

CaDDANZ



Capturing the Diversity

Dividend of Aotearoa New Zealand

LITERATURE REVIEW

14th April 2021

Diversity, Belonging and Inclusion in Aotearoa New Zealand: a review of consultation and community engagement

*This section of the literature review has been updated on 20 April 2021. References to
'elderly' have been replaced with 'older people'.*

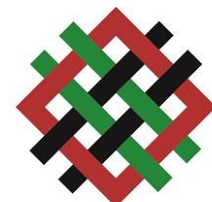
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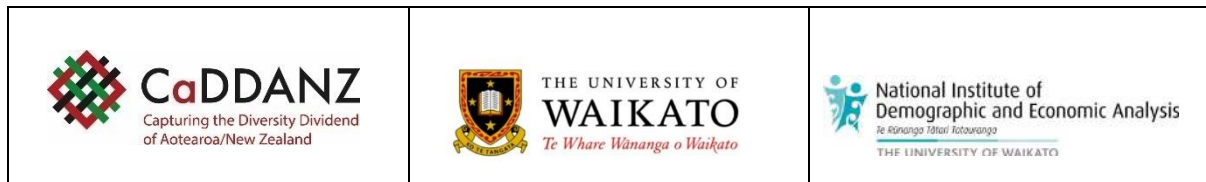
Capturing the Diversity Dividend
of Aotearoa/New Zealand

The Inclusive Aotearoa Collective (IAC) project was developed around the concepts of connection, kinship and belonging. It is about cultivating an Aotearoa New Zealand founded on the partnership of Te Tiriti o Waitangi that provides a place for all. Their vision is of a collaboration of people across the country committed to building a socially inclusive Aotearoa New Zealand. To achieve this vision, the IAC will develop a Diversity & Inclusion Strategy which will bring diverse groups together in a way that will empower communities to build and strengthen actions at the regional and local level.

IAC has approached the National Institute of Demographic and Economic Analysis and the Capturing the Diversity Dividend of Aotearoa New Zealand research project at the University of Waikato for research support – namely to lead a review into previously-held consultation with community and Government organisations and subsequent documentation of these consultations. We have been delighted to contribute to this important work.

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For more information about CaDDANZ visit www.caddanz.org.nz or NIDEA www.waikato.ac.nz/nidea/



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Executive Summary

This literature review presents an overview of consultation that has taken place on issues of diversity and inclusion in Aotearoa New Zealand. This review was undertaken by the Capturing the Diversity Dividend of Aotearoa/New Zealand (CaDDANZ) research programme on behalf of the Inclusive Aotearoa Collective.

This report focuses on the acceptance of different kinds of human diversity in society and the barriers people face to inclusion and belonging. The report centres around two key questions:

1. What prevents/are the barriers to individuals and communities being who they want to be, and to establishing a sense of belonging?
2. What needs to change to make enable individuals and communities to be who they want to be and feel like they belong in society?

The communities who are the focus of this report are incredibly diverse and even within these communities there is significant heterogeneity. As such the issues faced are varied and may or may not overlap. In common is the desire to have a society that is inclusive and provides belonging for all.

Because views on diversity and inclusion are expressed in a range of fora and forms, the report uses a broad definition of consultation, using documents that infer that consultation has occurred or that gather together people's perspectives in a manner akin to consultation. The review has looked at the following communities, broadly defined: Rainbow, Youth, Disabilities (including neuro-diverse), older people, Tangata whenua, and Ethnic. The time frame of consideration was from 2014-2019. However, there were some documents included that were published outside this time frame because they addressed matters essential to the project.

The review has highlighted that health and wellbeing are significant issues for all communities. Some individuals from all of these communities have suffered from mental illness and mental distress from being excluded and marginalised. Though all have access to the health system, certain communities have more health issues than others. The disabled, rainbow, and older people communities have issues with access to health care or how such health care is provided. The older people and the disabled also require care services that are more accessible and better funded. The health system is slow to adapt to bicultural models of health, especially in terms of providing for Māori health models. Cultural health competency in health care is also lacking in much of the system despite rhetoric that states otherwise.

Education was also identified as a factor for most of communities and centred on two issues: 1) public education of diversity and inclusion (or the lack of it) and 2) the education system itself. A number of reports and consultations have indicated that more needs to be done regarding public education in relation to diversity of Aotearoa and the need for an inclusive and participatory society. This lack is exemplified by increasing reports of racism, sexism, and hate speech and attacks on both individuals and groups from a wide range of minoritised communities.

The education system itself is also seen as an issue for many of communities. Education is situated in colonial, heteronormative ideologies and as such fails to meet the needs of many of communities because these ideologies actively marginalise people who are seen as different. Reports discussed in this review suggest there is a need for greater cultural and sex/gender competency. From a disabled perspective, there are issues with access both physically and in regard to material and information about relevant education. There is a need to provide activities and events within education providers to enable different communities to feel belonging and feel respected while at the same time enabling other communities to understand them and gain respect for them.

The issue of employment was noted in consultation undertaken with many communities. Some communities feel a stigma against them within employment. Muslim women felt this in particular.

There are not sufficient equal opportunities to enter and progress within the workforce. There is a greater need to incorporate sex/gender diversity, as well as cultural and religious diversity in workplaces.

A central theme highlighted in consultation amongst almost all of the groups is marginalisation. Society has had a particular perspective of individual and community differences that take shape in stereotypes which lead to discrimination and marginalisation of most of these communities. Racism and sexism have been noted as having a substantial impact on the inclusion of communities. Discrimination does not only occur from dominant to minority groups in Aotearoa, but can also occur between and within communities, such as particular religious or ethnic groups' views toward the rainbow community. The affect is not only stigmatising, but also influences wellbeing and the ability to participate fully and freely in society. Exclusion is typically a feeling of acute alienation, and for youth in particular, social exclusion (along with discrimination) is experienced as pervasive¹. Exclusion breeds exclusion (in vicious cycles) and inclusion breeds inclusion (in virtuous cycles)¹. Where there were supportive families/whānau and networks, people have felt included, at least to a limited extent, but otherwise they developed strategies to hide mental distress from others and/or safe havens within the wider exclusionary community¹.

A feeling of fear and lack of safety are also of concern for many communities. Safety concerns associated with the fear of verbal and/or physical attack, in particular for women and the rainbow community but also ethnic and the disabled communities as well, restrict them from being able to participate in society and negatively impacts on their health and wellbeing. People need to be safe being who they are or what they believe; they also need to *feel* safe.

In addition to racism, sexism, and other forms of marginalisation, many of these communities also report facing structural inequities in attaining employment, financial, health, crime and equitable outcomes. Reports suggest that it is time to move from a deficit theory model to a social model that considers what barriers need to be removed in the face of the inequities that these communities face². National structures are deeply rooted in colonial, patriarchal ideologies that have inhibited meaningful change². To provide equality to all people, there are special measures required to ensure equal outcomes including “access to decent work, healthy affordable housing, and effective delivery of health, education and other services”².

Most of these communities have indicated the importance of supportive networks. These networks have been important to provide a means of support when they are marginalised and often isolated. Support networks require allies to help the broader society to be a more inclusive and caring society. Advocates from these support networks need more support from government and other sources (such as philanthropy) to enable their continued work in this area.

Diversity for its own sake, as a public good, and as a vision for a future society remains to be articulated³. The greatest efforts in inclusive policy have been at the level of design, primarily by maximising the presence of members and promoting visibility for communities of difference. Inclusionary policy making has had some impact in response to a rise of neo-conservatism that compromises the inclusion of communities⁴. However, policy efforts have to date had limited transformational impact in advancing the wider social inclusion of diverse communities⁴.

