they trust me again. That's the goal, yeah. But she's [oldest daughter] scared that I'm gonna come in and take them away and stuff. Big picture, have my kids back, but like realistically, I'm gonna be a part time mum, when I do get to be a part time mum... because I can't do that to my oldest daughter, you know? That's her family now, I just wanna be a part of it.

Yeah, that's what's important, I feel different. Me and my daughter are no contact until I do the big sit down and show her what I've done, how far I've come and stuff which I should be able to do hopefully halfway through next year. It's like all the talking in the world aint gonna work with those ones. No, none of that. It's all about actions. [Kaiwhatu or Team Lead] said I should do Level 4 and I went with it; I thought yeah maybe that'll be my way of getting closer to the kids.

Marama's high level of responsibility meant that her application for the Māreikura villa was successful. She thrived with more autonomy over her surroundings and formed strong relationships with kaimahi and was able to mentor other Raukura. Marama is studying, completing her level 4 in addictions and mental health, is employed in peer support roles and has moved into permanent accommodation at HomeGround and living independently.



# Wainui (67 years old, Māori)

**Narrative themes:** Aging as a kuia experiencing homeless, aging as a kuia in transitional housing, the importance of whānau even when those bonds are sometimes toxic, grief and suicidal ideation, bouncing between emergency and transitional housing providers.

Wainui is a kuia, she was 67 years old at the time of the interview and had resided at Te Whare Hīnātore for a period of six months before being supported to live independently. At the time of Wainui's interview, another interview with the Kaiwhatu of Te Whare Hīnātore (Team Lead) was taking place concurrently. Unknowingly, but perhaps unsurprisingly, their stories became interwoven, and their respect for one another was mirrored at various points in each other's talks. In response to a question around building trust with Raukura and the unique services offered by Te Whare, the Kaiwhatu commented:

It changes, things change here. You know, Wainui. She's a prime example. Oh, God. She hated us, she loved us, she hated us, she loved us. Now she's... she's... Shiloh [interviewer with Wainui] will be there for another good hour, she's got so much to say, but she needs somebody to hear her story.

Wainui's story is given below and presented mostly verbatim. Where necessary, context is provided for readers to clarify points made by Wainui. The pūrākau opens with Wainui

reflecting on previous experiences engaging with housing providers, aging while homeless, and the pathways that led to her homelessness, and finally to Te Whare Hinatore:

Some [housing providers] were okay, but a bit too business, too much by the book, too strict, too many rules, didn't know how to relate. There was nobody talking about deep feelings and why you ended up in here and things like that. It's to do with our historical things in my family, trauma. My family would come to see me [at transitional housing facility], it was just very stressful. Each time it was like my family members who were coming to visit me in my little place where I was, they would bring the disturbance and all that to the point that I would be asked to leave, which hurt me. Then I was like in a caravan park that Work and Income put a lot of their clients in. Then I went into these cabins for families, like transitional housing, which was supposed to help me get into permanent housing.

While I was there, I went up to the top of the priorities list for Kāinga Ora. But I ended up going back to Whangārei [and losing priority listing], too many things were happening with COVID... my moko had passed away, we couldn't even see the body, the body was cremated before I could... and I couldn't leave them... I wanted to be by the other moko's.

After spending a period of time with her mokopuna (grandchildren) following the tangihanga (enduring Māori ceremony for mourning someone who has died) of one of her mokopuna, it no longer became feasible to stay with whānau as the issues within her whānau resumed (e.g. poverty, violence, addictions). Wainui returned to Auckland, still in a state of shock and deep mourning:

So, I was living in my car for about 8-9 days. I just wanted to be by myself... in my car. I was grieving for my moko. There was like a high-rise building [which she would park outside of], and people used to see me day in and day out. There was this lady who would come down with bottles of water and all that [food, clothes, amenities], she'd say, "You've been down here in your car for a few days," and I said "Yes, yes I have". She was such a lovely lady, she brought me water and food. She said, "Is there anything else I can help you with?" I said, "No, but thank you, I appreciate this very much." Then she put the word out and she rang up the Salvation Army, and some places like that and told them where I was parked up, and that I might need some help.

A growing number of elderly people are couch-surfing with friends and relatives, or living in their cars, or relying on emergency and transitional housing <sup>(5)</sup> This is particularly concerning given recent reporting, of Auckland woman, Helena Wakefield, age 72, who died while living in her car, on the 7th of July in 2022 <sup>(6)</sup>. **There is an alarming shortage of suitable social and public housing, as well as a lack of support for older people to live in their own homes** <sup>(7)</sup> – to prevent the needless deaths of elderly people experiencing homelessness.

[Wainui continues...] Anyway, this one morning I was sleeping in my car, and I hear this noise, when I opened my eyes there's this van parked right in front of my car, Salvation Army. I knew a John once, who had worked in the Henderson Salvation Army, and it happened to be him on the van. He came over to my car and tapped on my window and saw it was me, and I said, "Hello John, what a lovely wakeup call you are. You must be standing by my car for a reason," and he goes, "It's you!" and I go, "Yeah, just me." It was a good thing, I knew him. He said, "There is a lady concerned for you, she said you've been sleeping in your car for the past 8-9 days, and asked if we could come over to where you are and help you," It was 8'oclock in the morning and he tells me as of midnight last night a new traffic light thing has come out for COVID<sup>d</sup>, and I'm not allowed to be out here like I was, living in my car. He said he would stay by me, and we would work something out and see what he could do for me. Before he had even finished his kōrero, a Police car arrived and more or less parked right next to me. I go, "Oh my god, am I in trouble John?" He goes, "I think they are here for the same reason; do you have anything in your car [illegal substances]?" I said, no.

Wainui had previously battled a synthetic substance addiction when attempting to cope with her entry into street homelessness in her early 60s but was able to overcome her addiction following an overdose, which she had interpreted as a warning and act of aroha from her tupuna – she was beloved and had a purpose.

So, he says, "They may have to come and assist as well as we can't leave you here because of the traffic light COVID thing that happened at midnight." I didn't know that because I'd been living in my car, I haven't got a TV for the news, and haven't got a radio for the news, or anything, and I didn't know about this midnight thing happening. It was a lady and a male policeman, and they said that, "We're here just to help you, to place you somewhere, so that you are sleeping in a hotel, motel, somewhere tonight." So that traffic light thing plus that nice lady got the ball rolling for me. The Salvation Army, John, said to the Police, "How about Kāhui Tū Kaha<sup>e</sup>?" and the Police said, that they would just go and get on the phone. It's an emergency hotel, and it's run by Kāhui Tū Kaha over in the North Shore. I was born and bred in West Auckland all my life, and I'll tell you what, I've never ventured over the North Shore in all my life, don't you have to be rich to go over there?

So that's how I ended up a couple of months away from getting my permanent home in Whangārei, going down to my moko's tangi, and then 9 days in my car, and then all that love, and kindness. That morning was so overwhelming for me. But still with the sadness of my moko, everything you know, I broke down and [after a period of time] was asked to exit the emergency housing accommodation provided by Kāhui Tū Kaha, due to conflict with other residents]. I ended up coming back over West here. I was given a cabin sort of thing as a place, after the North Shore, in West Auckland. I didn't have to tell any family where I was staying, but I can't do that aye. I could say the words, but it ain't happening. I love my family, from the day they were born and been breathing it's been all dysfunctional, but I still tell them cause they are my family, and I need them, I need them by me.

It [whānau] was a continuous disturbance [and Wainui was given a warning] more than three times... four times, so they had to evict me. I was on the phone with Work

<sup>d</sup>COVID-19 Protection Framework (traffic lights). The three-tier traffic light system used vaccination and community transmission rates to determine the level of restrictions needed.

