FROM DARKNESS TO DAWN?

A FORUM FOR KĀPŌ MĀORI

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IVAN PRENTUS TE MOMO

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Abstract

This thesis researches Kāpō Māori (Māori who are blind or sight impaired) and their pursuit of Te Reo Māori. Te Reo Māori is a very significant cultural marker for Kāpō Māori to identify themselves as Māori. Kāpō Māori face many challenges, challenges that are unknown to the mainstream. The thesis surveys the fortunes of Te Reo Māori as it struggles to survive and find acceptance in Aotearoa/New Zealand, outlines attitudes towards disabled persons, who suffer discrimination and marginalisation, and summarises the story of the Blind in Aotearoa/New Zealand, especially through the history of The Royal New Zealand Foundation of the Blind, to provide context for the challenges faced by Kāpō Māori. For Kāpō Māori, discrimination and marginalisation is increased because all Māori suffer the disabilities that are a result of colonisation. The thesis sets out a methodology for field research, and draws from interviews with research participants to present the experiences of Kāpō Māori. This thesis provides an insight into the issues Kāpō Māori encounter when trying to engage Te Reo Māori, and draws those issues forward from darkness, where they are unknown, into the world of light by providing Kāpō Māori with a forum for discussion of these issues.

Ngā Mihi

Mai i te pō-uriuri, ka puta ki te ao-mārama
Tīhei mauri ora !

Kei te nui ngā mihi o taku ngākau.
Mei kore ake ēnei te whakaotinga tūturu o tēnei tuhingaroa.

Kei Te Kaihanga o ngā mea katoa,
ngā whakamoemiti, ngā whakawhetai ki a koe.

E te whanau.

E koro, e William Te Momo
ahakoa kua ngaro koe i te tirohanga kanohi,
kei te kitea tonutia ā-wairua.

E te tamahine, e Tapairu Te Momo, ka mihi nui.
He nui tōku aroha ki a koe.

E te tuahine, e Fiona Te Momo, nāu tēnei tuhingaroa i poipoi, i whaihua ai.
E te tuakana, e Hāmiora Te Momo, nāu anō au i akiaki, i whāngai ai.
He aha koia ki tēnei mea te whānau !?
Ko koutou tēnā !

Ngāti Kāpō huri noa. Koutou i te uiuitia, koutou i te tautoko mai ;
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e ōku rangatira - ko koutou ēnā.

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Nāu au i whakawhiwhi ki te Postgraduate Excellence Award i te tau 2006,
Nāu ano i aroha mai ki āku tono whakaroanga !

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E kore e ea te maioha o te whatumanawa ki ēnei kupu korekore noa … heoi anō. Ehara taku toa i te toa takitahi, ēngari he takitini!

Tēnā koutou ! Tēnā koutou ! Tēnā koutou !

Ka apiti hono tātai hono,
te hunga mate ki a rātou te hunga mate,
te hunga ora ki a tātou te hunga ora.

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He uri nā te whanau o Poaneke-Te Momo rāua ko Paenga -
Kia Hiwa Rā!

Introduction

Working towards the completion of this thesis inspired personal growth, and I was faced with many new challenges. At times the persistence to continue labouring throughout the period of this research had to be drawn from an inner strength, as I was entering a field where I had much experience but little knowledge. Determination and passion for the research topic meant spending long hours to meet deadlines. Exploring a topic such as Kāpō Māori and trying to build a bridge of knowledge that linked to Te Reo Māori required taking a wide approach first, then identifying key themes to construct a platform of knowledge to work on.

The wide approach involved exploring broad issues of disability by looking at the general experiences of disabled persons in the past. Exploring issues that affected the Blind in Aotearoa/New Zealand over the years was a necessary background for gathering the research; it meant a review of the history of Te Reo Māori (Māori language) and how it applied to Kāpō Māori.

Researcher's Background

I became a member of the Royal New Zealand Foundation for the Blind in the late 1980's and was identified as a Kāpō Māori. At eight years of age, I encountered eyesight impairment problems. I can recall one day in class trying to read the blackboard and then suddenly my vision becoming obscured. The general practitioner called this condition keratoconus. It was present with both my eyes, one eye also having a cataract.

Growing up sight impaired was a challenge because as a child one is often mocked or tormented by other children. Many times I regretted having such a condition and for almost a year of my life I was removed from school to cope with a series of operations to help correct my eyes. Playing sports and other activities that required a decent amount of sight was such a constant concern that for me non-participation was the reality. In class, I was made to sit up front, and some teachers even sat me directly in front of the blackboard as if I was being punished for not seeing the board. Teachers became frustrated; one referred to me as a 'blind bat'. I felt embarrassed. Reflecting on my childhood experiences, I understand that what I encountered was discrimination from children and teachers, unfair treatment for not being able to see the blackboard and kept after school to catch up on class work. Since the education system provided an uncomfortable environment, I withdraw from participating and dropped out of high school.

In my early twenties, I enrolled in a New Zealand Certificate in Te Reo Māori. A significant factor about that course was that much of the content was taught orally. After successfully completing that degree, I was encouraged to continue learning. The next year, I enrolled for a Bachelor of Arts Degree in Te Reo Māori. My experiences were similar to those in my early days of schooling, like being unable to read from the blackboard or to read overheads, but I learnt to cope by copying from notes taken by classmates and working late into the night to keep up with my work. The support given to disabled students by the University included having note takers in lectures, but this support was not available for a Māori student in a Te Reo Māori class because the University did not have a person available with skills in the Māori language.

Because of that situation, I spent late nights doing homework to keep up with everyone else. Hardships were always present, and they were amplified by the difficulty of being unable to see properly. That meant designing my own coping strategies, which was important in accomplishing tasks. However, I had a lot of support from whanau. Ideas began stirring in my mind about my situation. Teachers or tutors were never really skilled in teaching a person with sight impairment. Support services and resources were very minimal, and in a subject like Te Reo Māori the problem of minimal resources was heightened. However, my desire to learn Te Reo Māori was very important to me, for my identity.

The Māori language became essential to being Māori. Although my skin was brown, my first language was English. When I attended funerals and hui, I was uncomfortable. I could not understand Te Reo Māori, and felt ignorant for not knowing Māori culture. My mother and father rarely spoke Māori. Their knowledge of the language was almost minimal. They could understand parts of the language, but because of the negative treatment they received when they spoke Māori at school, the language was abandoned, and subsequently become a foreign language for our whanau. However, my father, who was illiterate, often read the Māori bible and attended Te Reo Māori classes in an attempt to learn Te Reo Māori. In spite of his efforts he never did. I learnt Te Reo Māori at secondary school and, like my father, desired to learn the language of my forefathers. Personally learning the language was a chance to reclaim my identity as a Kāpō Māori and stand proud against hurdles and struggles I experienced in the Aotearoa/New Zealand education system.

Research rationale

Personal experiences and struggles as a Kāpō Māori and as a student of Te Reo Māori propelled this research forward. The research was an avenue for finding an understanding of myself as a Kāpō Māori, and shares my knowledge as comfort for those who may be in a similar situation. The research presented an opportunity to elicit stories from Kāpō Māori about what they had encountered, and an opportunity also to provide an understanding of the world of Kāpō Māori to those that do not suffer a loss of sight. In addition, the research serves as a forum for examining the effects of marginalisation, discrimination and social identity issues on the lives of Kāpō

Māori. Learning about Kāpō Māori is important for social workers, universities, health practitioners, disability organisations, Aotearoa/New Zealand society, iwi, hapu, and whanau members who have interest in Kāpō Māori. This thesis provides information on Kāpō Māori, Kāpō Māori experiences, and knowledge of their quest to learn Te Reo Māori. It is a stepping stone upon which further research can be built, it and may inspire future research by other students.

Thesis statement

Kāpō Māori are marginalised in Aotearoa/New Zealand because of two fold: their ethnicity; and their disability. History on Kāpō Māori has been rarely documented or spoken of, which indicates they have been ignored; pushed aside; or unrecorded. Since there was minimal literature or minimal knowledge about Kāpō Māori, the marginalisation of this particular group are further exacerbated. This thesis explores the world of Kāpō Māori to draw their stories from the darkness *where they are unknown* into the light *where they can be known,* providing a forum for Kāpō Māori to discuss their issues on learning Te Reo Māori.

Research Aim

This research aims to investigate the issues Kāpō Māori face when learning Te Reo Māori.

Research Methods

This research used two research methods. The primary research method was that of interviewing Kāpō Māori. The second research method was that of reviewing literature about Te Reo Māori, Blind/Blind New Zealand, and Disabilities generally. The research questions for this research are: Ko wai te Kāpō Māori? (Who is Kāpō Māori?) What does Te Reo Māori mean for Kāpō Māori? What strategies do they use to learn Te Reo Māori? What battles have Kāpō Māori engaged in? Where are Kāpō Māori from?

Chapter Summaries

The Introduction indicates the subject of the thesis. It outlines the background of the researcher and sets out his tūranga waewae for this research. It briefly recounts his background and his condition, and summarises some issues he encountered while he was in search of the language of his tipuna. The introduction continues with the research rational highlighting how Kāpō Māori have been marginalised, and the affect it has had on Kāpō Māori struggling to learn Te Reo Māori. The aim of the research follows, and then continues with a brief outline of the research methods used to guide this investigation. Chapter summaries are explained, and finally the introduction section concludes with a summary.

Chapter One is a historical review of the Māori language. The struggles that the Maori language has endued in history may give claim to the limited resources and services for Kāpō Māori when learning Te Reo Māori. The Māori language was near extinction but was revived somewhat in what Walker (2004) describes as a *cultural renaissance*. Walker describes the status of the language before European settlement, the period of European settlement, and current issues for the Māori language. Since the signing of the Treaty Of Waitangi in 1840, the Māori language was not given official recognition by government until 1987, which is almost 150 years later. This also suggests why there are very few resources available to help Kāpō Māori learn Te Reo Māori. Evidence presented in Chapter Two and Chapter Three will provide an insight into the suffering of Kāpō Māori in their struggle to learn Te Reo Māori.

Chapter Two explores in general the history of disabled people. The chapter points out historical and contemporary issues that disabled people have encountered. Historical records have shown that disabled persons have often been dealt with in negative ways. They have been victims of domination by society, religion and politics. They have been a marginalised minority that have had no presence in decisions that affect their lives. However, human rights and activist movements from the early nineteenth century have established rights for disabled people to make influential decisions concerning their wellbeing.

Chapter Three is a review of the history of the Blind in Aotearoa/New Zealand. The primary focus of chapter three is a historical review of the Royal New Zealand Foundation for the Blind (RNZFB). The Blind in New Zealand have been subjected to great injustice, have often been treated as subhuman, subjected to marginalisation, and also repressed. The history of the RNZFB brings into focus the assistance and limitations provided for the Blind, so that even within the RNZFB, the Blind struggled for equality. Chapter three serves as a bridge to gain access to the world of Kāpō Māori.

Chapter Four outlines the general experiences of Kāpō Māori, especially in relation to the RNZFB. The later parts of the chapter focus on the formation of Ngāti Kāpō, an organization that provides services and support for Kāpō Māori.

Chapter Five discusses the methodology for gathering and analysing field research data for Kāpō Māori. There were no formal guidelines from literature for interviewing or gathering data from Kāpō Māori. The method devised to elicit information from Kāpō Māori was based on triangulation of the following: understanding the blind; issues relating to disabilities, research and Maori; Kaupapa Māori Research methods; Māori Centred Research methods; and personal knowledge of Kāpō Māori. The chapter explains the ethical procedures used in the research; participant recruitment; and other issues involved with the research. The chapter continues with a biography of each research participant as told from their own voice.

Chapter Six begins with a tabular summary of the participants including brief descriptions of their eyesight conditions. The major part of the chapter reports and analyses the experiences and perceptions of the research participants as revealed in their own narratives. The narrative stories include: the day-by-day difficulties the faced in employment and income; their interests and involvement with learning the Māori language; and the support they receive from whānau and service providers.

The Conclusion reviews the separate chapters and exposes the main themes from the research findings. The conclusion creates guidelines for researching Kāpō Māori and outlines key characteristics for researchers wanting to pursue research on Kāpō Māori. for those who support Kāpō Māori, and for all who are in various ways involved with Kāpō Māori.

Summary

This study of Kāpō Māori and Te Reo Māori has been carried out because so little is known about core issues for Blind Māori. For the researcher personally, knowledge of Te Reo Māori is a vital aspect of his identity, of being Māori. His access to the language was limited, and this encouraged him to research this topic. The thesis provides historical background to disabilities in general, to the challenges for Blind, the struggles to revitalise the Maori language, and the assistance available for Blind in Aotearoa/New Zealand. The study sets out a methodology which is appropriate for research with Māori participants and for Kāpō Māori. The data is presented so that Kāpō Māori themselves can be heard speaking.

He māngai ō rātou, ā kāhore e kōrero: he kanohi ō rātou, ā kāhore e kite.

They have mouths but cannot speak; they have eyes but cannot see. *Psalms*, 15:5

Chapter One: Te Reo Māori History

Introduction

In the last century, the Māori language has struggled for survival and equality; because Kāpō Māori are a minority of Māori, they are further marginalised. While resources in the English language abound that cater for blind generally to learn English, there is a great lack of resources for Kāpō Māori who wish to learn Te Reo Māori. The events that led to such a situation can partly be found in the history of the Māori language. This chapter outlines the place of Māori language in traditional society, the circumstances which threatened the survival of the Māori language, and how Māori language loss affected all Māori and their culture. It then discusses efforts to revitalise the use of the Māori language.

Māori trace their descent from the ancestral lands of Hawāikii and travelled here in vast sea voyages, some tribes such as Ngāti Porou descend from Maui-potikitiki-a-taranga. Maori lived in Iwi (tribe), Hapu (subtribe), Whānau (extended family) groupings. Their survival depended on community living, working together to hunt, to cultivate crops, and to fish. Māori were also a warrior race. Often war raged between tribes over rights to land or to settle many and various grievances. Their fortified villages were called Pā Tūwatawata. Māori lived by the seasons, planting, fishing, and hunting at appropriate times. They were less masters over their environment than living symbiotically with it. After the arrival in 1769 of Captain James Cook, a European voyager from England, and his crew on the ship Endeavour, the traditional lives of Māori began to change dramatically. In the decades following, European whalers, traders, and settlers began to arrive in Aotearoa/New Zealand. The European colonisation of Aotearoa/New Zealand and of its Māori people and ways began, and Māori land, language, and culture were significantly affected. Today the Māori are a minority people in Aotearoa/New Zealand.

Before Te Reo Māori was established as an official language of Aotearoa/New Zealand in 1987, the language had no legal status and was on the brink of extinction. However, through the efforts of various people, mainly Māori but also with the assistance of a number of non-Māori who did not want to see the indigenous language of Aotearoa/New Zealand completely disappear, Te Reo Māori was revitalised. During the period of revitalisation, many initiatives were undertaken to regenerate the Māori language. What was available for Kāpō Māori in this period of cultural renaissance is unknown.

This section of the thesis is a brief survey of the history of Te Reo Māori. Because there is very little information on Te Reo Māori for Kāpō Māori, the timeline is an attempt to identify circumstances which may suggest why there is a paucity of resources for Kāpō Māori in the learning of the Māori language. Because the Māori people, Te Reo Māori, and Tikanga Māori (Māori customs) have had to endure many struggles to survive, initiatives had to be established first at a base level for Māori in general before any thought could be given to minority groupings of Māori people such as Kāpō Māori. Māori people are a minority within their own country; Kāpō Māori are a minority within that minority. Because of the struggles the Māori people endured while reviving their own language, this thesis asserts that the problem is further amplified for Kāpō Māori who wish to learn the language. Revisiting what happened to Te Reo Māori will help in understanding why there is a dearth of resources available for Kāpō Māori learning Te Reo Māori.

Early Māori

The indigenous people of Aotearoa New Zealand speak the Māori Language, Te Reo Māori. Te Reo Māori is enriched with many dialects and varies with and even amongst different Iwi. These differences occur in pronunciation, words, and sentence structure. Dialectal differences are very important; your dialect is a marker of your identity. Māori are able to tell which iwi and area you came from by the way you speak.

Initially Te Reo Māori was totally an oral language and had no written form (Biggs, 1968; Benton, 1989; Karetū & Waite, 1989). Important tribal knowledge and tribal histories were orally transmitted, and entrusted only to those deemed worthy to receive this knowledge. Ancient Māori chants known as Mōteatea were a major means of passing down important knowledge. Biggs (1968) describes these chants as prose narratives, sung poetry, and genealogical recital. Biggs (1968) also asserts that these chants were the oral literature of pre-European times. Mōteatea contained the Māori view of the world's creation. They marked ancestral feats and tribal areas. They provided lessons for fishing and hunting, and contained the history of the tribe (Ministry of Justice, 2001). The importance of oral language is emphasised in a Māori proverb which says, 'Ko te kai a te rangatira ko te kōrero', that is, 'Language is the food of chiefs.' The traditional oral form of Te Reo Māori was significantly influenced after the arrival of the Europeans and the introduction of writing. As I have already noted in chapter one of this thesis, oral teaching styles have more benefit for me personally as they do not require any strain on my eyes. The ancient lessons were conducted often in darkened rooms to eliminate visual distractions and to allow students to fully concentrate on the lessons being taught. For Kāpō Māori, the traditional oral arts provide a very important learning model.

Missionaries created the written form of Te Reo Māori (Biggs, 1968; Kāretū at.el, 1989). In 1815 the first Te Reo Māori book, called *A Korao no New Zealand*, was written by the missionary Thomas Kendall. However, this early work proved unsatisfactory, and in 1820, with the assistance of Hongi Hika and Kendall, Professor Samuel Lee of Cambridge University, England, produced a book called *A Grammar and Vocabulary of the Language of New Zealand* that outlined the structure of the Māori language (Biggs, 1968). Missionaries used this work as a basis for translating Christian texts into Te Reo Māori, and printed large numbers of copies of prayers, hymns, and portions of Scripture which circulated widely and rapidly among Māori.

Māori adapted quickly, acquiring literacy in their own language in short time. In the middle decades of the nineteenth century, the percentage of Māori who were literate in Māori was greater than Europeans literate in their own language (Biggs, 1968; Kāretū at.el, 1989). Many Māori were very positive about the written form of Te Reo Māori. Within their communities, Māori actively encouraged each other to read and write, and would make use of almost anything to practice and enhance their skills, writing with any accessible materials, such as charcoal, on stones, wood, or skins (Biggs, 1968). The transformation of Te Reo Māori from an entirely oral language into a written language as well had grown beyond all expectation.

Missionaries introduced the European model of schooling to Aotearoa/New Zealand. Kendall established the first school in 1816. Lessons were taught in Māori. The focus in these missionary schools was religious instruction. Some historians have seen the mission schools as a means of furthering European colonisation. Māori of the time saw them as avenues to open trade doors with European partners. Māori had their own beliefs and initially saw little value in Christian religion. With the growing number of European settlers in New Zealand, a formal means of communication in Te Reo Māori became a priority (New Zealand History on-line, 2006). More importantly for Māori in recognising the value of reading and writing, writing was a means of quickly and easily recording matters of moment to them in physical form, including tribal traditions (Royal & Tapiata, 1973). However, the introduction of pen and paper had dramatic effects on traditional Māori learning. Where once tribal experts were conditioned to memorise epic lines of genealogy, tribal history, and other traditional knowledge, westernised recording methods meant less need for remembering Mōteatea and other guides to behaviours and understandings, thus shifting the emphasis from oral transmission to visual transmission.

In 1835 a most important political statement was written using the Māori Language, the Declaration of Independence. Thirty-five chiefs from the North Cape to the Hauraki area signed the Declaration. Witnessed by James Busby, the British Resident, the Declaration stated that the chiefs of New Zealand wished to form their own autonomous polity and govern their own country with the support of the British King. Within a few years, however, for many complex reasons, the British government officials thought it better to annex Aotearoa/New Zealand and bring it under British rule (Walker, 2004).

The Treaty of Waitangi is the formal document that established legal authority for British officials to exercise British-style government in Aotearoa/New Zealand. In 1840, William Hobson, who represented the British Crown, presented the Treaty to Māori chiefs of Aotearoa/New Zealand. The Treaty was the proposal by the Crown to bring the British colonists and the Māori people under one authority. The Treaty was presented in both English and Māori, but the more favoured version for the Māori people was the Māori language version, and the majority of the Māori chiefs who signed the Treaty signed the Māori language version. The document contained three articles. Through the Treaty, the Crown promised Māori protection of their culture, customs, lands, foreshore, beliefs, and taonga (treasures) if they ceded rule of Aotearoa/New Zealand to British authority.