The review canvassed a wide range of material that affirms that everyone should feel that they belong⁵. All people need to have a sense of belonging, feel connected, secure, safe, accepted (able to be who/what they are and to be able to freely express their views) and valued⁵. A diverse and inclusive society requires opportunities to learn about others. That is, there are opportunities to teach and learn, to hold dialogues with different peoples, to continue to communicate in times of celebration and adversity, and to influence others to be comfortable with diversity. A key point highlighted in consultation is a need to have more societal ‘conversations’ about social cohesion⁵. Sense of

community is also very important, at a basic level, in preserving and strengthening whānau/families and knowing your own neighbours⁵. The experience of inclusion is feeling as if you are where you should be, with the people you should be with, and as the person you really are¹.

Diversity includes the ability to connect with others, set common goals, resolve conflicts, show resilience, compromise when necessary (on the part of all ethnic and cultural groups, including both newcomers and more established communities)⁵. In this context, reports discussed in this review assert that diversity should be a space to reject racism, sexism, and other forms of marginalisation and promote a space of tolerance, open-mindedness, respect for difference, and respect for others' values. It is the role of all groups, particularly leaders, to promote these qualities. Even in a diverse multi-cultural society, there are some common values. For example, honesty, respect for each other, fairness, support for fundamental human rights and belief in the importance of family/whānau, education and hard work⁶. Leaders and role models should promote, uphold and demonstrate these values, and encourage children and young people to understand and follow these values⁵.

The role of government was highlighted across the consultation and reports reviewed here. Reports suggest that the government should establish social infrastructure to enable social cohesion in terms of social relations, especially between different cultures⁵. Government must also enable representation of all diverse communities in governance structures in order to increase the scope for minority group perspectives to be represented in decision-making processes⁵. When government engages with communities, it must involve creating strong and sustainable relationships and significant investment at the outset - this should not be treated as a 'one-off transaction'⁶. Effective engagement with Pacific peoples involves creating strong and sustainable relationships⁶. Local and national governments have responsibility to provide space and resources for diverse communities to plan, talk, develop, share, communicate and feel safe⁵. The goal should be to further integrate and fuse the interests of the diversity of communities within the larger New Zealand community, without eroding each community's sense of identity in that process⁵. The responses that followed the 2019 Christchurch terror attacks have been viewed as an indication of a shift in the everyday encounters among diverse peoples. That shift has generated hope amongst some communities that there is a greater willingness to participate in an honest dialogue about identity and belonging for all New Zealanders, regardless of their differences.

Rainbow Community

The rainbow community is a grouping of various sex and gender minorities that are often considered outside of the male-female binary. The community includes:

people who identify as takatāpui, lesbian, gay, bisexual, queer, intersex, transgender, transsexual, whakawahine, tangata ira tāne, mātū (Tahiti and Hawaii), vakasalewalewa (Fiji), palopa (Papua New Guinea), fa'afafine (Samoa, American Samoa and Tokelau), akava'ine (Cook Islands), fakaleiti or leiti (the Kingdom of Tonga), or fakafifine (Niue).

The range of identities within the rainbow community was noted in the recent mental health submission for the Government Inquiry into Mental Health and Addiction – Oranga Tāngata, Oranga Whānau⁷. This submission highlighting existing research in Aotearoa New Zealand on rainbow people's mental health provides evidence regarding the need to foster belongingness among these communities. Rainbow people were more likely to report worse general wellbeing and mental health than the general population⁸⁻¹⁰. Discrimination and oppression occurred at the collective level, and the burden of stress negatively impacted mental health of rainbow people¹¹. Self-harming and suicidality were identified as epidemics requiring greater dialogue and awareness at the collective level of society rather than the sole problem of rainbow people¹⁰⁻¹². Suicide is a resultant from cisheteronormativity social norm (the belief that gender binary and heterosexuality are default) that reflects the wider discourses on masculinity and reluctance to seek healthcare in Aotearoa New Zealand¹¹. Rainbow people who had been discriminated against for sexual and/or gender identities were more likely to manifest mental health difficulties¹⁰. Despite being more likely to report feeling lonely and being excluded from social situation, rainbow people remain active contributors to the wellbeing and happiness of family, whānau, friends, and wider society⁸. It is important for rainbow people to be named as a priority in mental health policies and suicide prevention strategies^{7,13}.

Lengthy waiting times to access mental health support is a prevalent problem affecting rainbow people¹². Rainbow people who access mental health services risk facing professionals who make assumption that they are straight or cisgender¹², and there is an urgent need for mental health professionals to be educated about sex, sexuality, and gender diversity^{12,14}. Mental health professionals working in rainbow health are encouraged to take an affirmative stance (embrace positive views of rainbow identities and consider the impact of discrimination on their lives), respect self-determination (respecting the way rainbow people express their identities), engage in self-reflection (reflecting on own identities and privileges in an ongoing process), acknowledge the diversity of rainbow people (recognise the diversity of experiences and needs among rainbow people), learn about rainbow experiences and needs (understand common challenges, strengths, and resilience's), and support rainbow people from ethnically diverse backgrounds to explore and utilise their own cultural resources for resilience^{12,14-16}. In order to break down the pervasive ideologies and pathologising views which exist towards members of rainbow communities to this day, people in caring professions, and in particular, health professionals need to act as allies and facilitate opportunities whereby empowerment can take place.

Cisheteronormativity is so entrenched in society that the general population learns from media and surrounding environments that it is acceptable to make disparaging remarks about rainbow people¹⁷. It is common for rainbow people to report having been discriminated against^{9,10} and to conceal their sexual and/or gender identities to avoid intimidation^{18,19}. Negative societal attitudes have conspired to foster low levels of social acceptance resulting in further stigmatisation of rainbow people²⁰. Rainbow people reported feeling unsafe in a range of contexts such as waiting for or using public transport and walking alone in neighbourhood after dark¹⁰. Rainbow people also experience high rates of intimate partner and sexual violence²¹, and they are unlikely to report these incidents as they do not believe it will be dealt fairly or have insufficient knowledge of where to seek help²¹. In the university context,

rainbow students raise concerns about their physical safety and fear of negative outcomes from interacting with staff^{18,19,22} and rainbow staff feel the need to hide or contextualise their identity in their work place and in their teaching due to safety concerns¹⁸. While being visible on campus can sometimes lead to different forms of discrimination and marginalisation, it can create a safer space for rainbow people and promote social connectivity and academic success¹⁸.

It is necessary to recognise the specific experiences of rainbow people in anti-violence strategies, policies, and services^{10,21}. To resolve rainbow people's reluctance to seek help from mainstream services due to homophobia, biphobia, and transphobia, there is a need to develop relationships with rainbow people and training for mainstream violence services on preventing and responding to rainbow people's experiences of partner violence²¹. Institutions across various settings have the obligations to dismantle systemic structures (cisheteronormativity) that contribute to the culture of oppression towards rainbow people, as well as to protect these communities from discrimination by providing comprehensive resources and training about human rights issues¹⁰. Cisnormativity also prevails with the lack of insight into the specific discrimination faced by transgender people, lack of inclusive gender-neutral facilities, and problems of non-inclusive gender options on administrative forms and within teaching activities^{10,18,19,22}. There is a flow-on effect regarding feelings of safety, that is, the safer that a community or sub-community is, the safer one feels to be who one is and to be 'out' in the community. This was illustrated in a consultation within a university environment¹⁸. Numerous recommendations were provided to create a safe university space for diverse staff members and students to thrive psychologically, socially, and academically by being their authentic 'visible' self. These recommendations included:

- raising awareness about rainbow issues to reduce rates of discrimination and harassment experienced by rainbow students, delivering educational programmes for staff that support the active creation of inclusive environments for rainbow students²²;
- developing a comprehensive list of all current gender-neutral facilities on campus^{18,19};
- investigating policies, processes and curricula to ascertain areas where diverse gender identities require inclusion²²;
- supporting ongoing research into overcoming barriers to expanding gender-neutral facilities on campus; and
- creating events where findings relating to rainbow communities can be celebrated²².