<sup>e</sup>Kāhui Tū Kaha (Ngāti Whātua organisation) is a Kaupapa Māori mental health & addictions service, committed to achieving meaningful health and social outcomes for everyone.

and Income for emergency housing and to the other people [housing providers], "I'm sorry, there's nothing for you..." So that Monday, was the day of eviction day, I had till one o'clock. I made sure I was there for my appointment [at Work and Income to discuss housing options] ... but after all the raruraru [difficulties, issues], all the things that got me evicted with my dysfunctional family and the stress of it all. It all just got to me, and I made it to the doors of Work and Income and collapsed on the floor, the doors just opened, and I collapsed. I couldn't breathe or anything, so they rang an ambulance. I thought they would just give me something and I'll be okay and then I will carry on with my housing situation. Six weeks later, I'm still in hospital, ready to be released.

So, I'm ringing around [while in hospital], and there was this Māori social worker guy who sort of read my notes and saw my story of my needs for housing, and of course he knows [kaimahi at Te Whare Hīnātore]. He goes, oh I know who might be able to help this lady! She got his email [kaimahi at Te Whare Hīnātore], she thought about it, and she said, yeah, I think we can take her. She sounded really nice on the phone and arranged to pick me up the next morning, and I said yes, I will be ready for you.

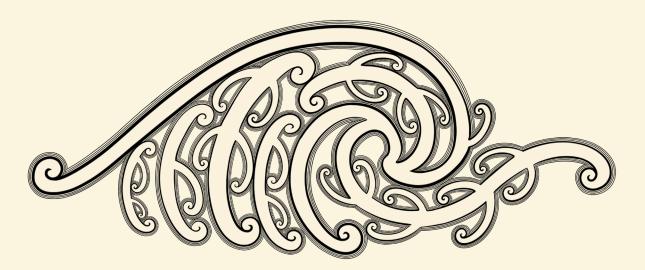
But come Monday morning, something just came crashing down on me, I really can't even say to this day what came over me, but I just walked out of the hospital. Of course, they were all looking for me when she got there, oh where is Wainui? I should have been happy, I'd been in hospital for six weeks, and somebody had just offered to put a roof over my head. To this day I can't... something happened to me when I was out, I didn't even know where I was going. It was like a couple of days just walking around on the street until I think maybe one o'clock in the morning on the third day, it was raining like hell, and I was in a dark place, but I said, I've got to go and ask for some help on the dark thoughts I was having [of death by suicide]. I went back to A&E, and I sat there for about an hour and a half, with hospital staff [impatiently] asking me what was wrong with me and telling me to move on.

Wainui requested to be placed at Waiatarau Inpatient Mental Health Unit but was informed that there were no beds available, and she did not meet diagnostic criteria for psychosis to be admitted. She returned to the transitional housing unit she had previously been evicted from for which she still had a key to the premises. Staff informed her she would be given a couple of days to resume her search for alternative accommodation, as the eviction notice had already been activated six weeks previously before hospitalisation. Fortunately, following her second visit to A&E, her name was recirculated and kaimahi at Te Whare Hīnātore were once again notified and arranged to pick her up. This time Wainui felt ready to engage their services.

I'll tell you about the first couple of days [at Te Whare Hīnātore]. In the first couple of days, I felt somebody must not have realized how old I was or something, and I'm maybe in the wrong place because they're all young ones [other Raukura]! Then I started getting whakamā, paranoid, I'm 67 and I'm still going through this [homelessness]. After the first initial couple of days, I settled in. If I'm with somebody [professional, support worker] and they go ding, ding, ding your hour is up I say, well you won't be seeing me next week... ding, ding, ding, that bell. Move on, get out... But the counsellors here have helped me aye because I am nowhere near how I used to be, I can actually look in your eyes today and tell you, I wouldn't wish that on you to have

#### met me back then.

[Kaiwhatu or Team Lead at Te Whare Hīnātore] and all the staff, how they work and all the mahi that they do is really for all of us. I felt it and it was good because I hadn't felt that for some time. I was meant to be here. We [Kaiwhatu or Team Lead & Wainui] got that bonding sort of thing because of our ages. Like this morning when I got my new whare, I didn't have anything yet, so she gave me this little bar fridge to use until I done all my quotes [for a Work & Income grant] to get stuff for my new place. When she came to help me move in... and of course I've been going through a little bit of raruraru, family issues with the whānau, then she arrived, so it was all big hugs, and it was good to see her. It's been a couple of months since I left here [Te Whare Hīnātore], but oh it was good to see her. We've had phone calls but just to have her right there in front of me, I could give her a hug. I know I might be getting on, but I've got a few more rodeos left to go yet, a few more rodeos to go. I was happy to see her, "Oh how have you been?" "Oh, you look good," then she asked me like a question, and it was like a starter gun going off, the race is on, "Oh let me tell you all about it!".



# **Client Vignettes**

In this section, the personal pūrākau of Raukura (see section above) are supplemented by anonymised client vignettes (n=4) provided by Te Whare Hīnātore as part of the reporting process for the Ministry of Justice Proceeds of Crime funding stream. This is to provide further understanding of the results that Raukura themselves want to achieve from the programme at Te Whare Hīnātore.



# **Client N**

Client N is a 53-year-old wāhine Māori who resided at Te Whare Hīnātore from November 2022 until January 2023. She is originally from Wellington but moved north after an altercation in her whānau. After a traumatic event occurred and various accommodation breakdowns, Client N separated from all support systems and arrived at Hīnātore with almost no belongings, frightened and exhibiting trauma symptoms. She initially focussed on administrative tasks as a safe way to engage with the support offered at Hīnātore, however, once a sense of trust was established, she was able to engage more deeply and settle into the community.

As Client N's sense of safety developed, she began to thrive in the Hīnātore environment. Client N was actively engaging in all chores and tasks, such as cooking, cleaning and gardening; as well as with professional support such as meeting with her probation officer, key worker and psychotherapist. She took pride in the upkeep of her new whare, supporting her new whānau and actively participating in the daily running of the household.

Client N displayed signs of disturbance such as talking aggressively to herself and having verbal outbursts. Although she was reluctant to discuss these experiences in detail, the safe environment and professional support available enabled Client N a space to observe and reflect on the impact of her experiences and behaviour on both herself and those around her, and begin working on managing these more effectively. Client N learned to gauge her 'wellness' on the severity and frequency of her symptoms, and make healthier choices such as reducing her workload when stressors became overwhelming, in order to focus on her mental health and wellbeing. With pressure removed and wellbeing increased, Client N was able to focus more on independent living and finding permanent housing.

Once well-established and engaging with available support, Client N submitted an application for permanent housing, was supported to prepare for the interview, and was accepted. She remained in regular contact with staff and engaged fully in the 12+ community programme provided by Hīnātore. Client N regularly returned to the whare to support with cooking and cleaning, as well as holding a key role on Tuesday evenings' Kai Wāhine [also referred to as Mana Wāhine, a dinner provided for women experiencing homelessness which is hosted at Te Tāpui Atawhai – The Auckland City Mission]. Eventually, Client N reconnected with her mother and agreed to attend a facilitated hui to address the conflict and reestablish a relationship and support. Acknowledging the importance of whakapapa and reconnecting with whānau, Client N was supported to return to Wellington to be with her mother, wider whānau and already established community support, where she continues to reside.

# **Client D**

Client D is a 51-year-old wāhine Māori who resided at Te Whare Hīnātore from January 2023 until June 2023. She is originally from Palmerston North but fled north after a traumatic event occurred. Client D was found by Te Tāpui Atawhai – The Auckland City Mission where the bus had dropped her in Auckland with no belongings and separated from all support systems. She arrived at Hīnātore frightened, defensive and exhibiting physical and psychological trauma symptoms.