The first newspaper in the Māori language, *Ko te Karere o Niu Tireni*, was produced by the government in 1842 (Taura Whiri i te Reo, 2006; Victoria University, 2005). However, not all newspapers in Te Reo Māori were vehicles for government perspectives: *Te Hokioi o Niu Tireni e Rere atu na* was written and printed by Māori under the command of Pōtatau, the Māori King, and there were other newspapers which were Māori initiatives. Maori newspapers covered local, national, international events and carried advertisements; they were actively read by both Māori and Pākehā.

Until the second half of the nineteenth century, Māori were the majority of the population in Aotearoa/New Zealand. Up to then, Te Reo Māori was, naturally, the primary language and it was normally used for formal occasions, church sermons, court proceedings, and as the language of trade by both Māori and Pākehā (Taura Whiri, 2006). Many Pākehā pioneers were proficient in Te Reo Māori; it was important for early Pākehā traders and settlers to know Te Reo Māori, since communication with the indigenous population was often vital. As settlers built up their influence in Aotearoa/New Zealand and the numbers of European immigrants increased, Māori became a minority in the country, and the English language became the primary language beyond Māori communities

Legislation and administrative activities by the colonial governments often had negative effects on Māori language and culture. An important example was the Native Schools Act of 1867. This provided elementary schools for Māori, but if schools wanted to receive government funding, then school lessons had to be delivered only in English, and English was to be the only language spoken in classrooms and playgrounds (Walker, 2004; Royal et.al, 1973; Waitangi Tribunal, 1993). Different opinions are expressed about the purpose of this Act: Walker (2004) and Royal et.al (1973) assert that the Act was a means to speed the assimilation of Māori into European culture. Bateman (2000) suggests that some considered the Native Schools Act as a means to ‘inject some pride’ into the ‘natives’.

The language provisions were actively enforced in schools and physical punishment was the price paid by many children caught speaking Te Reo Māori at school. Elderly Māori today recall being strapped or being made to weed the gardens if they spoke Māori in school. Allowances were made for the teacher if he/she could not explain a concept in English, when they were permitted to use Te Reo Māori. Nevertheless, the use of Te Reo Māori was actively discouraged.

Many Māori saw these circumstances as an excellent opportunity for their children to learn to speak English well. They believed that English was an important language for their children to learn, and would be a significant investment for their future welfare. While English was being taught at schools, Te Reo Māori would be nurtured at homes and Māori communities. For nearly all rural populations of Māori, Te Reo Māori was their first language, and mostly used amongst Māori communities. The Māori people of these communities were not adversely influenced by the increasing urban population of predominantly English-speaking people.

A significant factor that assisted the language decline further was the decline in the Māori population. Tribal and colonial wars and new diseases introduced during colonisation also reduced Māori numbers and further rendered Māori as a secondary people in their own country. Taura Whiri (2006) reports that by the mid 1890s, the Māori population had plummeted to its lowest numbers recorded, 42,113. Māori depopulation and the increasing numbers of colonists meant that the Māori language became the language of a minority. Durie (2003) supports this, and explains indigenous people face problems with the survival with their native language when they become a minority in their country. As a result the colonisers usually enforce their language as the main language.

Concerns were raised over the loss of the Māori language. However, the discouragement in the use of Māori language was promoted by government officials who claimed it would be of no real concern if the language became extinct, for the Māori language was a thing of the past and English would serve Māori better (1931, Jackson). Pākehā officials emphasised that the Māori language had no real status and only had a purpose in formal Māori gatherings. Matters became more critical for Māori language survival as Māori themselves began to believe that their language was second to English.

Sir Apirana Ngata defended the value of the Māori culture and language. He affirmed the equal status Te Reo Māori with the English language, asserting that such a position and appreciation of both languages would serve all Aotearoa/New Zealanders and would enrich both cultures and languages (Walker, 2004). Concerned Māori communities and iwi saw a need for domains of refuge for Te Reo Māori and hoped to create an avenue whereby future generations of Māori could know their language.

Urbanisation

Urbanisation also contributed to the loss of Te Reo Māori. In the first half of the twentieth century, most Māori lived tribally in rural communities where Te Reo Māori flourished as the first language. The urban drift of Māori migrating to the cities removed Māori from Te Reo Māori sanctuaries to areas where Te Reo Māori was foreign. Walker (2004) notes that Māori migrated in search of a better life, but that not all migration was optional, since during the Second World those unable to fight or contribute directly to the war effort were moved into urban areas to work in factories or industries to keep the economy stable (Walker, 2004).

In towns and cities, Māori were strategically positioned in predominantly Pākehā neighbourhoods which Walker (2004) refers to ‘pepper potting’; this was a means used to further assimilate Māori into a European lifestyle. It broke down the social structure to which Māori were accustomed, and placed them in one in which their ability to interact intimately with other Māori was seriously inhibited. In these circumstances, English became the dominant language (Walker, 2004; Taura Whiri, 2006).

Māori value systems changed. Māori in urban areas came to believe it would be more beneficial for the children to speak English. The Waitangi Tribunal (1993) reports Māori parents spoke English to their children at home fearing that their children might suffer abuse and embarrassment if they spoke Māori at school. Māori parents also expressed the view that they did not want their children to be disadvantaged academically or socially, and so emphasised the speaking of English.

Language Revitalisation

Te Reo Māori culturally identifies Māori as Māori. Te Reo Māori is an integral part of feeling Māori and being Māori. A culture's language is the core essence of that culture. The way in which a culture views and interprets the world and the culture's knowledge is imbedded in their language and marks for that culture a unique identity. Stories, histories of a people are passed down from ancestors through the medium of the culture's language. Hence, if a culture loses their language what do they become? It is not just a language that is lost, but the essence of the people. This is the reason why Māori revived their language, so they would not lose their connections to their past connections which were maintained though their language.

The fear grew that Māori would become a language with no native speakers and the language could be lost forever. In particular, Māori in urban areas were at greater risk to losing their language, unlike rural Māori communities where Māori remained as the customary means of verbal communication. In response to these difficulties, initiatives were launched to revitalise the language for Māori living in urban areas. Urban marae were built in some cities to cater for taha Māori. On these urban marae, Te Reo Māori was paramount and such marae offered a cultural refuge for Māori language and customs in cities (Walker, 2004). On the marae, hearing Te Reo Māori was normal, and people did not need to feel embarrassed or threatened about speaking Māori. These initiatives led to the establishment of, first, Kohanga Reo, then Kura Kaupapa Māori, and, eventually, the passing of the Māori Language Act in 1987.

Māori Educational Institutions

In the early 1980s, Kohanga Reo, Maori language nests, were set up, in which small children were fully immersed in Te Reo Māori and could easily acquire Te Reo Māori and culture so that they would be fluent by age five. This was a vessel to carry the language for future generations (Walker, 2004; Taura Whiri, 2006). The use of Te Reo Māori only inside the Kohanga Reo was an important strategy to ensure the acquisition and development of Te Reo Māori among the children. Kohanga provided a haven to enhance and encourage the use of Te Reo Māori because outside the walls of the Kohanga Reo the English language dominated. In 1982, the Te Kōhanga Reo National Trust Broad was formed as a voluntary group to liaise between government agencies and Kohanga Reo. Kohanga Reo came under the Department of Māori Affairs. In 1990, they came under the jurisdiction of the Ministry of Education. The shift had a huge impact at grassroots level. The organic structure of Kohanga Reo was formalised and each Kohanga Reo had to conform to policy imposed from a national level.

Kohanga Reo are community-centred and open their doors to all children. The children are generally instructed by koro and kuia (mature Māori elders). The aim of Kohanga Reo is to nurture the child in a Māori cultural environment, promote the Māori language among children and whanau, and strengthen pride in being Māori. Kohanga Reo are family-oriented, and welcome the support of volunteers and whanau to assist the successful development of the mokopuna (grandchildren).

With Kohanga Reo producing Māori children fluent in Māori at the age of five, there was a need to develop institutions so that children could continue their education in the medium of Te Reo, and Kura Kaupapa Māori schools were established to nurture the language for the children who came from Kohanga Reo (Walker, 2004; Taura Whiri, 2006). Seven Kura Kaupapa Māori Schools were created initially, and considered as crucial venues for revitalising Te Reo Māori. They maintained the same emphasis as Kohanga Reo, with school instruction conducted in Te Reo Māori (Walker, 2004). Te Reo Māori demanded government approval.

In 1985, Ngā Kaiwhakapumau I Te Reo, a Wellington-based Māori Language group, and Huirangi Waikerepuru submitted the Te Reo Māori claim to the Waitangi Tribunal. The claim derived from an increasing awareness of a need to make legislative provision for Te Reo Māori. Māori gathered in considerable numbers, and representatives from all tribes were present at the hearing. It was a strong display of unity for Māori, brought together with common purpose in support of Te Reo Māori (Waitangi Tribunal, 1993). The claimants wanted legal status for Te Reo Māori together with other provisions to ensure its survival. Such official recognition of the language was important for the development of Māori socially and culturally (Walker, 2004; Waitangi Tribunal, 1993). The official recognition of Te Reo Māori would also prompt an appreciation of the Māori language and culture amongst all New Zealanders. The Pākehā education system had demonstrably failed Māori children. Official recognition of Māori language and provisions within the claim offered alternative directions that could possibly better serve the needs of Māori (Waitangi Tribunal, 1993).

The Tribunal had much to consider. The ramifications would have a huge impact on New Zealand as a nation. The government was obligated to protect Te Reo Māori. Ngā Kaiwhakapūmau I Te Reo and others claimed Te Reo Māori was a taonga, and had a place of right in New Zealand's past, present and future.

Mainstream New Zealand had always tokenised Māori icons to represent New Zealand. Examples were the haka used by the All Blacks before the beginning of rugby matches, and the pōwhiri, a Māori welcoming ceremony, extended to distinguished guests (Waitangi, 1993). On these occasions, Te Reo Māori was highlighted, but legally the language had no standing. By virtue of the Treaty of Waitangi, the claimants asserted the government had fallen down in its responsibility to protect and nurture the well being of Te Reo Māori (Waitangi Tribunal, 1993). Hirini Moko Mead, a Professor at Victoria University of Wellington, stressed that the government owed duty to the language within the phrase 'O ratau taonga katoa' ([sic] Waitangi Tribunal, 1993. p. 20). Mead's interpretation viewed this phrase to mean government had to protect all things that were tangible and intangible for Māori. Mead stated Te Reo Māori was a taonga and in his opinion the government had a duty to protect the language (Waitangi Tribunal, 1993).

The Tribunal proceedings took four weeks, which was, up to that time, the longest sitting for any Waitangi claim. The Tribunal concluded that the Māori language was important for Māori and Aotearoa/New Zealand's past, present and future. Most importantly, the Crown had not fulfilled its duty to protect the language for Māori and Aotearoa/New Zealand. An important recommendation was that a Commission be established to oversee and foster the development of the Māori Language.

The Tribunal also recommended that 'legislation be introduced enabling any person who wishes to do so to use the Māori language in all courts of law and in any dealings with Government departments, local authorities and other public bodies; a supervising body be established by statute to supervise and foster the use of the Māori language; an inquiry be instituted into the way Māori children are educated to ensure that all children who wish to learn Maori be able to do so from an early age and with financial support from the State; broadcasting policy be formulated in regard to the obligation of the Crown to recognise and protect the Māori language and amendments be made to make provision for bilingualism in Māori and in English as a prerequisite for any positions of employment deemed necessary by the State Services Commission' (Waitangi Tribunal, 2006).

Māori Organisations

So the Māori Language Commission (later given the Māori name Te Taura Whiri I Te Reo Māori, and now affectionately referred to as Te Taura Whiri) was established in 1986 by that Tribunal recommendation to facilitate the development of Te Reo Māori. Te Taura Whiri is responsible for the distribution of government funding to facilitate the promotion of Te Reo Māori. Some examples of Taura Whiri funded ventures are Mai Time, a popular TV programme dedicated to the promotion of Te Reo Māori, and Iwi Radio Stations like Te Reo Irirangi o Ngāti Porou that receive funding based on the amount of time Te Reo Māori is used on air time.

Currently Te Reo Māori still struggles in its revitalisation. However, it is now common to hear people, Māori and Pākehā, using Te Reo Māori or learning Te Reo Māori. The efforts of Kohanga Reo and Kura Kaupapa Māori have ensured a number of Māori youth with Te Reo Māori as a first language. It remains to be seen how strong the place of Te Reo Māori is alongside English.

Summary

Before the arrival of Europeans, Te Reo Māori was universally spoken in Aotearoa/New Zealand. It was an oral language with no written form, but this situation changed significantly after the arrival of Europeans. Missionaries and the development of written language impacted dramatically on the traditional state of Te Reo Māori. As well as the increase in the number of European settlers and the depopulation of Māori caused by war and disease, laws enacted by colonial governments Influenced Māori language and culture. Amongst other measures, the Native Schools Act 1865 although not prohibiting Te Reo Māori in schools, actively discouraged its use, and teachers enforced this by various forms of abusing children who spoke Māori at school, including physical punishment (Waitangi Tribunal, 1994). The Māori language further suffered when many Māori moved into urban areas and lived among Pākehā neighbours. In those situations, the Māori language was often not practiced, and parents of urban Māori families refrained from speaking Māori to their children. Awareness and promotion of the Māori language saw the Māori language gain official recognition in Aotearoa/New Zealand with the passing of the Māori Language Act 1987.

Chapter Two: Disabilities and Blindness

Hūtia te rito o te harakeke, kei hea te kōmako e
Ki mai ki ahau he aha tem ea nui o te ao,
Māku e kī atu he tangata, he tangata.

If the centre of the flax bush is pulled out it will die
If you ask me what is the main thing in the world
I will say it is people, it is people.

Introduction

Most literature dealing with issues of the Blind often refers firstly to disabilities in a broad sense, and then to blindness as a sub-section of disabilities. Here, a discussion of disability generally is presented from a number of perspectives. For the purpose of this research, issues for Kāpō Māori are dealt with in the context of disabilities generally because Kāpō Māori issues are similar to those of the wider disabilities population.

Describing Disability

Stone's (2005) book *Culture and Disability* provides an American classification of disability.

> With respect to an individual, the term "disability" means (A) a physical or mental impairment that substantially limits one or more of the major life activities of such individual; (B) a record of such an impairment; or (C) being regarded as having such an impairment. A person must meet the requirements of at least one of these three criteria to be an individual with a disability under the Act (Equal Employment Opportunity Commission and the U.S Department of Justice, 1991). (Stone, 2005, p. 25)

Graziano (2001) formulates a simular description using the terms impaired, disabled and handicapped, and classes these terms in a progressive state. His theory defines a person as **impaired** when they have an abnormality in their sensory, mental or physical being. His definition of impairment is a condition, which reduces the ability of a person to perform a task as proficiently as a person who is not impaired. The impairment is no longer impairment when simple tasks become a problem and a person is unable to perform certain duties due to the nature of their impairment: the impairment then progresses into a **disability**. Disability in this sense is further an obstruction in performing a task but a person is still able to complete the necessary chores to care for themselves. However when the disability is severe enough to prohibit that person from performing the basic necessities to take care of themselves and the person needs the assistance of another person to bath, dress, and perform household duties, then that person can be considered as having a **handicap**. So the categories progress from impaired to disabled to handicapped.

Impaired → Disabled → Handicap

These categories impart negative connotations about disabilities because they are characterised by a theme of dependency. Moreover, the description fails to clarify the difference between ‘disability’ and ‘impairment’, and the definitions tend to be a medical interpretation of disabilities.

Social Interpretation

Taking a social approach, Scott (1969) comments that a person who has an impediment and is influenced by social opinion determines disability. Beatson (2000) has a similar view, and states that ‘Society creates disability, every bit as much as do impairments of the body and mind’ (p. 3). In Beatson’s view, if society interprets disabilities, then it opens the discussions to a broader interpretation and transforms the discussion into a wider arena. Being disabled is a physical, mental or sensory disorder which is influenced by social opinions (Scott, 1969; Beatson, 2000). However, being born with a disability or being unluckily affected by a disability later in life is not something over which society has any control and therefore society cannot be held responsible for causing those conditions. Regardless of how disability is defined, Scott (1969) and Beatson (2000) assert that society is involved in defining disability.

Beatson (2000) believes that there is a distinct difference between impairment and disability. Disability, says Beatson, can result from birth, or an incident, or a social construction. He explains that impairment is a biological state and people are born with the impairment, just as one is born tall or short, male or female. Other disabled are affected with disability as a result of misfortune. However, 'disabled' is the label used to categorise people with impairments as a social identity. A person is considered disabled when he/she cannot act in general society as efficiently or normally as everyone else. If you cannot see as well as the other person, or you have a mental impairment that slows your ability to learn, or your limbs are missing and you are not able to work, or unaided mobility is restricted to a degree that hinders your movement, then, socially, that is a disability. Beatson (2000) comments that some disabled, as a strategy to overcome their condition, take pride in the impairment rather than denying its existence. In general, people who have impairments are generally labelled as disabled.

Beatson (2000) asserts that 'handicap' was the former recognition of disability and that the terminology has changed with changing social attitudes. Derogatory terms like lame, moron, and idiot have been recognised as the hurtful names that they are, and have been replaced with a more widely accepted overall term, 'disabled', which eventually will probably change also. Society at large used to control the terminology. Now the disabled themselves have a modicum of control in determining society's description of them. At present both the disabled and society-at-large agree with the terminology: an 'impairment' is something that you are born with, and 'disabled' and 'handicapped' are further social identifications (Beatson, 2000).

In summary, the literature suggests that disability may be seen as based on intrinsic and extrinsic forces. Intrinsic as pointed out by Beatson (2000), refers to the biological state regarding impairment of sensory, physical and mental ability occurring from birth, condition or incident, and extrinsic refers to social, cultural and professional influences upon the formulation of social identity of an individual.

Religious Interpretation

In the literature, religious beliefs, in particular Christianity, are seen as having a major negative impact on interpretations of disability. Disability was seen as the product of punishment from God or the work of evil spiritual forces (Catran, 1992; Graziano, 2001; Elizabeth, n.d). Catran (1992) says that some religious views held that 'demons [and] bad spirits in general caused illnesses' (p. 1). Newbold (1987) adds that spiritual crimes were believed to be 'punished by blindness.' (p. 1). The religious view persecuting the disabled as 'purveyors of evil' (p. 1) was a product of ignorance towards disability and based on a total absence of unbiased scientific and medical explanation.

Discrimination

Religion negatively categorized the disabled as sinners and advocates of evil. Social exploitation in England during the Middle Ages treated the disabled as pets for the entertainment of kings and wealthy lords, subjects of derision, for example the court jester. These disabled individuals were dressed in outlandish clothing and made to prance around the court for the king's audience (Graziano, 2001). Other disabled people joined freak shows and put on public displays. This marginalisation forced many disabled to live in isolation.

The blind were discriminated against because sight was considered the most important of the senses. They were considered the most traumatised of all the disabled. Kāpō Māori suffered a multiple discrimination, that of race and of disability. As in the aforementioned claim to the Waitangi Tribunal, government policies failed to maintain their tinorangatiratanga, as well as prevented them enjoying the rights of citizens of the British Empire. Furthermore, 'People are sometimes subjected to different treatment because their preferred language is associated with a particular group, class or category. Commonly, the preferred language is just another attribute of separate groups' (Free Dictionary, 2007, p. 3). The same source cites the treatment of this grouping as marginalisation 'because of the possession of a prohibited attribute' (Free Dictionary, 2007, p.1).

Marginalisation

Disabled people have been marginalized by the religious and cultural attitudes of society (Oliver, 1998). Policies reinforce marginalisation, mainly through the reports and often distorted impressions of medical, educational and political professionals such as doctors, teachers who are deemed to have a superior knowledge of disabled people. Such notions continue to prevent disabled people from becoming fully active members of society. When a possibility arises where they might improve their lot, this is impeded by the high costs of medications and the expense of educational and work aids, which offer an artificial equality.

Exploited by the manufacturers and service providers that supply the necessary products and support, they are subject to the mercy of the capitalist opportunists who have the monopoly on how much to charge for products and services (DePoy, et.al, 2003). The disabled have been excluded from the decision-making which defines policies that determine costs or subsidies of equipment and services.. Without real access to those aids, employment prospects become bleak, leading to unemployment and further dependence on state subsidies (DePoy, et.al, 2004). That massive unfairness increases if you happen to be of Māori ethnic origin, for then you are one of the indigenous minority discussed by Beatson (2000) and Oliver (1998). The problem for Kāpō Māori is compounded as they are maltreated as subnormal, or simply overlooked and ignored totally.