It is a concern that rainbow people are less likely to feel belonging to neighbourhood and workplace compared to the general population¹⁰. For rainbow people who have experienced abusive relationships, friends and family members were rated as most supportive, followed by counsellors, and sexual violence agencies²¹. While biological family/whānau members were identified as key components of their support networks, whether they were children, grandchildren, siblings, or other relatives, this was not a universal finding, as some rainbow people reported experiences of rejection from their family²³. Resources about supporting rainbow communities focusing on friends, family, and whānau should be widely distributed^{21,24}. Whānau is the first and most important place of protection for takatāpui rangatahi (rainbow youth) who face violence and abuse in their lives²⁵, and it is the whānau's responsibility to ensure that takatāpui rangatahi recognised that their inclusion was never in doubt. True acceptance of takatāpui rangatahi is more than just accepting them as individual members of the whānau, it extends to the partners they brought home, the friends they found and the rainbow organisations and activism they became involved with²⁵.

Rainbow support groups on campus that aim to provide inclusive, visible, and responsive services are essential for rainbow students^{18,19}, especially when advocating for anti-discriminatory policies and other core issues such as availability of gender-neutral bathrooms¹⁹. Rainbow pride events were framed as an opportunity to implement social processes of inclusivity, raising awareness and activism to facilitate the normalisation of rainbow identities, and were important for rainbow people to demonstrate increased resistance to discrimination through social processes including social support and activism¹¹. A positive interaction between rainbow and straight individuals at rainbow pride events was found to foster a visual representation of public support and frames queer communities as received identities within society¹¹. Encouraging community belonging and connectedness is vital to

ensuring that rainbow youth are able to make meaning of their wider communities, which thus facilitates political and civic engagement²⁶.

School cultures were largely described as negative by transgender students²⁷ and hostile towards queer attractions¹⁷. Rainbow youth spoke about wanting to have their identity acknowledged regardless of their sexual orientation and gender; they didn't want to be put in a box²⁸. Some schools were found to be discouraging students from attending formals or balls with same-gender partners because of the potential harassment they could receive¹⁷. Transgender students reported a lack of important legal protection which would enable them to participate fully in school²⁹. Reducing bullying related to rainbow identity and expression is likely to have a positive effect on the mental health and educational achievement of rainbow youth^{13,14,27}. Challenging cisheteronormativity should become the dominant pedagogy within schools³⁰. The current cisheteronormativity state pervading schools¹⁴ calls for a need to create safe spaces of belonging for rainbow youth, so they have the space to grow, explore, and learn^{13,26,27}. School management not only has a legal duty to affirm sexual and gender diversity within the school. It also has a moral responsibility to do so, including putting in place explicit non-discriminatory policies against rainbow students and staff, encouraging rainbow students to attend the formals or balls with their same-gender partners, encouraging students and teachers to use rainbow students' preferred pronouns, having trans-accessible toilets, and educating all students about rainbow issues^{17,29}. Efforts to reduce discrimination and harassment against rainbow people should address gender identity and sexual orientation as a distinct but related area of marginalisation, such as in the Otago University study¹⁹. While rainbow people experience shared forms of discrimination as well as shared sense of pride and strength in the face of adversity, people with particular gender identities and sexual orientations can experience unique forms of discrimination¹⁹. Rural towns can be isolating and unsafe for rainbow people wanting to explore their identities¹³. Older rainbow people experience what is often referred to as "double jeopardy"; where they are stigmatised not only because of their sexual identity but also because of their age²⁰. Mental health challenges affecting rainbow people should be also understood by linking to racism, sexism, cisheteronormativity and challenges in relation to intersecting identities^{15,23}. For Asian rainbow people, community connections, family/whānau and peer support and role models could facilitate resiliency¹⁵. Claiming takatāpui identity could be seen as a means of decolonisation with cisheteronormativity being normalised in the context of colonisation for Māori, and is particularly important as it enables takatāpui to reframe their identity from negative or marginalised to one based on whakapapa, te reo and tikanga, inclusion, intergenerational values, and belonging²⁵. Gender identity and expression, sexual identity and being true to oneself are integral to being a rainbow person, and it is a part of wairua of takatāpui.

Intersex people have often been connected with the rainbow community, but there are many intersex people who are males or females and do not see themselves as part of the rainbow community. They are people who are born with physical sex variations (such as chromosomes, gonads or hormones) that don't fit medical and social norms for female or male bodies³¹. They represent sex diversity as men, women, non-binary people (people who live beyond gender), have transgender and cis-gender experiences, and various sexual orientations (including heterosexual).³¹ Due to their bodies not matching the norm of male or female, they still face legal and medical challenges, including unwanted and unnecessary medical treatment performed to physically match their body to their assigned sex.³² As there was a realisation that biology is no longer a binary system of sex, gender was created by John Money to habilitate intersex people into malehood and femalehood to maintain social order. Thus, after physical normalisation surgery and treatment, they were socialised into their 'gender' – the ideals of male or female. Sex was seen as 'virtually superfluous' and beyond critique. Gender became the structure to enable the male-female heteronormativity. The result of gender is the continued making of intersex people and their sex diversity invisible in society³³. The enforcement of gender on society has a physical, psychological and spiritual impact on their lived experience.³² They suffer in multiple ways: firstly through the enforced medical treatment to the 'gender assignment', and secondly, by the gendered system disregards the biological and psycho-social interconnection of

becoming for intersex people. Both of these continue the invisibility of intersex people and the continued discrimination against them.

Youth

Youth are for the purposes of this review aged 12 to 24 years as used by government agencies when carrying out youth research and advocacy works³⁴. Youth deserve special attention in Aotearoa New Zealand, not only because they constitute the most valuable human resource that forms the foundation of future nation development, but they also face specific challenges during the transition from adolescence to adulthood that increase their potential for poor outcomes, risk or danger. A more contextualised understanding of youth is needed by placing youth in contexts of time, location, and knowledge, and realising that the construction of identity and belongingness among this age group is highly heterogeneous in nature³⁵. One of the most established national representative surveys on youth health and wellbeing is the Youth2000 survey series³⁶, which employs a socioecological approach to identify the risks and protective factors that influence youth's health and wellbeing in Aotearoa New Zealand. The Youth2000 series has been surveying young people from 2001 to date, and will be releasing their findings of 2019 by the end of 2020³⁶, which this paper will not be able to review on.

In their report on *What Makes a Good Life?*, the Office of the Children's Commissioner^{28,37} identified a range of key themes: being happy and enjoying life; having hopes and aspirations for the future; having supportive family; whānau; and friends; being able to access essential needs such as a place to live and adequate food; having promising physical and mental health; feeling safe; having positive school education where they feel belong; and feeling valued and respected. This also corresponded with a sense of neighbourhoods and community. There was a correlation with the wellbeing of youth³⁸, especially for those of rural regions³⁹. Frequent contact with neighbours, as well as community-level activities and support for young people through existing institutions such as churches, sports clubs, and community groups serve as essential community assets for young people³⁸⁻⁴¹. Having an established community relationship also encouraged young people to seek support and help in times of need⁴². However, youth face significant challenges in many different areas.

Conversations about suicide among youth need to be normalised by developing strategies that speak to the ways that young people themselves understand suicide^{43,44}. This includes recognising the contagion effects of suicide behaviours within peer groups and family/whānau networks as additional risk factors for youth, acknowledging the ubiquitous nature of the pressures that youth are dealing with, facilitating youth's ability to extract themselves from difficult situations in which they experience little power, and recognising the expression of suicidality as a form of help-seeking and educate family/whānau to respond to this accordingly^{43,45}. In this way, young people are less likely to see their suicidal feelings as a source of shame and more likely to seek help⁴³. Suicide education programmes should also be supplemented by professionals mental health support for young people that does not pathologise and stigmatise suicidality, but instead facilitates young people's engagement with support.