Client D was supported to register with Calder Centre and seek medical attention and medication. Client D had previously been involved with mental health services and had a diagnosis of schizophrenia but was reluctant to take her medication. She also had legal charges arising from her trauma responses and was supported to attend probation. Client D's sense of safety developed over time and she was deeply appreciative of the supportive environment offered by Hīnātore. Client D was actively engaging in all chores and tasks to the best of her ability, often going above and beyond what was required; as well as with professional support such as meeting with her probation officer, key worker and psychotherapist. She faithfully attended every Tuesday evenings' Kai Wāhine [also referred to as Mana Wāhine, a dinner provided for women experiencing homelessness which is

hosted at Te Tāpui Atawhai - The Auckland City Mission], to 'give back' and reciprocate the care she had received.

Unmedicated, Client D intermittently displayed signs of disturbance such as talking aggressively to herself and having verbal outbursts. She would often become defensive when she believed that her memory or behaviour was criticised and could lash out verbally. Client D repeatedly refused to engage with external mental health providers, however the safe environment and professional support available at Hīnātore enabled Client D to share her thoughts to kaiarahi and talk through some of the more problematic beliefs she experienced. Her trust in kaimahi's perspective allowed Client D to reframe her misconceptions. Client D made healthier choices such as limiting her drinking to one day per week, reading and keeping a journal to focus on her mental health and wellbeing. Client D established warm relationships with other clients and staff.

Client D continued to progress and engage with kaimahi and expressed interest in attending ACC counselling to work through her trauma, as well as reconnect with her whanau. Over this time the role of Hīnātore was to hold her safe until she felt grounded again. After 5 months at Hīnātore she felt safe enough and showed marked improvement in mood when she began this reconnection. In June, Client D returned to Palmerston North and is living with whanau and friends.

# **Client S**

Client S is a 22-year-old wāhine Māori who resided at Te Whare Hīnātore from March 2023 until April 2023 and again from September 2023 until November 2023. She is originally from Tauranga and was referred to Hīnātore by Department of Corrections after a 2-year incarceration. Client S arrived at Hīnātore with few belongings, no change of clothes, no ID or shoes. Her release conditions were that she is not to enter Tauranga where she had lived all her life and where her family were. In Auckland Client S was separated from all support systems. She arrived at Hīnātore disoriented, anxious of the outside world, reserved and unprepared.

Client S was supported to register with Calder Centre. Client S had previously been involved with mental health services in prison and was required to see a forensic psychologist at probation. She had a diagnosis of Cluster B personality disorder but was reluctant to see her psychologist as she didn't want to be medicated and felt that the "offending based" treatment was too backwards looking. Client S struggled to settle in and engaged in some intrusive and unusual behaviours to reduce her anxiety, which initially alienated some of the other residents. She spent her days watching television and only left the whare if accompanied by staff or another Raukura, however she engaged well with Kai Atarau and worked towards mitigating the effects of her coping mechanisms.

Client S' initial goal was to stay in Hīnātore for 10 days and to stay out of prison. She achieved this, but over the following weeks Client S began to fixate on the well-being of her family members in Tauranga and their posts on social media. She absconded to Tauranga and was returned to prison in June. During this time kaimahi stayed in touch with her probation officer and were able to welcome client S back to Hīnātore upon her re-release from prison in September.

Client S had not expected to be welcomed back and was extremely grateful to be able to return. Upon this admission, Client S reports feeling like she is truly cared for here, she is able to be helped and trusts the whare, kaimahi and other residents this time around. She fully engages in the programme, especially every week in Mana Wāhine dinner [also referred to as Kai Wāhine, a dinner provided for women experiencing homelessness which is hosted at Te Tāpui Atawhai – The Auckland City Mission] and works with Kaiatarau to stay away from AOD which she recognises lowers her inhibitions and causes poor decision-making. She is an example to new wāhine and takes responsibility for the care and cleanliness of the whare. She has found alternative accommodation in South Auckland and received 12+ support from psychotherapist while she completes the last few months of her release conditions.

# **Client CC**

Client CC is a 41-year-old wāhine, residing at Te Whare Hīnātore from June 2023 to September 2023, and has recently returned for a short spell. She is originally from Australia and had moved to Aotearoa three years prior after the traumatic death of her parent. Her living situation in northland proved unsafe and she was separated from her children and all her family supports in Australia. She fled to Auckland and was referred through the Outreach Nurse at Calder Centre after more traumatic events resulting in the failure of her living situation in Auckland. She presented to Hīnātore frightened, unwell and in pain. She suffered regular panic attacks.

Client CC initially struggled with the tikanga of the whare around curfew but adapted quickly after she began to feel safe. She engaged regularly with staff at Hīnātore and the programme after a short period of settling in. She required considered accommodation due to her mobility issues as well as her PTSD symptoms. Her gratitude for support and a safe environment was expressed through active engagement in the programme. She has actively engaged with the onsite Kai Atarau (psychotherapist) and Kaiwhakaora Ngangahau (Occupational Therapist) and every week. Client CC suffered periods of illness due to her existing circulatory and anxiety problems and engaged with the outreach nurse and Calder Centre regularly.

During her time at Hīnātore, Client CC began to blossom. She formed strong relationships with other residents and was able to extricate herself from problematic relationships outside the whare. Her regular attendance at therapy sessions meant that her anxiety symptoms reduced and her physical restrictions were able to be mitigated. Client C was supported with advocacy at health appointments by kaimahi. One of Client CC's main goals was to secure solo permanent accommodation close to medical facilities. She was actively supported by kaiarahi to find suitable accommodation and was excited to apply for Te Ao Marama in September. She began to plan to study as an interior designer. Her application to Te Ao Marama was successful and she moved into her new apartment in September. Client CC was actively engaged in the 12+ programme and continued to receive support from her kaiarahi and Kaiwhakaora Ngangahau to fit out her apartment with tools for her physical needs. She contacted the whare when she needed extra support.

Unfortunately, a traumatic event occurred, and Client CC requested to return to the whare as this was the last place she felt safe. She was welcomed back in while she sorts out where she wants to go next. She is hapu and is on the list for social housing and hoping to find a place further north near her partner.

# Service delivery & demographic data

Since establishment in 2020 until March 2024, there have been 116 Raukura residing within the walls of Te Whare Hīnātore. The information provided below (see Table 1) was provided to the research team by the kaimahi at Te Whare Hīnātore, as recorded in their database.

# Table 1: Ethnicity

Ethnicity	Total
Māori*	66
Pākehā	25
Pasifika	15
Undocumented	7
Other	2

\*Over half reported as Māori, and within the Māori demographic just under half (32/66) either did not know or did not wish to disclose their iwi affiliations.

# Ages

The Figure below provides an illustration of the range of ages of Raukura engaging the service:

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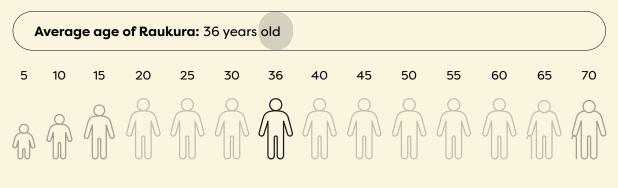


Figure 1: Ages of Raukura

# **Mental health & disabilities**

Diagnoses information below (see Table 2) was provided of 77 Raukura from May 2022 to March 2024 (current building only). Of the 77 Raukura recorded, at least 60 had 1 or more mental or physical health diagnoses (78%), 63% (38 out of 60) had comorbid (2 or more) diagnoses. Many experience co-morbidity of disorders and half <sup>(20)</sup> of AOD cases are dual diagnosis (mental health condition existing alongside the addiction).