Prejudice

Disabled people experience prejudice, and they are often not given a chance to say what they can actually do, either as a result of other people being uninformed about their condition or possibly because the label ‘disabled’ creates that ignorance. Consequently, people frequently looked upon them as pitiful souls in need of praise and encouragement. Such patronising attitudes are usually well-meant, and not unsympathetic. It is common for people to be condescending towards someone who has a disability (Weaver, 1999). Although it may seem like support and encouragement, very often gushing over someone trying to walk when clearly they have a walking impediment, for example, is more likely to cause embarrassment for that person rather than provide them with any sense of comfort or accomplishment. Realistically, the achievement was not so heroic, and Beatson (2000) suggests that such a person has simply found a way to adjust to the situation and is not submitting to the notion that they are unable. People with disabilities have been perceived to be very dependent on others, often treated as helpless. Many authors argue that this dependency was created by a prejudiced society assuming that the disabled are vulnerable and more, unable to complete simple let alone complex tasks. This prejudicial lack of understanding and ignorance of the disabled condition, along with the non-availability of appropriate technology to assist the disabled, further increases the perception of disabled dependency.

Summary

The definition of disabled is not uniform and is very reliant on social interpretations and expectations (or the lack of expectations). That definition is linked to cultural, social, religious and political views about the terms ‘impaired’, ‘disabled’, and ‘handicapped’. Medical definitions with a scientific basis are often ignored in favour of social interpretations. Graziano (2001) argues that impairment, disabled and handicap progress from one to the other as the severity of the disability increases. Beatson (2000) disagrees. For him, impairment and disability are different: impairment is a biological state that can occur though birth or accident, while disability is a social concept to categorise and identify disabled.

Discrimination against the disabled has been general throughout history. Abandonment or termination of life was often the fate of children born disabled. Religious persecution and social exploitation, which made the disabled victims of ridicule, led to some of the disabled living in isolation, the minority marginalized by the majority. Sometimes viewed as hopeless souls punished by some god, unfortunates in dire need, not able to do things that normal people can do, dependent on others, they have been oppressed by those who make decisions on their behalf, usually without consulting them. Many with the greatest disabilities come mainly from poorer, working class families. Expensive remedies, technological services, and products are priced out of their reach.

Fortunately, social reforms, bills of human rights, and the efforts of activist groups have forced changes and brought about developments for the benefit of the disabled. Avocation for disabled has allowed insights from disabled themselves and has given them a forum to put forward their views and assert their rights, challenging the views that usually founded on the aristocrat wisdom of medical and educational professionals. ‘Disabled’ is the blanket term that is used to cover all disabilities, but it is also important to specify that disability in order to identify the main issues that are faced by people with that particular disability. The chapter which follows explores in detail one of those disabilities, the experiences of the Blind and the Blind of Aotearoa/New Zealand.

Chapter Three: Institutionalisation and the Blind

Pūrea nei e te hau, horoia e te ūa,
whitiwhitia e te rā, ngāhere ake ngā poraruraru, mākere ana ngā here.
E rere, wairua e rere, ki ngā ao o te rāngi,
whitiwhitia e te rā, ngāhere ake ngā poraruraru, mākere ana ngā here.

Introduction

The Royal New Zealand Foundation for the Blind is the primary care service provider for Aotearoa/New Zealand's Sight Impaired and Blind. Currently the Royal New Zealand Foundation for the Blind provides services for 11,293 members, 86% Pakeha/European and 6% Māori (RNZFB, 2006, p. 2). However, many more than 11,293 Aotearoa/New Zealanders suffer from a sight impairment. According to the Foundation, there were in 2004 10,700 blind New Zealanders, and 88,700 who were vision-impaired. Of the total of blind and vision-impaired, 64 percent (64,000) were Pakeha/European, 14 percent (14,100) were Māori, and 11 percent (10,600) from other ethnic groups. (RNZFB, 2006, p. 12).

The Foundation records that in 2004, 2,146 applications were unsuccessful because they did not meet the Blind Foundation's requirements to qualify them for the Blind Foundation's services, 'due to vision worse than 6/18 acuity … Young males (15-39 years) accounted for 31% (658) of unfit applications … Young females (15-39 years) accounted for 26% (551) of unfit applications' (RNZFB, 2006, p. 21). There are also a number of people in Aotearoa/New Zealand who may be entitled to use the services of the Royal New Zealand Foundation for the Blind but do not seek assistance.

This chapter reviews the establishment of the Royal New Zealand Foundation for the Blind. It begins by discussing institutions generally, primarily those in Britain, because the initial institution that was established for Aotearoa/New Zealand's Sight Impaired and Blind followed the same structure as the British blind institutions. Then this chapter will outline the circumstances leading to the establishment of Royal New Zealand Foundation for the Blind. The Blind in Aotearoa/New Zealand were marginalized, discriminated against, and exploited, which led to the development of blind advocacy. This chapter will also address the issue of advocacy generally, then Blind advocacy in Aotearoa/New Zealand, before moving into an explanation of the vision, aims, mission, organizational structure and constitution of the Royal New Zealand Foundation for the Blind. The chapter concludes with a summary.

The Royal New Zealand Foundation for the Blind experienced four name changes. Each name change will be explained in this chapter, as well as the influences that led to the name change. The earlier names were the Jubilee Institute for the Blind, the New Zealand Institute for the Blind, the New Zealand Foundation for the Blind and, finally, the current title, the Royal New Zealand Foundation for the Blind. Each name is significant, as it reflects different circumstances it experienced during its development. To eliminate confusion, what is currently called the Royal New Zealand Foundation for the Blind will simply be identified as the Blind Foundation in the rest of the chapter.

Disabled Institutionalisation

Britain's solution for treating people with a disability was institutionalization. After 1840, when Aotearoa/New Zealand become a British colony, institutions for the disabled (and the sick and insane) were established in Aotearoa/New Zealand which followed British patterns. These British institutions offered care for people who had a disability. The disabled were trained in crafts and learnt skills where their ability permitted. The programmes the institutions offered to the disabled often required manual labour which was thought likely to provide the disabled with expertise they could use if they took up possible job opportunities. However, the institutions developed into a permanent 'solution', a home for the disabled, who became detached from their original families, with the institution serving as the surrogate family.

Humphries et.al (1992) comments that originally these institutions began with high moral intentions, based on strong Christian beliefs about caring for the disabled. However, many of the institutions eventually fell under the control of authorities who imposed a strict regime, and institutions became prisons for many disabled. A common shared experience of the disabled in these institutions was a feeling of being treated like ‘inmates’ (Humphries et.al, 1992; Barnes & Mercer, 2003; Keys & Dowrick, 2001). Many disabled people who experienced institutional conditions recorded that they were discriminated against and suffered dehumanising treatment (Humphries et.al, 1992; Barnes et.al, 2003). Grunewald (2003, p. 2) comments that such institutions expressed ‘collective ideologies, that gave society the right, and the power, to separate certain people from the rest of the community and limit their freedom, influence and life conditions.’

The majority of the disabled who were admitted into institutions came from poor or working class families. Because of poverty, many poor or working class families had limited opportunities for a healthy lifestyle, and could not afford good food, sanitation, medical services, and products that might have improved their overall wellbeing. They generally lived hard lives that were often unhealthy. Infants that were born with physical or mental defects were prominent amongst lower income families (Humphries et.al, 1992).

Institutions offered no classification of disabilities and in many cases those who had physical impairments such as blindness, deafness, or missing limbs were admitted alongside those who had mental impairments. This caused considerable public concern about safety issues when the public became aware that a blind or deaf person was possibly placed in a room together with someone who was mentally insane. Screening of people to be admitted into the institutions was poorly executed: in situations where an individual’s disability could not be unidentified, he/she was simply deemed ‘backward’ and admitted along with those whose disabilities were more evident (Humphries et.al, 1992). It is possible that people were admitted into institutions simply to increase institution numbers and therefore qualify for additional government funding.

Aotearoa/New Zealand’s Blind Foundation marginalised the Sight Impaired and Blind. Hugemark and Roman (2002, p. 5) explains that ‘Marginalisation constructs people as “dependants” which often imply being legitimately subjected to the authority of social service providers and other administrators who reinforce rules to which the marginal must comply’. For the Sight Impaired and Blind of Aotearoa/New Zealand, the Blind Foundation was their only source of salvation. Newbold adds that the Sight Impaired and Blind also became dependant on the care of the Blind Foundation and were subjected to whatever decisions the Blind Foundation imposed on them: 'The Blind, who were largely invisible before 1890, were now recognised as pitiable souls for whom the institute offered the only hope of salvation. In part this was true - there were no welfare benefits for the blind and the institute provided the major service available to them. If a blind person chose not to attend the institute, or if he or she was expelled for any reason, prospects could be grim. The dependant blind were placed in a powerless situation and were forced into permanent subservience to the will of the J.I.B management' (Newbold, 1995, pp. 25-26).

Blind New Zealand History

The need for a Blind Foundation in Aotearoa/New Zealand was population-based. Aotearoa/New Zealand's Sight Impaired and Blind are mentioned in 1874 when plans were discussed to create a facility for accommodating people who suffered a sight deficiency. However, these 1874 plans for the construction of the Blind Foundation failed to proceed because there were insufficient Sight Impaired and Blind Aotearoa/New Zealanders to attend the institute (Catran, 1992). The single alternative for Aotearoa/New Zealand parents of Sight Impairment and Blind children was to send them to Australia, where there was an established school for the blind. This option was only available to families who could afford the financial cost of travel, accommodation, and school fees, even though in many cases the Aotearoa/New Zealand government offered financial support to help cover costs (Catran, 1992; Newbold, 1995).

Plans for the Blind Foundation were resurrected with the arrival of John Tighe. Tighe himself was a blind man. Catran (1992, p. 8) comments that very little was known about Tighe's origins and many stories about him when checked have been disclosed as tall tales. He was described in newspaper reports as 'A tall man with bushy red hair and an Irish temper', 'a hard worker', with 'boundless energy and enthusiasm', someone 'who never let his blindness stand in his way' (p .8). Newbold (1995) says that before his arrival in Aotearoa/New Zealand, Tighe was a school teacher in Australia and a former teacher of blind people. He had been involved 'in setting up libraries of embossed books for the blind in Australia' (p. 19). After conducting a survey, Tighe found that nationally there were 214 individuals in Aotearoa/New Zealand who suffered a sight deficiency, but there was no school that catered for their needs (Newbold, 1995).

With the support of his wife, Tighe considered it necessary to set up a school that could offer a service to all Sight Impaired and Blind Aotearoa/New Zealanders, Māori and Pākehā alike. With assistance of Bishop William Cowie, Tighe secured the sum of 80 pounds, left over from the Queen's Jubilee celebrations of 1887, and erected a permanent establishment to cater for New Zealand's Sight Impaired and Blind in Parnell, Auckland, in 1890. The Blind Foundation was first named the Jubilee Institute of the Blind to commemorate the origins of the funds. Although it provided a basic foundation for its intending members, the building was very humble. Catran (1992, p. 8) records: 'It consisted only of an old 12-room boarding house – "rickety, full of cracks and cobwebs and very cold" – but here it was John Tighe set up a school with 20 children, both Māori and Pākehā, from all parts of New Zealand'.

The Blind Foundation's first teacher was Jane Collier. She was not qualified or trained to teach the Sight Impaired and Blind, and had just recently obtained a teaching diploma. Nevertheless, she adapted quickly to teaching students with sight deficiency and understood that teaching a group of Sight Impaired and Blind people would require a different approach. She utilised what she could to deliver an effective lesson to her students, with the students learning through other senses such as touch: 'For geography she made maps of plasticine in relief so that the students could learn by feel. She borrowed stuffed birds and small animals from the museum and, like most other New Zealanders from Founders Families, was adept in making do with whatever was at hand' (Catran, 1992, p. 15).

The Blind Foundation was governed a board of trustees. The principles of the board were 'educational and the appointment of teachers, and maintenance of education standards, provision of work for those who had finished their education, administration of the Institute as a residence' (Catran, 1992, p. 23). The board of trustees were all male, fully-sighted and Pakeha/European. They were selected because they held influential status in the local community, and their position gave social advantages, which enabled the Blind Foundation to procure funds from government. The trustees were detached from the Blind Foundation: many of them never set foot on its premises or had any contact with its members. Astonishingly, some had never known any blind person personally. The trustees' office was located off campus, situated in Victoria Arcade, Queen Street, and there the trustees made the decisions for the Blind Foundation. The board often acted without consulting the Blind Foundation's members.

The Blind Foundation further marginalised the Sight Impaired and Blind. The influence of board of trustees also extended into the personal lives of the Sight impaired and Blind, so that they had to seek board approval on who they could meet, who they could visit, and who could visit them. At the discretion of the director, the board monitored their relationships, and if they desired to court and get married, the board had to approve. The board of trustees did not look too fondly on those with vision marrying the sight impaired and blind. Aldis (1932, p. 6) complained: 'The Trustees can, at their own unfettered discretion, without being obliged to render any reason for their action, reject the application of any person for administration to the institute; expel any person from it; fix the rates of wages and the hours of work of the inmates, the kind of work one is to do, and the conditions under which they work and live; make rules for their guidance, and interfere in their private concerns. All this they can do, and most of all of it they have done, without the consulting their subjects, or giving any consideration whatever to their wishes, feelings, or opinions. There is no appeal from their decisions, and no one who can at will call them to account'.

As an ex-employee of the Blind Foundation, Aldis knew the institution's business well, but despite his protest, he found no support and his comments went unnoticed at the time. Catran (1992) says that Aldis's comments were personal attacks on the Blind Foundation. Newbold (1995) brings Aldis's comments forward to reflect on the nature of what the Blind Foundation members were subjected to.

Although Tighe ran the Blind Foundation with passion, his strict 'no negotiation' attitude made him dictatorial. He became a stern task master, and those under his authority were powerless and had little choice but to conform to his commands. All decisions that concerned the Blind Foundation ultimately fell under his authority: although the board of trustees made the decisions, Tighe was the sole executive. Newbold (1995, p. 27) records: 'John Tighe had worn the dictatorial mantle which his times conferred upon him. He insisted on a master servant relationship with his charges and used his powers freely in the enforcement of his wishes. Basic necessities of life – such as money and clothes – had to be … applied for and could be arbitrarily withheld. The food was bad, and on at least one occasion residents had been served dog meat in stew'.

Tighe's positive strides were admirable, and during his affiliation with the Blind Foundation he initiated its establishment, brought about the first enterprise to cater for blind school instruction, and provided a place of care for the Sight Impaired and Blind of Aotearoa/New Zealand. In 1905, Tighe reluctantly resigned his position as the director of the blind. He was criticised for being in breach of a court order in 1903 that prohibited him from attending racecourses, and Tighe was left little choice in the matter but to bow out, disgruntled.

Charles H. Frayling replaced Tighe. Frayling had previous experience as director of a blind institute, as he had held a similar position at the Birmingham Institute for the Blind. Around the same time, the Blind Foundation gained statutory recognition under the Jubilee Institute for the Blind Act in 1906. Although it was originally a private organisation, its increasing reliance on government funding led the government to place the organisation under the control of the government's Department of Education by legislation. The Department instructed the foundation to care for all children of sight impairment between 7 and 16 years of age (Newbold, 1995)

In the first decade of the twentieth century, a totally blind member of the Institute went on to became a university graduate. His name was Ernest Chitty. Having quickly discerned that Chitty had considerable academic talents, Jane Collier provided personal tutoring for him. Chitty entered Auckland University College, graduated with a BA in 1909, and then completed an MA degree. Chitty presented an example of how, with proper nurture and encouragement, a totally blind person was more than capable of succeeding in practical work. Following Chitty's example, Mary Law was the second blind graduate in New Zealand. Under the supervision of Frayling, Ernest Chitty and Mary Law opened the first library for the blind.

In 1923, Clutha Mackenzie followed Frayling as director of the Blind Foundation. Mackenzie was the son of a prominent politician, who had briefly been Prime Minister of New Zealand; a shell at Gallipoli had blinded Mackenzie in 1915 while a soldier during World War One. Born into a privileged family and having great influence among dignitaries. Mackenzie found his way comfortably into the position of the director of the blind, and eventually received a knighthood for his efforts in the Blind Foundation. However, Mackenzie's credentials as a blind director were challenged by Aldis (1932), and Mackenzie was also investigated over numerous accusations of indecent assault on young boys and men of the Blind Foundation. Newbold comments: 'it was … rumoured that he was sexually interfering with some of the boys. Talk about the director's alleged sexual activity was common among the boys at the time. So too was talk about Mackenzie's habit of conducting interviews and physical examinations in his office at night … on 29 April 1938 Sir Clutha was arrested on 16 charges of indecent assault on 11 youths and men, allegedly committed between 1933 and 1938' (Newbold, 1995, pp. 36-37).

Mackenzie was very successful in acquiring financial support for the Blind Foundation, even during times of severe economic difficulties in the wider world, and although the survival of the Blind Foundation had been at risk during World War One, the Foundation remained financially viable through the Depression. Mackenzie was highly regarded among the local community, and among his friends were many with business connections who provided financial assistance. As the Blind Foundation expanded nationally and financial contributions came mainly from public sources, this influenced the Blind Foundation to change its name, and the Blind Foundation became known as the New Zealand Institute for the Blind to reflect its national significance.

Mackenzie's military background and assertive nature gave him a simular persona to Tighe. Like Tighe, he ran the Blind Foundation in authoritarian fashion and ordered about those under his command with a firm hand. Some described Mackenzie as a dictator. However, his commitment to the well-being of the blind was important. During his period as director, there were several notable innovations: a hostel to house the working men was opened in 1926, more blind workshops were developed in 1927, and, in 1934, the opening of Bledisloe House meant that accommodation was made available exclusively for elderly blind (Newbold, 1995).

Advocacy

The Sight Impaired and Blind of Aotearoa/New Zealand suffered much injustice, and the way they were treated changed when they began advocating for themselves. Avocation is presently a growing trend, giving minority and marginalized groups such as the Sight Impaired and Blind a forum to put forward their views where once the chance for such expression was suppressed by religion, cultural attitudes, and the views of what was suitable for society which were held by the majority (Oliver, 1998). Human rights movements, bills of rights, and activists fighting for equality have paved the way for the disabled and blind to find their voice and speak out, reclaiming dignity and fairness from the constrictions imposed by their able-bodied peers. Early advocacy for Blind grew out of the unsatisfactory situation soldiers who were disabled during World War One found themselves in on their return from war. Many arrived back with missing limbs, impaired vision, and hearing loss. Returning as heroes and previously able-bodied, they did not want to be treated as if they were hopeless; they asserted their right to independence, equality, and dignity (Stone, 2005). Further progress was made with the return of veterans from service in the Second World War. These movements prompted positive reform and policy changes to improve the lives of the disabled person.

Avocation is crucial in areas of social reform and disabled rights where the advocates can prove most beneficial. Stone (2005, p. 25) explains that advocating means asserting your rights within society, culture and work areas it often requires a practical approach to finding a remedy through negotiation. He writes: ‘Advocacy is another strategy that is closely aligned with both negotiating and mediating. The advocate’s role is one of defining and pleading the cause of, promoting the rights of, of changing the system on behalf of an individual or group. Advocacy involves activists that are aimed at the redistribution of power and resources to the individual or group that has demonstrated a need. The strategy of advocating is closely integrated with the intervening conditions of power and economics, and the broker who is advocating must consider these intervening conditions in the brokering model.’ Stone goes on to say: ‘In disability services, advocacy can be further delineated as the act of informing and supporting consumers so that they can make decisions that serve their needs. Advocating can also encompass the responsibility to take appropriation action regarding instances of incompetence or unethical or illegal practices by a member of the service provider team. This would include a readiness to prevent any action on the part of others that is stigmatizing to consumers or prejudicial to their best interest'.

Aotearoa/New Zealand Blind's first effective advocate movement began in 1936. In the year after the first Labour government came into office, it introduced a 40-hour work week which limited the amount of time an employee was obligated to work. This gave labour unions the ability to liaise between workers and employers, and the general population of Aotearoa/New Zealand were, sooner or later, able to take full advantage of this new law. Unfortunately the Blind were exploited, because the Blind Foundation was a charitable organisation and thus were exempt from the new Industrial Conciliation Arbitration Act: 'When the 40-hour week was introduced in 1936, the institute refused to accede to it. As charitable trust the Industrial Conciliation and Arbitration Act did not apply to the [institute] and along with prisoners and mental hospitals, all employees there were exempt from union rights and privileges. The refusal of management to accept the spirit of the 40-hour week was seen as unjustified and it was this which fired workers into action' (Newbold, 1995, p. 42).