Vulnerable youth are those who have been exposed to adverse negative childhood experiences or are facing significant life challenges. Vulnerable youth have considerably more challenges coming into adolescence than their counterparts. Programmes targeting at risk youth need to pay specific attention to components that address risks arising from mental health issues and also take a more ecological approach, with partnerships between groups and agencies such as education and mental health services⁴⁶⁻⁴⁸. There are also important implications for community based interventions in terms of activating community resources to facilitate the participation of vulnerable youth in resilience-building youth activities so that these organisations are confident they can welcome such youth into their programmes⁴⁹. There is a need for funding and policy development that facilitates collaborative efforts between schools and social services so that contextual risks can be addressed while at the same

time making it possible for youth engaged in risky behaviours to participate fully in normative curricular and extra-curricular activities with pro-social peers⁴⁹. Youth in the justice system require encouragement and professional support to engage in the youth justice process. The youth justice system needs to consider how to effectively provide consistent communication with young people that ensures they understand the process, while engaging family/whānau in remand decision making and advocacy. This requires having professionals who are trained and skilled in working with young people in the justice system, and with whom young people are able to build rapport and trust through proactive support⁵⁰.

Schools are described as the “bread and butter of youth developments”⁵¹ wherein young people should feel like they belong and are affirmed in their identities, as this allows a safe site for deeper exploration and competency building^{42,51,52}. School however, remains an active site where youth report being bullied, victimised, and socially excluded^{47,53,54}. Youth who reported being bullied at school⁵³, from low socioeconomic status⁵⁵ were more likely to engage in non-suicidal self-injury. Youth from low socioeconomic backgrounds were also more likely to binge drink and exhibit hazardous patterns of alcohol misuse⁵⁶. Before effective learning can occur, youth need to experience a sense of acceptance and belonging within the classroom⁵⁷. School belongingness is important in regards to mental health, particularly for youth who do not have stable relationships and connections at home⁵³. Group initiatives that promote acceptance of gender and sexual diversity (e.g., rainbow alliance groups), political freedom of speech (e.g., feminism awareness), and cultural expression, are likely to foster school connectedness, and assist with sense of belonging, respect, and feeling safe in schools⁵³. Contextual education around mental health, alcoholic use, self-harm, and suicide need to be provided at school alongside knowledge to regulate emotion, self-care, and detect early warning signs^{44,53,56,58,59}. As youth are more likely to utilise their peers as a primary source of support, school play a role in reducing stigma towards mental health problems and educating youth on offering support for distressed peers in a safe manner⁴².

It is a concern that a high number of youth reported teachers at school did not step in to address bullying. Teachers and school staff are encouraged to identify students whose families are experiencing socioeconomic deprivation⁵⁵, have less family/whānau connection or are potentially estranged from their family/whānau in some way, and whether these students’ connectedness to school can be bolstered to potentially improve mental health outcomes⁵³. Teachers need to be mindful of how their students are coping at school, to consider their social and emotional wellbeing as well as their academic wellbeing, and to encourage them to seek support if necessary⁴⁴. Furthermore, collaborative and communicative relationships are needed between the school and the caregiver as positive relationships are vital to positive school experiences among youth^{28,37}.

Benefits of having support from family/whānau members on youth wellbeing were brought up across numerous academic research^{39,46,53,56,60,61}. Often, intergenerational education is more effective than traditional classroom efforts alone⁵⁶. Family/whānau has the potential to assist youth with educational engagement and ensuring youth are staying on-track at school, and this is especially true for vulnerable youth⁶¹. Family/whānau would benefit from similar information being made available to appreciate the stresses involved in the support process and to be able to offer creative solutions to support youth⁴⁶. As family/whānau structures evolve, policies to increase effective co-parenting should be investigated by the government, including providing in-home education programmes for new fathers or relationship building or exploring programmes that can improve the quality of the parental relationship in relation to childhood adversities⁴⁶.

It is necessary that the messages within the public domain are accurate, and that the media consider the purpose of their reporting⁴⁴. Youth need to be supported to become informed and resilient consumers of media so that they are equipped with information to deal with the negative consequences of harmful media content⁶². Stigma regarding mental health problems and seeking help was exposed to youth via society’s stigma and judgments, and this is particularly evident in popular culture and media⁴².

System change needs to occur by recognising young people as the experts in their own lives^{28,41,51,52,57,59,63}. Traditional expectations for civic engagement and participation are often not appealing for youth because they are not relevant or accessible, and frequently tokenistic⁵¹. System change should begin with promotion of strengths among youth, provision of better role models, fostering of agency for effect youth leadership, and improved services and institutions for those who are marginalised^{28,51,63}. Continuous investment in supporting young people should be deemed worthwhile⁵¹. Government plays a crucial role in enhancing the support and resources provided by schools and the support systems that are set up within the education system to enhance communication and information-sharing across agencies, and provide training on the needs and strengths of care-experienced children and young people to those involved in their care and education^{28,37}. Professionals that work with children could benefit from focusing on the lived experience of youth in their environments^{48,64}. Youth were more likely to remain engaged with services when relationships are built based on mutuality and reciprocal recognition⁶³⁻⁶⁵. It is important for service providers to recognise engagement with youth as an ongoing process rather than a singular event, and made the effort to connect with young people throughout the challenges they face.

Disability

The disability community comprises of a wide array of both physical and intellectual, and neuro-diverse conditions. The community aims to overcome pathological considerations of their condition and rather, adopt a social model of disability that focuses on identifying and addressing the social barriers as the main contributing factor that disables people. There are numerous organisations that advocate on behalf of their communities and most of these are specific to particular conditions. Many of the smaller organisations do not have the resources to make submissions to the government on a regular basis or be consulted. Rather, it is the larger organisations that tend to take the lead on such work, such as IHC and CCS^{66,67}. As larger organisations, they have more resources and thus able to be more proactive in consultation with the Government and other ministries and departments. However, the differentiated need of the smaller organisations of often not considered in the submissions of the larger organisations. Moreover, the smaller organisations struggle to get funding for necessary resources for their community that has specific needs.

Central to this community is elements of bodily autonomy and self-determination. Disabled people aspire to be empowered to live the life of their choosing, and to be included in decision-making processes⁶⁸. Those with disabilities indicated that they describe and conceptualise quality of life in four interrelated ways: (1) independent living, (2) normal life, (3) connectedness to family and culture, and (4) performance of social roles⁶⁹. To enhance and maintain quality of life these participants and their families sought four interventions: cultural, biomedical, social and economic⁶⁹.

Funding for Ministry-funded disability supports has grown at a similar rate to overall health funding⁶⁸. Most people use self- or family-organised services, and large numbers also use residential services, provider-organised community support, and respite care though are highly prescribed and relatively inflexible⁶⁸. The distribution of these funded service types across the country varies widely and though delivered by over 300 organisations it becomes concentrated within 5 large providers⁶⁸. In a Samoan study, it was discussed as a barrier for some who did not qualify due to the cause of their impairment⁶⁹.

The health and disability system should support the empowerment of disabled people to live a life of their choosing and be included in decision-making processes⁶⁸. Disabled peoples are some of the highest users, but often have the greatest risk of poor health and wellbeing outcomes and lower life expectancy⁷⁰. Human rights state that everyone has the right to attain the highest standard of healthcare without discrimination, healthcare providers should ensure the availability of services and remove physical, communication and coordination barriers that may hinder access to care⁷¹. Health systems must also be responsive to the changing needs of these young people when transitioning from paediatric to adult health services and provide better support for emerging capacity for self-management⁷¹. Disabled people want more control over their own lives, and more flexibility and inclusion within systems so that they receive empowering, equitable and effective healthcare⁶⁸.

People with disabilities desire more support to be able to contribute and participate in decisions that affect them⁷⁰. They are often not included in discussions of mental health and wellbeing⁷⁰. Carers play a crucial role in enabling people to live and participate in their communities⁷². Carers provide care for someone close to them who needs additional assistance with their everyday living because of a disability, health conditions, illness or injury. Carers also need support to ensure the person(s) they are looking after is well cared for and this includes adequate resourcing (including payment)⁷². The choice of carer for caring of disabled people should be prioritised and well-funded⁷⁰.