## **Table 2: Raukura diagnoses**

Diagnosis	Total
Alcohol and Other Drug (AOD)	40
Legal conditions (e.g. Mental Health (Compulsory Assessment and Treatment) Act 1992)	19
Schizophrenia	14
PTSD	10
Physical	10
Anxiety	9
Substance induced psychosis	8
Bipolar	7
Borderline Personality Disorder	7
Autism	2

These figures only include diagnoses by a medical professional, however most wāhine report symptoms of PTSD, depression, low mood, and anxiety. This is understandable given that they have all experienced at least one and usually multiple of the contributing social determinants of health that lead to homelessness (poverty, incarceration, addictions, unemployment, mental health issues, discrimination, childhood abuse, state care, institutional care) and many are distrustful of the health system so have never received a diagnosis or treatment.

The Kaupapa of Te Whare Hīnātore is based on the understanding that homelessness, hazardous drug and alcohol use and cyclical inpatient mental health admissions, are the

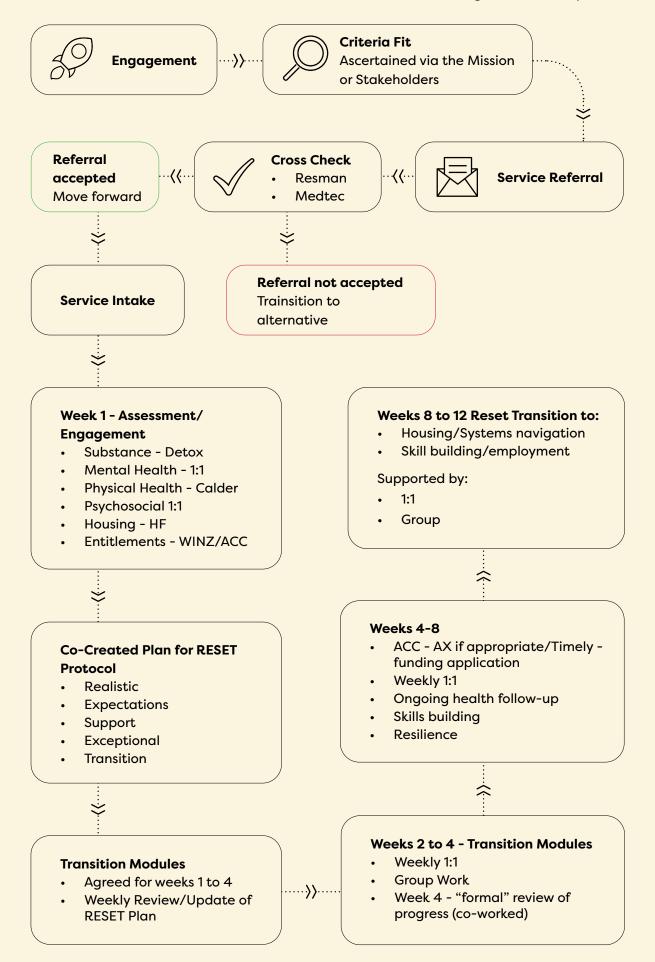
symptoms of trauma not the cause. Wāhine eligible for the service include those who have an extensive trauma background (including sexual and physical violence, neglect and abuse), and typically are overrepresented in the criminal justice system, mental health and addiction services. Women sleeping rough in Inner City Auckland, in Police custody, or on remand; along with those experiencing cyclical mental health inpatient admissions and/or presenting to the Auckland Hospital emergency department as a result of an assault, acute intoxication, self-harm or due to an accident or injury; are also eligible for the service (see the Wainui's pūrākau).

This programme fills a significant gap in the mental health and addictions continuum of care. Despite the acute relapsing nature of the condition; funded harm reduction services are largely absent in metropolitan Auckland. There is an over-reliance on abstinence models, which while highly effective for some, fail to meet the needs of this cohort. Some may struggle with an inflexible 12-step treatment regime, while others are excluded due to their inability to maintain abstinence and the low tolerance for relapse within abstinence services. Some, including those with a traumatic brain injury or intellectual disability, are unable to participate in mainstream therapeutic modalities, which are largely reliant on cognitive capacity. Te Whare Hīnātore supports those currently not served by existing modalities with long-term cognitive impairment and substance dependence and fulfils an existing gap in the mental health and addictions continuum of care in the Northern Region.

# Referrals

Wāhine identified as meeting the eligibility criteria are referred to an eligibility group who are comprised of representatives from Manaaki Wāhine, Local Co-ordination Services, Inpatient Mental Health Unit, and the referring team. The group reviews the referral information along with any supplementary information and determines whether the service is able to meet the needs of the wāhine. The process includes the following key steps depicted graphically below (see Figure 2):

It should be noted that while this pathway appears to be a smooth transition from step to step, progression through the service is non-linear. Flexibility is achieved by incorporating different entry and exit points through the model and Raukura can use a selection of services to best meet their individual needs and personal preferences.



It should be noted that while this pathway appears to be a smooth transition from step to step, progression through the service is non-linear. Flexibility is achieved by incorporating different entry and exit points through the model and Raukura can use a selection of services to best meet their individual needs and personal preferences.

Referral information for May 2022 to March 2024 is provided below, to canvas where referrals typically come from:

Table 3: Referra	l Persons/Or	ganisation
------------------	--------------	------------

Referral person/organization/institution	Total referrals
Te Tāpui Atatwhai – The Auckland City	23
Mission	
Ministry of Social Development	17
Department of Corrections	15
District Health Board	13
Self-referral	4
Women's Refuge (WR)	1
Lawyer	1
Sky City	1
Community Alcohol and Drugs Services	1
(CADS)	
Manukau Māori Urban Authority (MUMA)	1

The high number of referrals received from the Department of Corrections, MSD and DHB presents a strong rationale for a multi-agency relationship and funding streams from these ministries.

# Length of stay

Length of stay for Raukura varied, including some who left and returned:



Figure 3: Length of stay

**Short term:** The shortest length of stay is 2 nights. Short term stays typically occur when there is a mental health/legal condition (e.g. absconding). They may have presented well in the risk-management part of the preadmission assessment e.g. needs to be bailed to address, states they can self-manage medications, denies propensity for self-harm. Upon arrival it becomes evident that they are not ready for the softer level of support Hīnātore can provide and may need readmission to referrer.

This is where readmissions can occur, after a stay in hospital or serving more time for breaching conditions. Upon readmission clients may be more familiar with the level of care Hīnātore offers and are more able to be held by the whare.

**Mid-length terms of stay** (around the 12 weeks mark) - usually occur when whanau need a bit longer before the Raukura can return to the family home after a hospital admission, or when the Raukura doesn't have complex needs and is able to transition into the community

Long term: The longest term someone had stayed was two years and one week. The longerterm Raukura continue to stay at Te Whare Hīnātore as there is no other service that can meet their needs. As Te Whare Hīnātore accepts people in active addiction, there is no requirement for them to be clean and sober (however, they are not permitted to drink or use substances onsite). AOD recovery support is offered when they request it. Many Raukura are not quite mentally well enough to live completely unsupported, however they also aren't considered ill enough to warrant supported living or hospital admission. Kaimahi can liase with corrections personnel and accept people on Electronic Monitoring bail, so some wāhine will remain at Te Whare Hīnātore for the length of their release conditions which is often longer than 12 weeks.