The Sight Impaired and Blind continued to work long hours in the Institute's workshops where the Board provided employment for the blind. In addition, work conditions were poor, with dirty surroundings, loose boards, and dust. The Sight Impaired and Blind workers decided to take a stand and called for a meeting in August 1937 protesting their displeasure. Tom Gilbert was the Sight Impaired and Blind spokesperson. Gilbert argued the case for the 40-hour week and spoke of the unreasonable work conditions and the long hours of labour endured. There was boisterous support from the Sight Impaired and Blind at the meeting. Mackenzie, the current blind director, also at the meeting, was asked to mediate on behalf of the Blind Foundation, and he brought this matter before the board. The protest was a success (Newbold, 1995).

This victory created a forum where the Sight Impaired and Blind could put forward their views and develop a sense of unity. They had begun to advocate for themselves, and disputed anything imposed upon them, which they regarded as unfair. When a living allowance was withdrawn in 1941, even though they earned less than sighted employees, the Sight Impaired and Blind held a strike, and withheld their products because they were paid unjust wages.

The Sight Impaired and Blind elected two representatives to raise the two issues before the Auckland Trades and Labour Council. Consequently a hearing was called to discuss these concerns, and this led to the formation in 1943 of a blind advocacy committee, called the Blind Welfare Committee. Tom Skinner was appointed chairmen. Skinner became an advocate for the blind, promoting Sight Impaired and Blind views to the Blind Foundation Board and then, when he became MP for Tamaki in 1946-49, further promoting Sight Impaired and Blind views in parliament.

Because the Blind Foundation was the primary caregiver for Aotearoa/New Zealand, many Sight Impaired and Blind were completely reliant on the Blind Foundation and the support services it provided. They fell into a condition of dependency, and confirmed the impression put about by the Foundation that they were indeed helpless. It was an important challenge for Blind activists to reverse this unsatisfactory situation, and to establish pride and self sufficiency amongst the Sight Impaired and Blind community. However, the Blind Welfare Committee met opposition from both the Blind Foundation and from those of Sight Impaired and Blind community who had become dependant on the Foundation. The Blind Foundation subjected the Committee to political attacks, and Sight Impaired and Blind residents of the Blind Foundation, a situation that affected the Committee's integrity, sabotaged its activities. Overwhelmed, the Blind Welfare Committee was eventually dissolved in 1953.

Earlier, during the establishment of the Blind Welfare Committee, a number of people saw the need for a broader organisation, and in 1945 a sub-group formed alongside the Blind Welfare Committee. On 8 October, 100 people concerned about the rights of Sight Impaired and Blind people met at the Municipal Hall in Newmarket, Auckland. As a sign of future difficulties, addresses of blind members were withheld by the Blind Foundation, and the 1ZB radio station declined to broadcast a notice about the meeting, so the meeting had to be advertised by word of mouth. The purpose of the meeting was to discuss whether there was a need for Sight Impaired and Blind people to form an organisation. Newbold (1995, p. 46) records: ‘After discussion, it was unanimously agreed that an association should be established and that an executive of eight, plus a secretary, be set up. It was decided that two of the executive should be women’. Bill Finley was elected president, Albert Williams vice president, Lionel Voice secretary, and Theo Haultain, who was sighted, minutes secretary. Others on the executive were Bill Marnane, Bill Fletcher, Morton Laurent, Fred Spear, Anne Haultain (wife of Theo) and Rina Voice (wife of Lionel).

This organisation was recognised as the Auckland Provincial Association of the Blind, but was renamed the Dominion Association of the Blind, usually known by the letters DAB. The DAB was instrumental in presenting the concerns of the Sight Impaired and Blind to the Blind Foundation’s governing board, and was responsible for many positive reforms. The members of the executive were dignified and proud of their sight deficiency, and in general promoted Sight Impaired and Blind awareness in Aotearoa/New Zealand. The DAB aims and objectives were ‘The advancement and protection interests of the blind persons’ and ‘To promote a closer social relation among the blind’. Membership was restricted to blind people aged 18 years and over, and the annual subscription was five shillings (Newbold, 1995, p. 46).

The DAB enlisted the help of Dr Martyn Finlay who looked after legal formalities for the group had previously held positions as secretary to the Minister of Justice and member of the Law Revision Commission. Finlay also reiterated his support the following year when he entered parliament as Labour MP for the North Shore electorate. The DAB came under attack from the Blind Foundation, which barraged them with criticism and promoted the views of the Foundation on local radio.

The Blind Foundation also attempted to discredit DAB politically, sending letters to parliament which claimed that work of the DAB would contradict the work of the Blind Foundation, and saying there was not enough room for both organisations. Fortunately, Rex Mason the Minster of Education and Justice, who the letters were addressed to, knew Finlay well. He responded to the Foundation that there was room for both organisations, and that if there was a conflict of interest between the two groups, both would be consulted in attempting to arrive at a resolution.

The DAB encountered many obstacles. Nevertheless, 'one constant aim of the Association [was] its unwavering devotion to the cause of advocacy on behalf of the blind community through the vehicle of collective action. Peer support, public education about blindness, and all of the other functions traditionally aligned with an organization of the blind had and have their place in the dynamic life of the [association], but advocacy, in one form or another, has been the mainstay of its existence' (Frye, 2005). Important recognition came in 1947 when the director of the Blind Foundation, government officials, and the Prime Minster attended the DAB's annual meeting in Wellington. Subsequently, the DAB secured a position on the board of the Blind Foundation.

Blind Foundation registration increased significantly as a result of wars that produced sight injured soldiers, population growth, and longer life expectancy. The increased numbers of Sight Impaired and Blind persons in the population created more public awareness, and this subsequently placed pressure on the Blind Foundation. The Foundation became subject to public agitation to provide better services for the Sight Impaired and Blind of Aotearoa/New Zealand (Newbold, 1995). Prosperity and growth of national pride in Aotearoa/New Zealand was echoed in the activities of the Blind Foundation. The livelihood of the Sight Impaired and Blind improved and the Blind Foundation began expanding nationwide. However, the paternalism of the Foundation remained a crucial issue.

The National government, in power from 1949 to 1957, emphasised individualism and self proficiency in their policies. Originally the purpose of the Blind Foundation was to assist the Sight Impaired and Blind to learn skills which would allow them to operate independently: the Blind Foundation aimed to 'mainstream' (as it would be termed now) Sight Impaired and Blind people in amongst the general community. However, the reverse had become the case, with the blind highly dependant on the Blind Foundation, and the Blind Foundation relying on Sight Impaired and Blind work production. When the National government increased subsidies to the Blind Foundation, the Foundation could function more easily, with less pressure on creating generating funds for the organisation. With the government's financial support, the Blind

Foundation could concentrate on its original purpose, assisting Sight Impaired and Blind in working towards independence. The Blind Foundation began deinstitutionalising its members and moving them out into the community. This change meant that 'the vocational world of the blind was transformed' (Newbold, 1995, p. 66). An additional reason for this initiative was to help break down the barriers between the wider society and the Sight Impaired and Blind. Generally people considered Sight Impaired and Blind to be helpless and dependant on others for survival. The RNZFB (1990) points out that since society itself placed barriers upon the blind, exposure of the blind to society was important in breaking down those barriers.

As the Blind Foundation continued its development from the 1950s to the end of the century, the care of the Sight Impaired and Blind changed positively, influenced by advocacy from the DBA which increased public and political awareness of the Sight Impaired and Blind. Another change in the name of the Foundation was a result of government legislation. The passing of the New Zealand Foundation for the Blind Act 1955 placed the control of the Blind Foundation with the government's Department of Health; subsequently the Department of Education (now the Ministry of Education) was charged with management of the Foundation. The New Zealand Institution for the Blind became known as the New Zealand Foundation for the Blind.

The Blind Foundation began expanding its operations, leading to the organisation of blind sports, chess clubs, and other leisure activities. To assist the education of children with sight impairment, an area of 28 acres in Manurewa was gifted to the Foundation. Wally Christiansen, the director of the Foundation since 1947, was eager to create a new style of college, to be named Homai. The move from the Parnell campus was not only supposed to be a physical shift but also mark a change in the educational environment.

The intention was to make it more significant, practical and comfortable for Sight Impaired and Blind students. Christiansen travelled internationally, collating ideas from other blind schools to create this vision, and he directly involved himself in the creation of the school. Significantly the complex was not isolated, but was located close to urban residential areas. Homai opened in 1963, as a 'residential centre for visually handicapped children in New Zealand' (Catran 1992, p. 114). Blind education had changed greatly since the days of Jane Collier, the Foundation's first teacher: Homai was armed with resources to enhance the learning productivity of the students. Students began schooling here in segregated classes and, when they displayed the ability, they were then integrated into the mainstream schools in the local district. Along with a commitment to achieving mainstreaming goals, another aim was ‘to assist children to become as independent as possible’ (Catran, 1992, p. 120). Additionally, after many discussions, potential instructors were sent overseas to train for a service that began in 1962, providing trained guide dogs to improve independent blind mobility, ‘the Guide Dogs for the Blind Association’ (Catran, 1992, p. 97).

The DAB and the Blind Foundation were at odds on a number of occasions. Catran (1992) sees this as a feud for political power with the DAB wanting equal status. The DAB argued that ‘formulation and dispensation of services to the blind should rest equally with blind and sighted – a true partnership in administration and control’ (Catran, p. 124). Instead, the DAB were given a minority position on the Foundation’s board. Newbold (1995) adds that growing tensions were also attributed to government funding favouring the DAB on occasion. However, the DAB was unsuccessful in gaining government support over their petitions seeking equality on the board. The government replied to DAB petitions by saying they represented a minority group of the Blind. It seemed ironic that on one hand the Blind Foundation’s aim was to promote the independence of the Blind and build paths so they could work self sufficiently, and that, on the other hand, they did not want to allow half the members of the board to be blind.

Tensions between the DAB and the Blind Foundation were heightened when people became confused about the distinctions between the two organisations: letters that were intended for the DAB were delivered to Blind Foundation. During the 1980s, the membership of the DAB did not significantly increase, and their activities ceased. Blind Foundation members became comfortable with the way things were, because DAB efforts over the years had led to improved conditions, and members did not live indefinitely at the Foundation as in earlier times, but were moving out on their own. Nevertheless, the DAB had given voice to views, which once had gone unheard, and had provided the blind with a forum through which they could exert pressure to take control of their own lives.

A further change in the name of the Foundation occurred in 1972, after Princess Alexandra became the first royal personage to visit the Foundation. The occasion was commemorated by the addition of ‘Royal’ to the Foundation’s title.

Royal New Zealand Foundation of the Blind

Currently the Blind Foundation provides services and support for the Blind, Sight Impaired, and Deafblind who are registered with the Foundation or who apply for assistance from the organisation. The Blind Foundation is responsible for fundraising efforts to support, provide services and advocate for the Sight Impaired and Blind. It offers avenues and support for those who may encounter an injustice or derogatory treatment which prevents them from engaging in normal full lives to which they are entitled.

The vision of the Blind Foundation is that the ‘Blind, deafblind and vision-impaired people have the same opportunities and rights as other citizens to live meaningful lives as they so choose’ (RNZFBb, 2007. p. 1). In addition, the Foundation looks to ‘put tools in the hands of blind, deafblind and vision-impaired people so that they have the skills to enjoy independence and choice; promote awareness of the needs and capabilities of blind, deafblind and vision-impaired people; reduce barriers to participation in society; and, work with others to further he interests of blind, deafblind and vision-impaired people’ (RNZFBb, 2007. p. 1).

The Blind Foundation’s values are ‘member centred’, ‘committed to understanding the needs of our members and providing or referring members to quality services’ (RNZFBb, 2007. p. 1). Finally, the Blind Foundation has seven goals for further development. The goals are to maximise opportunities for members to participate in their communities, to seek more opportunities on behalf of members, to increase awareness of blindness-related issues, to deliver quality services that meet the blindness-related needs of members, to set blindness-related quality standards for and partner with others to meet the needs of members, to increase the Foundation’s resources and key internal and external relationships, and to be recognised as the leader in blindness-related matters (RNZFB, 2007).

Board of Directors

The Blind Foundation is governed by a Board of Directors that is elected by its members: the Board of Directors replaced the former Board of Trustees under the Royal New Zealand Foundation for the Blind Act of 2002. The Board may consist of eleven members. The Blind Foundation members elect eight members to the board; the associate members elect one, and the board reserves the remaining two positions for people who have specific qualifications to assist board decisions professionally. Board elections take place every three years. The Chief Executive of the Foundation is elected by the board and is responsible for the management of the Foundation and oversees execution of board decisions. The foundation is divided into six divisions, with 42 regional Community Committees, and 19 offices throughout the country (RNZFBb, 2007).

Membership of the board is open to anyone over the age of 18 years, except for people customarily disqualified from such positions because of criminal convictions, bankruptcy, and other impediments. The current Board members come from various backgrounds and have a wide range of professional skills, including doctors, lawyers, and businessmen. In contrast to the earlier decades of last century, the board has a mixture of men and women, and includes blind or sight impaired members. Current board members have affiliation to the blind and have been involved in blind issues for a number of years. However, representation of Māori on the present board is not strong.

The Foundation

The constitution sets out that the Blind Foundation is a charitable organisation established to promote the positive development of the sight impaired and blind of New Zealand. The Board of Directors aims to: ‘Promote the independence, integration, enablement and well-being of blind and vision-impaired people in New Zealand society. Provide and help to provide services, programmes and activities for blind and vision-impaired people, especially in education and training, rehabilitation, recreation, equality of opportunity, support and enablement. Promote and encourage a positive attitude towards blindness and vision-impairment amongst the public and blind and vision-impaired people. Encourage and help blind and vision-impaired people with additional disabilities to live useful and dignified lives according to their personal choice' (RNZFBd, 2007. p. 1).

Membership of the Blind Foundation can either be 'full' or 'associate'. To become a full member of the Blind Foundation, applicants must seek professional conformation from a registered optometrist or ophthalmologist that their vision is no better than 6/24 when corrected with glasses or lenses, or have 'serious limitations in the field of vision generally not greater than 20 degrees in the widest diameter' (RNZFBd, 2007, p. 4). Membership can cease for full members if they no longer meet the medical criteria. Associate members do not have to undergo a medical examination and associate membership has to be renewed every three years.

Summary

This chapter has surveyed the challenges Blind/Blind New Zealand faced. The survey has been presented chronologically, bringing forward significant themes. In a world which lacked scientific explanations of blindness or sight impairment, the condition was often deemed to be the work of sinister magical forces. Regarded as burdens, frequently neglected and abandoned by families, oppressed by the negative attitudes of society, the Blind were unheard, and segregated into institutions where they suffered injustice. More recently, they have found their and have sought equality and understanding among their sighted peers, the other disabled people who had endured similar treatment and no different. In general, the experiences of New Zealand's Blind and Sight Impaired were no different from those in other parts of the world. Though the struggle has been long, the RNZFB now not only provides services and support for the Blind and Sight Impaired, but also advocates for them and challenges the social or political barriers that still exist.

The beginnings of the RNZFB were difficult, but reform has made it a leader in blind care. The lives of Kāpō Māori were also entangled in the injustices of the earlier times. However, it is important that they have a chapter of their own. Within the story of Blind/Blind Aotearoa, outlined in this chapter, there is a more specific story to be told about the lives of Kāpō Māori, and the thesis now focuses on that specific story.

Chapter Four: Kāpō Māori

Ahakoa he iti, he pounamu

Although small, a treasure

Introduction

In previous chapters, this study has outlined the ways in which the use of the Māori language was discouraged and its continuing existence threatened, discussed how the Disabled generally were subjected to prejudice, marginalisation, and discrimination, and surveyed the experiences of the Sight Impaired and Blind in Aotearoa/New Zealand, especially through the way they were treated at the Blind Foundation, until the harshness and dependency was mitigated though self avocation and promotion by the Blind, creating a public awareness of the existence of Sight Impaired and Blind Aotearoa/New Zealanders. Each of these discussions has provided context and background for the present chapter, since Kāpō Māori were influenced by all the circumstances already explored – language loss, discrimination as Disabled, and the practices of the Blind Foundation.

Kāpō Māori is a new field of research, and there is little previous information about them. This chapter will begin by investigating Māori and Disability, reporting figures on the population of Disabled Māori in Aotearoa/New Zealand, the causes of Disability among Māori, and the demographics of Disabled Māori. It then goes on to present the perspective of some Maori scholars who have argued for a wider definition of disability, which includes the impacts of colonisation. Subsequently there is a discussion of the importance of Māori language and customs for Disabled Māori. The chapter deals with the general experiences of Kāpō Māori who were involved with the Blind Foundation, and finally provides details about Ngāti Kāpō, an organisation formed in the 1980s that advocates for and supports Kāpō Māori and their families.

Māori and Disability

Statistics New Zealand (2001) reports that in Aotearoa/New Zealand 'an estimated 107, 200 Māori reported having a disability in 2001' (Statistics New Zealand, 2001, p. 3). In ratio to the Māori population, 'one in five Māori has a disability' (Statistics New Zealand, 2001, p. 3). The percentage of Māori who have a disability increases with age, so that 'Fifteen percent of Māori children (0 to 14 years) reported a disability, compared with 19 percent of Māori aged 15 to 44 years and 34 percent of Māori aged 65 and over having a disability' (Statistics New Zealand, 2001, p. 3). Age is clearly a significant factor for disability issues.

Fifty-five percent of the disabled Māori population also reported that they were multiply disabled. The leading type of disability was a physical impairment. According to Statistics New Zealand, the main cause of Māori disability to was disease or illness, which was 'reported by over 40,000 Māori (39 percent). The next most common cause was an accident or injury' (Statistics New Zealand, 2001, p. 2).

Statistics confirm that Māori who have a disability are less likely to be employed, and unemployment is also common among the general population of disabled, a result of prejudice, marginalisation, and discrimination. For Disabled Māori, this situation is further amplified, as Kingi and Bray (2000) put it, because being Māori in Aotearoa/New Zealand is itself disabling. The majority of disabled Māori receive state benefits which, at the beginning of the twenty-first century, amounted to an annual income of some $15, 000 (Statistics New Zealand, 2001, p. 3). Beatson (2000) and Oliver explain that it usual for a disabled person to be reliant on government-based benefits, usually just enough to cover basic necessities but leaving little income to access technology that could improve the quality of their lives in a major way.

Māori Interpretation of Disability

In most societies, disability is defined by medical diagnosis or social and cultural perspectives or a combination of these things. For Māori, disability is more complex and far-reaching, since as well as medical and social definitions, it is a consequence of colonisation. The results of colonisation have been called the 'primary disability' (p. 13) for colonised people. Kingi and

Bray (2000) argue that Māori interpret disability as being disconnected from your own lands, your culture, and your language, situations created by the activities of the colonists and governments. Kingi and Bray (2000) record the words of a Māori person who insists: 'It's a disability to have your lands taken from you … it's a disability to be told you can no longer grow your own food. So you have to get a job in a system that has been set up by white people … disability is not giving kids the right support … not having the skills to be able to go forward … being old, it's a disability' (Kingi and Bray, 2000, p. 8).

Māori language and Customs

Māori language and customs are very important for Disabled Māori. Ballard (1994) states that Māori 'felt strongly that Māori identity was … important to … disabled Māori' (Ballard, 1994, p. 213). Ballard (1994) also argues that it is a right of a Disabled Māori to have access to the Māori language, for 'if we appreciate that language is essential to our cultural identity then it is just as crucial for the identity of the disabled Māori' (Ballard, 1994, p. 214). Disabled Māori therefore have to cope with a disability as well as working to maintain their Māori identity. Although Te Reo Māori is very important for cultural identity for Disabled Māori, it is even more essential to support them correctly: 'The Reo is important', Ballard suggests, 'but the manaaki from people caring for that person is more important' (Ballard, 1994, p. 217).

Essential to the appropriate care for Disabled Māori, in Ballard's view, is the recognition of Tikanga Māori, including 'legends, history, customs and traditions, art and crafts, whakapapa, karakia, music … traditional Māori values such as aroha-ki-te-tangata, manaakitanga and whanaungatanga' (Ballard, 1994, p. 215).