Accessibility is a barrier to social inclusion and participation. Public spaces should be based on a universal design, which safely allows disabled people access to, and the ability to participate in communities, education, health services, recreation, and make social connections⁷³. This also includes access to, and use, of facilities and services such as buildings, roads and footpaths, signs, recreation

facilities, and parks⁷³. For example, though public parks and playgrounds are generally enjoyed by all at low or no financial cost, many are not designed or evaluated for use by disabled people⁷⁴.

Moreover, inclusion and participation require accessibility of information. Disabled people also need access and the ability to share information and without it are unable to participate in society⁷⁵. Limitations in or non-provision of information in accessible and understandable means generates barriers for disabled people⁷⁵. Furthermore, the right to vote and the broader right to participate in political and public life are integral to a functioning democracy including for disabled people⁷⁶. Disabled people encounter barriers to exercising their rights to vote and participating politically including inaccessible information and voting papers, limited voting methods, and a lack of physical facilities that enable engagement with politicians⁷⁶.

Another place of exclusion for disabled people are social activities and employment. This exclusion often relates to difficulties in being as active as non-disabled people⁷⁷. More importantly, the barriers to employment are not only barriers to participation and the ability to earn an income, but also relate to living valued lives⁷⁸.

Disabled people face barriers during the period of school education from pre-school to tertiary levels. In one study, for example, 15% of high school students reported living with a disabling health condition⁷¹. Education is changing theory and practice but not language where use of ‘deficit’ is still common such as “special education, disability, dysfunction, disorder”⁷⁹. In a small high school, they have created an environment truly inclusive of ability, ethnicity, culture, gender and language⁷⁹. Moreover, transitioning to tertiary education are a challenge for disabled people. During the critical change in life period, students with disabilities not only have to learn the skills for independent learning but also face the lack of personalised support they used to receive in high school⁸⁰. Social media and mobile devices are critical tools to learn, study, collaborate and work together on and off campus or when they used these tools to facilitate communication, and build and maintain connections, support, and trust with their new peers and old friends⁸⁰. These tools enable disabled people to manage support of their friends and peers, both with or without impairments, rather than on their own⁸⁰.

Māori directly or indirectly experience disability at a higher rate than any other population group in Aotearoa New Zealand⁸¹. Māori face barriers to access support and health and disability services⁸¹. Despite having had access to health and rehabilitation services, injured Māori experience considerable long-term disability after injury⁸². A part of the barrier is the model of working with disabled persons that differs from many Indigenous disabled persons whose worldview is holistic, relational and collective in nature⁸¹. There is a need for a Mātauranga Māori approach to disability⁸¹. It will contain a clearly defined set of values and principles that appropriately reflects the diversity of cultures and Māori as tangata whenua should guide the behaviours and operation of the entire system⁶⁸. Furthermore, in a Samoan study, there was a cultural issues where disability was associated with ma’i (sick) or malaia (curse) and consequently not really a whole person and destined for a life of hardship and unhappiness⁶⁹. Cultural awareness and competency is central to working with disabled people from other cultures.

A fully inclusive society recognises and values disabled people as equal participants. Their needs are understood as integral to the social and economic order and are not identified as “special”⁷³. The concept of ‘embodied belonging’ is used to show that bodies, things, place and space intersect in complex ways to produce contradictory feeling of (not)belonging in ‘disability spaces’⁸³. Disability spaces can offer a direct challenge to ableism and create feelings of belonging for disabled people. They can also, however, reinforce normative identities and ideologies within and beyond disability spaces⁸³. A focus on lived, felt and spatial elements of belonging to and in disability spaces can deepen understandings of what it means for disabled people to feel in and out of place⁸³.

There is a need to consider and focus on the disabled community and in particular for those that are more common with ageing, such as mobility and agility impairments⁸⁴. However, there is a lack of reliable data. But rarely do people with disability fit neatly into a single category with clear boundaries, and a consideration of the complex qualitative social and cultural issues that are related to these quantitative measures is required⁸⁴. Such data is central to the greater accuracy, clarity and consistency between the various organisations such as the MOH, the Office for Disability Issues and Statistics New Zealand⁶⁸.

The primary aim of the *New Zealand Disability Strategy 2016–2026* is to create a non-disabling society – “a place where disabled people have an equal opportunity to achieve their goals and aspirations, and all of New Zealand works together to make this happen”⁸⁵. The goal is that the disabled community is visible, acknowledged and respected on an equal basis with others, and that disabled people can live a life with dignity and feel valued^{73,85}. Disabled people should be able to live valued lives in inclusive communities that recognise and respond to their interdependence and diversity and as equal participants⁸⁶. It must follow the principles and duties of the *Treaty of Waitangi*, and the *Convention on the Rights of Persons with Disabilities*, to ensure that disabled people are involved in decision-making that impacts them – including in partnership with people with disability, families and whānau, communities and service providers^{85,86}. The *Disability Action Plan 2019-2023* “presents priority work programmes and actions developed through a co-design process by government agencies, disabled people and their representative organisations”⁸⁷.

Older people

The older people are a growing group in our community. The changing demographics in NZ indicate a growth of the older people population due to low birth rates, medical and technological improvements and the ageing of the baby boomers^{88,89}. They include people of a wide age group from 65 years and older. As the population lives longer, the number of people living to 100 and beyond are increasing. The needs of such a group is diverse while at the same time may also interconnect with some of the other groupings of this review. Though the numbers of older people is increasing, the population is also more educated and independent than in previous generations⁸⁹.

There are numerous means of support for the older people ranging from a dedicated *Office for Seniors Te Tari Kaumātua*, sectors within government departments and ministries such as the ministry of Health, and also non-profit organisations providing support and advocacy. Two of the key advocacy organisations for older people: Age Concern and Grey Power (initially Auckland Based). These organisations envisage “an inclusive society where older people are respected, valued, supported and empowered”⁹⁰. They are the most commonly consulted when issues arise concerning the older people and they often make submission regarding bills and regulatory changes proposed by the government. The issues that they are advocating for include adequate income, safe and suitable housing, satisfying work and healthy activity, opportunities for education and lifelong learning, a safe and enabling environment, access to care and support, time for leisure, and positive contact with friends, family/whānau and others in our community⁹⁰.

One issue facing the older people is ageism and discrimination. In general, New Zealanders have high levels of respect for seniors and acknowledge the value of their contribution to society⁹¹. Though this is a good point, some older people face significant discrimination. Ageism, a process where society discriminates and stereotypes people by virtue of old age. Ageism also reinforces fear and denigration of the ageing process thereby establishing myths and assumptions regarding the ability of older people⁸⁹. They are often perceived as senile, frail, disabled, likely to live in institutions, unable to learn new skills, socially withdrawn and dependent⁸⁹. 26% of Older people face bad treatment or discrimination due to their age⁹¹. A significant proportion of the respondents indicated that experiences of bad treatment or discrimination occurred in the work place⁹¹.

Isolation is an increasing issue for the older people. An increasing number of people aged over 60 are living in their own home and 80 percent plan to stay there as they age⁹¹. However, a growing problem is the increasing isolation that many older people are facing⁹². Many are losing touch with their families and communities that were once central to their way of life. There is also concern that strategies for older people do not meet the needs and aspirations of kaumātua⁹³. Being excluded or feeling isolated’ is the leading type of poor treatment⁹¹. Many older people, in one report, nearly one in three, spend their days alone⁹⁴. While most are doing well but for those towards the pointy end, life was “really miserable” – and that portion was growing larger⁹⁴.

In a similar vein, there is significant evidence that the older people face older people abuse. It is significantly higher in the Pākehā as compared to Maori older people⁸⁹. This is because there is a higher level of respect for the older people in the Māori as opposed to Pākehā⁸⁹. There is a slightly older document (2012) that has a bibliography of elder abuse⁹⁵.