## Why do some Raukura need to stay for an extended length of time?

Some are young or very vulnerable in the community and will stay longer than 12 weeks as they value the support and whanau environment that Hīnātore provides, with the freedom to come and go as they please. Often, for significantly traumatized clients, they require longer support in a semi-structured community before they are ready to consider independent living. If there are setbacks during independent living, clients will often return for support (not necessarily accommodation), viewing Hīnātore as a secure base.

Exit numbers for 2023

In 2023, Te Whare Hinatore supported 22 out of 32 wahine into secure homes.

# Table 4: Exits into other housing 2023

Types of housing situations	Total exits
Moved into permanent housing	10
Moved in with/returned to whānau	10
Moved location (outside of Auckland)	2
Self-exited into Emergency Housing when regaining care of her son/to be with partner	2
Discharged to Social Withdrawal Services (with a plan for residential rehabilitation)	1
Self-exits to alternative accommodation without an attached programme	3
Discharged back to inpatient unit	2
Person no longer wanted to participate	1
Early discharge by staff	2
Breached probation and returned to custody	1

# Barriers to sustainable housing

The limited supply of social housing increases the period of accommodation within the service for some wāhine as the availability and cost of private rentals sits outside their financial capacity. As a result, **requests have been made via MSD for wāhine to remain at Te Whare Hīnātore for an extended period to continue to support, until appropriate accommodation is sourced.** Networking and relationships have been successfully established with Te Tāpui Atawhai – The Auckland City Mission's two recently opened permanent housing services - Home Ground Apartments and Te Ao Mārama. A relationship has been established with Home and Place (Social Housing). Attempts to connect with private housing services have been largely unsuccessful<sup>f</sup>. The General Manager of Te Tāpui Atawhai provided insight into the complexity of attempting to connect with private housing services and different housing options in general:

Gosh, they have to have access to permanent housing [to meet measurements of successful service provision of transitional housing services]. Who can even afford what they're offering now? Like 800k, yeah! So even though we've got social housing, we call it permanent housing or supportive housing, it's only as permanent as you follow the rules because every space has specific criteria [that can exclude wāhine with acute and complex trauma, addictions, and cognitive impairments]. But imagine them being able to have their own place that belongs to them. That wasn't bound by tenancy rules or how you're presenting. So, we need different spaces for different needs. Unfortunately, there's no real space for the real complex whānau. And what I find is what they [policy briefs] think is well and stable, and what community thinks is well and stable, there's a gap and there's no one to fill that gap. So, they'll often

<sup>f</sup>Service provider perspective on why this might be is provided in the Recommendations section in the conclusion of this report.

send the most complex ones to us. That for me is the problem. Where do we put these wāhine?

The longer-term impact of COVID-19 continues to be evidenced in the small number of wāhine who have graduated from Te Whare Hīnātore. COVID-19 restrictions had a significant impact on the service, and the longer-term effects have become evident. While referrals and admissions have been able to resume and at higher-than-normal rates, there are increased barriers to available housing post-treatment. However, moving premises and release of COVID restrictions also had a significant and lasting impact on wāhine engagement and outcomes.

Te Whare Hīnātore offer a space for wāhine that do not easily fit within the diagnostic frameworks to receive social support. Some come to Te Whare Hīnātore because they are not deemed unwell enough or do not fit the criteria (physically, emotionally, or mentally) to be hospitalised or remain in hospital or respite, however they are too unwell to functionally live in the community or with whānau. Some are addicted to substances and are unable to meet the requirements to stay in dry or rehabilitation facilities. Some are not cognitively impaired enough to meet disability support criteria for supported living, however, are not functional enough to safely live on their own. For many of these wāhine, there is simply nowhere else they can be other than on the street.

Due to the complex nature of service users' presentations, they do not meet the criteria or are unable to fulfil the conditions for traditional supported living elsewhere. Raukura users have historically experienced poor outcomes when moving on to living arrangements that do not meet their needs and while gaps in external housing options continue to exist, this will keep recurring. **There is nowhere else that can hold many of the wāhine accessing support and dignity at Te Whare Hīnātore.** 

# Opportunities to regain care and/or custody of children and reconnect with whānau

With increased support to participate in AOD/mental health treatment, legal conditions, and requirements, securing suitable accommodation; and building skills related to relationships, communication and managing daily life; Raukura have successfully increased opportunities to regain care and/or custody of their children and reconnect with whānau. All wāhine report **increased frequency of contact and quality of relationships with supportive members of their immediate and extended whānau.** Whānau relationship improvement is particularly noticeable with young people that come to Te Whare Hīnātore after their first hospitalisation for psychotic onset. Families are initially reluctant to have them back home once they are released from hospital, particularly if there are younger siblings in their care. Once they have spent time at Hīnātore and proved to have stabilised, families are happy to welcome the wāhine home.

Ongoing support following exiting ensures that wāhine do not feel abandoned by Te Whare Hīnātore (see sections "Marae Model of Care - Whanaungatanga" and "Pūrākau -Raukura" for insights into how this is achieved). Raukura still have access to the expertise, relationships and networks that were established in Te Whare Hīnātore. This provides greater confidence to re-engage with the community and find alternative means of support including developing relationships with a wider range of services. While wāhine coming out of Te Whare Hīnātore will be considerably empowered by the therapeutic process of living in a place of safety and support, they may still require advocacy and information to enable them to live independently and assert their rights. Ongoing support is available as long as wāhine need it. They can come and go because a crisis can occur at any time.

# Mua & Muri

When wāhine first arrive at Te Whare Hīnātore, they are housed in the Raukura Whare (Raukura House) which has a mix of shared and private rooms (4 single and 3 shared) and communal spaces (kitchen, lounge, bathroom etc). After 12 weeks, if they are showing good progress, they may have the option to move into the Mareikura villa (3 single and 1 shared), which fosters a more independent lifestyle. Concepts of mua (front) and muri (back) are significant locatives that designate spatial zones of ritual within the context of marae. 'Out the front' delineates the formal roles assigned to those who occupy these spaces, and who are often elders or hold seniority. 'Out the back' designates the spaces for workers whose responsibilities include providing for guests (manaakitangata). Marae are run and governed from the back. The back is where the engine room of a marae is located. Also important here is a sense of safety and security that has often been absent in the lifeworlds of Raukura (<sup>1)</sup>. A life trajectory of chaotic, marginal, and unsafe housing often manifests in feelings of displacement, failure, and worthlessness:

Kai Atarau (Psychotherapist): We've got girls coming from the hospital or corrections. Like all these institutions where they've had to advocate for themselves, or they've been quite controlled and then they come here and yes... it's another organisation. To understand the **felt** difference, that takes time. Like one thing I have noticed with people coming in is - they're really unsettled that first night... like heaps of them don't sleep and I have to remind myself with any new person that comes in - that, this is such a big change. They're hypervigilant, they don't know what to expect and like just how hard it is, how weird it must be because I feel like even for me... how weird it was for me coming in here.

Central to positive social functioning is a reduction in loneliness and the cultivation of a sense of place, connection and being at home somewhere. Hinerauāmoa (Raukura, 19 years old) spoke to the emotional landscape of Te Whare Hīnātore and its function as a marae. She described the shift from the main Raukura whare to the Mareikura villa as one that upholds the wairua of all the wāhine who have come before her:

Hinerauāmoa (Raukura, 19 years old): So, when they move over here and then they find their own place, their wairua is left in there, in this whare, in Mareikura. And that tapu wairua, is a whole different vibe. It's a whole different aura. You're on your own, you have independence, you can think, you can feel, you can heal even, you know, in your own space. I feel like the wairua that the previous women who came before us, who left and have their own place, left it there for us. You know, "If I can do it, you can do it too". Some of them even leave some of their things behind. Like their lights or certain lamps or a certain coat hanger... things, you know? Just to help you get you started. I feel in those little pieces left behind is their wairua, it's just saying "Here are some things to tautoko you and... I don't need this anymore, here you go", you know? They might be second hand but it's still the thought of it, aye? To think that it's someone else's before yours who was struggling with you as well, you know? That's fuckin' mean. In my eyes, that's how I see it.