Kāpō Māori

Kāpō Māori history begins with the John Tighe's establishment of the Blind Foundation because there are few known records of Kāpō Māori before his intervention. Bryder and Dow (2001) explain that 'until the 1990s, Māori health was a relatively unknown field and neglected in New Zealand history' (p. 3). Before the 1990s, the main concerns of researchers were 'anthropological, epidemiological or demographical topics, reflecting nineteenth and early twentieth-century concerns about the “dying race”’ (Bryder et.al, 2001, p. 3). Historical research, including systematic consultation of whakapapa, mōteatea, and tribal traditions, may at some stage reveal earlier data relating to Kāpō Māori. Perhaps Kāpō Māori were before modern times very few in number, and only recently, with the growth of the Māori population, longer lives, diseases of age, and accidents, has the number of sight impaired Māori become more apparent. Kāpō Māori are Māori who have sight impairment have had the same struggles as the general population of Sight Impaired and Blind in Aotearoa/New Zealand, but as Māori also, their challenges have been compounded.

Catran (1992) explains that prior to the establishment of the Blind Foundation, Maori individuals who had sight impairments lived on marae. Concerned for their welfare, Tighe negotiated with Māori communities to remove Kāpō Māori from the marae environment. It was also the case that for every Māori Blind he had admitted into the Blind Foundation, Tighe received funding. Newbold (1995) records: ‘In 1902 John Tighe succeeded in gaining from Native Minister James (later, Sir James) Carroll a promise of £25 from the Native Vote for every Māori admitted to the institute’ (p. 22).

This was a period during which the government of the day was especially concerned to ensure blind children received education. Newbold (1995) points out that ‘In 1901 and 1910 the School Attendance Act and the Education Amendment Act respectively, had made it compulsory for the parents of blind children to provide “efficient and suitable” education for them. If not, the Minister of Education could direct that the children be placed in a suitable institution’ (p. 22**)**. For the parents of Kāpō Māori, choice was limited, and the Blind Foundation was the only institution that offered services for Sight Impaired and Blind.

Even if the removal of Kāpō Māori from Māori communities was done with the best intentions, it is not certain that it was in fact a positive step. Kingi (2000) and Ballard (1994) note that Māori with mental impairment were treated with love and cared for by the whole marae community, and were considered treasures. It is likely that this treatment was also extended to Kāpō Māori. However, the lives of Kāpō Māori who were removed from the marae were interrupted, and henceforth they would be subject to the rules of the Blind Foundation, rules based on those which operated at the British School for the Blind. Lifestyle and education of Māori members of the Foundation thereafter followed a European structure. Kāpō Māori students attended school in the institution, and lived there, totally detached from their families.

For Kāpō Māori, their entire world changed with the previous government acts that prohibited the use of Te Reo Māori in schools. That piece of their lives was exiled for the duration of their time at the Blind Foundation. Although the Blind Foundation was established for education of the Blind and Sight Impaired and the aim was to enable them to act self sufficiently, for many Kāpō Māori the Blind Foundation became a permanent situation and in effect a home for them. This meant that the connection of Kāpō Māori to the Māori language didn't exist. Catran (1992) mentions a proposal by Māori members in the 1940s for integration of Māori language and customs into school lessons.

However, the proposal was not successful, since in that era Pākehā authorities were more concerned with the assimilation of Māori into European lifestyle, and the submissions were put aside. As the struggle of the Sight Impaired and Blind to participate in decisions continued over the decades, and blind spoke out for fairness, Kāpō Māori were no doubt involved, but their specific contributions are not recorded. Then in the final decades of the twentieth century, with the establishment of Kohanga Reo, Kura Kaupapa schools, the preparation of the Te Reo Māori language claim, and increased Māori national awareness of language and other cultural and political issues, Kāpō Māori themselves acted to form Ngāti Kāpō.

Ngāti Kāpō

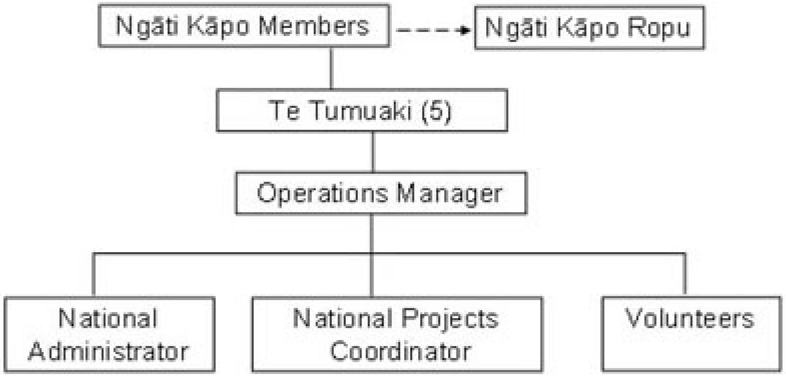
As the positive development of the Blind Foundation continued in the 1980s, Kāpō Māori members of the Blind Foundation created space for themselves. Kāpō Māori desired an identity, and they wanted an organisation that valued the cultural heritage of Kāpō Māori. In 1982, the first serious attempts to provide such an arrangement were initiated, and the following year Ngāti Kāpō made their debut. They informed the Foundation that 'Ngāti Kāpō is a collective of individuals and families who have common needs, not only as visually impaired persons, but as people with cultural identity … the motivating force in our coming together and our being together as whānau arose out of our feelings, concerns and wants – to share and learn Te Reo and Ngā Tikanga Māori … in order to reach our full potential, we need a base from which work' (Catran, 1992, p. 138).

The idea of Ngāti Kāpō as an autonomous community within the Blind Foundation gave its Māori members a new sense of their uniqueness. Founded in 1983, Ngāti Kāpō (2006; 2006b; 2006b) rests on Mana Kāpō (Kāpō Pride), in effect expressing 'tino rangātiratanga kapō'. Ngāti Kāpō aims to improve the lives of Kāpō Māori and their whānau. Ngāti Kāpō is a Māori health and disabilities service provider that is driven by Kāpō Māori and their families (Ngāti Kāpo, 2006; 2006b; 2006b). It is supported by Pākehā and Polynesian members of the Blind Foundation. Initial funding came from simple fund raising efforts by the members, and then was supported by the Blind Foundation. Currently Ngāti Kāpō receives funding from the government: 'Ngāti Kāpō acknowledges that through the sponsorship and support of Government the society has been able to rebuild its infrastructure which has enabled the society to focus on achieving its aims and objectives. Reaffirming old relationships and establishing new networks has seen Ngāti Kāpō reconnect with the Royal New Zealand Foundation for the Blind, its key sponsor and supporter during the 1980's to 1990's' (Ngāti Kāpō, 2004, p. 1).

Ngāti Kāpō established its office at Bledisloe House in Newmarket, Auckland. The office was named Whare Te Ako O Te Tui (Catran, 1992). Ngāti Kāpō's rapid growth forced their organic structure to become a formal entity and, in March 1991, Ngāti Kāpō became Ngāti Kāpō Aotearoa Incorporation under the Incorporated Societies Act 1908. Ngāti Kāpō were originally in partnership with the Blind Foundation.

However, Ngāti Kāpō underwent 'internal fracturing and estrangement from its only sponsor, the RNZFB' which resulted in 'a phase of great chaos, with the society's membership in disarray' (Ngāti Kāpō, 2004, p. 2). They re-established themselves in 2000. The financial aim of Ngāti Kāpō is now 'self sustainability, first and foremost for its members, individually and as a collective group, which in turn will generate organizational self sustainability' (Ngāti Kāpō, 2004, p. 1). The philosophy of Ngāti Kāpō is 'Ahakoa kaore matou i te kite … kei te kite … Although we may be blind, we have vision' (Ngāti Kāpō, 2004, p. 1).

Organisational Structure



Source: Ngāti Kāpō (2007b, pp. 1-2)

This diagram shows the structure of the Ngāti Kāpō organisation. The organisation model shows the organisation is a top down organisation and places Māori members at the top. Ngāti Kāpō members in this diagram represent the individuals in Ngāti Kāpō that come together to participant in the group's ventures. This group is the active driving force of Ngāti Kāpō.

The National Operations Manager designs plans to develop regional and national Ngāti Kāpō activities. This person ensures that the plans coincide with the goals and objectives of the organisation. They are and charged with management of the society's projects and staff members. They also liaise with government stakeholders and with those who show interest in Ngāti Kāpō's operations. Their role includes assistance to the society's members, consultation with members, up-skilling programmes for staff, and public relations activities, whilst ensuring the Tumuaki are kept informed (Ngāti Kāpō, 2007b).

The National Administrator tends to the national administration in Aotearoa/New Zealand and supports the Operations Manager, National Projects Co-ordinator and Tumuaki. The National Administrator's role is also to distribute information between the organization and national stakeholders and Ngāti Kāpō members. The National Administrator is answerable to the National Operations Manager (Ngāti Kāpō, 2007b).

The National Projects Co-ordinator is accountable to the National Administrator. He/she organises Ngāti Kāpō events at a provincial level. This person supports and guides members of Ngāti Kāpō and is involved in member and community networking. He/she supports the National Administrator, and is active in implementation of Ngāti Kāpō assignments (Ngāti Kāpō, 2007b).

The volunteers are those who offer free services that contribute to many different activities for which sight is required, acting as drivers, sighted guides, reader/writers, and any other useful way that facilitate Ngāti Kāpō activities. They report to whoever is responsible for the organisation of the activity in which they involve themselves (Ngāti Kāpō, 2007b).

Tumuaki (Trustees)

The Tumuaki are the trustees of the organisation and are responsible for all aspects of Ngāti Kāpō. There can be up to five Tumuaki; currently there are four. The members of the society vote Tumuaki into their positions, and Tumuaki, are the ultimate governing force of Ngāti Kāpō. The Tumuaki are members of Ngāti Kāpō, and accountable to all its members.

Maaka Tauranga Tibble chairs the board of Ngāti Kāpō. He is descended from the Māori tribes of Ngāti Porou and Te Whānau-a-Apanui. He is also a pioneer and a founding member of Ngāti Kāpō. He is totally blind. He has been the recipient of a Cyrill White Memorial Trust Award and a Sir Winston Churchill Fellowship Award, and he was appointed a Member of the New Zealand Order of Merit for his contribution to disabled societies. He has completed a Bachelor of Social Sciences degree and a Diploma of Business (Ngāti Kāpō, 2007c).

Nigel Ngāhiwi descends from Ngāti Maniapoto, Ngāti Paretekawa and Ngāti Ngutu. Nigel is the Vice Chair of Ngāti Kāpō, and has been one of the Tumuaki since 2001. He holds multiple qualifications, including a Bachelor of Literary Performing Arts, diplomas in Te Reo Māori and in Māori Management, and is currently studying a Masters in Mātauranga Māori. He is involved with Māori music and Māori Performing arts (Ngāti Kāpō, 2007c).

Mereana Hemara, the secretary, descends from Ngā Pūhi and Ngāti Moerewa. She took up her Tumuaki position in 2005. She is active in supporting community ventures that involve Kaumatua, and Youth and Child Services, whānau, hapū and iwi activities (Ngāti Kāpō, 2007c).

The other member of the Tumuaki at present is Stevie Stevens, who was appointed Treasurer at the annual general meeting in 2005. He is actively involved in blind activities, and has held other positions on the Ngāti Kāpō board (Ngāti Kāpō, 2007c).

Ngāti Kāpō Operations

Ngāti Kāpō operates in five regions of Aotearoa/New Zealand: Te Tai Tokerau, Te Puku o te Ika, Te Tai Hauāuru, Te Tai Rāwhiti, and Te Waipounamu (Ngāti Kāpō, 2007). The vision of Ngāti Kāpō is '"Mana Kāpo" - Blind Māori dignity' (Ngāti Kāpō, 2004, p. 2). Its mission is to improve the quality of lives for Kāpō Māori and their whānau, to advocate for Kāpō Māori and their whānau, observing the principles of whakawhanaungatanga, to provide peer support to whānau development, and to create opportunities for each member to reach their potential.

Membership is open to anyone that shares the goals and aims for which Ngāti Kāpō strives (Ngāti Kāpō, 2007a). According to Ngāti Kāpō, 'Kāpō Maori have the same goals as their able bodied counterparts of quality education, good health, employment, economic and social independence. Kāpō Maori want to be inclusive members of Aotearoa society contributing to economic prosperity through gaining qualifications/skills that will increase knowledge capital and broaden employment options. A key goal of many Kāpō Maori is to secure employment which in turn will enhance personal esteem, self confidence and independence but also contribute to whānau income, lifestyle and social prosperity' (Ngāti Kāpō, 2004, p. 2).

Ngāti Kāpō principles are based on advocating for Kāpō Māori and whānau, and aligning business practices with tikanga and kaupapa Māori (Māori cultural practices). The members decide the direction Ngāti Kāpō will pursue (Ngāti Kāpō, 200). They feel strongly about being able bodied in the "Maori community whānau, hapū and Iwi, the retention and growth of Te Reo Māori and upholding Tikanga Māori are of extreme importance to Kāpō Māori, viewed as their birthright as Tāngata Whenua o Aotearoa" (Ngāti Kāpō, 2004, p. 2). In addition, 'Ngāti Kāpō believes in the partnership of the Treaty of Waitangi and in an inclusive society in which its members are able to be independent and have access to the resources which this implies' (Ngāti Kāpō, 2004, p. 4).

Summary

The interpretation of disability for Māori is significantly different from the medical and social interpretations. Being disabled for Māori also means being disconnected from traditional lands, and from culture and language, the consequences of colonisation. The majority of disabled Māori are unemployed and rely heavily on government benefits. The Māori language and customs are very important for disabled Māori, but even more important is that they receive the appropriate care and support. One in five Māori have a disability with is mainly caused by infection, disease and accidents. The majority of impairments for Māori are physically related and Māori are more likely to have an impairment during their older years. Today, as Ngāti Kāpō has stated, 'Kāpō Maori do not wish to be totally dependent upon the good will of the Government, they do not wish to be a burden upon their whānau, hapū, Iwi or upon Aotearoa Society as a whole. They do not seek pity or handouts and they do not appreciate the paternalistic behaviour of many of the organizations who are funded to provide services to persons with a disability' (Ngāti Kāpō, 2004, p. 2).

Until substantial historical research is undertaken, little can be known about Kāpō Māori in the nineteenth century. From the establishment of the Blind Foundation by John Tighe in 1890, some information about individual Kāpō Māori began to be recorded, if fitfully and without much regard for matters of culture and language. Certainly Kāpō Māori experiences in the twentieth century involved marginalisation and discrimination, and they endured a loss of their cultural environment, including language, when they were removed from their homes into the Blind Foundation. Māori heritage was not supported during the early years of the Blind Foundation, and Kāpō Māori endured the same injustices as the general population of Sight Impaired and Blind. Ngāti Kāpō was formed in the early 1980s to provide a voice for Kāpō Māori, to promote Kāpō Māori mana, to build relationships between Kāpō Māori, Māori, and the wider community. Ngāti Kāpō seeks 'to break down social and economic barriers that prevent its membership from taking their rightful place as tangata whenua and citizens of Aotearoa’ (Ngāti Kāpō, 2004, p. 2). Kāpō Māori desire to learn the Māori language and customs, so that the Māori aspects of their Kāpō Māori identities will be strengthened, but, as the research participants reveal in a later chapter of this study, little has been done so far to help Kāpō Māori fully engage with Te Reo Māori.

Chapter Five: Method

Whāia te pae tāwhiti, whāia te pae kia tata, whāia te pae kia tata,
whakamāuā, kia ū kia tīna.

Seek your greatest desire and enjoy the little success along the journey.

Introduction

A review of literature indicated three issues likely to be significant for the Sight Impaired and Blind of Aotearoa/New Zealand: marginalization, discrimination, and social identity. For Kāpō Māori, a fourth issue would likely be Māori identity. Any research approach would have to ensure that the researcher understood these four areas. My personal experiences of these issues gave me insight, and, for Kāpō Māori, I know these issues exist. Without this prior knowledge, I would have found it difficult to identify what general issues of disability and the Māori culture and language affect Kāpō Māori. An 'insider's view' allowed me to draw literature those issues for Kāpō Māori and led to Kāpō Māori Research as a research methodology.

To complement the theories drawn from literature, a practical approach was applied, which revealed that Kāpō Māori face marginalisation and discrimination when in search of their own social identity, which is a Kāpō Māori identity. People with disabilities face many barriers apart from their impairment: these barriers include the social concepts that define and confine the disabled. Blind Aotearoa/New Zealanders and Kāpō Māori have also experienced the issues that the disabled have faced -- marginalisation, discrimination, and issues of social identity. Māori culture has also struggled for acceptance and survival. For Kāpō Māori, there is a combination of barriers encountered by blind people have encountered and the barriers encountered by Māori. Theoretically, it is evident that Kāpō Māori suffer many challenges in trying to recapture their culture and language.

This chapter outlines the research approach of Kāpō Māori Research, devised from modifying previous models and drawing on what would be appropriate for Kāpō Māori Research. The chapter begins by explaining research and the purpose of research. The discussion then leads into disabilities and why a qualitative approach is important when researching people with disabilities. Previous research that involved Māori with disabilities acknowledged Māori-centered research as an excellent research framework in the area of Māori disabilities. Then the application of Kāpō Māori Research is explained: this entails describing the protocols used to engage Kāpō Māori; research conduct and participant recruitment; and ethical approval. The chapter then discusses data analysis, including content analysis and the significance of narrative story telling. The chapter concludes with a summary.

Research

Research is about gathering knowledge for a variety of reasons. Research creates an understanding and informs the researcher, the reader, and the target research group about a particular issue. Research can have a negative impact. However, good research produces positive outcomes for the group being researched. Research is about resource allocation, information and equity (Te Awekotuku, 1991). Research may lead to political change that affects and influences management and planning decisions.

For Kāpō Māori to engage Te Reo Māori research becomes vital. Kāpō Māori have expressed a desire to learn Te Reo Māori, but access to resources which would help address that desire are limited. Research is significant for Kāpō Māori if issues that are important for Kāpō Māori but unknown to the mainstream are made known. Research may also help explain why resources are limited. An effective research method to address the process of gathering information from Kāpō Māori has to be constructed and supported within academic frameworks, to provide validity for the research process. As there has been no specific research framework for researching Kāpō Māori, this project is also an exploration of appropriate research methods.

Disabilities and Research

Traditional research on disabilities has reinforced medical interpretations of disability, concentrating on the problems that disabled people face because of their impairments (Kingi et.al, 2000). This type of research looks to find remedies for disability in the medical arena, and implies that if a medical remedy does not exist, then the disabled individual has limited options. The medical analysis took precedence, and services to accommodate the disabled were entirely built on the medical model. An extension to that diagnosis is that the disabled are usually portrayed as dependant on others for support or medical products. However, these views are not the opinions of the disabled. Ballard (1994) writes that the medical research model 'is independent of the cultural, historical and values context of the research and the researcher … this approach to social science has serious flaws and … it has not achieved much in understanding complex human experiences such as disability' (Ballard, 1994, p. 22).

In contrast, the social research model argues that the medical interpretation is not the only means of analysing problems encountered by disabled people encounter, and that the social research approach can offer alternative insights which medical-style research fails to acknowledge. The medical model can assess the possibility of treating a person with an impairment, but it neglects to consider the impacts of society on disability. A social research approach takes into consideration the influences that are external to the individual's impairment, and addresses the issues based on a more holistic style of research. However, usual social research approaches do not give much recognition to specifically Māori circumstances of disability. In the case of Māori, disability is not only matter of the individual's impairment or the social influences of their able-bodied peers, but also should take into account the impact of colonisation upon Māori people.

The arena for research and disability evidently extends far past relaying on accounts primarily from medical style research and when researching disabilities in a field which involves understanding disability from a Māori interpretation. The social style research model is not as efficient and merely extends as far as disabilities generally. With such a holistic view on researching Māori with disabilities "definitions have been broadened to acknowledge the diverse nature and reality of disability and the importance of the environment, and the effect of belonging to an oppressed culture" (Kingi et.al, 2000, p. 3). This complexity of issues involving the research of Māori and disability "have been sowing seeds into this ground and developing, validating and presenting their own research methodologies" (Kingi et.al, 2000, p. 4). Methodologies that usually incorporate the importance of an approach that places people and there experiences as the main concentration of the research derive from qualitative methods.