Health and well-being are important issues for older people. The Ministry of Health has identified health and care a key societal concern relating to the older people⁹⁶. Older people have physical, psychological and mental disabilities, depression, loss and chronic medical conditions⁸⁹. The focus of health care should be on life-course and person-centred approaches to address the social determinants of health and to give full weight to the end-of-life phase⁹⁶. Consultations have found that there was a need to develop a strategy about ageing well with a better and more integrated responsive system rather than a focus on health issues only⁹⁶. Health and care services need to equip families with the

ability to provide more support, in a culturally appropriate manner⁹⁶. There is also a growing awareness of the need of older people for programmes to keep them active⁹⁷.

Though some older people are mobile, for example still able to drive, there is a large number who do not have that ability. Mobility relates to personal independence, well-being and quality of life⁸⁸. There is a link between health and mobility in older people have been neglected⁸⁸. The mobility and accessibilities issues for older people cause unequal access to vital infrastructures and can lead to distress, social exclusion, discrimination, insecurity and disrespect⁸⁸.

While at one stage a large number of older people owned their own home, there is a growing number that no longer do. Within the next few decades, half the older people reaching retirement age will be renting⁹⁸. The affordability of Auckland for renting seniors and financially vulnerable owner-occupier seniors will become a deeper issue if housing costs continue to rise and the number of seniors grows⁹⁸. With the increasing number of older people renting like with others communities lead to other issues of health and well-being such as quality, condition cost of rental housing⁹⁸.

Some local governments have begun to address concerns of older people in their regions and develop strategies in consultation with older people groups within their catchment⁹⁹⁻¹⁰¹. The plan aims to build on and make cities better places for older people to live in. Actions cover nine key themes: outdoor spaces and public buildings; transport and mobility; housing; social participation; respect and social inclusion; civic participation and employment; communication and information; community support and health services; and safety. Examples found were Hamilton City Council (first in New Zealand) and Tasman District Council. The Horowhenua District Council has a dedicated website for information on transport services, activities and connections and networks for older people. It also adopted a *Positive Ageing Action Plan 2016-2019*.

The Office for Seniors produced a strategy for the older people: *Better Later Life He Oranga Kaumātua 2019 to 2034*. This strategy was produced in consultation with the older people advocate groups and interested parties and at the same time was both guided by and in line with the Treaty of Waitangi^{93,102,103}. Aotearoa New Zealand has a growing older people population that is diverse with many ethnicities and sexualities and family/whānau structures. There are increasing barriers with technology and transport, though housing and health remain the most important issues for this community^{93,102,103}. The strategy identifies five key areas for action, and within each what we want to achieve and what needs to happen to do this:⁹³

- Achieving financial security and economic participation
- Promoting healthy ageing and improving access to services
- Creating diverse housing choices and options
- Enhancing opportunities for participation and social connection
- Making environments accessible

Inclusion and participation is important for the older people to provide continued purpose in their life. They desire more older people-friendly communities that provide opportunities and spaces for community participation in and among the community⁹⁶. This requires support and assistance for older people and their families as the current modern family situation has led to family fragmentation⁸⁹. For Māori, there is still responsibility to include their older people in community participation as they are called upon for their knowledge and leadership as kaumātua, and to look after whānau, hapū and iwi well-being⁸⁹.

Tāngata Whenua

Due to vast the consultation documents available on Māori sense of belongingness in Aotearoa New Zealand, our team resorted to reviewing reports, journal articles, dissertations, and theses that were published on academic platforms. Academic articles were primarily identified via electronic searches in indigenous journals such as *MAI journal* and *Journal of Indigenous Wellbeing*, and local journals such as *New Zealand Journal of Psychology*, *Journal of the Royal Society of New Zealand*, and *Kōtuitui: New Zealand Journal of Social Sciences Online*; whereas dissertations and theses were located via New Zealand research portals. Searches were further extended by going through the references cited in articles, and only those that were published within the specific time frame were included for review. A total of 42 documents were examined. Methods used to capture voices of Māori communities on their conceptualisation of belongingness were diverse, ranging from surveys, questionnaires, interviews, focus groups, to case studies with most employing kaupapa-Māori informed methodologies.

Nationally representative surveys indicated that racism is a prevalent issue, as well as a significant social problem, affecting Māori people in contemporary Aotearoa New Zealand^{104–107}. Racism affecting Māori manifests in blatant and latent forms and at personal and institutional levels^{106,108}, and all these can denigrate and exclude Māori participation, demean Māori identity, and reinforce the disadvantaged position of Māori^{106,108}. Evidence suggest that those victimised by racism perform worse across a range of wellbeing outcomes, from less satisfaction with healthcare access, employment, standard of living and relationships to lower levels of education attainment, job security, home ownership, life satisfaction, mental health (e.g., increased depressive symptoms and suicide attempts⁴), physical health, and spiritual health^{104–107,109}. Racism also deters Māori from embracing or enhancing aspects of cultural identities, including learning te reo Māori¹¹⁰. Māori who have experienced repeated exposure to racism may take a longer process before considering if they wish to identify as Māori and may choose to pass as Pākehā to avoid discrimination. Education systems that privilege knowledge from dominant culture in academia, and use racist interpretations often create cultural dissonances¹¹¹, and systematically undermine Māori knowledge and experiences⁴. The introduction of bicultural curriculum, integration of tikanga Māori in teaching, and more education around Māori cultural history, Te Tiriti o Waitangi and the Declaration of Independence, colonisation, and tribal specific teachings is key to ensuring that important cultural knowledge is passed on through generations^{111–115}. The educational system that was constructed in a post-colonial Pākehā power structure wherein the equality inherent in the Treaty is sidelined would continue to marginalise Māori culture¹¹⁶. Normalisation of Māori culture in the education system can assist Māori in perceiving culture as a symbol of identity, rather than a token to leave at the gates¹¹³. The urgency to which the government and its agencies need to identify and take action to eliminate discrimination towards Māori, aligns with obligations under the Treaty of Waitangi and various human rights conventions and declarations, to realise Māori rights to live free from discrimination. There needs to be structural commitments to disrupt status quo research, policies, programmes, and service provisions that perpetuate discrimination and result in inequitable outcomes for Māori^{104,107}.

It is crucial to ensure Māori have access to Māori culture and resources^{106,117}. Increased cultural efficacy (one's confidence to competently engage in te ao Māori (the Māori world) or the ability to navigate the Māori world) and Māori cultural embeddedness (degree and intensity of cultural identification) were linked with enhanced psychological resilience and mental health^{112,118–120}. Fostering social bonds and whakapapa (genealogy) through whanaungatanga (shared relational bonds) are central to the Māori individual and collective identities^{25,113,116,121–126}. This relational notion of self is important for Māori to “break the cycles” or buffer against whānau living in economic hardship from adversity and negative portrayals, as well as act as resources for rangatahi (youth) Māori to develop their cultural identities^{117,124,127}. There is evidence that where Māori have an established social network, they were more likely to be supported in their goals for individual achievement in education

and career¹²⁷, and being able to emulate attributes such as awhi (embrace), manaaki (care) and aroha (love) that is crucial for their identity development¹²². Knowing one's whakapapa also provides a sense of belonging, affinity and membership to particular iwi (tribes) and hapū (sub-tribes)¹²⁸.

Systems that are established on non-Māori philosophies, culture, and values are unrealistic for Māori, and the imbalance of power relations continues to intrude Māori rights and diminish cultural integrity^{108,129,130}. Now is an era of cultural reclamation for Māori¹²¹, and there is a need to shift away from the featuring of Māori in negative social statistics¹¹², deficit approach, and problem-focused orientation that blame Māori without recognising the root causes of social inequity and disadvantage^{124,129,131–133}, but to construct Māori identity as a site of strength and hope^{108,115,134}. This can be achieved by carrying out holistic and strengths-based research based on traditional tikanga Māori^{124,128}, understanding the interactions between Māori culture and colonialism¹²⁹, and fostering tino rangatiratanga (sovereignty) by encouraging community-led initiatives¹³⁴. Decolonisation or claiming Māori culture and identity as strengths allows Māori people to be positioned as resisting the perpetuation of such colonising practices^{108,135}. The recognition of colonial history also renders visible the ways in which it has disrupted the cultural ways of relatedness embedded within Māori social structures and that has been reshaped over decades of assimilation¹²⁹.