The excerpt above highlights the importance of functional 'judgement free spaces' <sup>(2)</sup>. Such spaces promote inclusion and acceptance, foster community connections and allow for both public and private settings in which Raukura can both engage with others and take time out for themselves <sup>(2, 3)</sup>. Typically, people occupy more than one role on a marae. Notions of mua and muri, and specific roles, break down, and we can see them as dependent on the presence and willingness of people to contribute. This is encapsulated in the following saying, 'ka tika ana a muri, ka tika hoki a mua', which translates to 'get the back right, and the front will be a success'. Raukura are looking to transition from the back to the front and kaimahi support their efforts to establish themselves as peers and mentors. In this way, the notion of a home-space is internalized and conveyed by Raukura- as a lived part of their daily lives that shape interactions and secures identity:

Kaiarahi (cultural practitioner lead): This [Te Whare Hīnātore] is a whare of potentiality. If you see potential in people, then you tend not to give up on them because that potential will always be there. You know, whether they're down or on a high, the potential will still be there. You don't get disappointed in them, their potential is still there, yeah. Home is having a sense of belonging. It's knowing that that's where your tūpuna are. So, it's having people around you that care about you.

See, a lot of the girls here think that this is their home. And I go, no [speaks softly], it's not your home, it's a marae. You can come and go, but you can't live here forever. But home to me is - belonging... where you're from and where your tūpuna are from. Where your tūpuna are with you all the time. That's Te Whare Hīnātore. You know? You are special, you are loved.

Within te ao Māori (the Māori world), learning to work out the back (first adapting to the Raukura whare) is part of the process of apprenticeship and an important part of manaakitanga, which over a lifetime will see one's role change and move from the back to the front of the marae (to the Mareikura villa and/or beyond into permanent housing). Te Whare Hīnātore is more than a place of shelter. The wāhine who reside within her walls are daughters, mokopuna, māmā, kuia, sisters, friends – they are somebody and imbued with dignity. Te Whare Hīnātore is a space and place that enables whanaungatanga and, in doing so, aims to support Raukura through targeted services, provides opportunities to flourish alongside one another and does so with genuine manaakitanga.

# Recommendations

Below we conclude the report and provide recommendations:

- The experience of homelessness and housing insecurity are as diverse as the wāhine living it. As a result, responses to homelessness must be contained within a model that offers a finely balanced service delivery that has aspects of both flexibility and structure.
- Of particular importance to this report, is the oftentimes impossibility of delivering services that respond to Māori needs when those services are designed to address an issue defined in a way that is fundamentally inconsistent with Te Ao Māori. This obstacle is best summarised by the Manutea

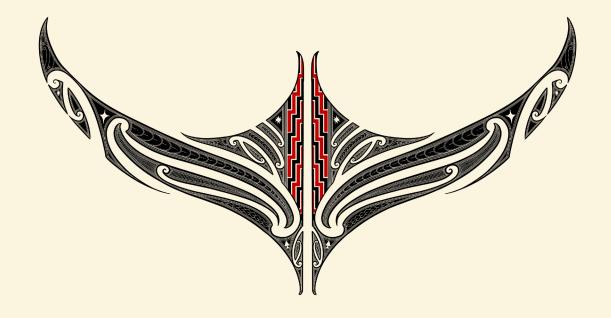
It's often my experience that you're given a framework and you're told to make it Kaupapa Māori and then you look at it and you'll go, "How the hell am I going to make this work?" and it's not resourced well enough and that isn't Kaupapa Māori. So, that's the constant issue that we often experience. Māori staff, just make things work. So, they're the cleaners, they're the cooks, they order kai, they're the key workers, they're the counsellors, they're the drivers, they're admin support, they're the 'everything'. And then they're meant to support and create change. We grew up with mums who did that, right? Whatever was in the cupboard, they'd just made it work. We inherited that. We continue to do that. And I see it, you know, in the entire team. I think it is the superpower of Māori to make do with what they have but also the struggle where they're impacted because they are never resourced enough. So, there's not enough funding [to support multiple roles]. It's difficult to sustain.

Although Te Tāpui Atawhai - The Auckland City Mission as a mainstream provider provides oversight, Te Whare Hīnātore is able to successfully operate a Kaupapa Māori approach to transitional housing because it is tangata whenua-led and centred, employs dedicated kaimahi, is located within a unique physical environment that provides connection to Papatūānuku and there is the cultural expertise to ensure success. The model is genuine and authentic. However, continued successes are placed at risk due to a lack of sustainable multi-agency/ministries funding. Te Tiriti o Waitangi obligations will continue to go unmet.

- Inflexible funding models attached to inflexible definitions of transitional housing (e.g. 12-week length of stay/rigid and set lengths of stay), hinder ability to deliver specialised services to under-served populations. This is not fast work; unique communities require longer support and engagements. The 12-week duration of stay typical for current transitional housing provision is too limited, greater flexibility is needed to meet the unique and complex needs of wāhine with acute and complex trauma.
- The provision of housing is a critical part of the response to homelessness and housing insecurity. However, a lack of understanding of acute and complex, personal, intergenerational and historical trauma means the focus on housing is set up to fail.
   People are unable to move into or maintain permanent housing due to levels of trauma that require longer support and independent living is not always possible.
- Raukura are unable to meet the costs of private rentals, home ownership and waiting
  lists for public housing are long with no guarantees. Further, due to the complex nature
  of service users' presentations, they do not meet the criteria or are unable to fulfil the
  conditions for either private or traditional supported living elsewhere.
- Raukura have historically experienced poor outcomes when moving on to living arrangements that do not meet their needs and while gaps in external housing options continue to exist, this will keep recurring. There is nowhere else that can hold many of the wāhine accessing support and dignity at Te Whare Hīnātore.
- A lack of sustainable funding risks understaffing which means the impact of services provided by Te Whare Hinātore are limited. Greater resourcing and funding would allow Te Whare Hinātore to expand communities of care and to reach unique populations that are currently under-served.
- Kaimahi reported sometimes having to fund their own professional training due to a lack of resources and funding. Prohibitive costs for professional support heighten the likelihood of workforce burnout. Staff are never resourced enough, and, as such, are

undervalued by current funding models.

- The high number of referrals received from the Department of Corrections, MSD and DHB presents a strong rationale for a multi-agency relationship and funding streams from these ministries. A collaborative funding venture would involve the Ministry of Health, Ministry of Housing and Urban Development, Ministry of Social Development, Metropolitan Auckland District Health Boards, and the Accident Compensation Corporation (ACC).
- Potential expansions in the future for Te Whare Hinātore could include spaces for tamariki and mokopuna. While kaimahi spoke of long-term aspirations for this to be an option, they were cognizant of the complexities in facilitating this, including safety for the wāhine and their tamariki as well as emotions that may arise when some are united with their tamariki while others are not.





# References

# The power of pūrākau

1 Rangihuna D, Kopua, M. Te Wehenga a Ranginui rāua ko Papatūānuku. The stages related to the separation of Rangi and Papa. Mahi A Atua; 2014.