Qualitative Research

Qualitative research involves studying people through subjective data. The data priority is collecting the experiences, which can be found in the stories told by people. The qualitative approach draws on research methods from other disciplines that research human behavior, such as anthropology, psychology and education, and currently is a 'dominant - or at least significant - type of research in the fields of women's studies, disability studies, education studies' (Wikipedia, 2007, p. 1). Qualitative research allows issues to be addressed from an 'indepth understanding of human behavior' (Wikipedia, 2007, p. 1).

A somewhat different approach is needed to incorporate cultural and disabled sensitivities when researching disabled Māori, in particular for this research which involves Kāpō Māori. Kingi et.al (2000) brings forward the Māori-centred research approach as a formidable means to incorporate the complexity of research involving disabled Māori. Kingi et.al (2000, p. 4) writes: 'Any attempt to separate disability and Māori health research from other types of health research is . . . sometimes seen as subverting science and research for politically correct purposes. However the Māori-centred approach to research does not ignore the range of western research methods, nor the contributions which have derived from the medical and health sciences, but insists on and deliberately places Māori people at the centre of the research activity'.

Māori and Research

It was necessary to gain a better understanding of a Māori-centred research approach by acknowledging the implications and issues involved in the formulation of Māori research. Māori research themes are prominent in universities around Aotearoa/New Zealand. Many indigenous cultures have suffered negative reviews because of the ways Western thought has considered indigenous peoples. Western epistemology has constructed the mainstream foundation on indigenous cultural issues and stands as the parent source of knowledge about indigenous people. However increasing numbers of indigenous researchers are beginning to rewrite their history, presenting their own world view, and they have provided indigenous cultures with an alternative forum for research, returning the power of research to indigenous groups.

Barriers constrain Māori as researchers when they enter Māori communities to gather information. Because of the hegemony Western philosophies have held over research, the first challenge is convincing Māori and Pākehā of the importance and validity of Māori input into research. Māori have been recipients of unsympathetic products of Western research, which has left many Māori with an unenthusiastic attitude towards research generally, so persuading Māori people that a Māori alternative approach can be positive is challenging. Smith (1999) explains that previous research conducted on Māori issues had detrimental effects and portrayed Māori in a negative way. Previous researchers of Māori issues were usually non-Māori, and the target audiences were non-Māori. Often the values of Māori were not taken into consideration, and conclusions were written to fit with Western intellectual and cultural categories. Convincing Pākehā of the validity of a Māori research approach means demonstrating that Māori research involving Māori theories and frameworks is a valid form of research.

Cunningham and Durie (1998) identify three approaches, Kaupapa Māori, Māori-centered Research, and Research involving Māori, and define the differences between them. In one sense, the ‘parent’ of all three approaches is Kaupapa Māori Research.

Kaupapa Māori Research breaks down Western research dogmas imposed on Māori knowledge in which, historically, Western researchers maintained control over the research (Te Momo, 2004). It challenges mainstream ideals, instead asserting an academic view based on Māori epistemology. The Western research approach failed to appreciate the different worldviews of Māori, and consequently Western research often made negative or unsympathetic judgements about Māori. Breaking these constraints and reconstruction of the research approach so that Māori are presented positively has been contested and criticized. Presentation of alternative approaches by Māori opposed to the traditional methods created new barriers, as work completed prior to the introduction of Kaupapa Māori Research theory would become more closely scrutinized. Te Momo (2003) highlights the efforts of Māori writers such as 'G. Smith (1992), Mead (1996), Durie (1998), Bishop (1999), and L. Smith (1999) have reinforced processes of 'Kaupapa Mäori' or 'Kaupapa Mäori Research' as a process of ethical conduct for a researcher intending to research in the Mäori world' (p. 65).

Kāupapa Māori Research involves the researcher and clients actively researching together, deciding together on how the research is to be conducted and what the outcomes standards need to be reached. Both the researcher and clients have equal control throughout the process of the research. Mead (1996, p. 203) adds: 'Kaupapa Mäori Research, as currently framed, would argue that being Mäori was an essential criteria for carrying out Kaupapa Mäori research. Durie and Cunningham offer guidelines for Kaupapa Māori research, and state that Kaupapa Māori Research requires Māori to be 'significant participants, and where the research team is typically all Mäori; Research where a Mäori analysis is undertaken and which produces Mäori knowledge; Research which primarily meets expectations and quality standards set by Mäori' (Cunningham and Durie, 1998, p. 4).

A framework that is distinctly different from Kaupapa Māori Research is Mäori Centered Research. Māori centered research requires the researcher to be Māori and the participants in the research are Māori. The researcher primarily collects and analyses data, he/she designs the analysis process of the research, and works independently of the client group. The Māori-centered researcher then communicates those findings back to his/her participants. Cunningham and Durie (1998) define Māori-centered research as research where 'Mäori are significant participants, and are typically senior members of research teams; Research where a Mäori analysis is undertaken and which produces Mäori knowledge, albeit measured against mainstream standards for research' (1998, p. 4).

The third framework is Research involving Māori. This framework means the researcher or the participants may not be the senior members in the research. Research is gathered from a field that involves Māori, and the data and the findings are graded against western frameworks for analysis. It is Research 'where Mäori are involved as participants or subjects, or possibly as junior members of a research team; Research where Mäori data is sought and analysed; Research where Mäori may be trained in contemporary research methods and mainstream analysis' (Cunningham and Durie 1998, p. 4).

Kāpō Māori Research

Because gathering stories from Kāpō Māori was a privilege, I felt obliged as a researcher to ensure that every step was carried out properly, observing protocols, which were professional, sensitive to Kāpō Māori, and followed Māori etiquette. Kāpō Māori Research for researching Kāpō Māori is a simple approach: the guiding principles are set out here to assist future researchers and promote further development of Kāpō Māori Research. Ngāti Kāpō promote 'by disabled Māori, for disabled Māori'. Modifying the Kaupapa Māori Research approach brings an important emphasis to Kāpō Māori Research, and establishes that Kāpō Māori are the senior members of the research programme.

Kāpō Māori Research directly coincides with 'Mana Kāpō', and allows Kāpō Māori to create a place in the research and produce research from a Kāpō Māori perspective. Establishing Kāpō Māori as the senior members in the research does not exclude the assistance of able sighted people. The purpose is to put Kāpō Māori at the forefront of Kāpō Māori Research, and to encourage Kāpō Māori self development in research.

A further purpose is to discourage the kind disabilities research, which historically has presented disabled as dependants. Kāpō Māori are few in number, and organization of a consistent study group would create mobility and resource problems for Kāpō Māori, adoption of the Māori-centered research framework is more suitable for Kāpō Māori Research.

Te Momo (2004) used the marae concept when dealing with Māori organisations, so that the researcher was positioned to grow in the role. However, my participants came from different districts, not all it's the principles of the marae concept could be observed. On the other hand, the principles of kānohi kitea, whakawhanaungatanga, whakakoha, and ngākau pāpaku described by Te Momo (2004) were all applicable. Te Awekōtuku (1991) and Te Momo (2003) insist that when extracting information and dealing with Māori, 'kānohi kitea' is a fundamental principle and is as simple as ‘meeting the participants face to face and introducing myself’ (Te Momo, 2002, p. 2). In practice, meeting the participants face to face was an opportunity for them to scrutinise my research and, in the words of Walsh--Tapiata (1997, p. 9), ‘enabled those I was interviewing to check me out, to connect to me with whakapapa and to ask critical questions outside of the bounds of the interview, to gauge where I was coming from’, and gain an understanding about the work expected of them.

Whakawhanaungatanga meant building a rapport with the participant, establishing genealogy and similar backgrounds as a means of making connections, forming a relationship, which allows the researcher to have a collective journey where the participant and researcher enlighten each other (Timutimu, 1990). Whakawhanaungatanga also provides a rationale for the research area. Walsh--Tapiata makes similar comments concerning whanaunga connections, and explains that as long as your research is a worthy enough, ‘Whānau, hapū and iwi connections are not necessarily a prerequisite for automatic access to the participants and information. It also needs to be accompanied by factors such as trustworthiness, acknowledgement of the mana of the individual/hāpū’ (Walsh--Tapiata, 1997, p. 9).

Being Kāpō Māori myself, and understanding Kāpō Māori experiences gave me direct access to that world and asserted the ‘by disabled Māori, for disabled Māori’ concept, reaffirming the appropriateness for Kāpō Māori Research. Although genealogy was not established with all participants, the idea that we were both Māori and had sight impairment allowed a connection where our relationship was based on a commonality of both of us being Kāpō Māori. Bevan-Brown (1998) adds that ‘Māori research must be conducted by people who have the necessary cultural, reo, subject and research expertise required’ (Bevan-Brown, 1998, p. 233). She further suggests that ‘They must also possess a commitment to things Māori, the trust of the Māori community being research qualities suited to doing Māori research and an understanding of and commitment to the obligations, liabilities and responsibilities that are an integral part of Māori research’ (Bevan-Brown, 1998: 233).

Showing a ‘respectful attitude to the participants’, termed whakakoha, is a value Te Momo indicates a researcher leaves (Te Momo, 2003, p. 2). Especially when addressing Kāpō Māori, one has to take into account they have difficulty with vision, and some have no vision at all. Having knowledge of Kāpō Māori prior to engaging with them also is an marker of respect. Going in with no prior familiarity with Kāpō Māori may create discomfort or embarrassment for the researcher or the participant. It is common to feel uneasy and unsure on how to approach someone who has sight impairment if you have had no previous exposure to them. The Blind Foundation offers guidelines to approach someone who is Sight Impaired or Blind : ‘Always introduce yourself when you meet a blind or vision-impaired person. Even though they may know you, they may not recognise your voice … When leaving a room or conversation tell the blind or vision-impaired person you are leaving, so they are not left talking to themselves … When you are in a group introduce others in the group and use people's names so that the person who is blind or vision-impaired knows who you are speaking to”’ (RNZFBg, 2007, p. 1).

Is also common for people to overlook someone who is Sight Impaired or Blind in situations where the Sight Impaired or Blind individual is accompanied by a sighted person. Unconsciously, the interviewer will redirect the questions though the sighted person to the Sight Impaired or Blind individual. The Blind Foundation suggests: ‘Always direct questions to the person who is blind or vision-impaired, not the person they are with. Just because their vision is less doesn't mean they can't talk’ (RNZFBg, 2007, p. 1).

Additionally, ‘You don't need to shout or talk loudly to someone who is blind or vision-impaired, just talk clearly … Don't be afraid to use words like see, look and watch. People who are blind or vision-impaired use them too’ RNZFBg, 2007, p. 1). The Blind Foundation concludes their guidelines for addressing Sight Impaired and Blind people by saying: ‘When giving directions or passing something to a blind or vision-impaired person, use directions like "behind you on your left" or "I'm putting the cup by your right hand". Avoid "over here" or "there" … If you are going to touch someone or guide them somewhere, let them know what you are doing before you do it, say "I'm just going to take your right arm" etc … Some people who are vision-impaired find it difficult to adjust to bright light or a dark room quickly. How much they can see can depends on how much light is around, sudden changes of light levels, whether they are tired or if they are somewhere unfamiliar. If you want to know how much they can see, ask them - "Can you see alright, or would you like me to help you?"' (RNZFBg, 2007, p.1). In addition ngākau päpaku (humility) was important. During the field research process, some interviewees were very defensive about certain issues. Acknowledging that reluctance to talk further and moving on to other points in the interview was very important, keeping in mind that you were very much in their debt for their kōrero.

Research Conduct

Implementation of the principles of kānohi kitea, whakawhanaungatanga, whakakoha, and ngākau pāpaku was a natural process for myself. As part of the observance of kanohi kitea, each participant greeted me with a hongi, kihi, or hāruru. The majority extended the hongi, the only female participant extended a kihi, and one participant offered a handshake upon arrival. Regarding the hongi with those who were totally blind, I had to guide my nose to their nose: one participant mentioned that sometimes he/she misses the nose and hopes that the recipient of the hongi catches his/her nose otherwise he/she may miss completely. Before the formal part of the research, we engaged in informal conversation to help settle any anxieties about the research. Upon reaching the formal part of the interview, a small mihi was extended to the participants, greeting them and thanking them for contributing their time and knowledge. Being respectful meant being mindful of the guidelines offered by the Blind Foundation on how to engage a Sight-impaired or Blind person. Throughout the research process, it was natural for me to humble myself before the participants, understanding that the participants themselves were the experts in Kāpō Māori issues.

So that I could analyse and document the research interviews, I tape recorded all interviews, then later transcribed the data. Since the interviewees were Kāpō Māori, further steps had to be taken. The presence of a support person was considered, and offered. However, those participants who did need support persons arranged this themselves. To protect the individual identities, participants were assured that their names would not be disclosed in the final report of this research. I also understood that it is not difficult to identify a severely sight-impaired Māori.

As the researcher, I was responsible for protecting the participant from being identified through the research, and all documents relating to the participants are kept in a safe location. My responsibility as the researcher also obligated me to maintain a professional level of field research. Participants were fully informed about the research and its possible implications. To validate the process for this research ethical approval was sought from the School of Māori and Pacific Development Ethics Committee of the University of Waikato. After scrutiny and modifications to ensure that I followed correct ethical procedure as set down by the School, approval was granted.

Analysis

The tape recordings were transcribed, creating textual data that could be analysed. Transcriptions were coded and participants were identified as P1 to P8. The frame also recorded age, locality of participants, extent of sight impairment, which was generalized as either totally blind (T/B) or partially sighted (P/B), sight condition and the cause of the condition, and employment. The data was analysed using content analysis drawing upon the common themes in the transcripts. Wikipedia (2007) explains that 'Qualitatively, content analysis can involve any kind of analysis where communication content (speech, written text, interviews, images ...) is categorized and classified' ('Content Analysis', Wikipedia, p. 1).

Presenting the data in a narrative fashion is an important issue when researching Kāpō Māori. Ballard (1995) explains that 'Telling stories is a traditional means of sharing experiences and imparting complex, culturally valued knowledge. Where a person tells their own story this can be practically compelling, engaging the reader directly in another's life and in another's ideas" (Ballard, 1995, p. 24). Basic information on the participants has also been presented in tabular form further below.

Participant Recruitment

All participants were over eighteen years of age, were Māori, and had sight impairment. The participants gave their consent to the interview by signing a consent form before the interview began. If the participants were unable to give their consent personally, the interview did not commence. I compiled a list of potential participants with whom I had rapport, then randomly contacted each participant to see whether they were interested in this research. Those who agreed to participate were then informed of the research criteria and goals, and they were all given an information sheet describing the project, what was expected from them, what was expected from me, and my contact details. They were informed that if at any time during the research a participant felt uncomfortable and wanted to stop the interview, they could, and I would simply end the interview. If they did not want to answer certain questions, they did not have to. If at any stage they no longer wanted to participate in the research, they could tell me, and I would remove their information from the research data and return it to them.

Participant Background

There were eight Kāpō Māori participants in the research. Rather than provide summary biographies and notes on their conditions, it is right that they should speak for themselves. The following comments are extracted from their narratives. They were asked how long they had been blind or suffered sight impairment, the extent of their blindness or sight impairment, and what circumstances or conditions had caused loss of sight. Each participant has been given a pseudonym then referred to as P1, P2, and so on.

Matakore said he was 'Totally blind … I'm blind though accident … I was shot in the head, did you know that, by my younger brother, was just a[n] accident I think … 1978 … about 14 [years old at the time]'. This participant will be known as (P1, 2007).

For Whatungaro, sight impairment is more recent. He says: 'I was diagnosed . . . about four or five years ago but I know that I had it for longer that that … I have retinitis pigmentosa I think… It really plays up like in early morning, like when speckles of lights come though the trees, night time can't see to save myself. During daytime I can see a fair way but there still some places where I get blind spots and if a younger or smaller person is walking beside me and I don't know they're there, if I turn, I'll probably walk straight into them. Peripheral [vision] at the moment is gone . . . that's the worst part of it at the moment . . . I was told that it actually travels down the female line . . . in rare occasions its come across to guys . . . I must be one of the rare ones . . . I went to another hui [and someone said] it goes along the male line then rarely jumps across [to] the female line . . . So maybe I'm wrong, maybe that other lady's wrong. Not too sure'. This participant will be known as (P2, 2007).

Matakerepō said: 'I have been visually impaired for, coming to July, twenty years . . . visually impaired totally … the social aspect of it is that I never really had any direction… I have no condition . . . first one was car accident … I went to jail one time… I hadn't been out of jail very long when I lost my left eye… drinking heavily at our local hotel … at a taxi stand waiting for a taxi and my mate said we're alright and I went to sleep … well I was in an unconscious state at the time, semi intoxicated I think, it was painful when I got socked in the eye … wake up next day in hospital [and had lost sight in the second eye]'. This participant will be known as (P3, 2007).

Pohepohe was 'totally blind. And [I] have a condition called retinitis pigmentosa … It appeared when I was about twelve. And my sight started to deteriorate, and at about age 35 my sight would continue out there. So I've had poor sight up until then and no sight from then up until now… Yes . . . it's a hereditary condition that cause the retina, the cells in the retina to deteriorate so my understanding is like the film in the camera, it translates what the eye sees into images and sends them to the brain for interpretation, but that part of the mechanical behind has simply gone. Apparently it's a hereditary condition but there is nobody in a four generation span had the same condition . . . if you get this eye condition it eventually leads to blindness, total blindness … Well there's lots of research going on at the moment. I mean, you can slow the process down, like wearing sun glasses, not exposing yourself to sun, taking care, which we all should do whether you have eye problem or not . . . I keep pretty much in touch with what's happening around the world and bits of research, there's lots of advancements been made but [the condition is] terrible'. This participant will be known as (P4, 2007).

Terengaro described himself as being ‘blind as a bat… I’ve got a couple of things . . . first one is a hereditary condition called retinitis pigmentosa and it’s passed down along the male gene, it’s extreme tunnel vision impairment of retinitis . . . it was heredity but they don’t know where it came from. My mother’s got it . . . somewhere back down the line there was an Englishman and it came from his family… I’ve got a cataract as well. Colombo is another type of tunnel vision. So we got two different cataracts. And another condition called keratoconus where we lose the centre of the eye. Yeah, so that’s me’. This participant will be known as (P5, 2007).

Tirohia said: ‘I don’t know the medical term for it but I’m almost completely blind in my left eye. In my right eye I’ve got a cataract but the medical professionals . . . don’t want to touch it cause if something goes wrong with [an operation], then I’ll go completely blind. And they have advised me to keep away from an operation… until it’s absolutely necessary … My left eye … it slowly got weaker and weaker . . . it’s a . . .disease you get if you mow over the grass and you run over dog poo … there’s a bug and it goes into your eye … that’s what the doctor told me was my problem . . . there’s no treatment for it. Yes, there is a way of preventing it, don’t mow over dog poo”. This participant will be known as” (P6, 2007).

For Kimikimi, ‘My condition is] a cataract, genetic … Since I was . . . a baby … I receive the invalids benefit. I’m a musician, entertainer. I go out to the rest homes, to community groups, to sing to them … the people of the rest homes see me as a person. And that’s the way I like it, and I think of the fact that because that I have a disability that I should not be pitied . . . [in] the rest homes that I go to . . . people . . .have disabilities of some other kind. Some of them might be in wheelchairs, some of them might use walkers. What is inspiring for them is to have somebody like me to come out and share my music, such pleasure to them. [I’m told] their faces just light up the moment I walk in there [and] start singing’. This participant will be known as (P7, 2007).

Hārau stated: ‘About 20 years I had it … it’s called keratoconus or also referred to as chronicle cornea. So it means that . . . my eyes aren’t shaped properly so I use lens to correct them … I’ve done a bit of reading and even in the readings they’re not sure the cause of it. It tends to hit males around the teenage age . . . if not then there’s another type of disease it’s like a disease in the eye . . . yeah that sucks too, it's difficult as well. Why? Because . . . if you can't focus or can't see things properly then migraines happen. Which makes it hard to actually do anything'. This participant will be known as (P8, 2007).

The Research Questions

The research questions were designed to investigate Kāpō Māori by finding out who they were, what their opinion is of being Māori, what general experiences they have had with learning Te Reo Māori, what they find rewarding about learning Te Reo Māori, what challenges they encountered, what strategies they utilized to overcome challenges, what the nature of their visual impairment was, and what services were available to assist them.

Summary

Literature indicated three issues experienced by the Sight Impaired and Blind of Aotearoa/New Zealand, marginalization, discrimination, and questions of social identity. Kāpō Māori also experience issues related to Māori identity. A researcher would have to understand these areas. My personal experiences provided insight and I knew these issues existed for Kāpō Māori. Without this prior knowledge I would have found it difficult to identify the issues which concern Kāpō Māori. My insider's view allowed me to locate literature dealing with those issues, and led to Kāpō Māori Research as a research methodology. To complement the theories drawn from literature and Kapo Maori Research, a practical approach was applied, indicating that Kāpō Māori face marginalisation and discrimination when in search of their own social identity, which is a Kāpō Māori identity.