Continuous reclaiming of traditional Māori knowledge and practices is necessary by allowing rangatahi Māori to heal, connect and recognise colonialism to have enduring effects on Māori people¹⁰⁸. Encouraging rangatahi Māori to become more engaged and embedded within their culture whilst being able to exercise their tino rangatiratanga can help to build resilience and wellbeing through the development of adaptive coping strategies through collective efforts from whānau, hapū, and iwi^{118,135}. These engagements include: learning te reo Māori me ōna tikanga (Māori language and customs); fostering connections with Māori whānau and friends, linking the rangatahi to important geographical sites such as mārae, maunga, awa, and moana from which their iwi, hapū and whānau originate (as locating oneself within these physical elements fosters a deeper sense of belonging, cultural responsibility, and connectedness with the land); reconnecting with their iwi social systems; upholding the tapu nature of the homeland through kaitiakitanga (guardianship) that enable the mauri of the whenua to flourish; and relearning the teachings of tūpuna (ancestors) through kōrero tuku iho (traditional stories or myths) to counter the trauma, isolation, and poverty that has trickled down the generations following colonisation, and developing greater awareness of cultural similarities and differences^{112,118,120,121,128,129,136,137}.

Providing cultural spaces that endorse a Māori worldview and ensuring those who work closely with rangatahi Māori are practicing in a culturally safe and respectful manner are important for rangatahi Māori development. These include:

- increasing a sense of cultural belongingness in kura kaupapa, wānanga, polytechnics, and universities^{109,138,139} through the open discussion of racism against Māori; countering of negative Māori representation in media, and teaching cultural expectations in a way which allow Māori and Pākehā to intermingle with mutual appreciation, empathy and understanding¹³⁰;
- in classroom settings, to cultivate Māori role models and mentors¹¹⁴; in the context of maternal healthcare system, to facilitate supportive whānau environment to improve birthing experiences of young Māori women¹⁴⁰;
- in health policy, to increase Māori voices by giving voices to ethnic specific advisory groups¹⁴¹;
- in the context of domestic violence, to see mundane collective tasks and everyday cultural practices as a valuable site for Māori people¹²⁹;
- to implement peer-education approach for Māori kaumātua transitioning in older life which stimulates social integration and engagement¹³⁴;
- in relation to suicide, to implement a whānau-centred approach that enables individuals to transcend the focus and empower whānau to challenge tikanga in relation to suicide¹⁴²;

- in the context of raising children, to allow Māori to reclaim the power, agency, will, and determination to guide aspirations, claim tino rangatiratanga, and control their own destinies¹²⁷; and
- in the context of language, to encourage non-Māori speakers in accepting that Māori language speaking domains need to be protected in order for the goal of language revitalisation to be achieved¹¹⁰.

Unconscious bias, unjust practices, and racism against Māori were highlighted in criminal justice systems^{108,131,133}. Criminal justice use of Māori identity was found to be tokenistic, as merely to meet Treaty of Waitangi obligations rather than a genuine effort to reduce Māori offending rates¹³³. Criminal justice systems ought to practise the concept of whakahoki mauri (to restore peace and balance within the whānau and wider community) to improve social integration for Māori who have offended. Whakahoki mauri embodied in this way would reinstate the traditional meaning of rehabilitation, to help to reform an individual's ability and capacity to participate fully in society¹⁰⁸. For Māori within the criminal justice system, connection to Māori culture and identity was viewed as preventive to further criminality¹⁰⁸.

There is a need to address the practicality of a 'culture as cure' perspective within the context of colonisation and the various needs of diverse rangatahi Māori today. Rather than seeing Māori as a crude indicator of ethnic identity, there is a need to recognise rangatahi Māori wellbeing as complex and multi-dimensional with multiple contributing factors embedded in cultural, historical, spiritual, physiological, psychological, structural and social domains^{107,118,143,144}. It is important to recognise the new representations of Māori urban youth identities that do not conform to Māori- mainstream dichotomies and implement initiatives designed to minimise identity threats so that rangatahi Māori do not feel being forced or coerced to occupy identity spaces they are uncomfortable with¹⁴⁴.

Ethnic Communities

Ethnic community identities are fluid, diverse, multi-dimensional, and need to be understood in relation to social class, ethnicity, culture and gender. Often, they become amalgamated into 'regional' groupings such as Pacific Peoples which obscures the complexity within these ethnic groupings. For example, they may "align themselves variously, and at different times along ethnic, geographic, church, family, school, age/gender, Island born, New Zealand born, occupational lines or a mix of these"⁶. Yet, at the same time, these regional groupings also share many commonalities that may not be in other regional groups⁶.

Though Aotearoa New Zealand prides itself on being a multicultural country, the reality is often quite different. Monoculturalism does not promote social cohesion, but a nation built on a bicultural past can benefit from incorporating both worldviews and improve social cohesion⁵. There has been some progress made in regards to multiculturalism, such as in level of design, primarily by maximising the presence of members and promoting visibility for communities of difference³. In reality, changes to incorporating multiculturalism has had much less impact in the ability to sustain deep political transformations or opportunities for advancing diversity, in particular with the backdrop of recent neo-conservatism³. Multiculturalism is also strained between the instrumentalisation of migration as an end to an economic goal, and a vision of a fair, equitable, and diverse society as its own ideal with the former often having priority³.

Transitioning into Aotearoa New Zealand culture can be overwhelming for migrants¹⁴⁵, especially those who come from countries with different political climates¹⁴⁶ or religious backgrounds¹⁴⁷. Viewing migrants as one 'ethnic' group not only misses the sub-regional, linguistic, religious diversity, and reasons for migration that exist in between, but also ignores differences in capacities that are not shaped by ethnicity or nationality at all^{148,149}. The othering of migrants, such as through immigration status, ethnic diversity, and the stigmatisation of ethnic and religious clothing in public can further lead to social exclusion¹⁵⁰.

All dimensions of government play a crucial role in supporting ethnic community networking¹⁴⁵. A tension exists between Aotearoa New Zealand's non-discriminatory citizenship rights and its everyday exclusionary citizenship practices which hinder a sense of belonging for ethnic communities¹⁵¹. To ensure the success of migrant or refugee settlement and integration, appropriate information and resources on employment, education, housing and other social services should be provided to them¹⁴⁵. Co-ethnic networks can have the potential to segregate migrants from others, but they also provide a sense of belonging and integration at the community level¹⁴⁸. Encouraging cross-cultural interaction and education deconstructs negative stereotypes and celebrates diversity¹⁵². Such interactions enable privileged individuals to overcome perceived ethnic and cultural barriers and to relate to one another at a more fundamental level as human beings¹⁵¹. Ethnic communities are continually negotiating bicultural (or multicultural) identities in respect to their degree of assimilation into Aotearoa New Zealand^{149,153-157}. Often, migrants undergo a process of hybridisation wherein they identify themselves with a new identity, one that maintains both ethnic and religious affiliations but have strong identification with Aotearoa New Zealand culture¹⁵⁸.