2 Lee-Morgan J. Pūrākau from the inside-out: Regenerating stories for cultural sustainability. Zed Books Limited; 2019.

3 Hakopa H. Pūrākau: The Sacred Geographies of Belonging. [Doctor of Philosophy (PhD), Te Whare Wānanga o Awanuiārangi]; 2019

4 Kopua D. Factors that facilitate and constrain the utilization of a Kaupapa Māori therapeutic approach with Mahi-a-Atua. Australasian Psychiatry. 2019 Aug;27(4):341-4.

## **Executive Summary**

N/A

# Part One: Research Design

1 Hillgren P-A, Seravalli A, Emilson A. Prototyping and infrastructuring in design for social innovation. CoDesign. 2011;7(3-4):169-183.

2 Brankaert R, den Ouden E. The Design-Driven Living Lab: A New Approach to Exploring Solutions to Complex Societal Challenges. Technology Innovation Management Review. 2017;7(11):44-51.

3 Doroud N, Fossey E, Fortune T. Place for being, doing, becoming and belonging: A metasynthesis exploring the role of place in mental health recovery. Health & Place. 2018/07/01/ 2018;52:110-120.

4 Hodgetts D, Rua M, Groot S, Hopner V, Drew, N, King P, Blake D. Relational ethics meets principled practice in community research engagements to understand and address homelessness. Journal of community psychology, 50(4); 2022.

5 Rua M, Hodgetts D, Stolte, O, King D, Cohrane B, Stubbs T, Karapu R, Neha E, Chamberlain K, TeAwekotuku N, Harr J, Groot S. Precariat Māori households today: The need to reorient policy to cultivate more humane understandings of whānau in need. Ngā Pae of te Māramatanga. Te Arotahi Series Paper; 2019

6 Pihama L, Campbell D, Greensill H. Whanau storytelling as Indigenous pedagogy: tiakina te pa harakeke. Decolonizing research: Indigenous storywork as methodology; 2019.

7 Hoskins TK, Jones B. Non-human others and Kaupapa Māori research. Critical conversations in Kaupapa Māori; 2017.

8 Halkier B. Methodological practicalities in analytical generalization. Qualitative inquiry. 2011 Nov;17(9):787-97.

9 Hodgetts D, Stolte O. Case-based research in community and social psychology: Introduction to the special issue. Journal of Community & Applied Social Psychology. 2012 Sep;22(5):379-89.

## Part Two: Textbox Insight - Literature Review

1 Groot S, Vandenburg T, Hodgetts D. I'm tangata whenua, and I'm still here: Māori youth homelessness. Precarity: Uncertain, insecure and unequal lives in Aotearoa New Zealand.2017.

2 Groot S, van Ommen C, Masters-Awatere B, Tassell Matamua, N. Precarity: Uncertain, insecure and unequal lives in Aotearoa New Zealand. Massey University Press; 2017 Sep.

3 Amore K, Robinson D. Women's Homelessness and Family Violence. Parity. 2007. 20 (9) 13.

4 Hager D. Homelessness: A Hidden Problem for Women in New Zealand. Parity. 2007. 20(9)14-15.

5 Bukowski K, Buetow S. Making the invisible visible: A photovoice exploration of homeless women's health and lives in central Auckland. Social science & medicine. 2011. 72 (5) 739-746.

6 United Nations General Assembly. The Universal Declaration of Human Rights (UDHR). New York: United Nations General Assembly. 1948.

7 United Nations (General Assembly). International Bill of Human Rights. 1948, 10 December.

8 United Nations. Convention on the Rights of the Child. Treaty Series. 1989, November. 1577

9 United Nations (General Assembly). Declaration on the Rights of Indigenous People (UNDRIP). 2007.

10 Ministry of Housing and Urban Development (MHUD). MAIHI Ka ora. The National Māori Housing Strategy. 2022. Available from https://www.hud.govt.nz/assets/Uploads/ Documents/MAIHI-Ka-Ora-Implementation-Plan.pdf

11 New Zealand Human Rights soci (The Commission). Housing Inquiry, Homelessness and human rights: A review of the emergency housing system in Aotearoa New Zealand. 2022. Available from https://assets.nationbuilder.com/nzhrc/pages/3403/ attachments/original/1670900354/Report\_-\_Homelessness\_and\_human\_rights\_review. pdf?1670900354

### Part Two: A Marae Model of Care

1 Lee-Morgan J. Kainga tahi, kainga rua: A Kaupapa Māori Response of Te Puea Memorial Marae. 2017. Parity, 30(8), 13-14. Available from https://search.informit.org/doi/10.3316/ informit.227855363551990

2 Ministry of Housing and Urban Development (MHUD). MAIHI Ka ora. The National Māori Housing Strategy. 2022. Available from https://www.hud.govt.nz/assets/Uploads/ Documents/MAIHI-Ka-Ora-Implementation-Plan.pdf

3 New Zealand Human Rights soci (The Commission). Housing Inquiry, Homelessness and human rights: A review of the emergency housing system in Aotearoa New Zealand. 2022. Available from https://assets.nationbuilder.com/nzhrc/pages/3403/attachments/ original/1670900354/ Report\_-\_Homelessness\_and\_human\_rights\_review. pdf?1670900354

4 Smith G. The development of Kaupapa Māori: Theory and praxis. Doctoral dissertation, ResearchSpace@ Auckland. 1997.

5 Mead L. Nga aho o te kakahu matauranga: The multiple layers of struggle by Māori in education. Doctoral dissertation, University of Auckland. 1996.

6 The New Zealand Law Commission. Māori Custom and Values in New Zealand Law. Wellington, New Zealand: Law Commission. 2002.

7 Gallagher T. Tikanga Māori Pre-1840. Te Kāhui Kura Māori, 0 (1). 2016. Available from http://nzetc.victoria.ac.nz/tm/scholarly/tei-Bid001Kahu-t1-g1-t1.html

8 Ritchie J. Becoming Bicultural. Thorndon, Wellington. Huia Publishers & Daphne Brasell Associates. 1992.

9 Pere R, Nicholson N. Te wheke: A celebration of infinite wisdom. Gisborne: Ao Ako Global Learning New Zealand Limited, Awareness Book Company Limited. 1997.

10 Metge J. Te rito o te harakeke: Conceptions of the whānau. The Journal of the Polynesian Society. 1990. 99(1), 55-92.

11 Groot S, Hodgetts D, Nikora L, Leggat-Cook C. A Māori homeless woman. Ethnography. 2011, 12(3), 375-397.

12 Moore J. Polarity or integration? Towards a fuller understanding of home and homelessness. Journal of Architectural and Planning Research. 2007 Jul 1:143-59.23

13 Lloyd K, Auld C. Leisure, public space and quality of life in the urban environment. Urban policy and research. 2003 Dec 1;21(4):339-56.

14 New Zealand Government. He Ara Oranga, Report of the Government Inquiry into Mental Health and Addiction. 2018. Available from www.mentalhealth.inquiry.govt.nz/inquiry-report/

15 King D, Rua M, Hodgetts D. How Māori precariat families navigate social services. Precarity: Uncertain, insecure and unequal lives in Aotearoa New Zealand. Massey University Press. 2017: 125-135

16 Nikora LW, Te Awekotuku N, Tamanui V. Home and the Spirit in the Māori World. In He Manawa Whenua: Indigenous Research Conference 2013.

# Part Two: Pūrākau - Raukura

1 "Making Space" works to build capacity within homelessness and housing services in Tāmaki Makaurau to provide safe, non-discriminatory and accessible services for takatāpui and rainbow/LGBTI+ clients, publications and reports can be accessed via their website https://www.making-space.nz/research-and-policy

2 Arnold JH, Gemma PB. A Child Dies a Portrait of Family Grief. Philadelphia, PA: The Charles Press Publishers. Second Edition. 1994.