People with disabilities have faced many barriers apart from their impairment and these include the social concepts that define and confine the disabled. Blind Aotearoa/New Zealanders and Kāpō Māori have also experienced the issues that the disabled face like marginalisation, discrimination and social identity. Since Māori culture has struggled for acceptance and survival, Kāpō Māori face the barriers the Māori people have encountered as well as the barriers blind people have encountered. Thus Kāpō Māori suffer many challenges in trying to recapture their culture and language.

This chapter has outlined a Kāpō Māori Research approach, devised by modifying previous models and drawing on what would be appropriate for Kāpō Māori Research. This chapter began by explaining research and the purpose of research. The chapter then discussed disabilities and research, emphasising the importance of a qualitative approach when researching people with disabilities. Previous research involving Māori with disabilities acknowledged Māori-centered research as an excellent research framework. Then the chapter explained the application of Kāpō Māori Research and described the protocols used to engage Kāpō Māori, the research conduct and participant recruitment, ethical approval, and outlined how the data would be analysed.

Chapter Six: Ngā Kupu o Ngā Kāpō Māori

Uia mai koia, whakahuatia ake …

Should the question be asked, answer that all might hear …

Introduction

The previous chapter presented the research methodology for the collection and analysis of field data. It also briefly introduced the participants and their conditions. The chapter which follows provides further information drawn from the narratives of the participants. This information is presented in two forms. First, there is a summary table of participants and their condition causes and their rohe (districts), together with a brief description of the causes of eye conditions. The main part of the chapter is based around extracts from the narratives of the participants, whose voices are the primary emphasis. Their stories are arranged under content headings such as coping with blindness, employment and income, whanau and services, and Māori language experiences.

Table Results

Code	Gender	Rohe	Age	Category	Condition	Cause	Income
P1	M	Waikato	40-49	T/B	Blind	Accident	Benefit
P2	M	Waikato	40-49	P/B	R/P	Hereditary	Benefit
P3	M	Waikato	50-59	T/B	Blind	Accident	Benefit
P4	M	Te Tai Rawhiti	60+	T/B	R/P	Hereditary	Work
P5	M	Te Tai Rawhiti	50-59	P/B	R/P/Cat	Hereditary	Work
P6	M	Te Tai Rawhiti	60+	P/B	Un/Cat	Infection	Benefit
P7	F	Waikato	30-39	T/B	Cat	Hereditary	Benefit
P8	M	Te Tai Rawhiti	30-39	P/B	Ker	Hereditary	Work

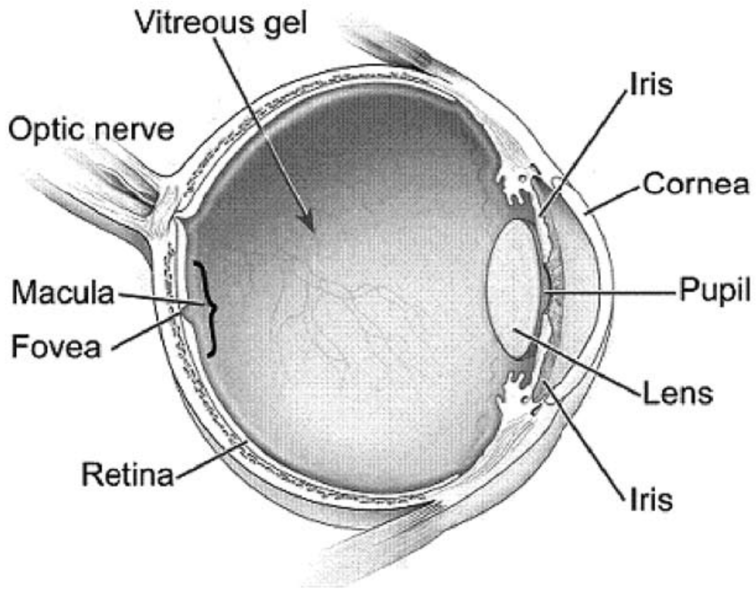
Table Overview

Each participant was coded from P1- P8. The majority of participants were male; one female participated. Four were from Te Tai Rāwhiti, and four were from Waikato. The overall age group span was from thirty to sixty plus. The sight limitation of the participants was categorised as total blind (T/B) and partial blind (P/B). Total blind means having no sight at all; partial blind means having very poor vision that cannot be properly corrected with glasses or lenses.

Causes and Conditions

The five main causes of vision loss in New Zealand are 'age-related macular degeneration, glaucoma, retinitis pigmentosa, cataracts and diabetic retinopathy' (RNZFB, 2007h, p. 1). Regardless of which sight loss a person experiences, it has a huge impact on them socially, psychologically, and financially. Not only is it an issue that the individual has to deal with, but the impact also impinges on the individual's family (LaGrow, 1992; Department of Social Welfare, 1986). Aotearoa/New Zealand considers those who have a vision of 3/60 or less, or whose peripheral vision is poorer than 20 degrees in its widest diameter (Department of Social Welfare, 1986), to be legally blind.

This study group is a reflection of three ways in which someone can be affected with sight loss. One was born with a sight condition, two lost sight as a result of an accident, and the other five contracted their condition over a period of time. The three conditions that were identified amongst participants were keratoconus, retinitis pigmentosa, and cataracts. These three conditions are described below.



Retinitis Pigmentosa ‘What u should know’ (RNZFBg, 2007)

Keratoconus is an improper formulation of the cornea. Rather than the cornea having a normal curve shape, it develops into a cone. It is a hereditary condition that is more likely to affect females during adolescence. This condition obscures distance vision and is usually present in both eyes (Jose, 1989). Only one person in the group of participants had this condition.

The second condition is retinitis pigmentosa. This condition is hereditary condition, and mostly affects males. The rods of the retina slowly deteriorate causing sight loss over a period of time, and this can lead to blindness. Symptoms include loss of night vision and loss of patches in peripheral vision. There is no available therapy for this condition (Jose, 1989). Three participants had this condition, and they were all male, confirming that males are prevalent in contracting retinitis pigmentosa.

The third condition is cataracts. This condition involves any opacification of the lenses of the eyes. It is a condition that mainly results from aging. The loss of vision is determined by the density of the cataract (Jose, 1989). The only female among the participants had had cataracts since birth, and the severity of her cataracts caused her to be completely blind.

Introduction to the interviews

Throughout the interviews, the participants often referred back to personal experiences related to their condition. However, I didn't probe too deeply into this area because the issue became sensitive. There were different experiences between the totally blind and the partially blind. Among the totally blind, there was no similarity on how they came to terms with their blindness, because the totally blind participants were affected by blindness in different ways. The partially sighted all expressed embarrassment and felt ashamed of their condition. Each participant continually finds their own way to cope with their condition. There is an ever-present sense of struggle through all the themes in this chapter that extends from how participants cope with their condition to their experiences with the Maori language. The information in this chapter is presented as extracts from the narratives of the participants, and my commentary on the significance of the experiences related in the stories.

Coping with Blindness and Daily Struggles

P7 had no remorse about being totally blind. She has been blind since birth, and therefore she could not comment on what it was like to lose her sight. P1 lost his sight instantly during adolescence, and the heavy medication he was on allowed him to come to terms with his blindness: 'It was really good cause … I went blind at Christmas time. So when I came out of hospital I didn't know anything about being blind, so it was just like sitting around all day for a month you know … because I was on so many drugs after the accident or during the operations you sort [of] don't worry about it. You know what I mean? You didn't think about it' (P1, 2007).

P3 had a quite different response; his reaction may be attributed to him losing his sight during adulthood. The situation of living with vision and then suddenly losing sight totally contributed to his depression. He found inspiration to overcome his grief from a blind peer: 'It was actually a social worker … came up with a kaumatua … I believe he inspired me because he came up … all the corridors of the hospital, up and down . . . but this gentlemen had no vision and a didn't have a cane… no aids, totally incredible. So once he mentioned that, I thought, so what am I doing here? You know, that was the end of feeling sorry for myself' (P3, 2007).

P4 lost his sight over a period of time and he was able to adjust to his condition. However, he asserts that losing his sight was unfair, and he has never come to terms with his vision loss. He feels that fully sighted people are ignorant and cannot understand what it is to be blind: 'Yeah well . . . I suppose with sight deteriorating over time you know . . . It was so slow an experience I sort of had time to adjust really… Yeah, well I mean at one stage of my life I hated it, but the thing is I have it, I have to bear with it, I have to live with it. I make no apologies for some of my moods related to that and it's no different from anybody who sometimes drives me and kangakanga in front or behind or across the road and, you know, supposedly that's ok. But when it comes to me and I kangakanga about my situation, oh now, all of a sudden, I must be this blind man who can't come to grips with his blindness … despite the fact that I [will] not come to terms with my blindness, never. But I learnt how to cope, how to manage, you know, the unfairness of it all. So . . . yeah, I suppose . . . I am a strong advocate for Kāpō Māori' (P4, 2007).

Another participant was partially sighted, but he is losing his sight and will become totally blind. When he was initially told that one day he will lose his sight totally, he was shocked, and he certainly does not want to lose his sight: 'the doctor was about to tell me, he was giving me a time table . . . I was going to lose my vision totally . . . And, um, he had a not a big desk, and I says to him, before you finish that sentence I'll probably be over the desk and hitting you. And he said, I beg your pardon. I don't want to be told when I'm actually going to go totally blind. I'd rather be deaf than blind, really, so I can see the guy that's going to hit me' (P2, 2007).

Three of the four totally blind participants shared stories of discrimination, humiliation, and exploitation. These were in response to questions asking about their experiences as a Kāpō Māori. P1 was exploited by his ex-partner, who was stealing money from his bank account. Because of his sight condition, he allowed her to handle all his financial affairs. He said she was 'using my bank account, transferring money … she was sighted. I used to get her to take care of my bank account, you know, and I'll go to work and that. She was transferring money, she get my bank statements and … she knew my bank numbers and … she transferred my money to pay her visa card … this was a girlfriend … I brought furniture… I split from my partner. I had been with her for ten years… then this other lady [came]along… just the way it happened, and when you look at it, the way I met her and everything, such a fraud you know, and then after . . . we split up she went back to her original partner' (P1, 2007).

P7 shared two incidents, one in which she was ridiculed, and the other where she was discriminated. The first story is about what usually happens when she goes into out into public. She said people make inconsiderate gestures towards her on a daily basis. I was shocked to hear that even today people are quite horrible to Kāpō people; 'I've had experiences when… I go out into the public … My family tell me those people … stare at me because of my visual impairment and someone will come up to me and say, "Excuse me are you blind?", and I'll say, "Do I look like I'm blind?", and they would say, "Well I don't know", and I'll say, "Well yes I am!". When I go out to . . . shopping malls and I'm wearing glasses people, tend to think that because I'm wearing glasses that I'm not blind, and it might be funny to them, but they really don't understand . . . the daily task for the challenges I face with my visual impairment' (P7, 2007).

P7 continued with an incident when a shopkeeper humiliated her. P7 was with a friend, and the shop keeper overlooked P7 and began addressing the sighted friend: 'for example, when I go out to do the shopping, to, say, a food place and I have a sighted peer with me … and I would go up to the counter … people behind the counter would say … to any friend of mine … "And what would your friend like?", and I'd say, "Well excuse me, I'm right here, what do you have on the menu?" and . . . I'll give you a demonstration'. At this point of the interview, P7 took a piece of paper and forced it into her face and began rubbing the paper into her face, showing me what the shopkeeper did to her. She continued her story and said: '[The] lady behind the counter would say, "Well, we have this, this is the menu here, have a look at it!". I'd say, "Excuse me, I can't see the menu", and she'd be standing there like' (P7, 2007).

P3 shared with me an interesting story about when he was studying at an educational institution. It was a bridging course in Māori, and he was discriminated against because of his sight impairment: 'Try to educate myself sometimes. I think yeah I get tired of getting people helping you, going together as a[n] institution. You're going up to a lot of wars up there, even with people within our… area… this lady bay she was … she was trying to go for a social working degree and there's a Māori bridging course and I tried to take this Māori teacher up on this… she told me, "I don't think this class will be good for you. You do it at home", and I said, "Why should I do it at home when I paid for the course". You know, they're not giving me the real deal' (P3, 2007).

P3 told me that when he tried to seek help, he met a lot of resistance within the institution, and unfortunately was unable to find assistance to help him study on an equal level with sighted peers. 'So I took it up in front of her peers and I realised when I was talking to them they were, all of them, were against me … I thought that was a waste of time. Oh well, it's a kangaroo court. Well, who are you, Māori boy. I had quite strong people I could go to, but they sort off turned on me too, they['re] in the system and they don't want to thing their job, and a sort of a bum screw that one, wherever you turned . . . Even when I went to the disability coordinator, I tried to get her to do stuff for me on tape or something like that. That was like going overseas to, ah, you know, just to get an appointment, and they promise you the world, and also belong to the student union, and a lady said, definitely, she could make a head way . . . a lot areas that blocked you off' (P3, 2007).

Experiences suffered by the partially sighted included humiliation and embarrassment. I could personally relate to many of these issues about being ridiculed at school by children and teachers. Often I would try to hide my impairment to try and avoid the uncomfortable situation of people knowing that I was different. P8 recalled: 'Sucks, it was interesting, because when I was growing up you don't want anyone to know about it. So you kind of get secretive, so you wouldn't tell people or you wouldn't share that with people. You know, you kind of agreed, or you said yes, or you made up things. So that people wouldn't realise that you had a visual impairment' (P8, 2007).

In class, I was made to sit directly in front of the blackboard. Often I would feel embarrassed and I was often mocked because I couldn't see. Participant P4 also shared this experience. He explained his concerns while at school, 'ranging from having difficulty reading the blackboard to not being able to play board games, sports'. These experiences were similar to those of P5: 'It wasn't a pleasant, no, I got a lot of shit at school because of my glasses … I had to sit in the front row of desks to see my blackboard … you miss out on so much, you know, sports… you were always the last one to be picked … all those sorts of things… but I got there' (P5, 2007).

Another shared experience was homework. Often I had to work late at night trying to catch up with class work. Once that was completed, then I spent the rest of the night doing homework. P5 had a similar story: 'Well, my first time at school my sight wasn't that bad. I mean it was bad, but it wasn't that bad. I sat up in class right up the front … there was nothing back then, the foundation wasn't a foundation to support you. The fact that I had a couple of really good teachers helped a lot … you take your mates' books home, you copy them … however, it just got you in line to do the homework, then you had to do the homework. I was doing a day's work, then catch up, then homework. started my day early in the morning, doing study and homework … I just passed School C and didn't fall asleep' (P5, 2007).

This problem of staying up late to catch up on school work and then spending extra time studying to complete assigned tasked persisted into my university years of study, and is still a current problem I have to deal with. Another problem was whiteboards. It was hard to see anything written on them. P5 comments: 'See, when I did school there was no white boards, there was only blackboards. I used to pinch all the teachers' chalks and hide them . . . you know, third form year, I had boxes and boxes of white chalk. See, the white board was just introduced when I left school. There was only one white board at the school and that was in our physics department. But it was overhead projectors, you know the whole school had bloody overhead projectors, so almost all the time the teachers would give me the overheads' (P5, 2007).

The issue of embarrassment is an ever present issue. An example is the recognition of people. Often I cannot identify who it is. Sometimes people who I know think that I'm being arrogant if I don't acknowledge them. The simple fact is, I am unable to identify them. P6 shared with me a similar incident, and when I asked him how it made him feel, he replied: 'Well. Whakamā. I feel embarrassed by it because, you know, I should know, yeah, but I don't cause I can't see her. My eyes can't translate what I'm seeing' (P6, 2007). P6 gave an example: 'The eyes is getting where it's bit difficult, but it's not hard, but it's bit awkward sometimes. Most cases the recognition of people that you've known very, very well. And you could be looking straight at them and yet you don’t see them. You only can see an outline. It’s like, ah, you can’t distinguish the . . . person’s features but you can see the person. It’s very hard to make out who it is’ (P6, 2007).

All participants expressed a desire to play sport. However, P8 explained that ‘You’re really limited by activities, you can’t play contact sports, that’s a bit of a problem. If you do, well, in my case, if you do lose your lenses, you can guarantee that I’ll lose a week, a week of doing normal activities, because it’s very difficult to focus on things. So visual impediments, it just makes life harder. Not being able to [do] things’ (P8, 2007).

Benefits and Employment

The financial welfare of Kāpō Māori heavily influences their ability to access services and materials that could further their knowledge in Māori language and customs. P4 explains: ‘So you know that’s the thing, so you talk about anything about Māori, at the end of the day it’s our ability to access it and some of that [is] financial, some of that is to do with unemployment’ (P4, 2007).

Only three of the participants in this study were employed. The rest were on benefits and actively looking for work or studying. All participants discussed finding employment or doing something useful. P4 spoke of it as ‘getting a job, some form of useful employment, [this was] an area of concern I grew up with’ (P4, 2007).

When I inquired about the financial support the benefit offers, P7 (2007) said that the benefit supplied the bare necessities and allowed for “grocery needs, for food, of course, I get the disability allowance and I get the accommodation supplement … I had to budget carefully’. P4 (2007) insists that ‘for a lot of our Kāpō people … they [‘re] just living in squalor, pōhara”. P5 (2007) simply says that ‘financially I don’t think WINZ meets the true cost of blindness’.

This ‘cost of blindness’ is an important issue. Newbold (1995) discusses the matter in great detail, defining the cost of blindness as involving the additional costs Sight Impaired and Blind have to pay that fully sighted people do not. These costs include public transport, products and services to support their condition in education, normal living, and work environments.

P4 (2007) offers an insight into what costs are involved for Kāpō Māori specifically: ‘With Māori, the cost of blindness, it’s also to do with your social and economic status. If you haven’t got a job and you’re living on the benefit, the benefit’s only allowing you to survive, so your on a haere to nothing … for blind people access to radio, television, talking books, computer access, all that stuff which is very, very expensive, and so for Māori those mediums become inaccessible. Just cost too much. and a lot of us are unemployed … I know for a lot of our Kāpō people it’s just unaffordable. They … haven’t got a shit show in getting into this technology. It’s one of the issues that comes back to the cost of blindness … our poor buggers that are out there who can’t even get access to a simple bit of technology to . . . make a shopping list or don’t have access to the internet, or don’t have access to, you know, a whole lot of things, who can’t even organise their kitchen so it makes it more user friendly for them, cause all those things cost money and they’re not even getting to that point cause they’re still trying to get money’.

Those who were employed felt lucky to have jobs. P5 (2007) was discriminated against because of his condition and explained that he ‘applied for over 200 jobs, as soon as they realised I couldn’t see, it made it difficult to get a job’. P4 (2007) commented, ‘Well, I suppose I don’t know, but, um, I’m one of the lucky ones, I’ve always had a job, never been unemployed’.

Kāpō Māori and Māori language

Despite the fact that their lives are complicated by the additional problems arising from sight impairment that able bodied people are not aware of, the Māori language is very important to Kāpō Māori. When addressing issues about the Māori language, the participants became very emotional. P2 simply said, ‘Te Reo Māori, it’s our language’ (P2, 2007). P6 told me that the Māori language was ‘Everything, it’s everything I’ve been robbed of’ (P6, 2007). When I asked P4 whether it was important, he responded: ‘The reo is about being Māori. Being Māori is about an identity, Māori are a unique people of this motu. Māori are the indigenous people of this motu and terms of being that Te Reo becomes a very, very integral part of that, and we talk about not only the ability to talk Māori but when we talk about the Reo and I consider its relevance and importance, one other thing that we hear often is that Te Reo is not sort of own its on, so our people see it Te Reo me ōna Tikanga, so that becomes very, very important. Because if it was Te Reo only, all we will . . . learn is “kia ora” and “tēnā koe”. So that’s the relevance and importance of Te Reo … if we are to maintain that identity . . . I think that there’s no doubt in our mind with Te Reo me ōna Tikanga is central to that’ (P4, 2007).

I then specifically asked each participant to comment on whether the Māori Language was important for Kāpō Māori. P6 replied, ‘I believe so, I believe it is’ (P6, 2007). However, the lack of awareness among others generally that Kāpō Māori want to learn or are learning the Māori language creates resource and assistance barriers. The following observations provide evidence that there is a need for the consideration of Kāpō Māori in any discussions concerning Māori Language development.