Ethnic communities often have intergenerational issues. That is, there is a gradual shift in culture from first generation to second and third generation Pacific New Zealanders, away from the church as their main collective institution, to other support systems⁶. There needs to be active and open dialogue between parents of migrants and teachers in order to enhance to understanding of the heterogeneous expectations of each other, and developing respectful relationships, inclusive practices and cohesiveness^{156,159}. While, for example, Pacific peoples are continuing to maintain their own cultural norms, they are also adapting, evolving and responding to the environment (context) in which they live⁶. This pattern has also been reflected by young Bhutanese women who felt they would readily fit in Aotearoa New Zealand but were often held back by adults of the family/whānau who imposed their

traditional culture on them¹⁴⁵. However, there is evidence that migrants may also create home by relinking with the past through bringing their culture, traditions, religion, food, practices and language to Aotearoa New Zealand, while some also had more visibly adapted to Aotearoa New Zealand through language and cultural practices¹⁴⁵. Over generations, the maintenance of ethnic languages occur for a “sense of belonging and imagination” rather than a state of necessity¹⁶⁰. Ethnic communities’ wellbeing is impacted upon when there is a generalised or universal view about wellbeing and in the ethnic minority diaspora that have neglected the cultural voices in the past¹⁶¹. If the cultural incursions of language, culture and the identity of ethnic communities in Aotearoa New Zealand continue to occur, it will threaten their very existence¹⁶². There is a need to maintain and support ethnic communities’ language acquisition and cultural values, and promote the cohesion of families and spirituality^{162–164} that shape successful learning as well as retaining values, identities and cultures^{161,162}.

Though language and culture maintenance is valuable, it is also important to have a reasonable standard of English language to enable inclusion. Effective English language skills lie at the heart of effective communication between diverse groups in Aotearoa New Zealand⁵. Proficiency in English language affects migrants’ sense of self-value, which consequently influences their sense of belonging in Aotearoa New Zealand¹⁶⁵. For those who English is their first language, there needs to be encouragement to learn another language in order to enhance appreciation of different cultures and world views⁵. While English communication may not necessarily be a determinant towards racial discrimination, adequate levels of English language proficiency poses an advantage for effective intercultural communication and to overcome challenges in social life^{145,152,153,166,167}.

The education system needs to play a bigger role in informing and building a culture of diversity and inclusion. Though some schools are adapting to cultural needs, the process of change is slow in terms of providing for different cultural needs and ways of learning. Existing policies and guidelines need to review how to highlight successful strategies to support ethnic communities in all levels of education. The education system needs to reflect the increasingly diverse character of society by providing fit-for-purpose education and training for cultural and religious awareness¹⁶⁸. Eurocentric educational environments with an over-emphasis of Western ideologies in curricula, reinforce the “pedagogy of the oppressed”^{166,169}. Curriculum contents that have integrated cultural knowledge enable learning opportunities for ethnic communities to realise their potential and acknowledge their uniqueness^{166,169,170}. Responsible educational leadership considers the relevance of cultural and religious backgrounds¹⁷¹, validating the relevance of wisdom from non-Pākehā cultures in education¹⁷², and recognising the contribution of each culture in the intercultural space that allows the formulation of identities that align with core school values¹⁷². While there are education leaders who value ethnic diversity and are committed to improving the academic achievement of all students, the evidence for inclusive practices to improve student success has been less apparent¹⁷³. Inclusive practices must be based on, and applied within cultural contexts¹⁷³. Teachers are responsible for cultural competency to overcome negative assumptions and stereotypes to become more familiar with other ethnic communities^{170,171} which should be supported by culturally appropriate pastoral support services¹⁶⁹. Provision of cultural spaces (e.g. fono room for Pacific Peoples) and participation in cultural events provides ethnic communities a sense of place and community^{169,170}. Having role models in educational institutions is a crucial success factor for youth from ethnic communities¹⁶⁹.

International students face particular challenges where academia experiences differ from the home country^{166,167}. They have higher levels of spirituality and religiousness, and were more likely to use harmful religious coping methods if they felt that their religious identities were not affirmed¹⁴⁷. When there is a fostering of interaction between local and international students through events that celebrate cultural diversity it enhances the process of cultural adaptation and a sense of empathy among local students towards international students^{146,166}.

There are issues of employment opportunities for many within ethnic communities. Muslim women in particular face particular barriers in re-entering the workforce¹⁶⁸. There needs to be more equal opportunities for those who face higher barriers to entering and progressing in the work force¹⁶⁸. There is also a need to look at how to incorporate cultural and religious diversity in workplaces¹⁶⁸.

Ethnic communities face barriers due to the colonial or Eurocentric ideals that undermine the work that reflects cultural diversity^{159,162}. These lead to issues that impact upon life and wellbeing - in particular racism and stereotyping. They have adverse impacts on a person's wellbeing and life¹⁶⁸. Feelings of vulnerability can be enhanced because of the way clothing can visibly identify them with marginalised groups, such as with Muslim women¹⁶⁸. Deep-seated racism as a barrier to social cohesion is currently at the centre of discussions on multiculturalism and inclusion. Racism persists both in face-to-face interactions as well as online¹⁶⁸. Greater consideration needs to be given to how discrimination can be alleviated¹⁶³. Incidences of subtle racism, or being stereotyped are common among migrants who are attempting to adapt to the host culture^{148,166,174}. Not bringing these occurrences to the forefront can actually allow them to persist and promote the status quo¹⁷⁵. While this is a critical focus, society cannot ignore the wider swath of structural anomalies that equally deserve attention³. Addressing racism and stereotypes is critical to empowering all communities in Aotearoa New Zealand¹⁶³.

The media has the ability to either enable or inhibit diversity and inclusion. For example, it can portray positive messages about ethnic communities without reinforcing negative stereotypes¹⁷⁶. Unfortunately, it has often played a negative role in improving inclusiveness, belonging and cohesiveness within Aotearoa New Zealand. There needs to be more appropriate use of media to reflect diversity and inclusion and counter narratives that perpetuate stereotypes, bias and misinformation. Media can share positive stories in which diverse communities see themselves reflected and informed in a way that counters narratives that perpetuate stereotypes, bias and misinformation¹⁶⁸.

Wellbeing and safety is something that many ethnic communities feel is lacking in their personal and social lives. Different cultures may view the notion of mental health differently, for example Pacific cultures perceive mental illness as an imbalance that occurs as results of breaching certain customs or sacred relationships between an individual and their family/whānau, and possibly wider spiritual realms. Conceptualisation of wellbeing extends beyond the individual level, and often includes the collective such as families and communities as a whole^{145,161,164,167,169,170,174}.

The issue of safety restricts the ability of women of ethnic communities to participate in society¹⁶⁸. It has a big impact on health and wellbeing. For Pacific Peoples, their identity and wellbeing includes their perceived familial wellbeing; perceived societal wellbeing; group membership evaluation; Pacific connectedness and belonging; religious centrality and embeddedness; and cultural efficacy⁶. Cultural wellbeing is critical to many ethnic communities. For some, such as with Pacific Peoples, the family/whānau is central to wellbeing⁶. For others, religion also plays a central role to their wellbeing^{145,147,163,170,174,176,177}, policy makers need to ensure a safe place for the open practice of religions in Aotearoa New Zealand¹⁷⁷.

Youth from ethnic communities who had been bullied were more likely to report higher levels of mental health concerns and lower life satisfaction^{174,175,178}. Youth who had poor parent-child relationships, and were growing up in unstable social communities, were likely to seek for an identity within an alternative group to their family/whānau, including participating in gang activities which are likely to affect their psychological wellbeing¹⁷⁸. Healthy parenting and peer relationships are crucial for youth who are negotiating their pathway to adulthood. Mental health treatment and intervention initiatives for youth from ethnic communities should include participations from their family/whānau members^{161,164}, and be driven by evidence and culture-based practices¹⁷⁹. Presence and visibility of mental health and social services for ethnic communities are low, as well as relevant provision of

cultural resources¹⁶³. Others have suggested a spiritual or religious-integrated mental health intervention when working with religious minorities¹⁷⁷. A preventive approach is more effective than a reactive approach when addressing violent offences, and this can be done by centralising available information on youths from ethnic communities who have been exposed to risk factors¹⁷⁹. For youth from ethnic communities who experience discrimination and cultural dissonance, having supportive family/whānau networks as well as maintaining religious beliefs and practices helped these young people become resilient^{174,176,177}. Psychological wellbeing for ethnic communities needs to be understood through a cultural lens and in a holistic manner. Language cultivation presents for policy makers and health and community workers, as one key area to consider when designing programmes and policies that promote positive mental wellbeing and suicide prevention¹⁶⁴.

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