3 U.S. Department of Health and Human Services. The death of a child, the grief of the parents: A lifelong journey. National SIDS/Infant Death Resource Center (NSIDRC). 2005.

4 Groot S, Vandenburg T, Hodgetts D. I'm tangata whenua, and I'm still here: Māori youth homelessness. Precarity: Uncertain, insecure and unequal lives in Aotearoa New Zealand.2017.

5 Coalition to End Women's Homelessness: Retired, renting, and alone: the housing precarity of our older women. 2023. Available from https://www.coalitiontoendwomenshomelessness. org/womenshomelessnessinvisible/r etired-renting-and-alone-the-housing-precarity-of-our-older-women

6 Earley M. Elderly woman who died while living in her car after eviction wouldn't accept help. Radio New Zealand. 2023. Available from https://www.rnz.co.nz/news/ national/495574/elderly-woman-who-died-while-livingwouldn-t-accept help#:~:text=A%20woman%20who%20was%20found,seat%20on%20 7%20July%2C%202022

7 Robinson B. Homelessness in older age - Auckland's "hidden problem". Howick Baptist Healthcare Ltd. 2022. Available from https://www.hbh.org.nz/homelessness-in-older-ageaucklands-hidden-problem

# Part Two: Mua & Muri

1 Hodgetts D, Stolte O, Chamberlain K, Radley A, Groot S, Nikora LW. The mobile hermit and the city: Considering links between places, objects, and identities in social psychological research on homelessness. British Journal of Social Psychology. 2010 Jun;49(2):285-303.

2 Trussell D, Mair H. Seeking judgment free spaces: Poverty, leisure, and social inclusion. Journal of Leisure Research. 2010 Dec 1;42(4): 513-33.

3 Datta A. "Homed" in Arizona: The architecture of emergency shelters. Urban Geography. 2005 Sep 1;26 (6):536-57.

# An artist's note on imagery – Huriana Kopeke-Te Aho

# 1. Pattern piece 1

This piece was designed to represent the overall kaupapa of both the report and Te Whare Hīnātore itself. The red, black and white poutama (stepped pattern) represents whakapapa and ascension to a higher realm of knowledge, the stars on either side are there to represent Te Whānau Mārama. There are four important patterns that make up the "body" of this piece. The first is koru, koru in this context represents new beginnings and new life, the second pattern is kōiri and represents self reflection/turning inwards as well as protection and nurturing. The smaller koru are sheltered and protected by the larger koru. The third pattern is called puhoro and it represents movement, agility and speed and it can also represent water, particularly movement within water. The last pattern is called mangopare and sits at the base of the piece, mangopare represents the hammerhead shark, it symbolises courage, strength, leadership and unrelenting determination. Lastly, there are two "filler" patterns, one is unaunahi (rounded pattern) which represents fish scales and symbolises health, safety and protection. The second pattern is pakati (the more diamond like pattern) and represents strength, warriors, courage and strength. This is also a tohu to represent the relationship between raukura and kaimahi at Te Whare Hīnātore.

## 2. Pattern piece 2 - Hīnātore pare

The central figure is a representation of Hīnātore, numerous koru patterns are used in this particular piece to highlight the association between Hīnātore and new potential, hope and possibility.

## 3. Marae Model of Care (V1 + V2)

In this piece, it was important to ensure that the raukura were centred. The middle zigzag pattern is called kaokao and represents protection (it mimics the shape of the arm/elbow when you embrace someone as well as the shape of the ribs which protect the vital organs). The triangular pattern is niho taniwha and in this piece the main triangle shape represents strength and stability, the smaller repeating triangles represent whakapapa and the whānau, hapū and iwi structure. The poutama represents various stages of achievement as well as whakapapa. The wharenui both surrounds and protects the raukura that sit at the centre.

## 4. Raukura Icon 1 (V1 + V2)

There are two versions of the icon drawn upon to represent raukura, the first icon is intentionally very simple, and the second has some added detail. The pattern on each side

are made up of three patterns, the first is mangopare, which represents strength, courage and unrelenting determination, the second is koru which represents new life and new beginnings, the last is puhoro which philosophically represents swiftness and agility and physically mimics the movement of wai.

## 5. Raukura Icon 2 (V1 + V2)

This version of the raukura icon includes pou, while pou are more commonly thought of as poles, upright supports or posts, in Māori cosmological narratives, pou are pillars of light, used to keep sky and earth separated allowing the environment and consequently, people, to prosper and grow. In these pieces, the pou represent the kaimahi of Te Whare Hīnātore, supporting and uplifting raukura. The second version includes the same pattern on either side which is explained above.

# 6. Hinerauāmoa Icon

The star itself is made up of niho taniwha, pātiki and koru. Niho taniwha to represent genealogy and histories passed down over time, pātiki (diamond shape) which represents abundance and not only providing for your immediate whānau but for your wider community as well. The koru both within the star itself and in the background represent change, new life and new beginnings.

# 7. Parikoikoi Icon

This piece represents the gloomy light of Parikoikoi, the whenua represents grounding, security and safety and the pattern within the whenua is called koiri, representing nourishment, protection and community.

## 8. Marama Icon

This icon includes the shape of a crescent moon, the main "body" of marama consists of three specific patterns. The first is koru, koru in this context represents new beginnings and new life, the second pattern is kori and represents self-reflection/turning inwards as well as protection and nurturing. The smaller koru are sheltered and protected by the larger koru. The third pattern is called puhoro and it represents movement, agility and speed and it can also represent water, particularly movement within water. There are also two "filler" patterns, one is unaunahi (rounded pattern) which represents fish scales and symbolises health, safety and protection. The second pattern is pakati (the more diamond like pattern) and represents strength, warriors, courage and strength. The design also features niho taniwha, the main triangle shape represents strength and stability, the smaller repeating triangles represent whatapapa and the whānau, hapū and iwi structure, The small stars represent Te Whānau Mārama.

#### 9. Wainui Icon

The icon is designed to mimic the shape of water as it moves. There are two patterns within this piece, puhoro and koru. The represents movement, agility and speed and it can also represent water, particularly movement within water. The koru represents new life and new beginnings and within this particular context, philosophically it represents the cleansing power of wai. In Te Whānau Mārama, Wainui is the māmā, as such, this pattern is appropriate as it also represents the ideal whānau structure and relationships between parent and child/tuakana and teina.

# 10. Hīnātore full page illustration

The sun, moon and stars are placed above the main figure of Hīnātore to represent her place as the fourth born daughter of Te Whānau Mārama. The mangopare kowhaiwhai that borders the central image, represent strength and courage in the face of new challenges, poutama in the top corners represent whakapapa and various levels of achievement and there is a subtle triangular pattern in the background which is called niho taniwha. The triangular shape of the niho taniwha represents strength and stability. The repeating triangles within the main triangle represent the whānau, hapū and iwi structure as well as stories, histories and practices passed down over time. Feathers are included in reference to the relationship between the structure of Te Whare Hīnātore, the kaimahi and the raukura. Hīnātore cradles a small glimmer of light, protecting and nurturing it so that it may reach its full potential.

## 11. General Kowhaiwhai 1 (Mangopare - all versions)

The central image in this kowhaiwhai is called mangopare, it represents the hammerhead shark and it is a symbol of strength, courage and unrelenting determination. On the landscape mangopare kowhaiwhai, small stars have been included to represent Te Whānau Mārama as well as koru on either side of the central mangopare design to represent new life, change and new beginnings.

# 12. General Kowhaiwhai 2 (Poutama - all versions)

This kowhaiwhai is made up of poutama, commonly used in educational context as well as the tukutuku panels of wharenui. Poutama represents whakapapa as well as various stages of enlightenment/advancement, growth and achievement.