I inquired about the Māori language experiences of the participants. P2 responded, ‘My experience in Te Reo is that, just for myself personally, is that I feel ashamed when somebody is speaking to me and I struggle to find out what they’re saying. But you know … I should be able to understand my own language which I don’t and it really pees me off’ (P2, 2007). P8 explained: ‘What does it mean to me … because I’m Māori I should know my language, I should be able to speak in my own language, but the sad thing is, I can’t, so I think that … it is important, very important, but at the same time it’s difficult’ (P8, 2007). P4 said, ‘that’s why te reo is important … to us as Kāpō … cause we’re Māori, we just happen to be Kāpō as well. So what’s the difference, you know? So if it’s important to Māori, it’s important to us, why, cause we’re Māori, simple as that, we should create and support it in the same way’ (P4, 2007).

Parents and the Māori Language

Parents did not promote the Māori language and this was attributed to their limitations in the Māori language. Participants made such comments as: ‘I can understand some parts’ (P2, 2007), ‘Well it sux, end of story full stop. It’s getting better but it sucks’ (P5, 2007), ‘I’ve got a very limited Māori vocab and more than anything else I would to explain the vocabulary’ (P6, 2007), and ‘I’m not fluent, introductory level basic sentence structures’ (P8, 2007). P1 told me his mother was Māori and ‘She knew how to speak it but she only spoke it to her family. We didn’t really learn it …we were Pākehā schooled … she didn’t use it around the house, when someone came, you know, granddad, her family… she spoke it, greetings and that sort of thing … I don’t [know] why we didn’t learn it’ (P1, 2007).

Stories were shared about how the participants’ parents were abused if they spoke Māori at school, and because of that they said they would not allow the same treatment to happen to their own children: ‘When my father was a kid, he could only speak Māori. He tells of the times when he went to school and they used to sing a song about a mother duck, and he couldn’t say mother, so he used to say maro, maro duck, and every time he said that he got a crack. And his teacher broke his arm because … he couldn’t speak English. And so he decided that he wouldn’t speak Māori . . . and he only spoke Māori to the oldest of his brothers and sisters’ (P5, 2007).

For another participant, ‘it started with my father. When he was a little boy and he started school, he couldn’t speak English. So on the first day of school he was blamed. Cause according to the teacher he was wanting to speak Māori … and … the teacher spoke English to him. And this was a ritual, every day he got beaten up. Until he learnt, so for how long that took, I don’t know. But because of that he said that his family would never ever get beaten for speaking Te Reo Māori. So he turned around and he only spoke English to us, and it was like our grand parents, so they were saying. They were only allowed to speak English, even though it was broken English they weren’t allowed to speak Māori to us’ (P6, 2007).

Mainstream Classrooms

Mainstream Māori language programmes fail to provide efficient services for Kāpō Māori. This problem is increased by the lack of awareness about Kāpō Māori and their pursuit of the Māori Language. It is important for Kāpō Māori that those issues are brought forward so there is better awareness about how mainstream Māori language programmes relate to Kāpō Māori.

In my experience, tutors lacked the skills to teach a person with a sight impairment, and enlarged Māori dictionaries or note takers were rarely available. My only remedy was to sit in front of the class. However, I was still unable to see the board and I had to work out strategies in order to keep up with class lessons. P8 had a similar experience, and explained that his main issue was visual aids. He too 'had to sit near the front' (P8, 2007), and when he couldn't identify the words on visual aids, 'I made them up' (P8, 2007). In many cases, I copied work from class mates, but after a while they became annoyed. Subsequently, because I couldn't keep up to date with class work, tutors would become frustrated, and often made comments about my sight impairment.

When I heard P3's experience, it was comforting to know I was not the only Kāpō Māori exposed to this treatment. P3 explains how his tutor discriminated him: 'I had to know a lot of in between, highs and lows. The lows would be when the teacher says to you at the beginning that you got no promise, you're a bit koretake, but at the end of the day, if you stick by it, few years later that same tutor comes up to me and they read all the stuff all in the Reo, and I was able to do it straight back to her. You know my version in English, yeah, you were one of the main ones who wanted to boot me out … I might of been a hindrance, I may have been a good thing, I don't know … feeling accomplishment when I got up and said thank you and did a karakia to the kura, and they try to cut you off and you keep on going . . . I never used to have a set structure, that's why one of the tutors … said that my Reo is sort of babyish' (P3, 2007).

Issues involving the tutors were also experienced by P7, who talked about 'interacting amongst sighted people in a class … I was really nervous on the first night. Didn't quite know what to do, didn't know how to in fact interact … we both expressed the problems we were having … [to] start with it created a little problem for the tutor as well . . . the tutor would have had to stop the class, and then come and talk to us, and we would not be able to see, probably. So solution [we] came to was that … I was at the age where I could qualify for somebody to come in as a note taker … Work Bridge would pay that' (P7, 2007). Unfortunately, her friend was not eligible to access a support service because of her age (P7, 2007). She also continued and commented that an issue for her was noise: because she was totally blind, all she had to rely on was her hearing: 'We found a bit difficult to… hear the tutor sometimes. You know how it is when you go into a noisy class, and you try and hear what the tutor's saying? Everybody bah, bah, bah, bah … I spoke up to the tutor and I spoke to the kaiako as well. I said, look, we come here to learn … all we would like is to be able to hear everything … too much racket going on at the back. All … the tutors did, they put [my friend] and I at the front ... where we could hear them (P7, 2007).

Participants felt uncomfortable learning Kapa Haka. The problems began for the participants while learning the actions to a song. These responses came from questions about participants' experiences with the Māori language, not from questions specifically about Kapa Haka. P5 avoided the embarrassment of being unable to complete the movements by moving to the back of the Kapa Haka group. P3 said, 'Anything visual… I mean, learning the taiaha, for instance. Like your hands are up here and you wave it around and blah, blah, blah … I was like, aye? So you work your way to the back of the Kapa Haka and watch everyone else' (P5, 2007).

P7 said she was unsure about Kapa Haka: it was complicated learning the song as well as concentrating on the actions. 'You know, Kapa Haka … now I was a bit iffy about that, as well as singing the waiata I had to do the waiata ringaringa as well, which I found difficult to try and master, because I had to try and concentrate on what I was singing and concentrate on the moves" (P7, 2007). For P4 it was an unpleasant moment: he felt upset no one had considered that he couldn't see and he could not participate: 'It's easy to be hurt, well, sometimes you not inclusive on a thing, which is practically those sighted students getting up and doing the hulahula or something and … you're not inclusive … you can't even get up and do the bop or something. You know, doing the haka, you was just sitting there, and you go outside, around the corner and feel for yourself a couple of cigarettes, go and hide in the toilets somewhere' (P4, 2007).

Half of the participants were involved in Māori lessons for blind people. I was fortunate to be involved in the establishment and the organising of that project and took the class when the teacher wasn't available. The participants involved enjoyed the project and the lessons were totally audio, and did not require visual aids. As already stated, my experience of Māori tutors or teachers had not been positive, and, as seen in previous comments from participants, they too had not always found their tutors entirely helpful.

Understandably, the tutor would have to have had some knowledge of teaching people who were blind. However, a Māori tutor who is educated in teaching people with sight impairments is, in my experience, very rare. The tutor who taught the class (who will be named Papa) told me he had never taught a totally blind class before. It was surprising that he did not display the behaviour of other tutors to which I had been accustomed. In mainstream classes, a single person who had a visual disability would be a problem for the tutor: when addressing a whole group, it was easier to accept that another teaching style would have to be employed. Papa was very patient with his students, which the participants noticed and appreciated.

P1 commented approvingly, 'He encouraged you, not aggressively, he was, like, real happy … He was really good. I was surprised, because he never worked with a bunch of [blind people] before and for someone to come in and do that, I don't know, he must have been terrified on his first day' (P1, 2007). P7 added, 'Now I would want someone of [Papa's] character to explain to me how I could interpret … from a English sentence structure to a Māori structure … I'll just say, well, how I would put that into Māori, and I'll ask him to explain it to me' (P7, 2007). From another participant: '[Papa] gave the best compliment ever … I was just glad to have him there and stuff' (P2, 2007).

P1 was very pleased: 'It was good because we all knew each other, we all knew how, who was dumb and who was, yeah … and we could joke and have a laugh. If I said the word wrong, we'd laugh, and you wouldn't get embarrassed. You didn't have anyone saying, oh yeah, whatever, and if took you a long time, um, it didn't worry anyone, which was good. Waldo was good too, he just laughed it off … we didn't know what to expect either … we didn't care about things … when you were at school, ho god, we would have to sit in a class. You know, at school you have … th[is] class was a lot smaller, so you learnt more a lot quicker. It was just enjoyable. [Papa] was never wild or never aggressive' (P1, 2007). P2 commented, 'But old Papa … that was the way to learn it … we go there to learn, so if you got it wrong you keep on going over and over until you pronounce the words properly, and you have it in an atmosphere where everybody is comfortable ... you know, you'll going to get some of the words wrong, somebody else is there to help you out … the group that we were involved in was doing that' (P2, 2007).

The participants involved in the class discussed above felt successful when learning Māori amongst sight impaired peers. Mainstream classes present a problem for both the tutor and sight impaired student. Sight impaired students were not comfortable when they had to sit in front of a mainstream class; tutors were uncomfortable when they had to address the sight impaired separately and differently from the rest of the mainstream class. Learning among sight impaired peers was more successful and more comfortable for the participants involved. However, at present there are very limited resources for such endeavours.

Resources

In my experience, resources such as enlarged dictionaries were not available. Participants who could read Braille also commented on the unavailability of Māori language books in Braille. P1 said, 'I haven't come across it, well, not Braille ones… sure you'll be able to get one' (P1, 2007), while P2 was uncertain: 'I don't know if there's any written … I'm not quite sure. I know there are dictionaries but you wouldn't get them in Braille' (P2, 2007). P4 noted of talking books, 'there's not many, the Foundation hasn't done very many totally Te Reo books' (P4, 2007). P7 informed me: 'The only Braille I'd get in Māori is probably newsletters … would have got that in Braille but it would have taken six months to get the Braille thing done, that's how slow they are in getting things done in Braille' (P7, 2007).

When I inquired what resources they used to further their Māori language development, the majority of the participants referred to the Māori television station: 'Yeah, well, obviously Māori radio, television very important, always watch Karere when I can. Great to the hui, when you listen to Te Karere I always listen to all the different dialects' (P4, 2007). P1 said: 'There things like, I’ve been somewhere and, you know, you pick the odd word up, and they are using it in a sentence. Or even watching the Māori station on tv, you pick the odd word up you learnt. They must be talking about something you heard on the news this morning, they must be talking about that. They have some good programmes on there, with documentaries and that’ (P1, 2007). P2 mentioned ‘kōrero mai on the Māori channel, and actually, that would be the best way to go, that set-up there is awesome, because they had, um, situations where they got people doing what they were saying, um, then they have explanations, whatever they’re saying is written in English and in Māori. That would be the best format. And I quite often watch that programme as well’ (P2, 2007). P3 nominated other television programmes: ‘I can listen to it better yet. But when you have educated speakers on Te Karere and, what’s the other one, Te Kāea, some of them, I think they add extra words, to be a bit more sexier I suppose’ (P3, 2007).

Whānau and Services

Whānau support of Kāpō Māori is limited because of a lack of awareness whānau have about Kāpō Māori. The issue of whānau was a sensitive matter for participants. P7 said, ‘It’s a little bit of a sore subject’ (P7, 2007), and P5 commented, ‘From my whānau it’s good. It’s not great, but it’s good’ (P5, 2007). P3 mused, ‘If my father was still alive, you know, my aunty … they were a big support for me… I got [a] sister… I don’t think I should really go there. My sister works … and all you get is a, huh, huh like the cave man talk, huh … so sometimes it can be quite nonexistent’ (P3, 2007). P6 commented he didn’t mind that his family didn’t offer him support: ‘My own immediate whānau … have been good so suppose they have not tried to help me too much, they have, and consequently I’ve tried not to be a pain in the butt, and it works beautifully’ (P6, 2007).

P1 told me, “I don’t see my family” (P1, 2007), and continued: ‘My parents were separated just as I went blind or a couple of years later. I was glad they separated. I got on a lot better with my father. It hurt him you know, when I went blind … but he understood it, understood a lot better than my mother, even though my mother was a nurse. I think it was mainly probably because I was away a lot … up in Auckland, and then I come back to Rotorua, they sort of weren’t prepared, or …weren’t sure what to do’ (P1, 2007).

P4 suggested that it part the problem with the lack of whānau support is that families are becoming more individualistic. The romantic idea of whānau supporting each other is limited, it seems, when that support is extended to Kāpō whānau members. P2 said: 'I think the whole aroha of the social Māori spectrum [is] not working right'. P4 explains what the issue is with whānau support: 'A lot of it is to do with ignorance. Lot of it is whānau are caught up in there own kaupapa that … satisfies their type of egos or whatever it is, their aspirations, their goals . . . whānau are more interested . . . first and foremost where they going, and so it causes you to get a bit angry and frustrated … when you achieve something which is extraordinary, then all of a sudden you're a great man … so you just learn to box on and, ah, yeah, so it's all that sort of stuff' (P4,2007).

In contrast to whānau support, when I asked how consumer agencies supported the participants, the responses were very positive, and it was clear that government services support agencies supplied the majority of support for the participants. P2 considered that the 'Foundation is doing a good job of doing the assistance for me' (P2, 2007). Participants then described the assistance offered to them by the Blind Foundation. 'They provide everything', said P1. 'Mobility find your way here to the shop or town. Yeah, mobility instructor … they have people called technical daily living skills people, and they come here . . . maybe if you wanted to know how to weed your garden' (P1, 2007). P2 noted that 'they help us to use CC TV's … using the computers' (P2,2007). For P4, 'The Royal New Zealand Foundation for the Blind supplies me with a guide dog that allows me to move around … so they provide me with that [and] the usual follow up service to ensure [my guide dog] is doing his job properly and keeping me safe' (P4, 2007).

Apart from support by the Royal New Zealand Foundation for the Blind, some participants highlighted the support they received from services that drive them to do their shopping or keep appointments. Although sometimes whānau were able to do these things, whānau were not as reliable as the service providers. P5 commented, 'He's the only bugger I can rely on, actually . . . I can give [my driver] the outline for the day and say, well, I got my appointment there … he's an excellent support'. P3 said, 'Ah, superb, I haven't tried it with the whanau, but there kia tere, kia tere' (P3, 2007). From my own observation, the relationship between the participant and the support person became a close one, and it seemed that the support person took the place of what

I would think a whānau member would do. The support person assisted the clients beyond their specified duties, and P3 adds: ‘At the moment he does it on his own accord. Cause, um, victim support, he had a fallout, but he kept putting himself out on a Thursday to take [my friend] and I to the foundation … that’s why, um, our relationship with him, familiarising ourself with him, bonding together, yeah, I’ll say, shucks, on my behalf’ (P3, 2007).

Summary

This chapter has presented the research participants through a table which gives information about their impairment, followed by a description of causes of the different conditions. The main part of the chapter allowed the voices of the participants to be heard, as they discussed difficulties, including daily living, discrimination, and financial problems, then their concern to fully realise their identity as Māori, especially through knowledge of the language, and what kinds of teaching and learning situations made this possible. Finally, they talked about support available to them, from whānau and from service providers. A major aspect of the chapter is the clear message that, since being Māori means having Te Reo Māori, being Kāpō Māori also means having Te Reo.

Conclusion

This thesis has explored the world of Kāpō Māori, Māori who have sight impairment or who are totally blind, with especial reference to their access to Te Reo Māori, the Māori language. The project initially came out of my personal issues as a Kāpō Māori. I found that there was very little literature about Kāpō Māori. Through researching the subject, I have been able to find out more about myself and to understand the issues I face are also experienced by others.

The world of Kāpō Māori is not a simple one, and the earlier chapters of this thesis provided background for the challenges they face. Chapter One surveyed the history of the Māori language in Aotearoa/New Zealand, from traditional times when it was the only language to the effects of colonization when the language became that of a minority, and then was actively discouraged, until its very existence was threatened in an era of urbanization. From the 1970s and 1980s, Māori have made strenuous efforts to retain the language, and succeeded in making it an official language of Aotearoa/New Zealand.

Chapter Two outlined the difficulties faced by the Disabled through the centuries. Although there are different definitions of impairment and disability, the Disabled have consistently endured marginalization and discrimination, because of religious, political, or social prejudices. They have often been made victims, placed in institutions, and have been unable to fully develop their potential. As Disabled persons, the Blind and the severely Sight Impaired have suffered along with other Disabled.

Chapter Three reviewed the history of the Blind and Sight Impaired in Aotearoa/New Zealand, with a focus on the institution set up in the 1890s to look after their needs, the Blind Foundation. The Foundation treated the Blind as dependents, and encouraged dependency. Only when the Blind began to advocate for themselves did the Foundation accept their input into making decisions and change the system to suit the Blind themselves.

Chapter Four summarised disability among Māori, but noted the proposition that Māori generally suffer disability in another way, the disabilities that are a consequence of colonization, with the loss of land and resources, culture and language. It then brought together what little is known about the history of Kāpō Māori, mostly as they were moved from marae and their own culture into the Blind Foundation, where they were cut off from whanau, from customs, and from Te Reo Māori. The chapter then looked at how Kāpō Māori also advocated for themselves, forming Ngāti Kāpō as a service and support organization.

Chapter Five discussed the issues involved in enlarging knowledge of Kāpō Māori through field research, having regard to research requirements for people with disabilities and for people who are blind. The chapter then looked at important matters which must be taken into account in research of Māori, and set out how Kaupapa Māori research can be adapted for Kāpō Māori research. Participant recruitment and interview procedures were outlined, plus ethical issues. Finally, the chapter allowed the eight research participants to introduce themselves by talking about their conditions and when they became blind.

Chapter Six began with tabulated information about the research participants and then presented extracts from the narratives of the participants, as they talked about the difficulties of being Blind or Sight Impaired, employment and income, the importance of Te Reo Maori and problems in gaining access to learning the language, and whanau support.

From Darkness to Dawn is a beginning of research about Kāpō Māori. In particular, it serves as a paepae on which Kāpō Māori have spoken, raising the issues which matter to them. Because Kāpō Māori and their world is relatively unknown, there is a need to raise awareness among whanau, hapu, iwi, for Māori to take responsibility for the manaaki of Kāpō Māori. This thesis marks an important start, and may serve as a significant resource for social workers, educationalists, whanau, hapu and iwi, the Royal New Zealand Foundation for the Blind, and Māori language providers. Kāpō Māori advocating for themselves have created a forum to put forward their issues and be heard. The history of the Blind Foundation indicates that many issues did not improve for the blind until they began advocating for themselves. Ngāti Kāpō advocate for Kāpō Māori. It is evident that by promoting the awareness of Kāpō Māori existence, then that will project Kāpō Māori towards positive development.

As the Aotearoa/New Zealand population increases and lives longer, the percentage of blind Aotearoa/New Zealanders will increase. Many of them will be Kāpō Māori. There will be need for more research about Kāpō Māori. This thesis provides a methodology for field research which can be used, and modified, by other researchers.

The thesis has emphasized the importance of the Māori language as a way of illuminating the darkness and bringing Kāpō Māori into a world of light. 'Ko te reo te hā, te mauri o te Māoritanga', said Sir James Henare, 'Language is the very life-breath of being Māori'.
It is important for Kāpō Māori to learn and speak Māori to feel and be Māori, as the stories told by the research participants reveal. There must be planning of resources and services provided for Kāpō Māori giving them equality with sighted peers.

As a way of moving into the future, we can take lessons from the past. Traditional Māori students would huddle together in dark rooms, or at night, sitting in silent darkness, the darkness illuminated and enriched by the words and songs of the teacher. Students would learn epic stories of history, family genealogy that spanned many generations. If this style of teaching worked for hundreds of years, then its important features can be used today. Incorporating this traditional technique with modern technology can present avenues for Kāpō Māori to learn the Māori language. An informal example of this is mentioned in Chapter Six where everyone involved in the research used Māori television to learn simple words and phrases of the Māori language or further extend their knowledge of the Māori language. However, further research and consultation with Kāpō Māori needs to be conducted to produce the best benefits for Kāpō Māori.

It is important to increase awareness of Kāpō Māori. This thesis has journeyed into the world of Kāpō Māori and brought forward stories from the darkness where they are unknown and into the light.

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